Niagara leads in death rates

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LOCKPORT — Niagara County's death rates from breast cancer, lung cancer, stroke and heart disease are the highest among comparable counties around the nation, according to a new federal report.

The figures for infant mortality in Niagara County were among the most alarming, at twice the national average.

The Health Resources and Services Administration, an arm of the Department of Health and Human Services, conducted the study. It looked at health statistics for 28 counties, comparing Niagara County to Broome and Oneidacounties in New York and counties with similar demographics in 14 other states.



would reduce the black infant mortality rate." Niagara County Legislator Renae Kimble

The counties in the study were chosen based on population size, the amount of poverty and the number of minorities, children and senior citizens.

Niagara County's 1997 death rate from coronary heart disease was higher than any of the counties surveyed and far above the national average. Deaths from lung cancer, breast cancer and stroke also topped the national average.

Niagara County created a task of force last fall to respond to the infant mortality crisis in the black community. A recommendation is expected in October, according to County Legislator Renae Kimble; D-Niagara Falls, co-chairwoman of the task force.

The new report, however, does offer a couple of possible factors for the high infant mortality rates. In Niagara County, 18.8 percent of pregnant women received no medical care in the first three months of their pregnancies, the study said, and 33.7 percent of births were by unmarried women.

Both figures are slightly above the national averages.

The rate of babies dying before their first birthday in Niagara County is 7.6 per 1,000 live births, compared to 7.2 per 1,000 nationally. Broken down into racial groups, however, the death rate for black infants in Niagara County is 25.1 per 1,000, compared to a national rate of 13.7. A rate of 5.7 white infants per 1,000 die before their first birthday in Niagara County, compared to a national average of 6 per 1,000.

The overall infant mortality problem in Niagara Falls rose by one-third in the 1990s, according to figures from the Infant Mortality Task Force, while the rates were falling in the rest of the nation.

Niagara Falls Mayor Irene J. Elia, a former head of the Health Association in Niagara County, said she can think of an answer to the infant mortality problem in the city.

"Obviously, the first thing that comes to mind is better prenatal care and prenatal nutrition," she said.

The federal report says 18.8 percent of Niagara County mothers do not get prenatal care in the first trimester of pregnancy, compared to the national average of 17 percent.

Also, Niagara County's figure of 33.7 percent of births to unmarried women is above the national figure of 32.4 percent.

But the state Health Department says that 53 percent of the babies who died in the county from 1995 to 1997 had received prenatal care during the first three months of gestation.

Kimble, an African-American who represents Niagara Falls' inner city, said the problem is about one thing: race.

"Race is the bottom line," she said.

Meanwhile, the death rate from heart disease in Niagara County



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was 285.3 per 100,000 population, sharply higher than the national average of 216.

Strokes killed 65.9 per 100,000 county residents, compared to 62 nationally; lung cancer caused the deaths of 64.6 per 100,000, compared to 58.1 nationally; and breast

cancer killed 31.8 per 100,000, compared to 28.6 nationally.

"We've had pockets of stroke concern in Lewiston and Youngstown; it's an aging population," said County Public Health Director David E. Wertman.

"Heart disease, cancer and stroke are all related to smoking," said Wertman's deputy, Shirley A. Sampson. "We have a high rate of smoking."

The most recent estimate for Western New York is that 29 percent of the population smokes.

Other major causes of death in Niagara County are at or below the national average. For example, Niagara's colon cancer death rate was 21.8 per 100,000 residents, compared to 21.6 nationwide.

Niagara County's death rates from non-disease causes, such as murder, suicide and accidents, were all well below the national average.

Homicides killed 1.9 per 100,000 county residents in 1997; the national rate was 7.2 per 100,000. The suicide rate here was 8.5 per 100,000, despite the presence of Niagara Falls, a traditional magnet for people committing suicide. The national suicide rate is 11.4 deaths per 100,000 citizens.

Niagara's death rate from motorvehicle accidents was 1.4 per 100,000, much lower than the national figure of 15.8. Other types of accidents killed 14 out of every 100,000 Niagara County residents, as opposed to the national rate of 33.3.

The statistics were compiled by an examination of death certificates filed with the state Health Department.

Kimble said her task force's report will try to demonstrate that black women lose their babies more than whites even when they have stable families, education, insurance and money.

"We can be multimillionaires but we'll still lose babies," she said, blaming the situation on the stress of being black in America. Kimble said black women tend to be poorer, have less access to health care and often struggle with the care they do find.

"(Health care agencies) need to be more culturally sensitive to the minority population," she said. "They have to address cultural sensitivity in training and staffing."

Insurance makes a difference, too. State figures showed that Niagara County's infant mortality rate was only 4.4 per 1,000 babies for mothers who belonged to health maintenance organizations.

Women with traditional health, insurance had an infant death rate of 5.6 per 100,000. For Medicaid clients, the infant mortality rate was 9.9, and for women without insurance, the infant loss rate zoomed to 27.4 per 1,000 babies.

The death rate for babies of Niagara County teenage mothers is only slightly higher than for women ages 20 and up.