

WE ACT FOR ENVIRONMENTAL JUSTICE

ENVIRONMENTAL HEALTH REPORT CARD FOR NORTHERN MANHATTAN: RATING THE ENVIRONMENT WHERE WE LIVE, WORK, & PLAY



Acknowledgments

We would like to thank everyone who contributed to the development of this report. Without your guidance and dedication to environmental public health, this seminal document would not have been possible. Specifically, we would like to thank Derval Thomas (EPA program officer), WE ACT Staff, Northern Manhattan CARE Collaborative members, WE ACT Environmental Health Interns, and the many residents that participated in any and all of WE ACT's activities since 1988.

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Grades at a Glance

What do the two grades mean?

The Grade (Public Data) was developed using environmental health data from the city and state.

The Community Grade was developed using the risk ranking process done by community members through the Northern Manhattan CARE Collaborative.

| Environmental Health Issue | GRADE (Public data) | COMMUNITY GRADE |
|----------------------------|---------------------|-----------------|
| Indoor Air Quality | C | C |
| Lead Poisoning | C | C |
| Pests & Pesticides | C | C |
| Solid Waste | B | C |
| Outdoor Air Quality | C | C |
| Access to Healthy Food | C | C |
| Drinking Water Quality | A | C |
| Recreational Water Quality | C | C |
| Open Space | C | C |

Community Health Snapshot

The race/ethnicity and population data that appear for West and Central Harlem may seem incorrect but it is compiled directly from census and United Hospital Fund – Neighborhood data that combine data for West and Central Harlem into one neighborhood.

1

Washington Heights/Inwood¹

Population 270,700

Poverty 31%

Race/Ethnicity 14% Black & 71% Hispanic

Psychological Distress (adult) 1 in 20

Infant Mortality (per 1000 live births) 6

Obesity (adult) 21%

Asthma (child) 5 per 1000

Lead Poisoning (child) 9 new cases

2

West Harlem²

Population 111,724

Poverty 35%

Race/Ethnicity Black 67% & Hispanic 19%

Psychological Distress (adult) 1 in 20

Infant Mortality (per 1000 live births) 7

Obesity (adult) 27%

Asthma (child) 13 per 1000

Lead Poisoning (child) 11 new cases



Figure 1.

Northern Manhattan

Created by Carlos M. Jusino¹⁻⁴

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East Harlem³

Population 108,100

Poverty 38%

Race/Ethnicity 33% Black & 55% Hispanic

Psychological Distress (adult) 1 in 12

Infant Mortality (per 1000 live births) 8

Obesity (adults) 31%

Asthma (child) 12 per 1000

Lead Poisoning (child) 10 new cases

4

Central Harlem⁴

Population 151,100

Poverty 35%

Race/Ethnicity 67% Black & 19% Hispanic

Psychological Distress (adult) 1 in 12

Infant Mortality (per 1000 live births) 7

Obesity (adult) 27%

Asthma (child) 13 per 1000

Lead Poisoning (child) 11 new cases

How We Assigned Grades

Grading System

A

Excellent

WE ACT's Environmental health indicators are better than or the same as citywide performance and policies are in place to address inequalities.

B

Satisfactory

WE ACT's Environmental health indicators are slightly below citywide performance and policies are in place but are not implemented to address inequalities.

C

Needs Improvement

WE ACT's Environmental health indicators are well below citywide performance and no policy to address inequalities exist.

What is an environmental health report card?

An environmental health report card is an assessment of a community's environmental conditions given the existing health conditions.

Why do we need an environmental health report card?

Advocates and residents agree – information connecting our health and the state of our environment is difficult to find. Government and private sector data sometimes conflict with our experience on the ground. WE ACT created this report card to provide a more inclusive evaluation of Northern Manhattan's environmental health status in order to reconcile disagreement between different sources.

How did we grade each environmental health issue?

We chose to look at environmental health indicators from a variety of sources. These sources included statistics from government agencies and advocacy groups. We then contrasted Northern Manhattan's performance on these indicators against all of NYC. We also researched government policies (and actions under consideration) that would affect specific indicators. We assigned a letter grade to each identified environmental concern based on environmental statistics, related health impact and current policies. When the data showed a high impact on a community (disparity), we identify policies and practices that would reduce the impact. Please visit www.weact.org for an expanded discussion of risks and strategies for avoiding them.

Environmental health

explains how human well-being is connected to the environment. WE ACT defines "environment" as where we live, work, play and pray.

Environmental health indicator is a measure of a current environmental conditions and its impact on human health; this could include information relating to social, economic, and racial makeup of a community.

Indoor Air Quality

We spend more than 90% of our time indoors (e.g., our homes, workplaces, schools, churches, etc.). Although we would all like to think that our homes and schools are safe, indoor hazards could affect the health of our lungs and reproductive systems, and even cause cancer.

Housing Conditions – Northern Manhattan’s old, dilapidated housing stock promotes mold, contains lead-based paint, and holds a host of other hazards including asbestos. These and other potential, yet undiscovered, hazards make our aging housing an important environmental health indicator.

Mold – Mold can increase the number of asthma attacks you get, allergies, headaches, and could disrupt brain function. Northern Manhattan has one of the highest rates of mold complaints in the City – and the problem is growing.

Environmental Tobacco Smoke (ETS) – We used smoking status as an indicator for exposure to ETS. Smoking poses a special danger in our community because while we have fewer resources to stop once we start smoking, we are also targets of tobacco company advertising. The many chemicals in ETS can cause a variety of negative health effects like allergies, skin irritation, difficulty breathing and development of a child.

| GRADE (Public data) | COMMUNITY GRADE |
|---|----------------------|
| C | C |
| EH Indicator | |
| Smoking Status Percentage of smokers ¹⁻⁴ | 17—27 % of adults |
| Housing Stock Built before 1950 ¹⁻⁴ | 48 % of housing |
| Number of Mold Complaints ⁸ | 21,121 |



Take Action for Clean Indoor Air Quality

Read labels of household products & personal care products

- Avoid products that contain chemicals like phthalates & Bisphenol A (BPA). Visit www.weact.org for more information about least toxic alternatives

Call for OUR elected officials to support strong policies to protect residents from indoor hazards

- Better enforcement of health & housing codes
- Focus enforcement on protecting vulnerable communities
- Prohibit use of toxins in toys & children’s products

For more information on Indoor Air Quality visit www.weact.org/healthyindoorenvironments

Lead Poisoning

Despite progress in reducing the number of new lead poisoning cases, lead exposure remains an environmental health hazard in low-income neighborhoods and immigrant communities. In fact, 33% of the newly identified lead poisoning cases involve children who live below the poverty line – most of whom are children of color. Sources of lead poisoning include water from old pipes, peeling and chipping paint in housing built before 1978, children’s toys, turf fields, some brightly colored paint and food products, exposures in the work place, jewelry, personal care products, and soil.¹¹⁻¹²

| GRADE (Public data) | COMMUNITY GRADE |
|--|---------------------------------------|
| C | C |
| EH Indicator | |
| Rate of newly identified lead poisoned children¹⁻⁴ | 9–11 per 1,000 children tested |

Take Action to Eliminate Lead Poisoning

Ask the US Centers for Disease Control and Prevention to:

- Increase blood lead level (BLL) testing in children and start an intervention on BLL at 5µg/dL
- Improve enforcement of lead poisoning prevention rules

Be Lead S.A.F.E.

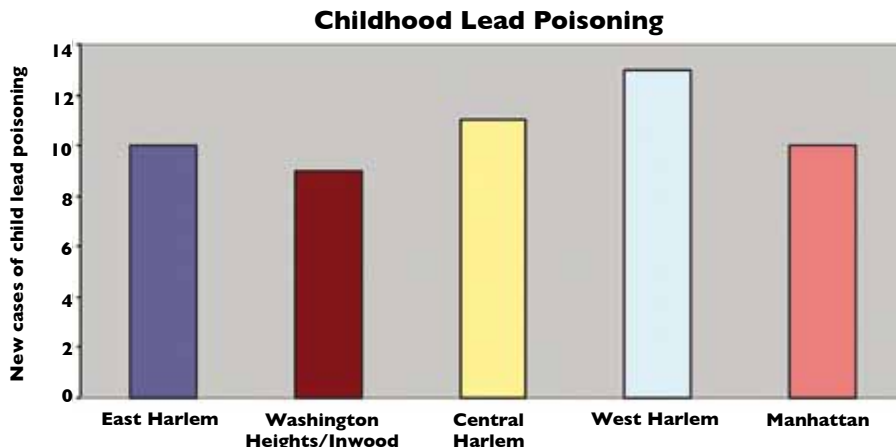
- If you have a child under the age of 6 get him tested and keep a record of their testing

Contact OUR local & federal authorities to:

- Increase lead remediation funding
- Couple remediation with education
- Focus enforcement in vulnerable communities



Table 1



Source: NYC DOHMH

For more information on Lead Poisoning visit www.weact.org/healthyindoorenvironments

Pests & Pesticides

NYC accounts for 13% (by weight) of the pesticides used in New York State, even though it comprises less than 1% of the state's land area. Northern Manhattan's high density, dilapidated housing stock and aging infrastructure result in some of the highest rates of households with rat, mouse and cockroach sitings as well as infestations of insect pests and bedbugs. As a result we have some of the highest percentages of households using pest sprays/foggers, in the City. Outdoor, we also have more rodent "hotspots" than most neighborhoods in the City.

| GRADE (Public data) | COMMUNITY GRADE |
|---|------------------------------|
| C | C |
| EH Indicator | |
| Percent of households using pest sprays/bombs | 36—55% adults report usage |
| Percentage of rat sitings ⁹⁻¹⁰ | 46—64% adults report sitings |
| Percentage of cockroach sitings ⁹⁻¹⁰ | 26—57% adults report sitings |

Take Action Against Pests & Pesticides

Encourage the NYC Department of Health & Mental Hygiene to strengthen the Public Health Tracking Program to focus on public health outcomes

Use Integrated Pest Management (IPM)

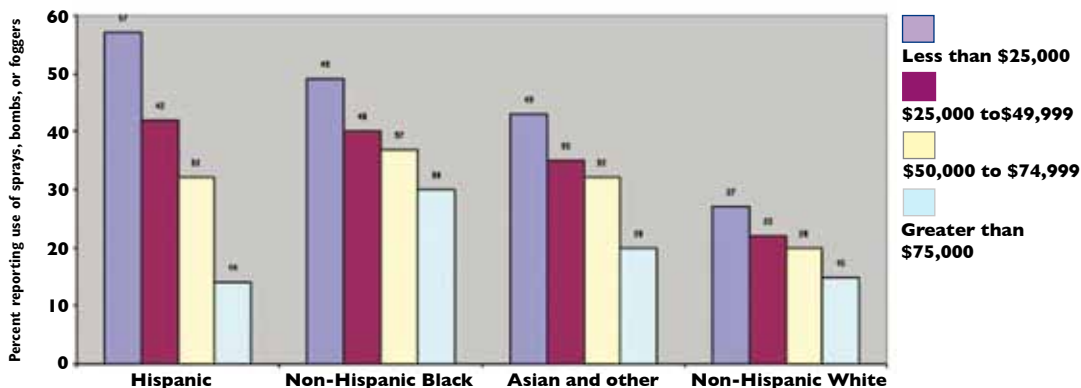
- Train & certify building managers in IPM
- Incentivize IPM in private housing

Contact YOUR building manager or super about using IPM in your building

Demand that NYC elected officials make use of least toxic alternatives in all city-owned and operated buildings

- Call your elected official and demand that they implement these rules
- Improve rules for waste management

Table 2 Percent of households in NYC that use sprays, bombs or foggers, by race/ethnicity and household income



Source: NYC DOHMH

For more information on Pests & Pesticides visit www.weact.org/healthyindoorenvironments

Solid Waste

Although the Department of Sanitation's data suggest that garbage and litter are managed effectively and efficiently. Residents tell a much different story, relaying stories of overflowing residential and municipal garbage containers, neighborhood-wide infestations of rats and roaches, litter strewn across busy commercial streets, and trees ornamented with bags and other street litter. Indeed, the NYC Department of Health and Mental Hygiene reports that uptown neighborhoods host the highest number of lots failing inspections for rat and refuse management. More than half of the Northern Manhattan residents WE ACT surveyed identified poor waste management and litter problems as top environmental health issues of concern.

Take Action to Clean Our Streets

Contact OUR local elected officials and demand:

- Adoption of a comprehensive strategy to reduce solid waste
- Inclusion of recycling and composting into policies for solid waste management
- Focus enforcement in vulnerable communities

Support initiatives to improve solid waste management in OUR neighborhood



Carlos Jusino

Demand improvement in data collection to identify garbage and pests hotspots within your neighborhood

Work within your neighborhood on a local neighborhood beautification plan

Encourage your neighbors to place litter in correct waste bins

Contact a local business in OUR neighborhood and form a partnership to keep your streets clean

| GRADE (Public data) | COMMUNITY GRADE |
|---|--|
| B | C |
| EH Indicator | |
| Tonnage of solid waste collected per day ¹⁻⁴ | 131.6 tons average for 4 community |
| Proportion of solid waste diverted from disposal ¹⁻⁴ | 10.9 % average for 4 community board areas |
| Tonnage recycle per day ¹⁻⁴ | 21.1 tons average for 4 community |
| Acceptably clean sidewalks ¹⁻⁴ | 95—100% |
| Acceptably clean streets ¹⁻⁴ | 92—96% |

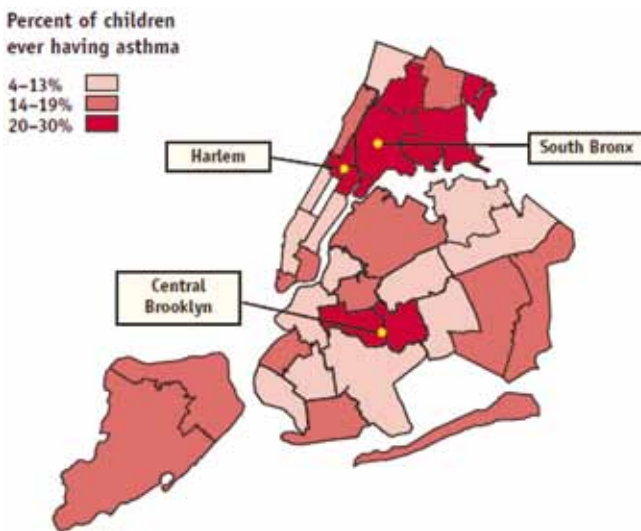
For more information on Solid Waste visit www.weact.org/Solidwastepestandpesticides

Outdoor Air Quality

| GRADE (Public data) | COMMUNITY GRADE |
|--|--------------------|
| C | C |
| EH Indicator | |
| Ozone Days above standard Ozone ¹³ | 15 (days) |
| Air Quality Advisory Days Sensitive Groups ¹³ | 28 (days) |
| Percent days above standard for PM 2.5 ¹⁴ | 3 (days) |
| Asthma Hospitalizations (child) ¹⁻⁴ | 35.4-142.8 (years) |

Air pollution in Northern Manhattan comes from dirty boilers and power generation plants, roadway traffic, and municipal facilities such as bus depots and sewage treatment plants. With approximately 5,950 trips eastbound on the George Washington Bridge, heavy diesel truck traffic moving from the east to the west side of Manhattan through Northern Manhattan streets, a diesel Amtrak, and crisscrossing expressways, mobile sources of pollution pose a significant hazard for residents of Northern Manhattan. Because state and federal monitoring only capture air quality on a regional scale, community-level air quality is difficult to determine. Air quality can be linked to health issues such as respiratory and cardiovascular diseases, cancer, and even delayed brain development. As a result of poor air quality and other environmental conditions, Harlem has a childhood asthma hospitalization rate six times the national and three times the Citywide average.

Figure 2 Childhood Asthma



Source: NYC DOHMH

Take Action for Clean Air

Call for OUR elected officials to support policies that promote protection of the public health by limiting sources of air pollution

- Demand the ban of No. 6 heating oil in your building
- Strictly enforce anti-idling rules, especially in vulnerable neighborhoods
- Prohibit co-location of sensitive uses such as housing, health care facilities, childcare facilities with roads and municipal facilities.
- Demand an increase in funding for public and alternative transportation
- Discourage driving and fossil fuel-based vehicles
- Organize an air quality task force to monitor idling in your neighborhood.

For more information on Outdoor Air Quality visit www.weact.org/CleanAirQuality

Access to Healthy

Access to low-fat, minimally processed food options and fresh fruits and vegetables results in better health. This is especially true for health risk factors such as being overweight and obesity. Across NYC, women and girls of color are roughly 1.5 times more likely to be obese. African Americans are nearly three times and Latinos are twice as likely to die from diabetes than their white counterparts. Despite the well-documented benefits of a healthy food environment, Northern Manhattan has poor supermarket service and few opportunities to purchase fresh fruits and vegetables, in addition there are an overabundance of stores offering fast food and highly processed foods such as chips, canned foods, and sugary snacks. Our food environment is so dire that the City has designated Northern Manhattan a “high need” area.

Take Action for Access to Healthy Food

Call for OUR local elected officials to support policies that promote access to healthy food in our communities by:

- Reduce availability of fast food and “junk” food
- Increase access to affordable healthful food including fresh fruits and vegetables

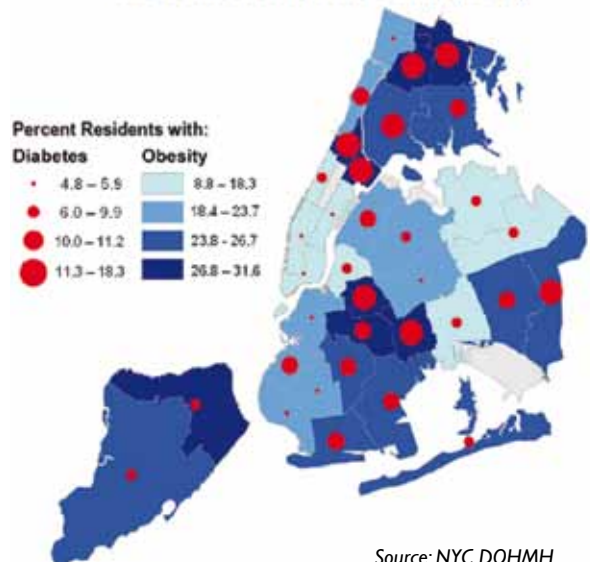
Participate in WE ACT’s Food Justice Training and advocate for better food in schools with policies that:

- Reduce fried and canned while increasing fresh fruit & vegetable options in school meals
- Equip schools with kitchens that are equipped with appropriate facilities for preparing healthy meals
- Improve funding for physical education

| GRADE (Public data) | COMMUNITY GRADE |
|---|-------------------------------------|
| C | C |
| EH Indicator | |
| Supermarkets ¹⁵ | Less than city average ratio |
| Ratio of supermarkets to bodegas ¹⁶ | Higher percentage than city average |
| Diabetes ¹⁻⁴ | 11—13% |
| Obesity ¹⁻⁴ | 21—31% |
| Children qualifying for free or reduced lunch ¹⁷ | 78% |

Figure 3

Prevalence of Diabetes and Obesity reported in neighborhoods defined by the United Hospital Fund (UHF)



Source: NYC DOHMH

For more information on Food Justice visit www.weact.org/AccessToGoodFoodInSchools

Water Quality

Drinking Water Quality

Like the rest of NYC, Northern Manhattan’s drinking water comes from the Catskill and Delaware System Reservoirs located in Upstate New York. Along the way, this water is treated to ensure quality and safety before delivery to homes. The City’s water does not violate New York State’s guideline for factors that could be harmful to human health and in fact has been ranked as some of the safest (and best tasting) drinking water in the entire U.S. However, contamination concerns remain for lead, byproducts of chlorine (used disinfectants), and biological contaminants (such as bacteria). With Northern Manhattan’s older housing stock (and thus older lead delivery pipes), residents should take steps to reduce the risk of potential lead contamination.⁵⁻⁷

| | |
|---|---|
| GRADE (Public data) | COMMUNITY GRADE |
| A | C |
| EH Indicator | |
| Contaminants in Drinking Water | Well below lev- els harmful to public health⁵ |

Take Action for Water Quality

Demand that OUR local agencies protect OUR watershed

Support OUR elected officials in creating policies to protect public health

- Disallow resource extraction, agriculture and development in the source watershed

Demand that OUR local agencies update our water delivery infrastructure

| | |
|------------------------------------|--|
| GRADE (Public data) | COMMUNITY GRADE |
| C | C |
| EH Indicator | |
| Biological Contaminants | Some levels below levels harmful to public health⁶ |

Recreational Water Quality

Contaminant levels continue to pose a risk to swimming in all NYC waterways, although the number of days with high biological contaminants is few. Even so, activities including canoeing, kayaking and other water sports are still allowed and even encouraged. Users should be aware that “Recreational waters” does not include water safe for fish consumption. City and state agencies (DEP and DEC) continue to advise against pregnant women’s and children’s consumption of fish caught in Northern Manhattan waters.

Take Action for Recreational Water Quality

Demand that OUR local agencies increase monitoring especially in vulnerable areas

- Concentrate on areas near sewage treatment plants and combined sewage overflows (CSO)
- Engage in effective communication when harmful contamination occurs

Know YOUR RIGHTS!

- Educate yourself about legacy toxins in New York’s Waterways

For more information on Water Quality in New York City visit www.nyc.gov/dep or www.weact.org/OpenandGreenSpace

Open Space

The built environment strongly affects a community's health; that is, the ways communities are constructed – from design of buildings to design of streets, from availability and placement of transportation infrastructure to that of parks and open spaces, from zoning of land uses that promote activity to that which promote healthy foods – can impact health status of its residents.

What is the Built Environment?

The communities where we live, work, play and pray are comprised of buildings, streets, parks and other structures made by man that impact our health.

Northern Manhattan's built environment needs to improve. When a healthy community is designed to promote physical activity and connectivity between parks, grocery stores, and schools along with accessible, and affordable public transportation. Safe streets encourage physical activity,

which can decrease stress and other health threats like heart disease, obesity, and diabetes.

Access to parks can determine the amount of physical activity a person undertakes, though City records show the open space for Northern Manhattan in some neighborhoods is high, the numbers can be misleading – park access presents a challenge. For example, Randall's Island's abundance of green space and playfields is attributed to East Harlem's park access. However, this area is mostly inaccessible to local residents.



Charles Santos

For more information on Open Space visit www.weact.org/OpenandGreenSpace

| GRADE (Public data) | COMMUNITY GRADE |
|---|--|
| C | C |
| EH Indicator | |
| Proportion of open spaces per community district ¹⁻⁴ | CB 9—20.4% CB 10—5.5% CB 11—45.8% CB 12—50.1% |

Take Action for Healthy Transportation Alternatives and the Built Environment

Call for local officials to promote the creation of land use development that promotes health and protects vulnerable communities:

- Increase availability of and access to open space in our community
- Equip and maintain parks and play yards in order to ensure adequate opportunity for physical activity

Organize a neighborhood task force to demand local agencies to:

- Use health data to meet open space needs of the community that the space serves
- Create meaningful and transparent processes to promote safer streets that promote health

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- 17.** Numbers were calculated by WE ACT Staff from the Inside Schools 2007 – 2008 and New York City Department of Education 2008 CEP School Demographic Snapshot

WE ACT for Environmental Justice

Our Mission

WE ACT for Environmental Justice is a Northern Manhattan community-based organization whose mission is to build healthy communities by assuring that people of color and/or low-income participate meaningfully in the creation of sound and fair environmental health and protection policies and practices.



WE ACT's Healthy Community Indicators

Public Mobility

Solid Waste, Pests and Pesticide Management

Clean Air Quality

Open & Green Space

Healthy Indoor Environments

Reduced Access and Use of Toxic Products

Sustainable & Equitable Development

Carlos Jusino



Our History

WE ACT for Environmental Justice began over 20 years ago when Peggy Shepard, Vernice Miller-Travis and the now deceased Chuck Sutton organized with local West Harlem community members to address environmental issues. In 1988 West Harlem received more than its fair share of environmental burdens including a marine transfer station, a majority of the diesel bus depots located in Northern Manhattan and a sewage treatment plant that was out of compliance with multiple federal regulations. In response to concerns, a group of stakeholders in West Harlem filed a lawsuit against the Department of Environmental Protection. This lawsuit resulted in the formation of a community benefit fund, the development of mitigation infrastructure to address hazards identified as sources of pollution from the North River Sewage Treatment Plant, and the formation of WE ACT for Environmental Justice formerly known as West Harlem Environmental Action Inc.

Join WE ACT to build healthy communities!

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The Northern Manhattan CARE Collaborative

The Community Action for A Renewed Environment (CARE) Program is funded through the United States Environmental Protection Agency (EPA). Through CARE funding WE ACT for Environmental Justice conducted a community-based environmental health assessment in Northern Manhattan. This assessment was implemented through the efforts of the Northern Manhattan CARE Collaborative which consisted of over 45 stakeholders that included local businesses, government agencies, community-based organizations, community residents and advocates. These

stakeholders represented the 4 community areas within Northern Manhattan. The 4 communities are East Harlem, Central Harlem, West Harlem, and Washington Heights/Inwood. Environmental health hazards were ranked using a high (H), medium (M) and low (L) ranking scale by participants at community meetings. The issues were prioritized using criteria during a community meeting. The prioritized issues were **Solid Waste; Pest and Pesticides;** and **Indoor/Outdoor Air Quality.**



Please Note:

Below is some additional information that should be used to better understand data within the Northern Manhattan Environmental Health Report Card.

Page 7: Lead Poisoning is diagnosed by a medical professional. Many of the sources listed on this page are linked to lead exposure not directly to lead poisoning cases.

Page 8: When this document went to print, data available on Rats was limited to percentage of rat sitings and percentage of cockroach sitings per household. As of the publication date of this document, more data has become available, and we can see this information by community level as reported by the DOHMH's Division of Environmental Health (2010). The Rat indexing project shows the prevalence of rats in the 4 community areas in Northern Manhattan has a range of 14.94% - 19.90%.

Page 10: Air Quality can have a variety of metrics used to determine the connection between air quality within the community areas in Northern Manhattan. The asthma hospitalization rates listed should be read 35.4 – 142.8 per 10,000 children per year. Currently it reads 35.4 – 142.8 visits per year. While the map that we included is a useful proxy for the impact of air quality it can be argued that it may not be the best. We offer data from the NYC Community Air Survey Data.. To see maps that include street level PM, ozone, elemental carbon and other pollutant exposure maps please visit the following link:
<http://www.nyc.gov/html/doh/downloads/pdf/eode/comm-air-survey-report.pdf>