



City of Berkeley

Health Status Report 1997

Health Status Report - 1997



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Berkeley Public Health Department

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Dear Colleagues,

On behalf of the Berkeley Public Health Department of the Department of Health and Human Services, I am pleased to present this Health Status Report - 1997, a focused assessment of health status of the city of Berkeley.

This data is a snapshot of important health indicators presented in comparison, where possible, with data from Alameda County as a whole, the State of California, and <u>Healthy People 2000</u> objectives. Because public health is organized community effort to prevent disease and promote health, we hope this document has widespread application to inform and educate the community about our state of health today.

The presentation of this data follows our core public health responsibilities to assess and monitor the health of the public. This document is the first of a series of summaries and reports which will be done on a continuing basis such that the community may assess trends and forecast future developments and join in the effort to improve the quality of life in Berkeley and the region.

What emerges from this report is a healthy community severely affected by major health challenges. The effects of health care reform and welfare repeal will continue to impact our ability to protect and promote health. In particular, our ability to deal with the terrible toll of the HIV/AIDS pandemic will largely depend on state and federal support. However, it is clear from the review of the indices, that Berkeley, with the second oldest health department in the state, has the infrastructure and the competence to meet these challenges.

Please use this data as a resource and reference and share it with any others who could benefit from this information.

Poki Stewart Namkung, M.D., M.P.H.

Health Officer and Director of Public Health

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Demographic Profile

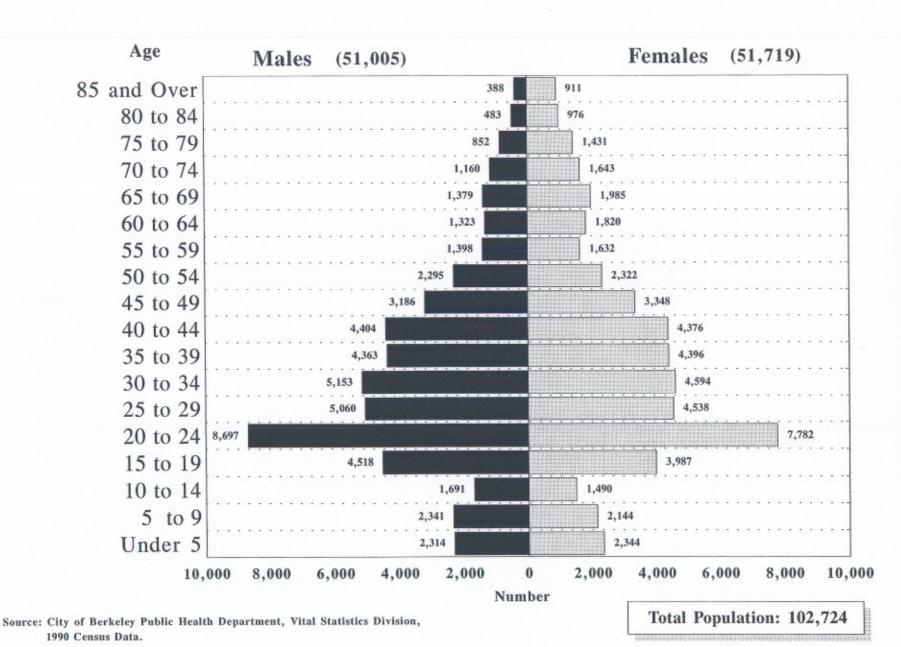
Demographic Profile of the City of Berkeley

- More than 50% of the population of Berkeley is under 35 years of age.
- Only 4.5% of the entire population of Berkeley is under 5 years of age, as compared with 8% for the state of California.
- ♦ The city of Berkeley has, proportionally, more residents between the ages of 18 and 64 (74.7%) than the remainder of the state of California (63.5%).
- The race\ethnic distribution of the estimated population of Berkeley for 1995 is as follows:

Whites 58.8%
African-Americans 18.3%
Asian\Pacific Islanders 14.5%
Hispanics 7.8%

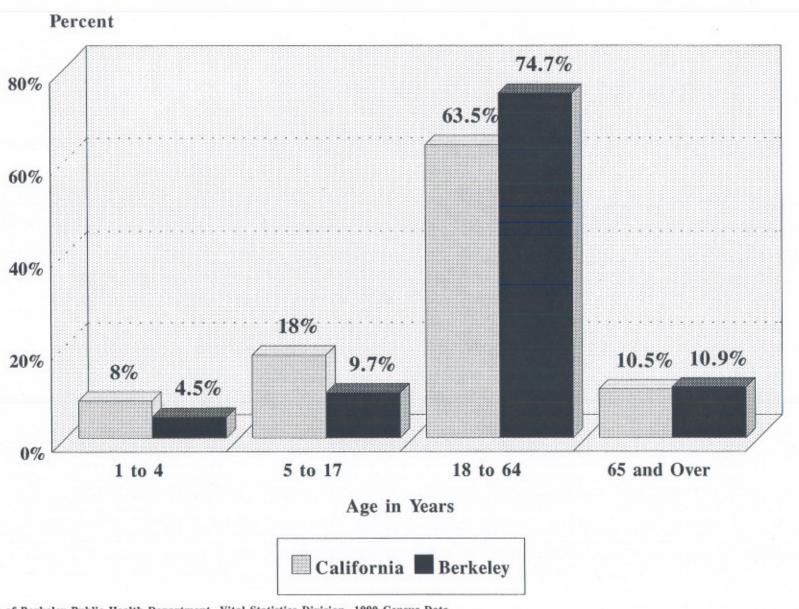
• The mean family income was \$53,351 for 1990 and is estimated to be \$61,300 per family for the year 2000.

Population by Age and Gender City of Berkeley, 1990 Census

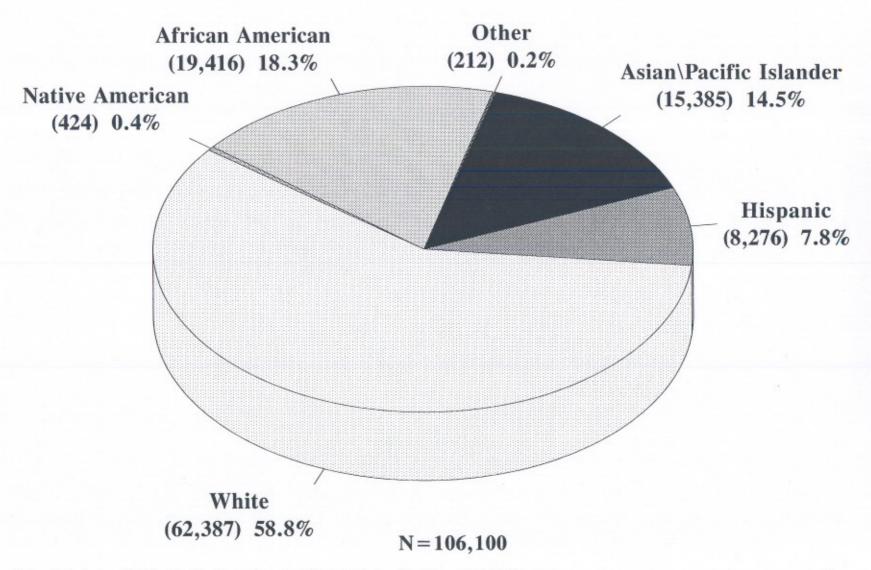


California and Berkeley Population Distribution by Age 1995 Estimates

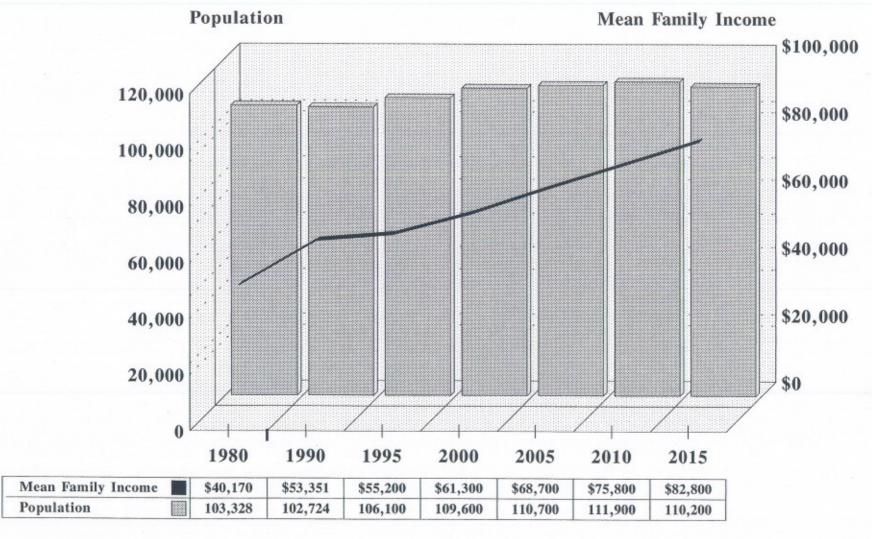
1995 Estimated Population for Berkeley = 106,100



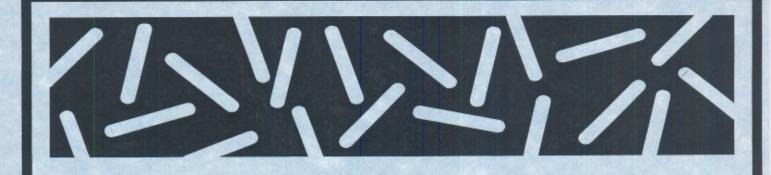
Berkeley Population by Race\Ethnicity 1995 Estimates



Population Projections and Mean Family Income City of Berkeley, 1980 - 2015



Year



Maternal, Child

80

Adolescent Health

Maternal, Child and Adolescent Health

- ◆ The infant mortality rate for the city of Berkeley in 1995 was 4.4 per 1,000 live births, lower than that of Alameda County (5.4/1,000 live births), the state of California (6.3/1,000 live births), and the Healthy People 2000 Objectives (7/1,000 live births).
- ◆ The number of live births in the city of Berkeley decreased by 24% from 1,193 live births in 1990, to 904 live births in 1995. A decrease of 10% was observed for the state of California during the same period of time.
- Of the 904 resident births of the city of Berkeley in 1995, 64% (612) were among mothers 20 to 34 years of age. The
 youngest mother in 1995 was 14 years of age and the oldest 50 years old (median age: 31 years).
- ♦ The percent of late prenatal care¹ in 1995 for resident mothers in the city of Berkeley (10%) is lower as compared to Alameda County (13.6%) and the state of California (21.7%), and meets the Healthy People 2000 Objectives (10%).
- In 1995, only 0.6% of all resident mothers of the city of Berkeley did not receive prenatal care at all during pregnancy.
- The percent of low birthweight² infants for the city of Berkeley (7%) is slightly lower than that of Alameda County (7.2%), but higher than that of the state of California (6%), and the Healthy People 2000 Objectives (5%).

City of Berkeley Public Health Department, Vital Statistics Division.

² Low Birthweight: less than 2,500 grams (5.5 pounds).

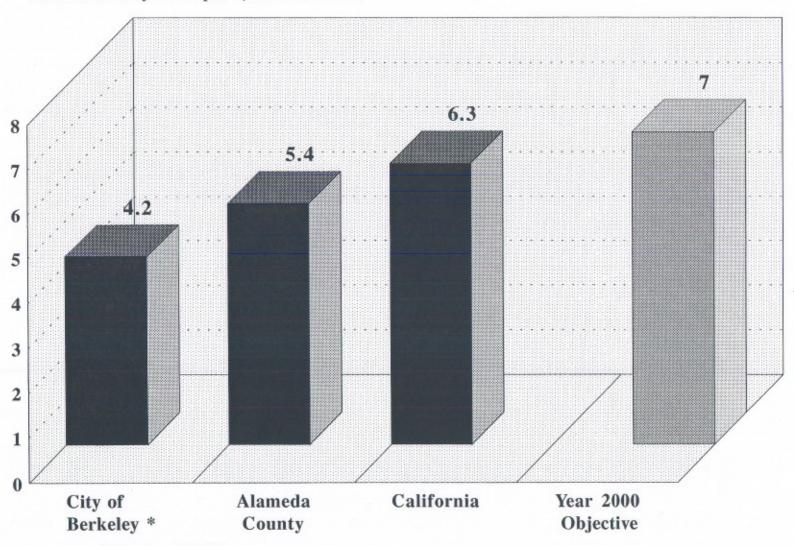
¹ Late prenatal care is defined as care which began in the 2nd or 3rd trimester of pregnancy, or no prenatal care at all.

Maternal Child and Adolescent Health

- ◆ The percent of births to adolescents under 18 years of age as a percentage of all births, has remained statistically the same since 1990 (3.4%) to 1995 (3.3%). This indicator was slightly lower for the city of Berkeley than that of Alameda County (4%) and the state of California (5%).
- ◆ The city of Berkeley has the lowest birth rate for adolescents 15 to 17 years of age (25/1,000), as compared to Alameda County (35.1/1,000), and the state of California (44.7/1,000).
- Of the 20 births to adolescents registered in the city of Berkeley in 1996, 50% are geographically located in South Berkeley (zip-code 94703).
- ♦ Approximately 59% of all children under 2 years of age were fully immunized in 1996 in the city of Berkeley; this proportion is similar to that of the state of California (57.3%), but below that of Alameda County (66.4%), and the Healthy People 2000 Objectives (90%).

Infant Mortality Rate, 1995 City of Berkeley, Alameda County, California, and Healthy People 2000 Objectives

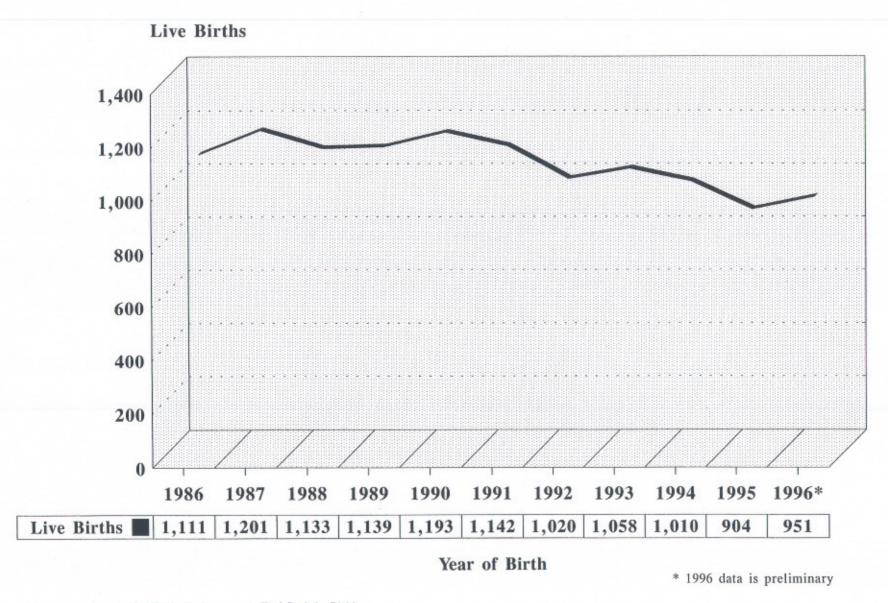
Infant Mortality Rates per 1,000 Live Births



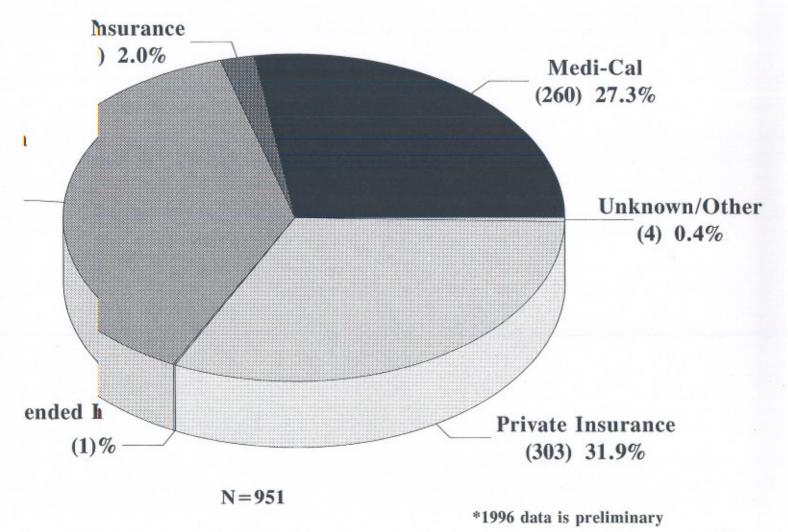
^{*} Rate is based on 951 births

Source: City of Berkeley Public Health Department, Vital Statistics Division, Birth and Death Records, 1995

Total Number of Live Births City of Berkeley, 1986 - 1996

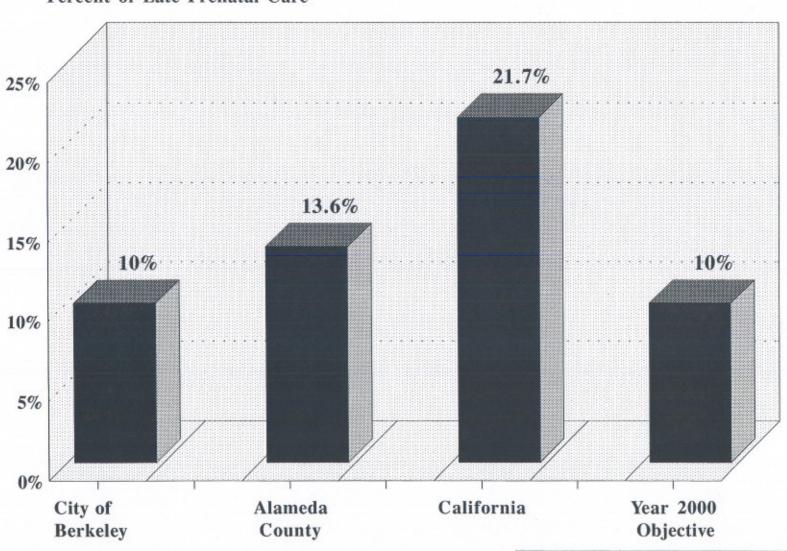


Icipal Source of Payment for Delivery City of Berkeley, 1996*



Late Prenatal Care, 1995 City of Berkeley, Alameda County, State of California, and Healthy People 2000 Objectives



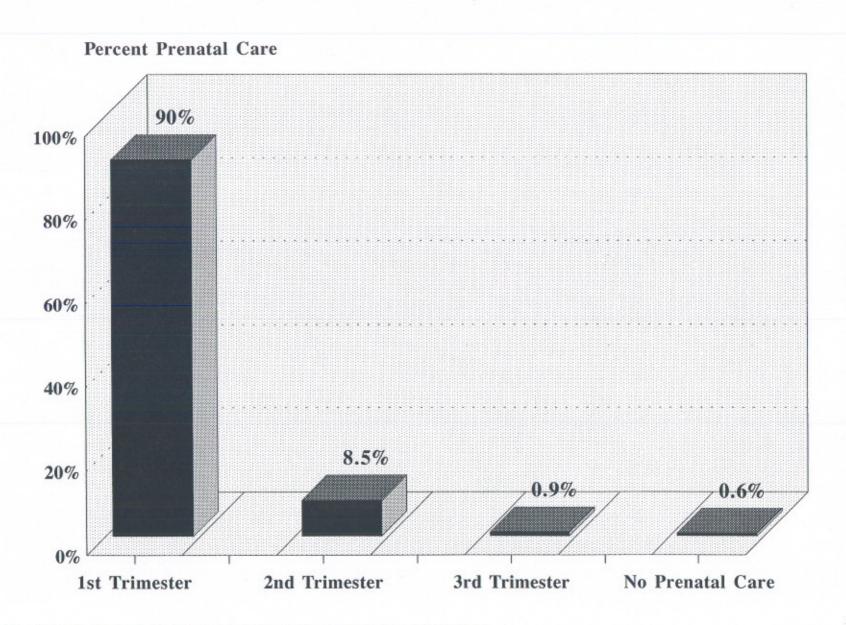


Late Prenatal Care includes care which begins in the 2nd or 3rd trimester or no prenatal care at all.

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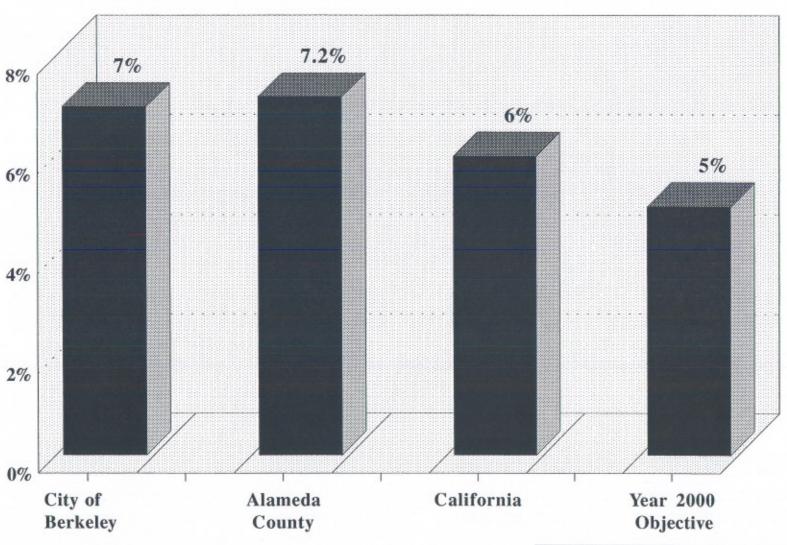
Source: City of Berkeley Public Health Department, Vital Statistics Division, Birth Records 1995.

Trimester Prenatal Care Began City of Berkeley, 1995



Low Birthweight Infants, 1992-1994 Average City of Berkeley, Alameda County, State of California, and Healthy People 2000 Objectives

Low Birthweight as a Percent of Total Births



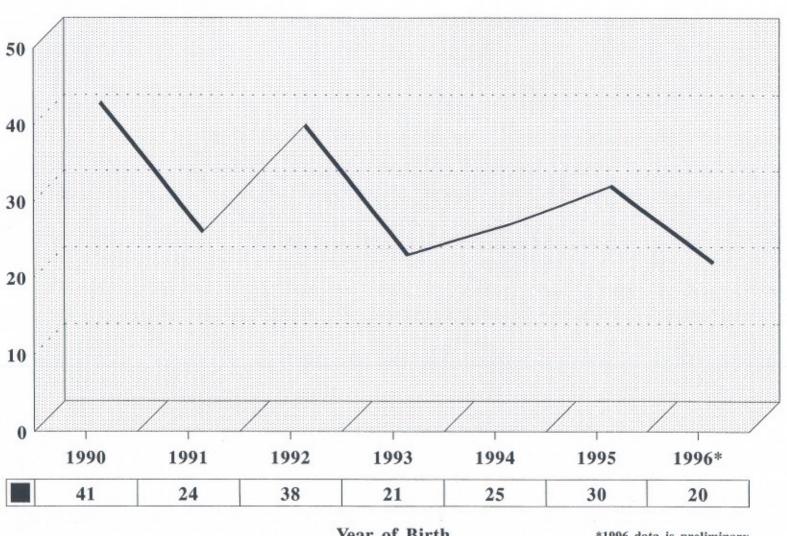
Source: City of Berkeley Public Health Department, Vital Statistics Division, Birth Records 1992-94.

Low birthweight is defined as less than 2,500 grams (about 5.5 pounds).

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Total Number of Births to Adolescents Under 18 Years of Age City of Berkeley, 1990 - 1996

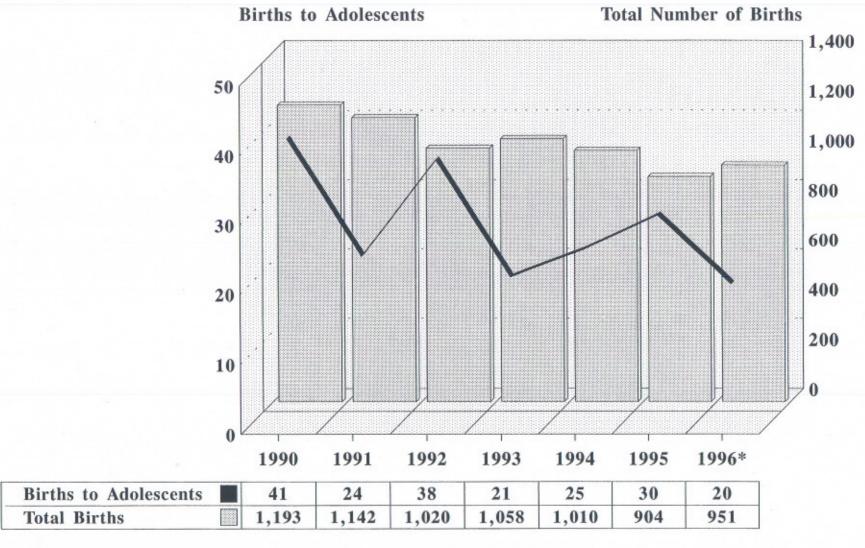
Number of Live Births



Year of Birth

*1996 data is preliminary

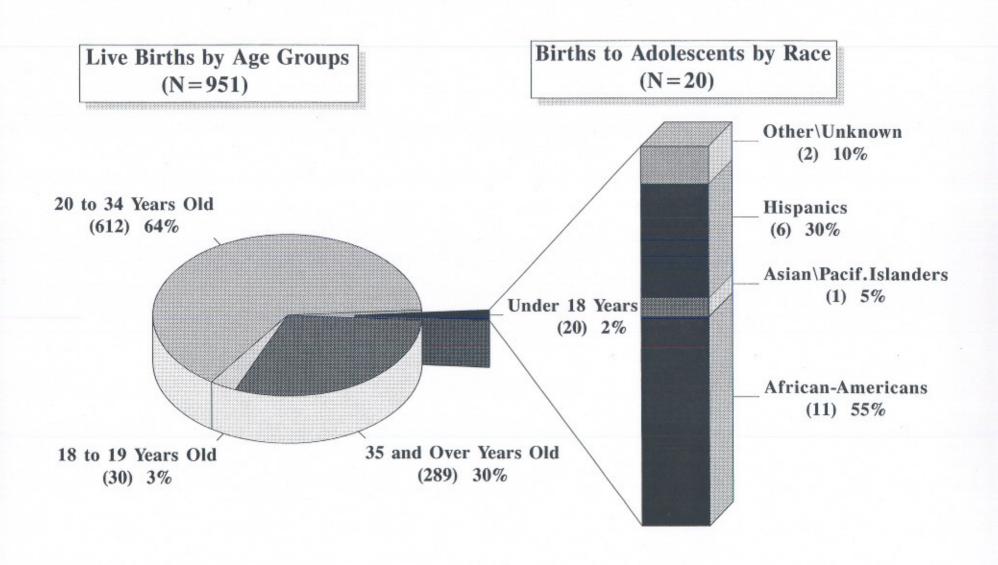
Total Number of Births and Births to Adolescents Under 18 Years of Age City of Berkeley, 1990 - 1996



^{*1996} data is preliminary

Year of Birth

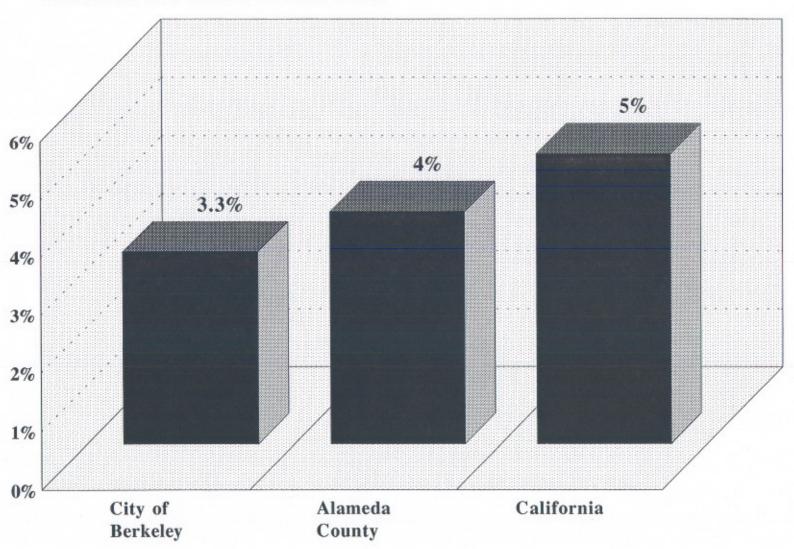
Live Births by Age Groups and Births to Adolescents by Race/Ethnicity City of Berkeley, 1996*



*1996 data is preliminary.

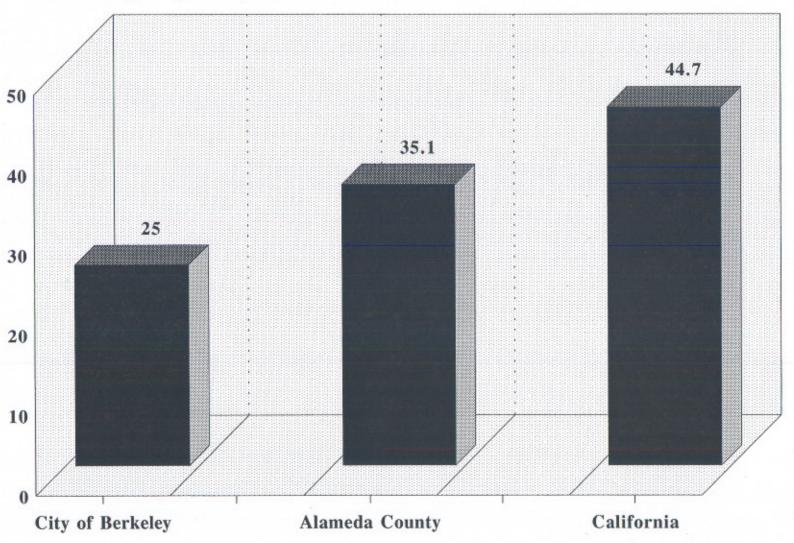
Births to Adolescents Under 18 Years of Age City of Berkeley, Alameda County and California, 1995

Teen Births as a Percent of Total Births



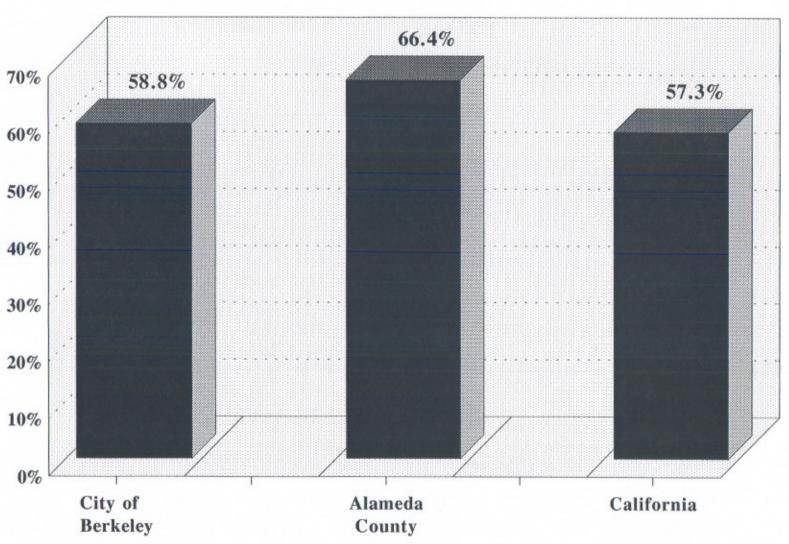
Age Specific Birth Rate for Adolescents 15 to 17 Years of Age City of Berkeley, Alameda County and California, 1992 - 1994 Average



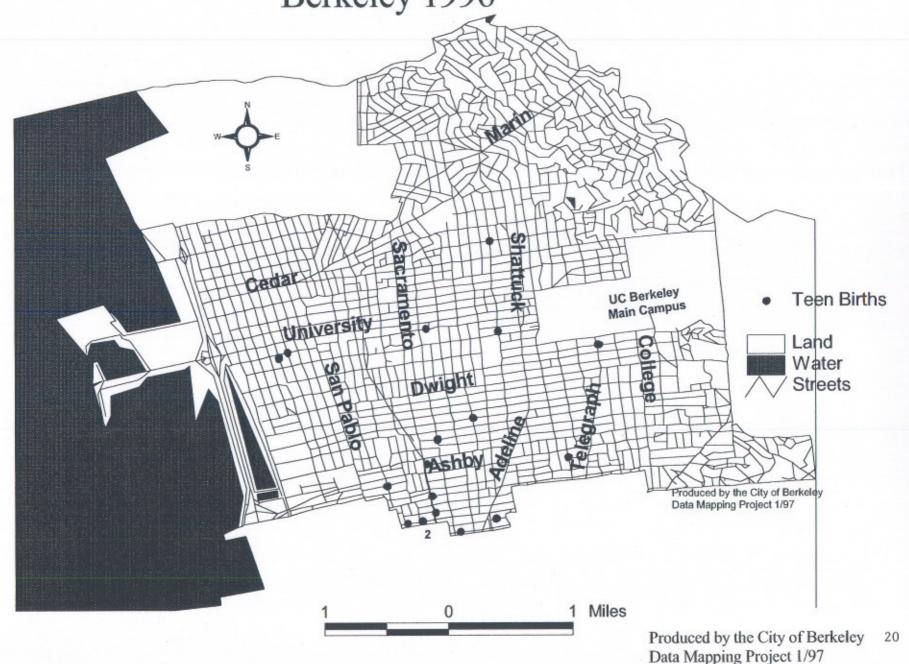


Immunization Coverage Levels for Children Under 2 Years of Age City of Berkeley, Alameda County and State of California, 1996





Births to Adolescents Under 18 Years of Age Berkeley 1996



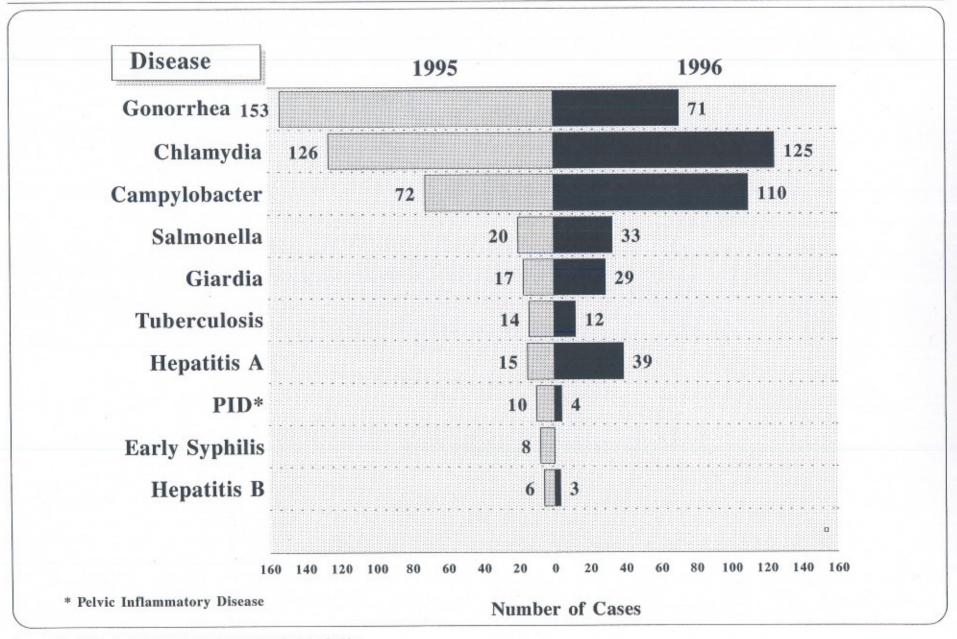


Communicable Diseases

Communicable Diseases

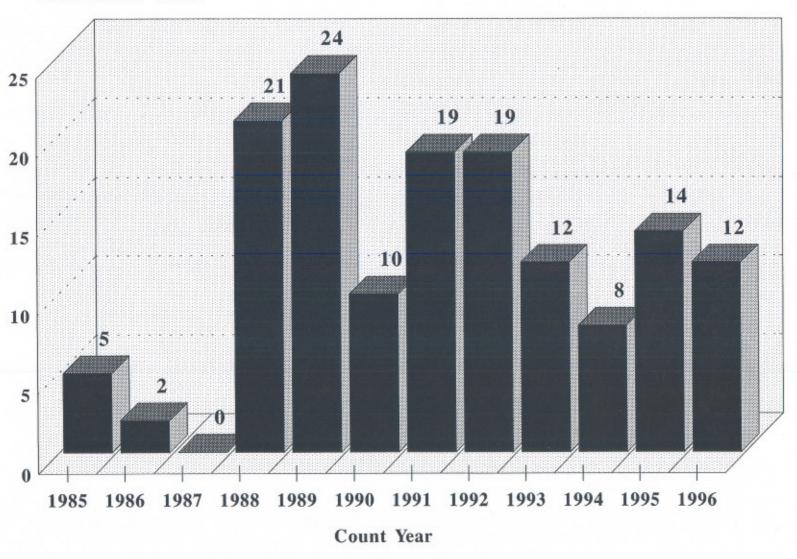
- Among the top ten communicable diseases reported to the City of Berkeley Public Health Department during 1995 and 1996, sexually transmitted diseases (gonorrhea and chlamydia) were the most prevalent.
- ♦ In 1996, the number of Hepatitis A cases (39 cases) increased almost 3 times as compared to 1995 (15 cases).
- During 1996, 12 cases of Tuberculosis were reported by the City of Berkeley Public Health Department, yielding a case rate of 11.2 per 100,000 population.
- ◆ The average Tuberculosis case rate (1993-1995) for the city of Berkeley is 10.7 per 100,000 population, as compared to Alameda County (16/100,000), the state of California (15.1/100,000), and the Healthy People 2000 Objectives (3.5/100,000).

Ten Top Communicable Diseases by Year of Diagnosis City of Berkeley, 1995 - 1996



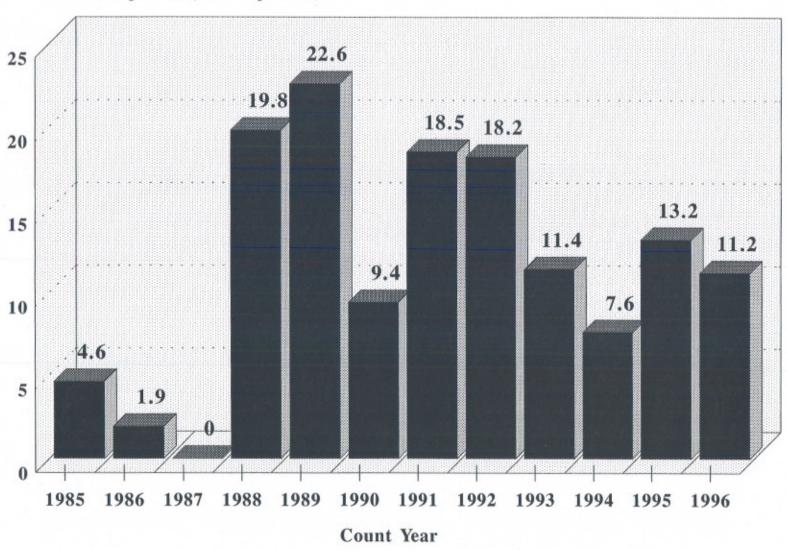
Tuberculosis Cases by Count Year City of Berkeley, 1985 - 1996



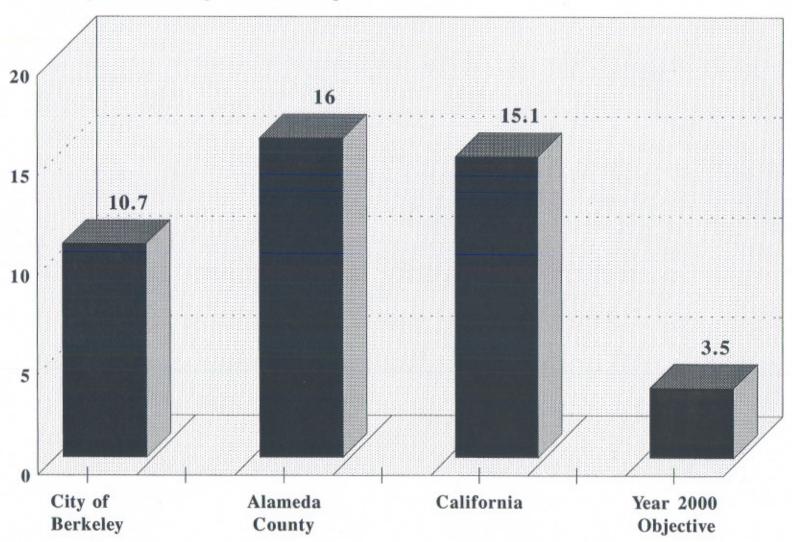


Tuberculosis Case Rate by Count Year City of Berkeley, 1985 - 1996

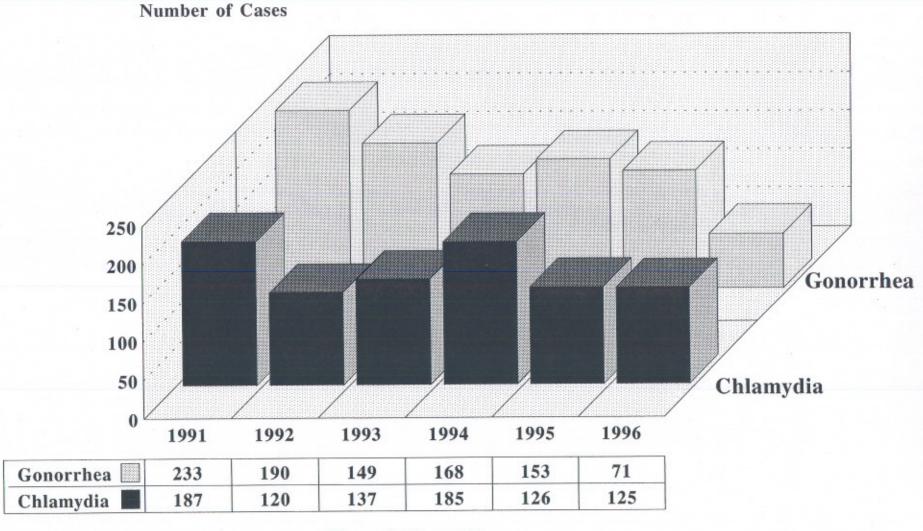
Case Rate per 100,000 Population







Chlamydia and Gonorrhea Cases by Year of Diagnosis City of Berkeley, 1991 - 1996



Year of Diagnosis



AIDS & HIV

AIDS and HIV

- ♦ As of July 31, 1996, there have been a total of 459 AIDS cases reported to the City of Berkeley Public Health Department. Of these cases, 307 (67%) have died.
- Of the 459 AIDS cases reported, 425 (93%) are men and 34 (7%) women.
- Among men, the principal mode of exposures are:

Homosexual/Bisexual 77% (328) Injection Drug User (IDU) 10% (42) Homosexual/Bisexual IDU 8% (33)

• For women, these categories are:

Injection Drug User 47% (16) Heterosexual Contact 47% (16)

- ♦ Approximately 60% of all AIDS cases reported are Whites, 30% African-Americans, and 8% Hispanics.
- The age groups most affected are:

30 to 39 years old 37% (168) 40 to 49 years old 33% (151)

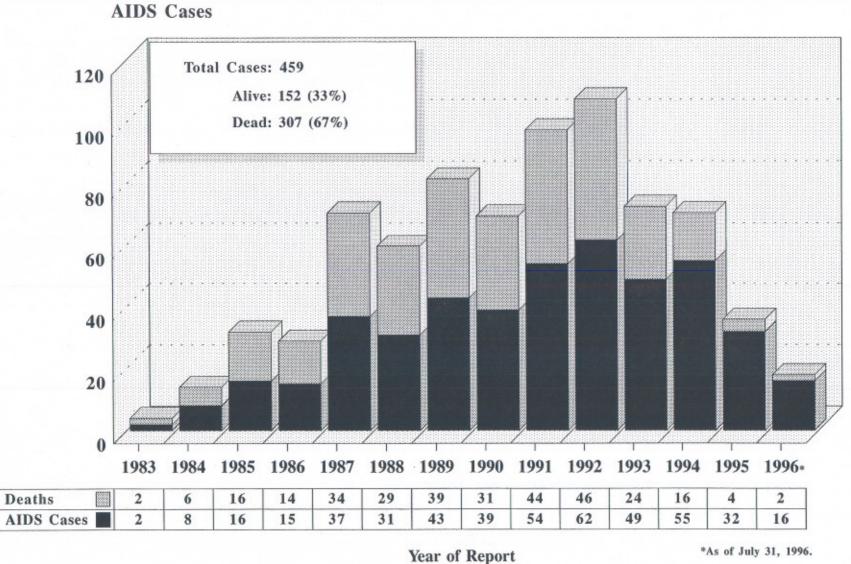
AIDS and HIV

- No pediatric AIDS cases (under 13 years of age at time of diagnosis) have been reported to the City of Berkeley Public Health Department.
- ◆ The AIDS annual incidence rate for the city of Berkeley (64.2/100,000) is high as compared to Alameda County (40.5/100,000), state of California (34.3\100,000), and the Healthy People 2000 Objectives (39.2/100,000).
- The City of Berkeley ranks among the top four health jurisdictions with the highest AIDS cumulative incidence in California:

San Francisco	2,650.7\100,000
Long Beach	625.4\100,000
Marin	488.2\100,000
Berkeley	416.6\100,000

♦ In 1996, 3,947 persons were tested anonymously or confidentially for HIV infection in one of the public health testing sites in Berkeley. Of those, 21 (0.5%) tested positive.

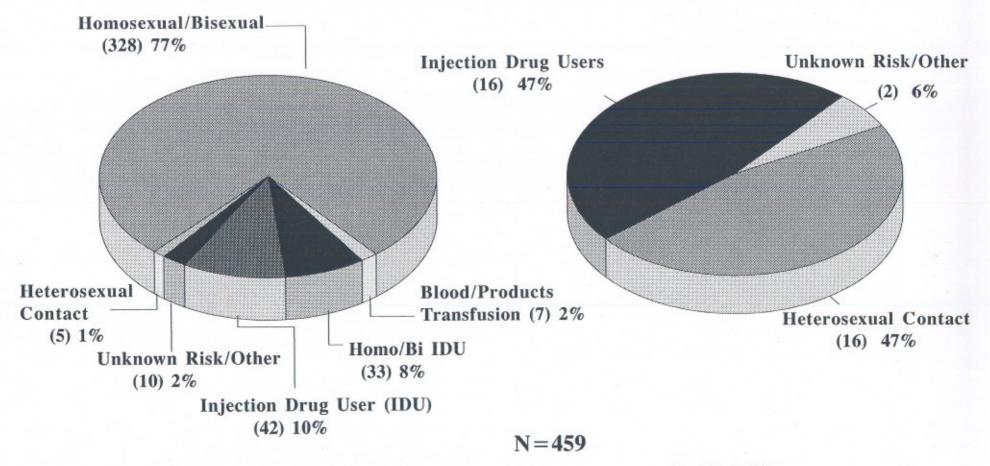
AIDS Cases by Vital Status City of Berkeley, 1983 - 1996*



AIDS Cases by Reported Mode of Exposure City of Berkeley, 1983-1996*

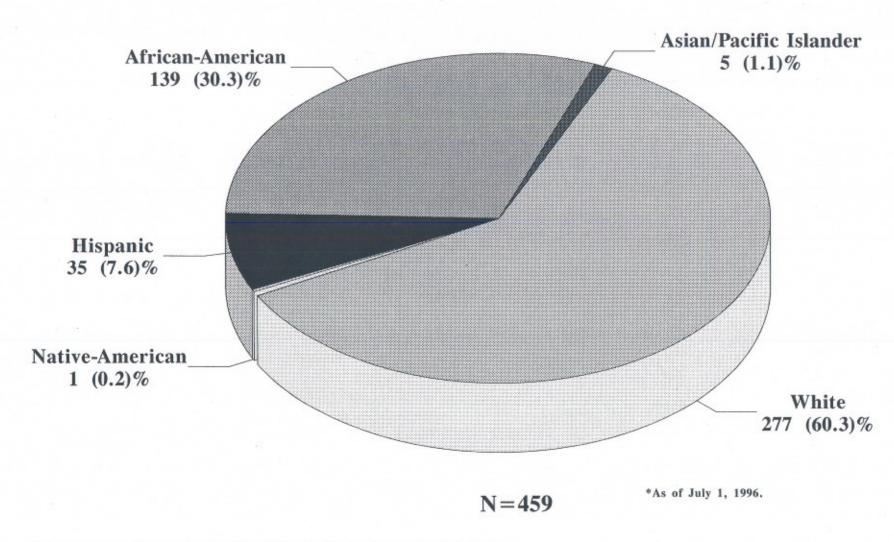


Females (N=34)

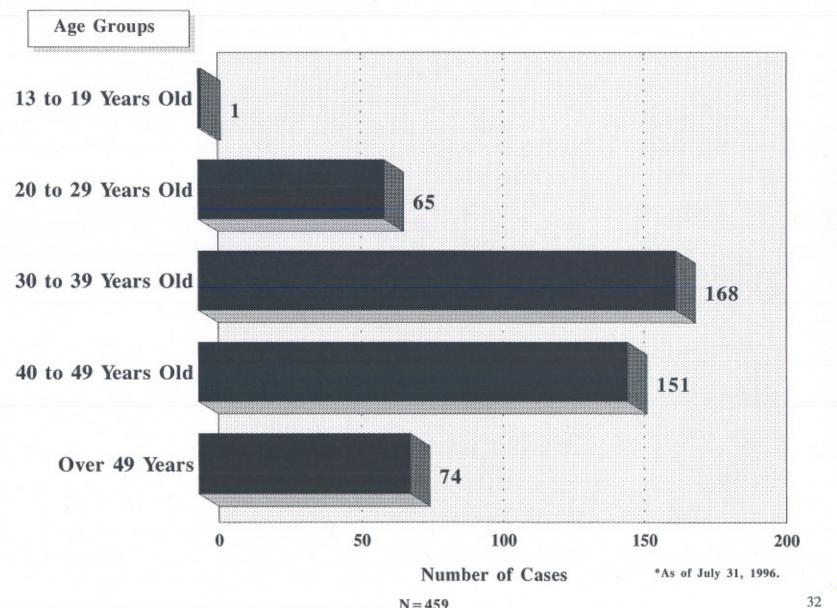


*As of July 31, 1996.

Cumulative AIDS Cases by Race/Ethnicity City of Berkeley, 1983-1996*

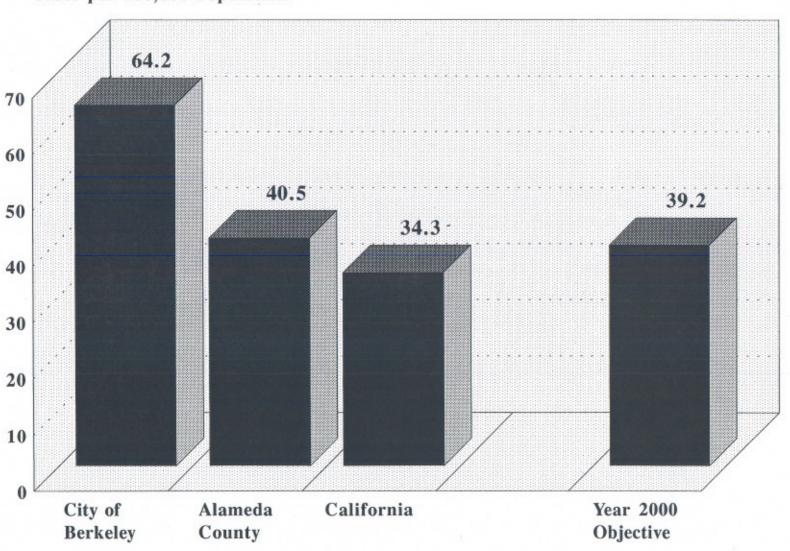


Cumulative AIDS Cases by Age City of Berkeley, 1983-1996*

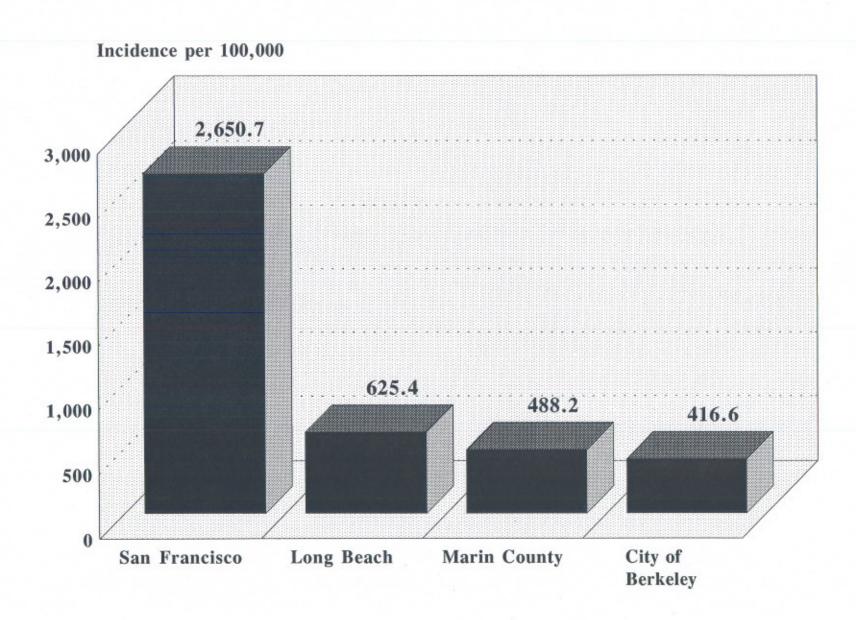


Annual AIDS Incidence Rate, City of Berkeley, Alameda County, California, and Healthy People 2000 Objectives, 1992-1994 Average Rate

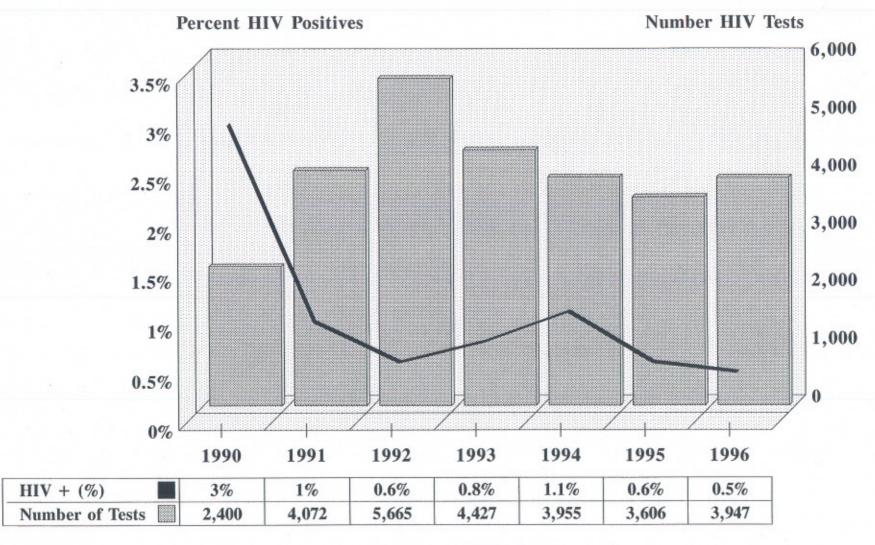




Health Jurisdictions with the Highest Cumulative AIDS Incidence in California 1981 through December 31, 1995

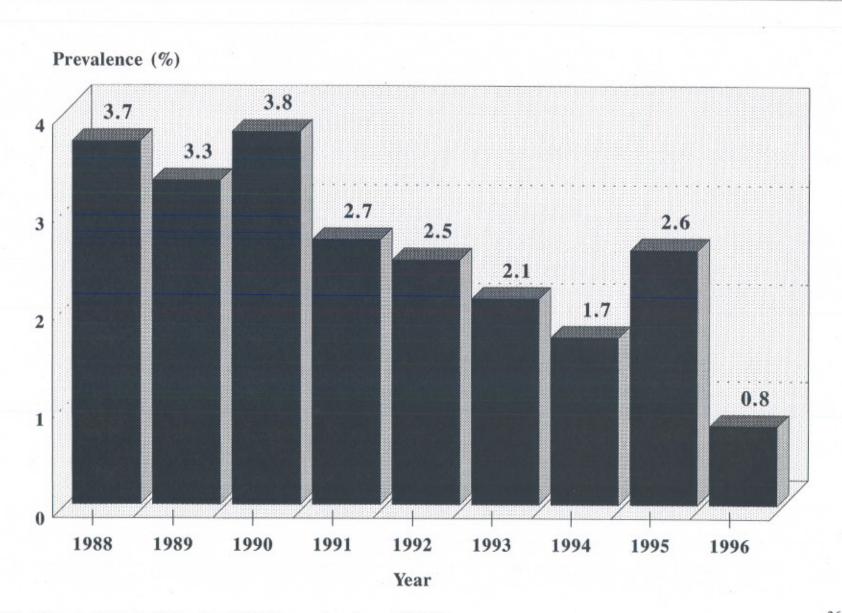


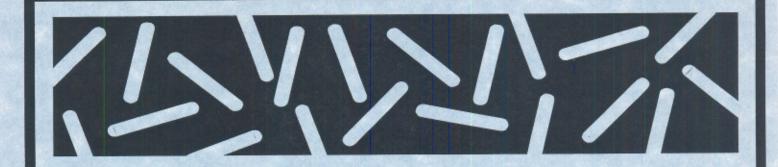
Anonymous and Confidential HIV Testing City of Berkeley, 1990 - 1996



Year of HIV Test

Prevalence of HIV Infection by Year STD Blinded Seroprevalence Survey City of Berkeley, 1988-1996





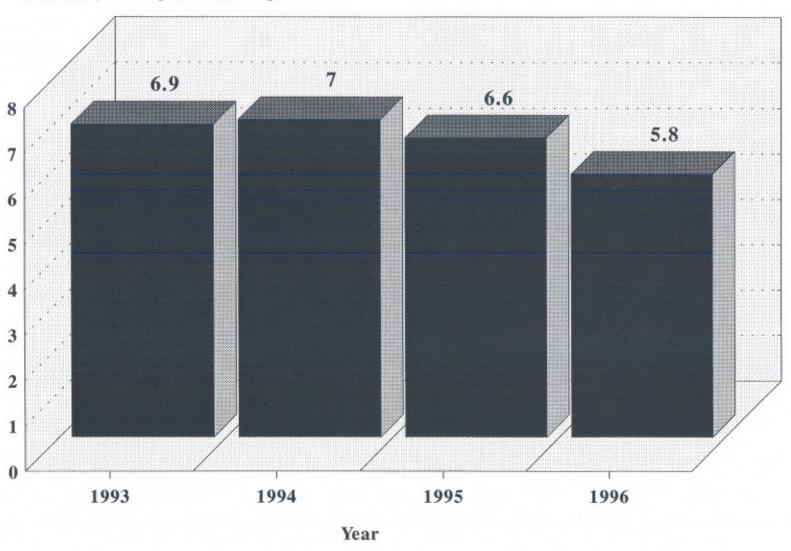
Mortality

Mortality and Leading Causes of Death

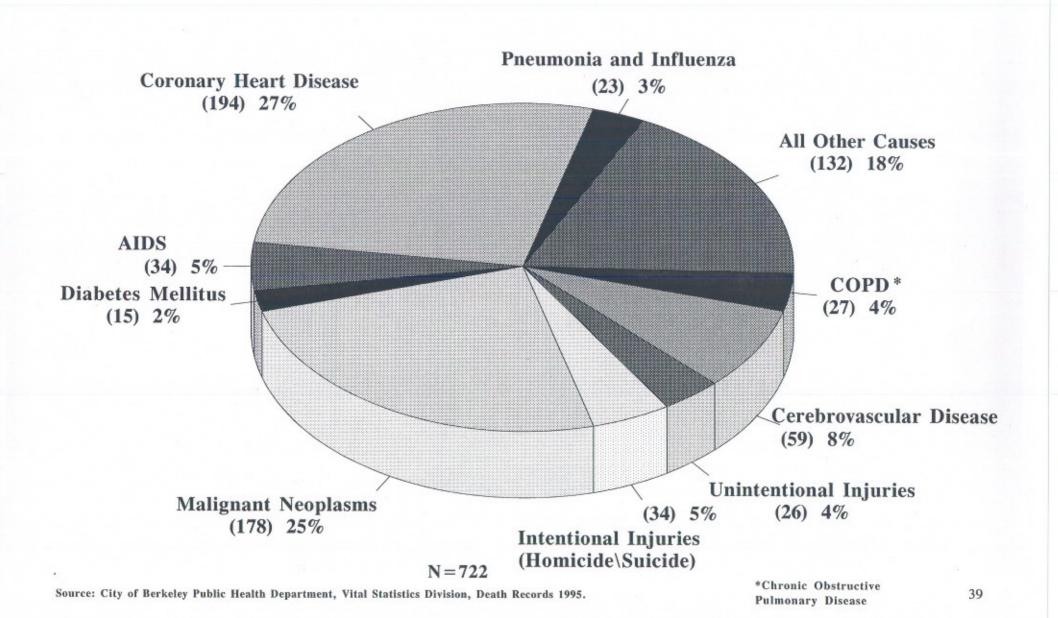
- ◆ The mortality rate for the city of Berkeley has decreased by 16% from 1993 (6.9 per 1,000 population) to 1996 (5.8 per 1,000 population).
- Heart diseases, malignant neoplasms, cerebrovascular disease, and Acquired Immune Deficiency Syndrome (AIDS) made up 64% of all deaths in the city of Berkeley during 1995.
- ◆ The age adjusted mortality rate for ischemic heart disease (which includes myocardial infarction) for the city of Berkeley (94.7/100,000) is significantly lower as compared to that of Alameda County (163.5\100,000), and the state of California (158.9/100,000).
- ◆ In 1995 there were 18 suicides and 16 homicides among residents of the city of Berkeley. These intentional injuries were among the ten leading causes of death in Berkeley in 1995.
- Unintentional injuries ranked number 6 among the ten leading causes of death in 1995. Approximately 27% of these deaths were caused by motor vehicle crashes, 23% due to falls, and another 23% due to unintentional poisoning.
- ♦ Of the 18 suicides that occurred in Berkeley in 1995, 6 (33%) were due to firearms, 5 (28%) to hanging/suffocation, and 4 (22%) due to poisoning.
- Among malignant neoplasms (cancer) deaths, lung and breast cancers were the two leading causes of death in 1995.

Mortality Rate by Year City of Berkeley, 1993 - 1996

Mortality Rate per 1,000 Population



Ten Leading Causes of Death City of Berkeley, 1995

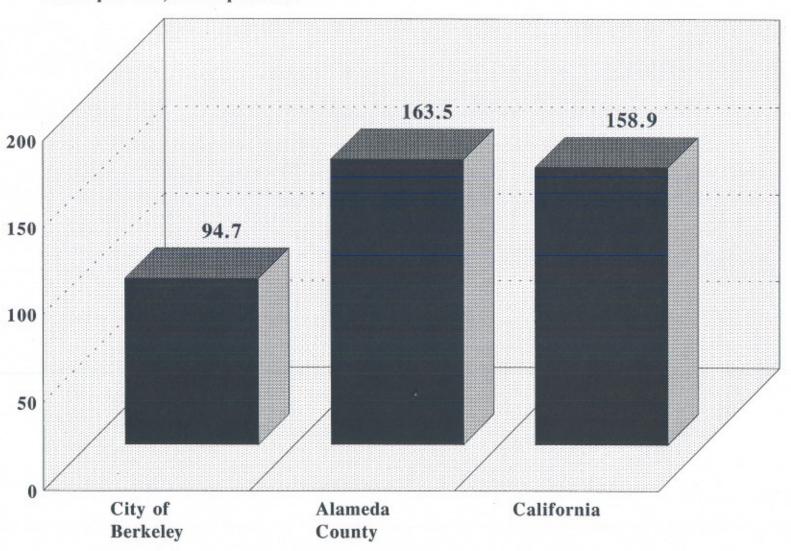


Ranking of the Ten Leading Causes of Death City of Berkeley and State of California, 1995

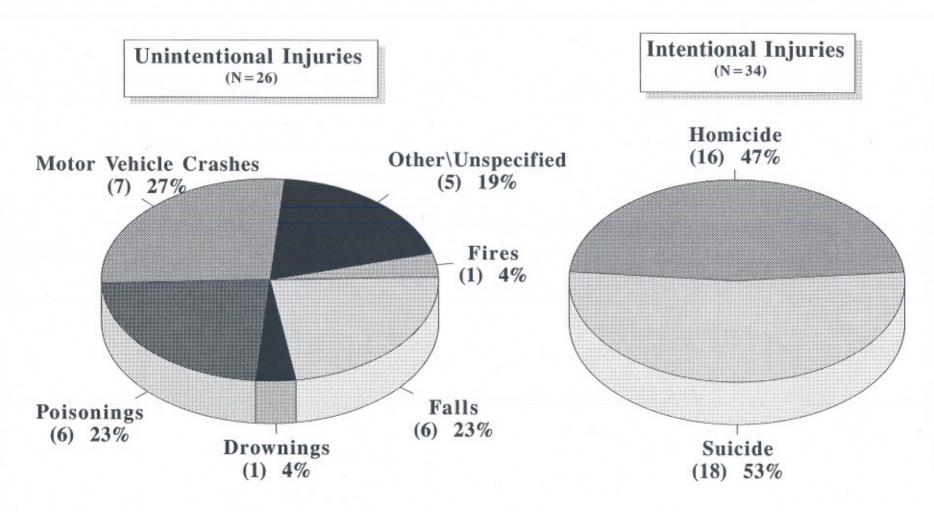
Cause of Death	City of Berkeley	Rank	California	Rank
Diseases of the Heart	194	1	67,990	1
Malignant Neoplasms	178	2	51,217	2
Cerebrovascular disease	59	3	16,176	3
AIDS	34	4	6,450	7
Chronic Obstructive Pulmonary Disease	27	5	10,765	4
Unintentional Injuries	26	6	9,372	6
Pneumonia and Influenza	23	7	10,548	5
Suicide	18	8	3,823	9
Homicide	16	9	3,623	10
Diabetes	15	10	5,096	8
All Other Causes	132		37,566	
TOTAL	722		222,626	

Age Adjusted Mortality Rate for Ischemic Heart Disease City of Berkeley, Alameda County and California, 1989-1991 Average

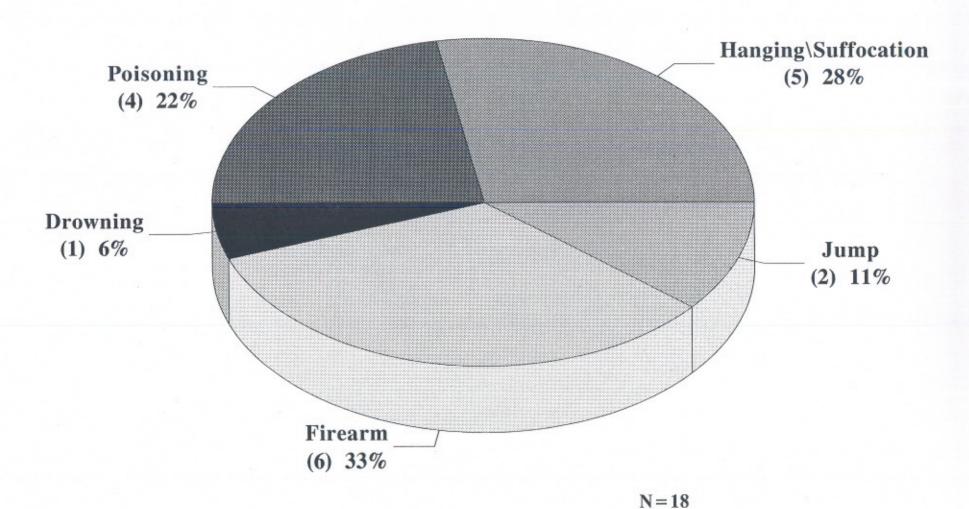




Intentional and Unintentional Injury Deaths by Cause City of Berkeley, 1995

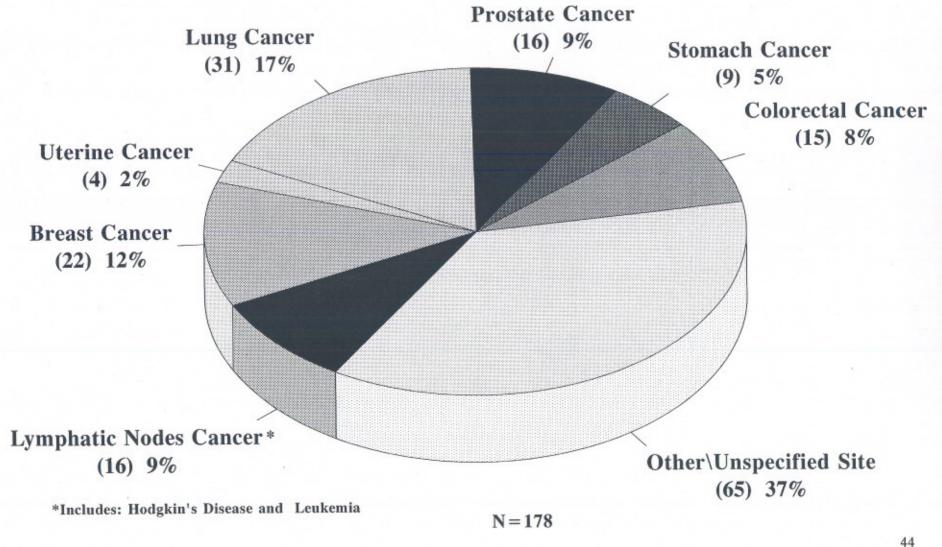


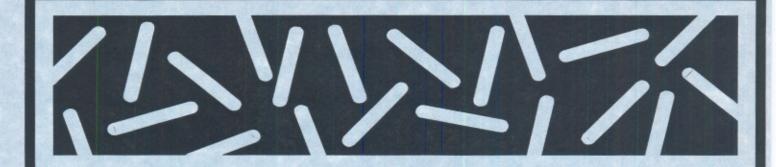
Suicides by Methods City of Berkeley, 1995



43

Malignant Neoplasm Deaths City of Berkeley, 1995





Technical Notes

TECHNICAL NOTES

DATA SOURCES

The numbers and rates presented in this report were obtained from a variety of data bases and registries collected by the City of Berkeley Public Health Department:

Vital Statistics:

Birth and death indicators were calculated using birth and death records for residents of Berkeley only, regardless of the place of birth or death.

AIDS\HIV Registry:

The statistics presented in the AIDS and HIV section were obtained using the AIDS cases reported to the City of Berkeley Public Health Department as part of the AIDS Surveillance System.

HIV databases were obtained from the anonymous and confidential HIV testing sites of the Public Health Clinic and the HIV seroprevalence surveys at the sexually transmitted disease clinic.

TB Registry:

TB rates were calculated using the TB cases diagnosed and reported by the City of Berkeley Public Health Department. Cases and rates are presented by *count year*, which is the date when the TB case is verified and reported to the State Health Department.

Communicable Diseases:

Communicable disease data was compiled by the City of Berkeley Public Health Department through the confidential morbidity reports.

Population estimates and projections were used in this report as denominators to calculate rates and proportions and for the Demographic Profile of this report.

DEFINITIONS

Rates: The number of events divided by the population at risk.

Adolescent Birth Rate: The number of live births among adolescents 15 to 17 years of age divided by the estimated female

population in the same age group.

Crude Mortality Rate: The number of all deaths in one year divided by the midyear estimated population.

Infant Mortality Rate: The number of deaths under 1 year of age divided by the number of live births occurring in the same

year.

Late or No Prenatal Care: Care which begins in the 2nd or 3rd trimester of pregnancy or no prenatal care at all.

Low Birthweight: Live birth weighing less than 2,500 grams or 5.5 pounds.

Injuries: Physical infliction induced by an external cause. In this report we use two classifications of injuries:

Includes those injuries caused by a person with the intention to kill or injure (homicides and suicides).

Unintentional: Includes those injuries or deaths caused by an unanticipated event (motor vehicle crashes, falls, etc.).

RACE/ETHNICITY

The following race/ethnic groups and their definitions are used in this report:

Asian/Pacific Islander: Includes Asian Indian, Cambodian, Chinese, Filipino, Japanese, Korean, Laotian, Thai, Vietnamese,

Asian unspecified, Hawaiian, Guamanian, Samoan, and other Pacific Islanders.

African-American: Includes Blacks, non-Hispanics.

Hispanic: Includes Mexican/Mexican-American/Chicano, Puerto Rican, Cuban, Central/South American, other

Spanish/Hispanic (born outside U.S.), other Spanish/Hispanic (born in the U.S).

Native-American: Includes American Indian, Eskimo, and Aleut.

White: Includes Whites, non-Hispanics.

Other/Unknown: Includes unspecified or unknown race/ethnicity.

ICD-9 CODES USED FOR LEADING CAUSES OF DEATH

For the definition of the ten leading causes of death, we use the standard diagnostic categories of the International Classification of Diseases, Ninth Revision (ICD-9):

All Cancers 140-208
All Causes of Death 000-E999
Female Breast Cancer 74

62.2-162.9 Lung Cancer Ischaemic Heart Disease 410-414 430-438 Cerebrovascular Disease 490-496 COPD E810-E825 Motor Vehicle Crashes Unintentional Injuries E800-E949 Homicides E960-E969 E950-E959 Suicides

Coronary Heart Disease 402, 410-414, 429.2

Pneumonia and Influenza 480-487
Diabetes Mellitus 250
Uterine Cancer 179, 182
Prostate Cancer 185
Lymphatic Cancers 200-208
Stomach Cancer 151

