

2017

Greater Third Ward Health Profile

The Greater Third Ward Neighborhood is one of the Houston Complete Communities designated by Mayor Sylvester Turner. This health profile of Greater Third Ward includes data on key health behaviors, health outcomes and the use of preventive services in the area.



HOUSTON HEALTH
DEPARTMENT

Complete Communities



Photo by Adrianna Blair



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Stadium

The Area

Greater Third Ward Super Neighborhood

The Greater Third Ward Super Neighborhood is comprised of four complete census tracts and two partial census tracts. As the boundaries of census tracts and that of a Super Neighborhood do not match perfectly, we have included those census tracts that have at least 50% of the population within the Super Neighborhood boundaries in the analysis for this report.

A map of the Greater Third Ward Super Neighborhood is overlaid on the background image. The map shows the neighborhood's irregular boundary in a dark grey color. Within this boundary, four census tracts are highlighted in a light blue color. The text 'Greater Third Ward' is written in white across the middle of the map.

Greater Third Ward

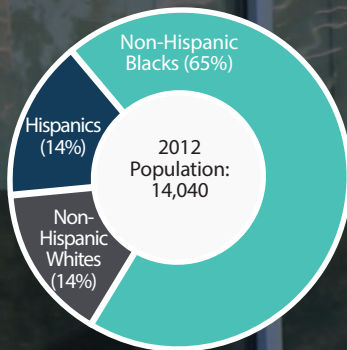
City of Houston

Photo by Adrianna Blair

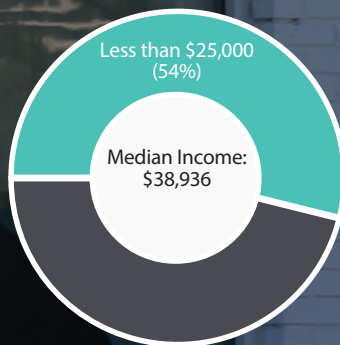
Demographics

The total population of the Greater Third Ward Super Neighborhood was 14,040 during 2012. The majority of the residents were non-Hispanic Blacks (65%) followed by Hispanics (14%) and non-Hispanic Whites (14%). The median (most common) income was \$38,936; over half (54%) had an annual household income less than \$25,000. More than a quarter (27%) of those 25 years and older did not have a high school diploma. Of the 6,683 housing units, approximately 30% were vacant. Approximately 83 % of the residents spoke English at home and about 8% were unemployed.

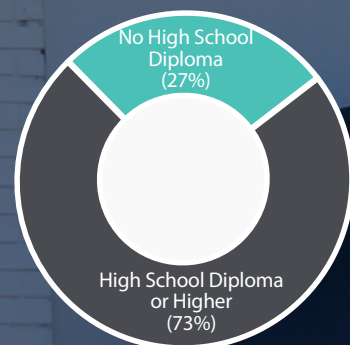
Population



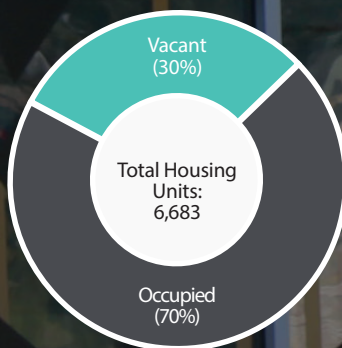
Annual Household Income



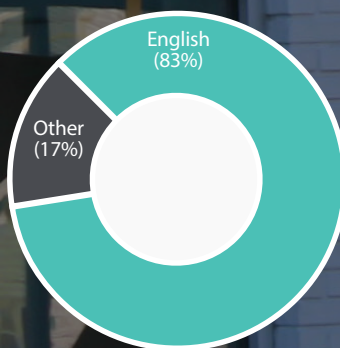
**Education
(25 Years & Older)**



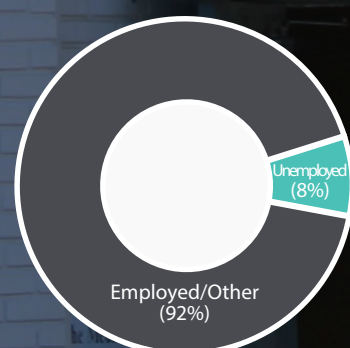
**Housing Units
(6,683)**



**Language Spoken
at Home**



Unemployment



Source:

Your Super Neighborhood's Demographics, Land Use Map, and Resource Assessment.

For more information on demographic information, please visit http://www.houstontx.gov/planning/Demographics/docs_pdfs/SN/67_Greater_ThirdWard.pdf



Photos by Adrianna Blair



A man in a blue basketball jersey with the number 3 is dribbling a basketball on a wooden court. He is wearing a black arm sleeve on his right arm and a black waistband. In the background, there is a basketball hoop and a wall with grey panels.

Health Behaviors

Smoking

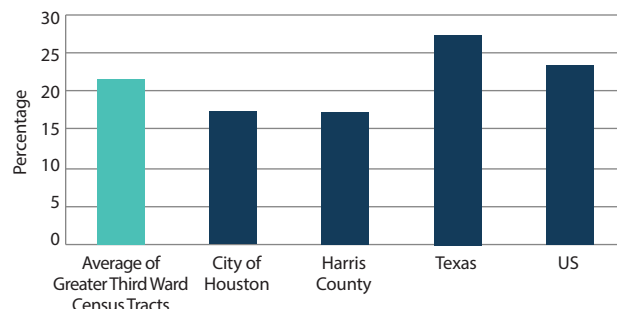
This indicator refers to the percentage of adults who smoke cigarettes.

Why is this important?

Tobacco is the agent most responsible for preventable illness and death in America today. According to the Centers for Disease Control and Prevention, tobacco use leads to premature death for almost half a million Americans each year, and contributes to profound disability and pain in many others. The World Health Organization states that approximately one-third of all tobacco users in the US will die prematurely because of their dependence on tobacco. Areas with a high smoking prevalence also have greater exposure to secondhand smoke for non-smokers, which can cause or exacerbate a wide range of adverse health effects such as cancer, respiratory infections, and asthma.

During 2013-2014, the percentage of adults 18 years and older in the Greater Third Ward neighborhood who smoked cigarettes was higher (21%) than that for Houston (17%) and Harris County (17.3%). However, it was lower than the rates for Texas (27.5%) and the US (23.3%). The percentages ranged from 18.1% to 24.2% in the census tracts in the Greater Third Ward neighborhood. The Healthy People 2020 target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12.0%.

Adults Who Smoke



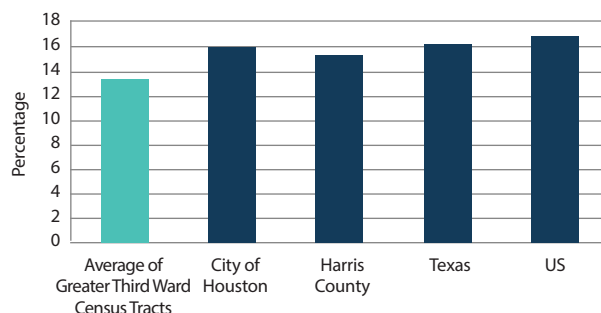
Binge Drinking

This indicator refers to the percentage of adults who reported binge drinking alcoholic beverages at least once during the 30 days prior to the survey. Male binge drinking is defined as five or more servings of alcoholic beverages on one occasion, and female binge drinking is four or more drinks on one occasion.

Why is this important?

Binge drinking is a common pattern of excessive alcohol use in the United States. Binge drinking can be dangerous and may result in loss of sensory perception, vomiting and blackouts. The prevalence of binge drinking among men is twice that of women. In addition, it was found that binge drinkers are 14 times more likely to report alcohol-impaired driving than non-binge drinkers. Alcohol abuse is associated with a variety of negative health and safety outcomes including alcohol-related traffic accidents and other injuries, employment problems, legal difficulties, financial loss, family disputes and other interpersonal problems.

Adults Who Binge Drink



During 2013-2014, the percentage of adults (aged 18 years and older) in Greater Third Ward who report binge drinking was lower (13.5%) than in Houston (16%), Harris County (15.3%), Texas (16.2%) and the US (16.8%). The percentages ranged from 10.8% to 21.0% in the Greater Third Ward census tracts. The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older engaging in binge drinking during the past 30 days to 24.4%, which already has been achieved in many states and counties including Harris County.



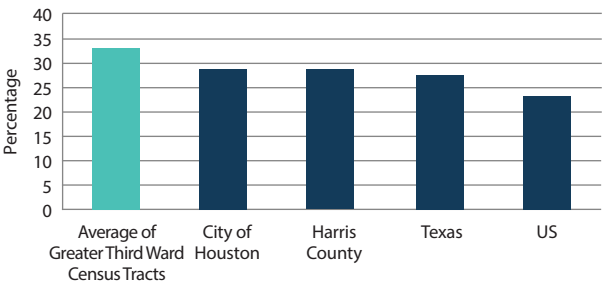
No Leisure-Time Physical Activity

This indicator refers to the percentage of adults who did not participate in any leisure-time activities (physical activities other than their regular job) during the past month.

Why is this important?

Adults who are sedentary (physically inactive) are at an increased risk of many serious health conditions. These conditions include obesity, heart disease, diabetes, colon cancer, and high blood pressure. In addition, physical activity improves mood and promotes healthy sleep patterns. The American College of Sports Medicine (ACSM) recommends that adults engage in moderate physical activity three to five times each week for 20 to 60 minutes at a time to improve cardiovascular fitness and body composition. The ACSM also recommends that you include strength and flexibility training in your exercise program. If you are not currently exercising, please consult your physician before beginning any exercise program.

No Leisure Time Physical Activity



During 2013-2014, the percentage of adults in Greater Third Ward who did not participate in any physical activities other than their regular job was higher (33.0%) than Houston (28.9%), Texas (27.5%), and the United States (23.3%). The percentages within Greater Third Ward census tracts ranged from 20.3% to 42.2%.





A photograph of a woman with curly hair, smiling and looking to the side. A young girl is sitting on her shoulders, also looking to the side. They are outdoors, with trees and sunlight in the background. The woman is wearing a white top and a small earring. The girl is wearing a red and white checkered shirt. The title 'Health Outcomes' is overlaid in the top right corner in a teal color.

Health Outcomes

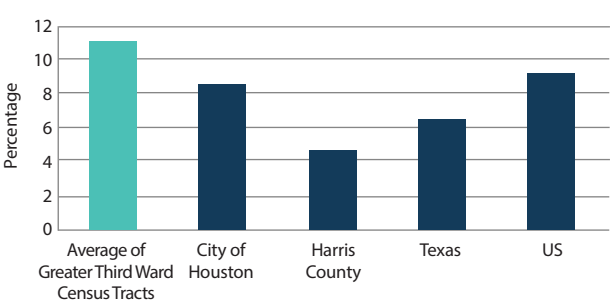
Asthma

This indicator shows the percentage of adults who have been told by a health care provider that they currently have asthma.

Why is this important?

Asthma is a condition in which a person’s air passages become inflamed, and the narrowing of the respiratory passages makes it difficult to breathe. Asthma is one of the most common long-term diseases of children, but it also affects millions of adults nationwide. Symptoms can include tightness in the chest, coughing, and wheezing. These symptoms are often brought on by exposure to inhaled allergens, such as dust, pollen, mold, cigarette smoke, and animal dander, or by exertion and stress. Reducing exposure to poor housing conditions, traffic pollution, secondhand smoke and other factors impacting air quality can help prevent asthma and asthma attacks. There is no cure for asthma, but for most people, the symptoms can be managed through a combination of long-term medication strategies and short-term rapid symptom relievers. In some cases, however, asthma symptoms are severe enough to warrant hospitalization, and can result in death.

Adults with Asthma



During 2013 to 2014, the percentage of adults in Greater Third Ward with asthma was higher (10.8%) than Houston (8.5%), Harris County (4.6%), Texas (6.6%), and the United States (8.8%). The percentages ranged from 9.9% to 11.5% in Greater Third Ward census tracts.



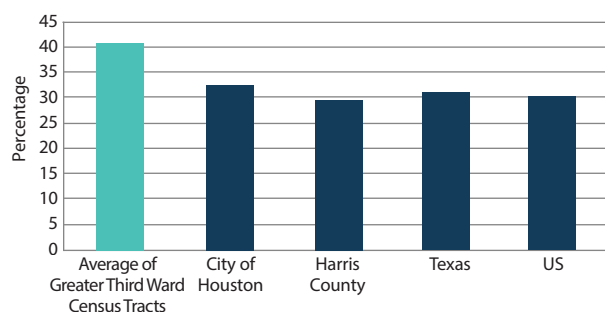
High Blood Pressure

This indicator refers to the percentage of adults who have been told by a health professional that they have high blood pressure. Normal blood pressure should be less than 120/80 mm Hg for adults. Blood pressure above 140/90 mm Hg or higher is considered high blood pressure or hypertension.

Why is this important?

High blood pressure is the number one modifiable risk factor for stroke. In addition to stroke, high blood pressure also contributes to heart attacks, heart failure, kidney failure, and atherosclerosis. The higher your blood pressure, the greater the risk for those conditions. In the United States, one in three adults has high blood pressure, and nearly one-third of these individuals are not aware that they have it. Because there are no symptoms associated with high blood pressure, it is often called the “silent killer.” The only way to tell if you have high blood pressure is to have your blood pressure checked. High blood pressure can occur in people of any age or sex; however, it is more common among those over age 35. It is particularly prevalent in African Americans, older adults, obese individuals, heavy drinkers, and women taking birth control pills. Blood pressure can be controlled through lifestyle changes, including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, being at optimal weight, and staying physically active.

Adults with High Blood Pressure



During 2013 to 2014, the percentage of adults in Greater Third Ward with high blood pressure was greater (40.2%) than that for Houston (32.3%), Harris County (29.4%), Texas (31.3%) and the United States (30.2%). The percentages ranged from 12.6% to 51.4% across the Greater Third Ward census tracts. The Healthy People 2020 target is to reduce the proportion of adults aged 18 years and older with high blood pressure to 26.9%.



High Cholesterol

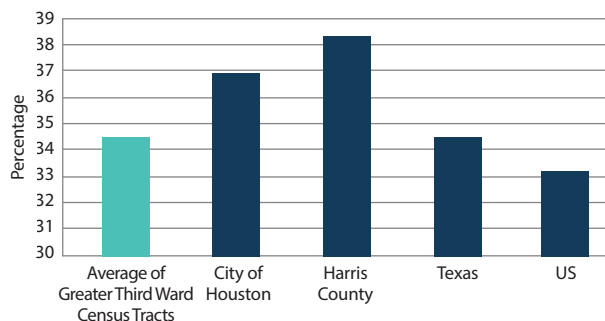
This indicator refers to the percentage of adults who have had their blood cholesterol checked and have been told by a health professional that it was high.

Why is this important?

According to the Centers for Disease Control and Prevention, about one in six adults have high blood cholesterol. High blood cholesterol is one of the major risk factors for heart disease. Studies show that the higher your blood cholesterol level, the greater your risks for developing heart disease or having a heart attack. Heart disease is the number one killer of men and women in the United States. High blood cholesterol does not cause symptoms, so it is important to find out what your cholesterol levels are. Lowering cholesterol levels decreases the risk for developing heart disease and reduces the chance of having a heart attack. Lowering high cholesterol levels is important for people of all ages, and for both men and women.

During 2013 to 2014, slightly lower percentage (34.5%) of adults in Greater Third Ward had high cholesterol compared to the percentages for Houston (36.9%), Harris County (38.4%), and Texas (34.6%). The percentages for the Greater Third Ward census tracts ranged from 13.0% to 42.5%. The Healthy People 2020 target is to reduce the proportion of adults aged 20 years and older with high cholesterol to 13.5%.

Adults with High Cholesterol





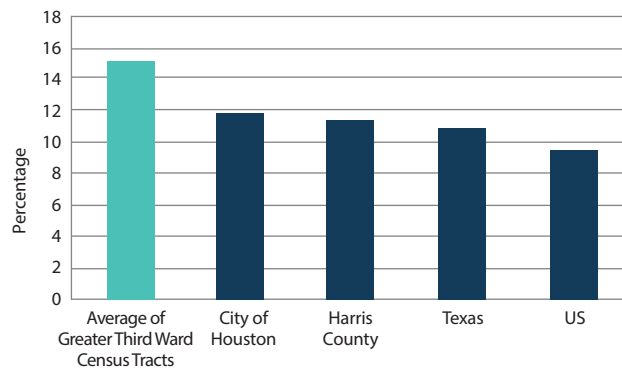
Diabetes

This indicator refers to the percentage of adults who have ever been diagnosed with diabetes by a health professional. Women who were diagnosed with diabetes only during the course of their pregnancy were not included in this count.

Why is this important?

Diabetes is a leading cause of death in the United States. According to the Centers for Disease Control and Prevention (CDC), more than 25 million people have diabetes, including both diagnosed and undiagnosed cases. This disease can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. According to the CDC, the direct medical expenditures attributable to diabetes are over \$116 billion. Diabetes disproportionately affects minority populations and the elderly, and its incidence is expected to rise as minority populations increase and the US population ages.

Adults with Diabetes



During 2013 to 2014, the percentage of adults with diabetes was higher for Greater Third Ward (15.2%) compared to Houston (11.8%), Harris County (11.3%), Texas (10.9%), and the United States (9.4%). The percentages ranged from 14.3% to 20.3% for the Greater Third Ward neighborhood census tracts.



Chronic Kidney Disease

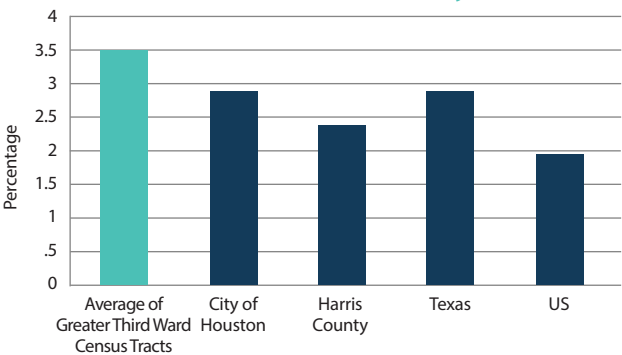
This indicator refers to the percentage of adults who have ever been told by a doctor they have kidney disease.

Why is this important?

Kidney disease is one of the top 10 leading causes of death in the United States. Kidney disease is most often caused by diabetes or high blood pressure, which slowly damages the blood vessels in the kidneys and decreases their ability to remove waste from the blood. According to the American Kidney Fund, it is estimated that 40% of people with diabetes will develop chronic kidney disease (CKD). CKD is more common among women, but men with CKD are 50% more likely to progress to kidney failure. The risk for kidney failure is also higher for some racial/ethnic groups, especially African Americans and Native Americans. Medicare expenditures for kidney failure account for about 6.7% of Medicare spending each year. For each kidney disease patient who does not progress to dialysis, Medicare savings are estimated at \$250,000.

During 2013 to 2014, the percentage of adults in Greater Third Ward with chronic kidney disease was higher (3.5%) than Houston (2.9%), Texas (2.9%) and the United States (2.6%). The percentages ranged from 1.0% to 4.8% across Greater Third Ward census tracts.

Adults with Chronic Kidney Disease



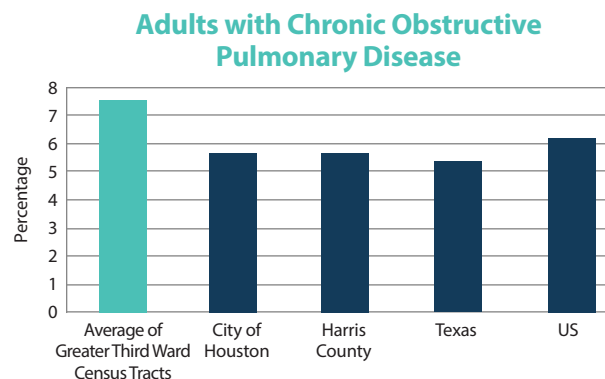


Chronic Obstructive Pulmonary Disease

This indicator refers to the percentage of adults who have ever been told by a doctor that they have chronic obstructive pulmonary disease (COPD), emphysema, or chronic bronchitis.

Why is this important?

Chronic obstructive pulmonary disease, or COPD, refers to a group of diseases that cause airflow blockage and breathing-related problems. COPD most commonly includes chronic bronchitis and emphysema and usually results from tobacco use, although it can also be a result of pollutants in the air, genetic factors, and respiratory infections. Common symptoms include shortness of breath, wheezing, and chronic cough. Although there is no cure for COPD, smoking cessation, medications, and therapy or surgery can help individuals manage their symptoms.



During 2013 to 2014, the average percentage of adults with COPD in Greater Third Ward was higher (7.5%) than Houston (5.7%), Harris County (5.7%), Texas (5.3%), and the United States (6.1%). The percentages for the Greater Third Ward census tracts ranged from 2.4% to 11.0%.



Coronary Heart Disease

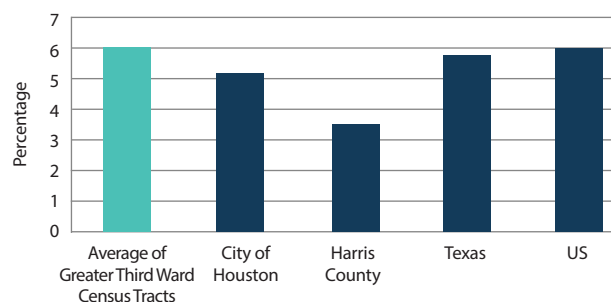
This indicator refers to the percentage of adults who have ever been told by a health care provider that they have coronary heart disease.

Why is this important?

Cardiovascular diseases, including heart disease and stroke, account for more than one-third of all US deaths and are a leading cause of disability. Heart disease is a term that encompasses a variety of different diseases affecting the heart. The most common type in the United States is coronary artery disease, which can cause heart attack, angina, heart failure, and arrhythmias. There are many things people can do to reduce their risk for heart disease and stroke including avoiding tobacco use and excessive weight, being physically active, and consuming a heart-healthy diet. Controlling high blood pressure and cholesterol are also important prevention strategies. According to the Centers for Disease Control and Prevention (CDC), a 12-13 point reduction in systolic blood pressure can reduce heart disease risk by 21%, stroke risk by 37%, and risk for death from heart disease or stroke by 25%.

In 2013 to 2014, approximately 6% of the adults in the Greater Third Ward neighborhood suffered from coronary heart disease. This is higher than the average percentages for Houston (5.2%), Harris County (3.6%), Texas (5.8%), and comparable to United States (6.0%). The percentages for Greater Third Ward census tracts ranged from 0.7% to 9.0 %.

Adults with Coronary Heart Disease



Stroke

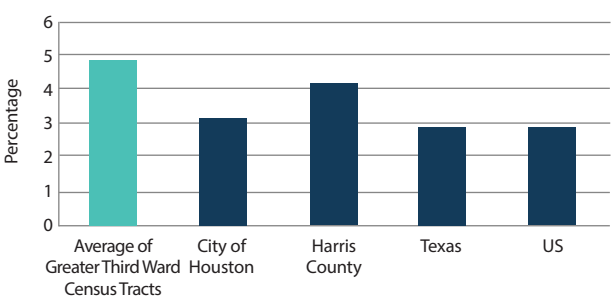
This indicator refers to the percentage of adults who have ever been told by a health care provider that they had a stroke.

Why is this important?

Stroke is a disease that affects the arteries leading to and within the brain. It is the No. 5 cause of death and a leading cause of disability in the United States. A stroke occurs when a blood vessel carrying oxygen and nutrients to the brain is either blocked by a clot or ruptures. When that happens, part of the brain cannot get the blood (and oxygen) it needs, so it and brain cells can die. Strokes occur more frequently in individuals 65 years and older, African American males, and those with a family history of stroke. Up to 50% of all strokes are preventable. Some risk factors for stroke that can be controlled are high blood pressure, uncontrolled diabetes, high cholesterol, tobacco use, excessive alcohol intake and obesity.

During 2013 to 2014, residents of the Greater Third Ward area had a higher percentage (4.8%) of adults who were told that they had had a stroke than average percentages for Houston (3.1%), Harris County (4.2%), Texas (2.8%) and the United States (2.8%). The percentages across Greater Third Ward census tracts ranged from 0.6% to 6.3%.

Stroke Among Adults



Poor Mental Health

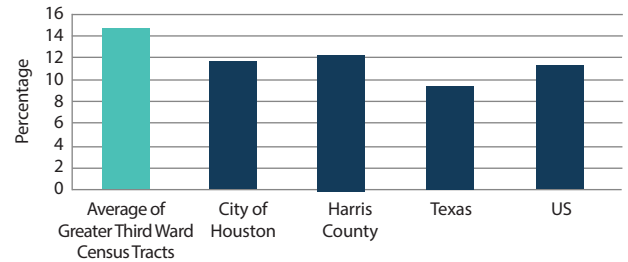
This indicator refers to the percentage of adults who stated that their mental health was not good 14 or more days in the past month.

Why is this important?

Psychological distress can affect all aspects of our lives. It is important to recognize and address potential psychological issues before they become critical. Occasional down days are normal, but persistent mental/emotional health problems should be evaluated and treated by a qualified professional.

During 2013 to 2014, 14.4 % of the adults in the Greater Third Ward neighborhood struggled with mental health for 14 days or more. This average is greater than Houston (11.7%), Harris County (12.2%), Texas (9.3%), and the United States (11.5%). The percentages for Greater Third Ward census tracts ranged from 10.5% to 17.5%.

Adults with Poor Mental Health



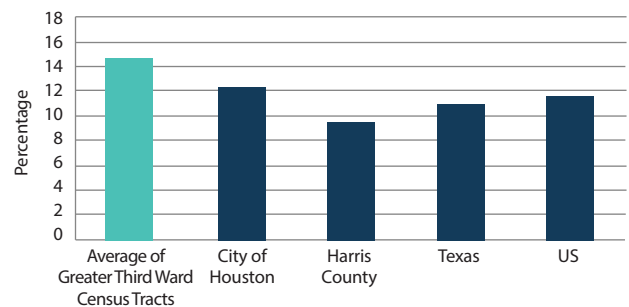
Poor Physical Health for 14+ Days

This indicator refers to the percentage of adults who stated that their physical health was not good 14 or more days in the past month.

Why is this important?

People's assessment of their physical health, which includes physical illness and injury, is a good measure of recent health. When people feel healthy they are more likely to feel happy and to participate in their community socially and economically. Areas with unhealthy populations lose productivity due to lost work time. Healthy residents are essential for creating a vibrant and successful community.

Poor Physical Health for 14+ Days



During 2013 to 2014, the percentage of adults who stated that their physical health was not good 14 or more days in the past month was higher (14.5%) in the Greater Third Ward area than in Houston (12.3%), Harris County (9.5%), Texas (10.8%), and the United States (11.6%). The percentages ranged from 6.0 % to 20.6% across the Greater Third Ward census tracts.

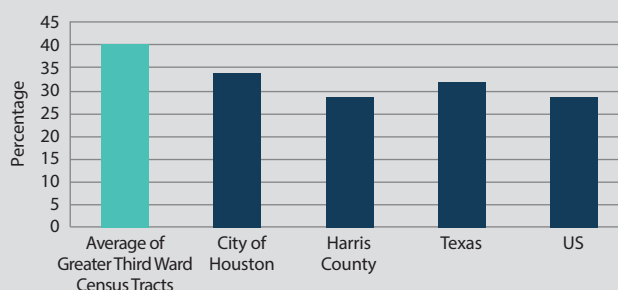
Obesity

This indicator refers to the percentage of adults age 18 and older who are obese according to the Body Mass Index (BMI). The BMI is calculated by taking a person's weight and dividing it by their height squared. In metric units, this is $BMI = \text{Weight (Kg)} / [\text{Height (m)}^2]$. A BMI greater than or equal to 30 is considered obese.

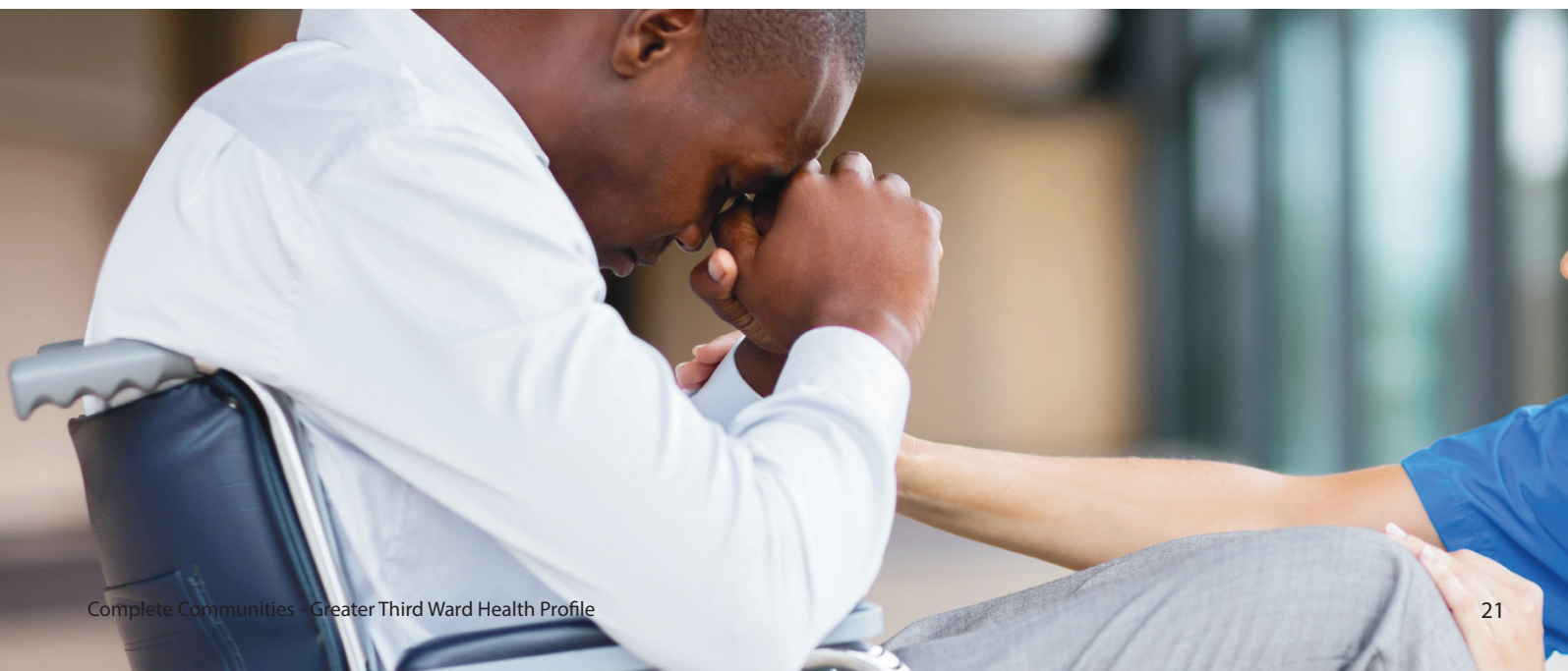
Why is this important?

The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions, including heart disease, type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis. Losing weight and maintaining a healthy weight help to prevent and control these diseases. Being obese also carries significant economic costs due to increased healthcare spending and lost earnings.

Obesity Among Adults



During 2013-2014, the percentage of adults (18+) in Greater Third Ward who were obese (40.2%) was significantly higher than Houston (33.6%), Harris County (28.2%), Texas (31.8%), and the US (28.7%). The percentages ranged from 22.4 % to 48.4% in the Greater Third Ward census tracts. The Healthy People 2020 target is to reduce the proportion of adults aged 20 and older who are obese to 30.5%.







Use of Preventive Services

Lack Health Insurance

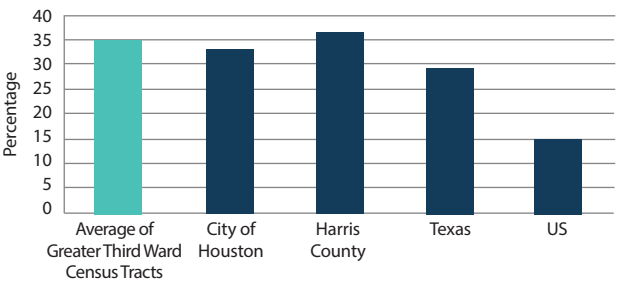
This indicator shows the percentage of adults aged 18-64 that do not have any kind of health insurance coverage.

Why is this important?

Medical costs in the United States can be extremely high, so people without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they will not seek treatment until the condition is more advanced and therefore more difficult and costly to treat. Many small businesses are unable to offer health insurance to employees due to rising health insurance premiums.

During 2013 to 2014, Greater Third Ward area had a higher percentage of adults without insurance (34.3%) than Houston (33.2%), Texas (29.1%), and the United States (14.9%), but lower than Harris County (36.9%). The percentages within Greater Third Ward census tracts ranged from 28.4% to 41.9%.

Lack Access to Health Care





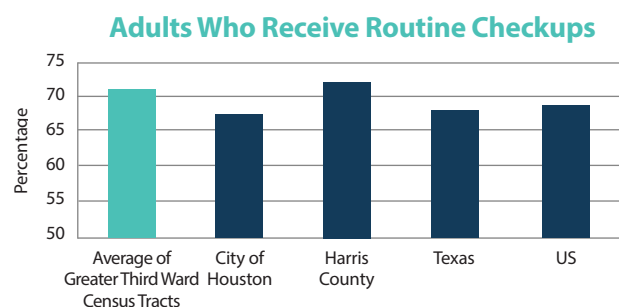
Receive Routine Checkups

This indicator refers to the percentage of adults that report having visited a doctor for a routine checkup within the past year.

Why is this important?

Routine checkups are integral to maintaining good health. Regular screenings and exams that take place during routine checkups can help diagnose problems before they begin or early on when chances for treatment and cure are better. Age, current health status, family history, lifestyle choices, and other important factors determine how frequently one should have a checkup and which screenings and tests should be taken. A checkup may include, but is not limited to, cholesterol screening, blood pressure screening, breast and cervical cancer screening for women, and prostate cancer screening for men.

During 2013 to 2014, Greater Third Ward area had a higher percentage (71.5%) of adults who had received routine check-up than Houston (67.4%), Texas (67.5%), and the United States (68.7%). The Harris County percentage was 71.9%. The percentages ranged from 61.0% to 76.9% across the Greater Third Ward census tracts.

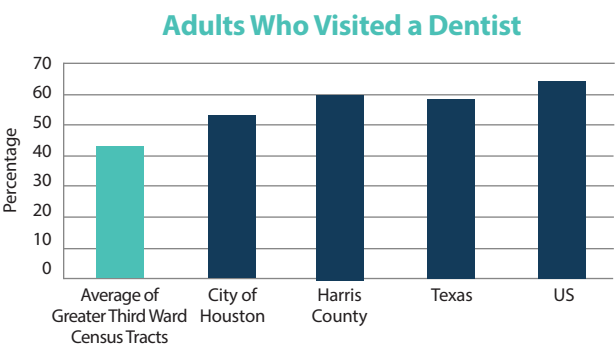


Dental Visits

This indicator refers to the percentage of adults who have visited a dentist or dental clinic for any reason in the past year.

Why is this important?

Oral health has been shown to impact overall health and well-being. According to the Centers for Disease Control and Prevention, nearly one-third of all adults in the United States have untreated tooth decay, or tooth caries, and one in seven adults aged 35 to 44 years old has periodontal (gum) disease. Given these serious health consequences, it is important to maintain good oral health. It is recommended that adults and children see a dentist on a regular basis. Professional dental care helps to maintain the overall health of the teeth and mouth, and provides for early detection of pre-cancerous or cancerous lesions. Maintaining good oral health by using preventive dental health services is one way to reduce oral diseases and disorders.



During 2013 to 2014, lower percentages of the adults in Greater Third Ward had visited a dentist (43.9%) compared to Houston (53.3%), Harris County (59.6%), Texas (58.2%), and the United States (64.1%). The percentages for dental visits in Greater Third Ward census tracts ranged from 37.3% to 50.6%.

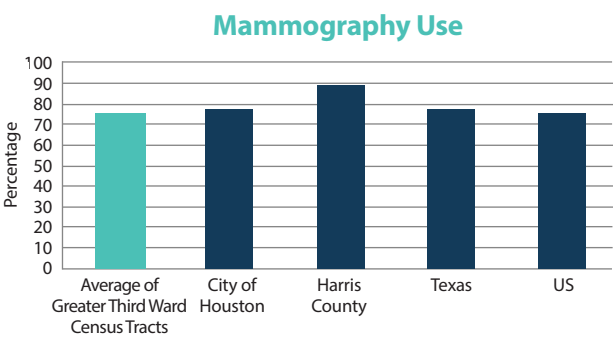


Mammography Use Among Women (Aged 50-74)

This indicator refers to the percentage of women aged 50-74 who have had a mammogram in the past two years.

Why is this important?

A mammogram is an x-ray of the breast that can be used to detect changes in the breast such as tumors and calcifications. The test may be done for screening or for diagnostic purposes. A positive screening mammogram leads to further testing to determine if cancer is present. Mammograms may also be used to evaluate known cases of breast cancer. Although mammograms may not detect all cases of breast cancer, they have been shown to increase early detection, thus reducing deaths from breast cancer. The Centers for Disease Control and Prevention provides access to free or low-cost mammograms to low-income, uninsured and underserved women through the National Breast and Cervical Cancer Early Detection Program (NBCCEDP).



During 2013 to 2014, the percentage of women, 50-74 years of age in the Greater Third Ward area who had received a mammogram in the past two years was lower (75.3%) than in Houston (77.1%), Harris County (88.9%), Texas (76.9%) and the United States (75.5%). The percentages in the Third Ward census tracts ranged from 70.1% to 80.1%.

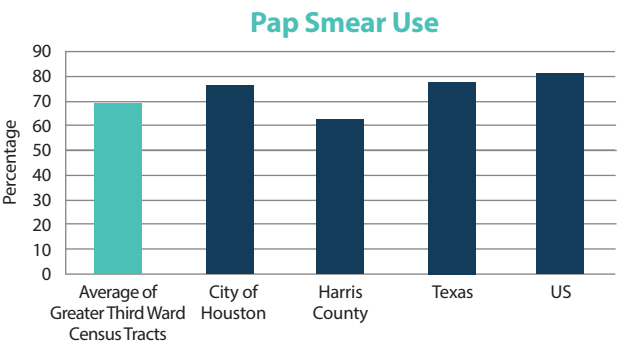


Pap Smear Use Among Women (Aged 21-65)

This indicator refers to the percentage of women aged 21-65 who have had a Pap smear in the past three years.

Why is this important?

The Pap test, also known as a Pap or Pap smear, checks for changes in the cells of the cervix that can be early signs of cervical cancer. Cervical cancer is a common cancer that has a very high cure or remission rate when detected early. If Pap results are abnormal, further testing or treatment may be necessary. Many abnormalities resolve without leading to cancer. The American College of Obstetricians and Gynecologists recommends that all women age 21-29 have a Pap test every three years while women aged 30-65 should have a Pap test and an HPV test every five years or a Pap test alone every three years.



During 2013 to 2014, 69.4% of the women in Greater Third Ward received pap smears compared to Houston (76.2%), Harris County (62.9%), Texas (77.9%), and the United States (81.1%). The percentages across the census tracts in Greater Third Ward ranged from 59.7% to 80.9%.





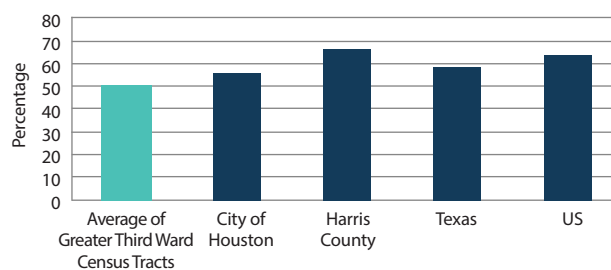
Colon Cancer Screening Among Adults (Aged 50-75)

This indicator refers to the percentage of respondents aged 50-75 who have had either a fecal occult blood test (FOBT) in the past year, a sigmoidoscopy in the past five years AND a fecal occult blood test in the past three years, or a colonoscopy exam in the past ten years.

Why is this important?

According to the Centers for Disease Control and Prevention (CDC), colorectal cancer—cancer of the colon or rectum—is one of the most commonly diagnosed cancers in the United States, and is the second leading cancer killer in the United States. The CDC estimates that if all adults aged 50 or older had regular screening tests for colon cancer, as many as 60% of the deaths from colorectal cancer could be prevented. Risks and benefits of using different screening methods, such as stool-based tests, sigmoidoscopies, and colonoscopies, vary. The US Preventive Service Task Force recommends that colorectal cancer screening begin at age 50 and continue until age 75. However, testing may need to begin earlier or be more frequent if colorectal cancer runs in the family, or if there is a previous diagnosis of inflammatory bowel disease. One should consult with a doctor about when to begin screening and how often to be tested.

Colon Cancer Screening



During 2013 to 2014, the percentage of adults who received screening for colon cancer in Greater Third Ward area was lower (50.0%) than in Houston (55.7%), Harris County (67.2%), Texas (58.4%), and the United States (64.0%). The percentages across the census tracts in Greater Third Ward ranged from 44.1% to 62.0%.



A person is sitting outdoors on a paved surface, wearing blue jeans and a light green shirt. In the foreground, several pairs of roller skis are visible, some with blue and white designs. The background is a blurred view of trees with green and yellow leaves, suggesting an autumn setting. A semi-transparent white box containing text is overlaid on the right side of the image.

Conclusions

- Residents of the Greater Third Ward community reported higher percentages who had routine checkups (in spite of lower health care coverage), lower percentages of binge drinking, and similar rates of smoking and high cholesterol than individuals in Houston, Harris County, Texas and the US.
- The reported percentages of asthma, diabetes, chronic kidney disease, COPD, stroke, and lack of physical activity were higher than for populations in Houston, Harris County, Texas and the US. However, the percentages of obesity and high blood pressure were significantly higher among Greater Third Ward residents.
- Greater Third Ward residents reported higher percentages of poor mental and physical health than adults in Houston, Harris County, Texas and the US.
- In Greater Third Ward, lower percentages of residents had dental checkups, mammograms, Pap tests, and colorectal cancer screenings.



Technical Notes

The census tract level estimates for the given indicators were averaged. Also, we have included the estimates for the census tracts that have the smallest and largest values. Those values are compared with city, county, state and US values. Data for Texas and the US was adjusted for age. This report also presents the Healthy People 2020 target for the given indicator when available. The estimates presented here are model-based estimates developed by CDC's 500 Cities Project. More information on methods are available at <https://www.cdc.gov/500cities/>.

Data Sources

1. CDC 500 Cities Project (<https://www.cdc.gov/500cities/>)
2. Houston State of Health (<http://www.houstonstateofhealth.com/>)
3. Healthy People 2020 (<https://www.healthypeople.gov/>)

Limitations

All data presented in this report are model-based estimates that reflect the statistically expected prevalence of each measure. These small area estimates may underestimate some areas with high prevalence or overestimate some areas with low prevalence. Because the small area model cannot detect effects because of local interventions, users are cautioned against using these estimates for program or policy evaluations.

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