# Depression in New York City

# A Cross-Sectional Analysis of the 2018 Community Health Survey

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## Background

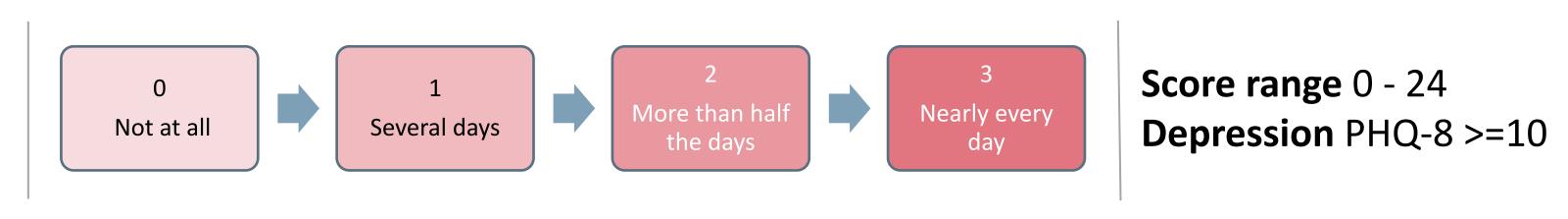
- Depression is the second most common mental illness among U.S. adults.
- Major depressive disorder is the largest source of disability in New York City (NYC).<sup>1</sup>
- Understanding the populations impacted by depression and identifying characteristics associated with depression is a critical component of mental health surveillance.

## Methods

- Health outcomes and predictors were measured using data from the 2018 Community Health Survey (CHS) (n=10,076), an annual survey of NYC adults administered by the NYC Department of Health and Mental Hygiene
- Depression was measured using the PHQ-8, an eight-question validated screening tool for depression contained within the CHS:

Over the last 2 weeks, how often have you been bothered by:

- Little interest or pleasure in doing things?
- Feeling down, depressed or hopeless?
- Trouble falling or staying asleep, or sleeping too much? Feeling tired or having little energy?
- Poor appetite or overeating?
- Feeling bad about yourself-or that you are a failure...?
- Trouble concentrating on things...?
- Moving or speaking so slowly...or the opposite...?

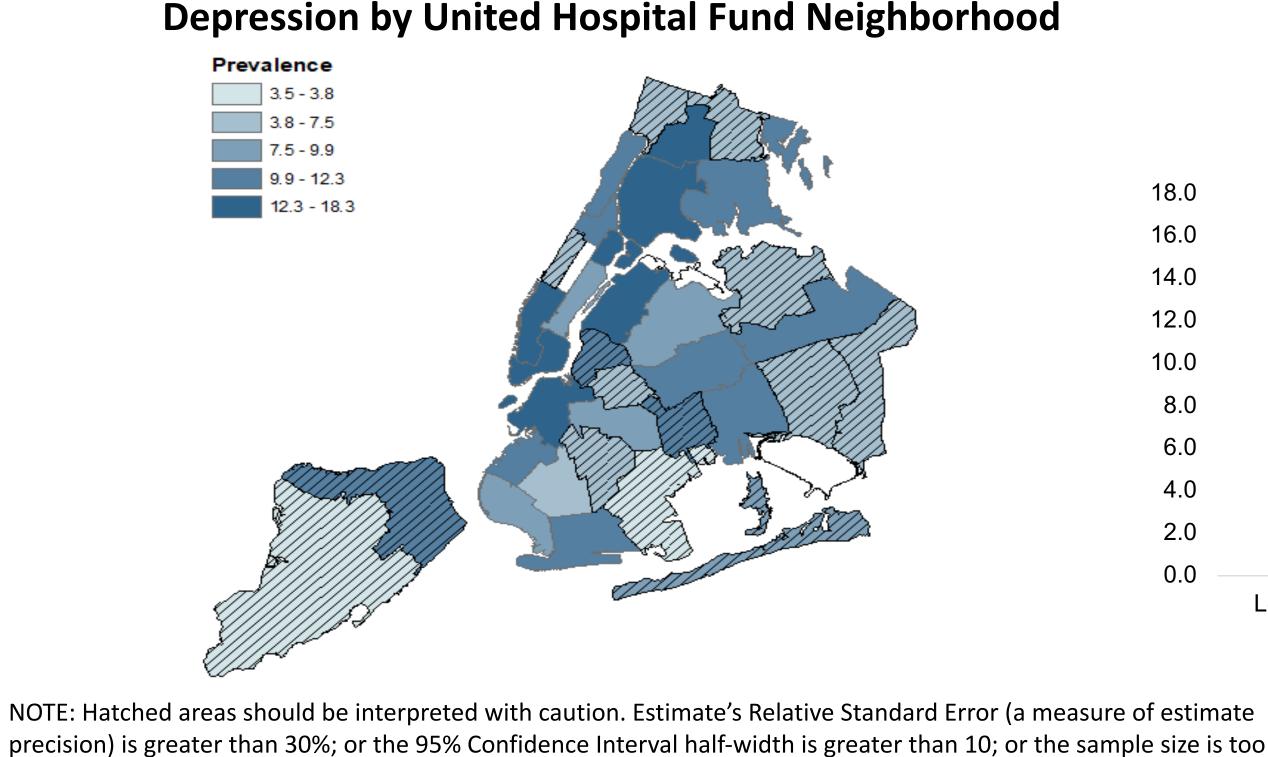


• Results were age-adjusted to the US 2000 Standard Population and weighted to the adult residential population per the American Community Survey, 2017. Data analyses were conducted in SAS and SUDAAN. Statistical significance was assessed using t-tests.

2018 prevalence of depression in NYC was highest among those with the lowest education levels and those with the poorest sleep quantity and quality.

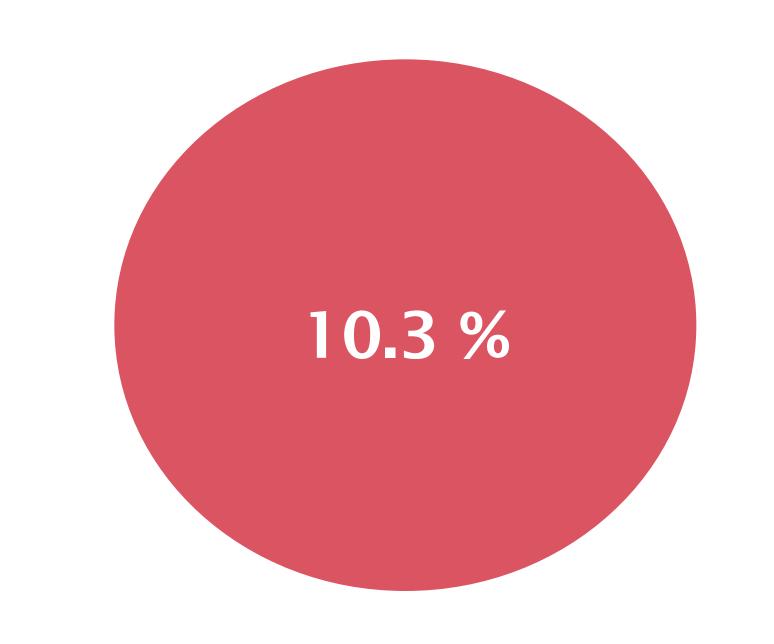
#### Results

- Overall prevalence of depression in NYC based on 2018 CHS data was **10.3%** (95% CI: 9.4% - 11.2%).
- Prevalence of depression was highest among those with the lowest education levels and those with the poorest sleep quality and quantity.
- Prevalence of depression was high in the South Bronx, Chelsea/Village(s), and Long Island City/Astoria.

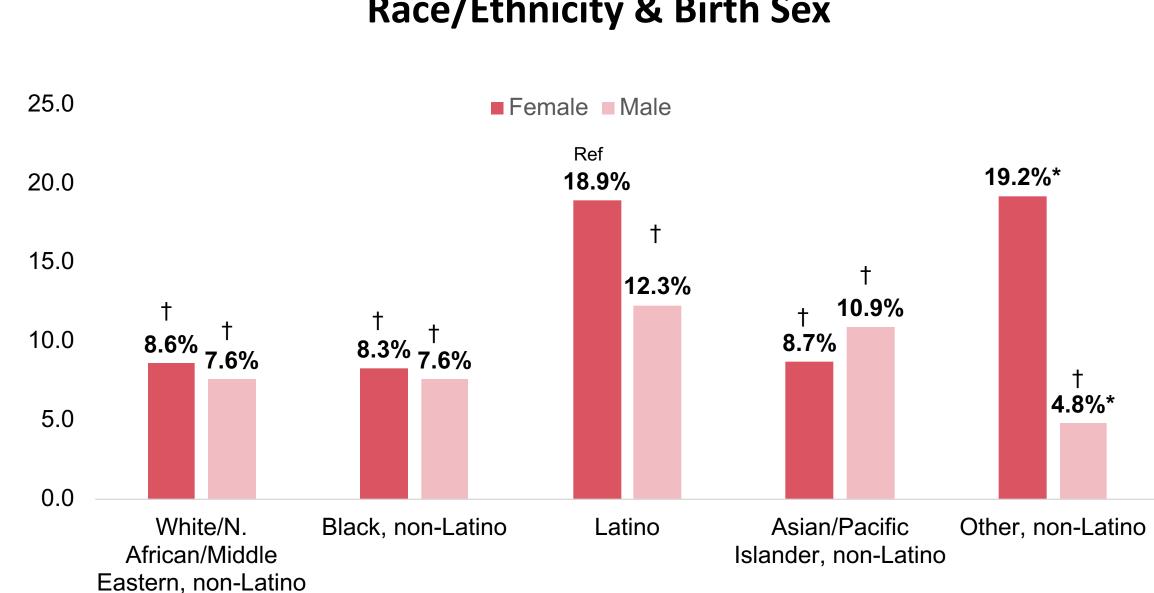


small, making the estimate potentially unreliable. The United Hospital Fund classified NYC into 34 neighborhoods,

## **2018 Prevalence of Depression in NYC**

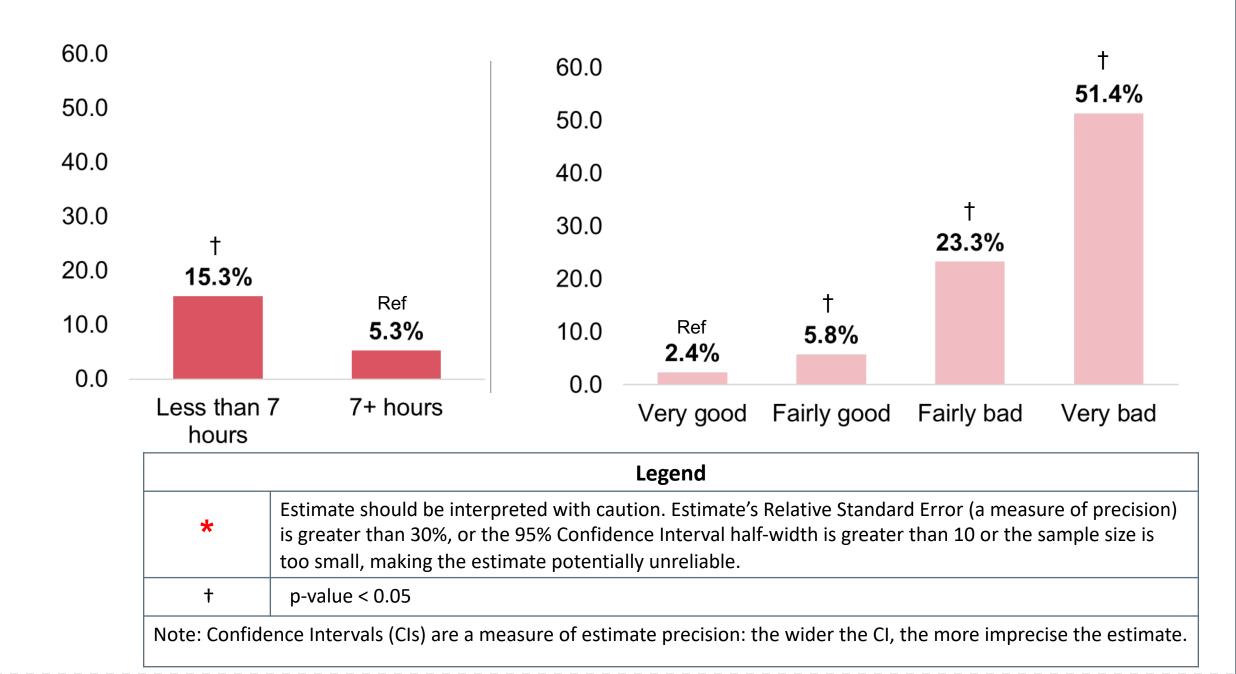


#### Race/Ethnicity & Birth Sex



#### **Education** 18.0 15.5% 16.0 14.0 11.6% 12.0 10.9% 10.0 8.0 2.0 0.0 Less than high High school graduate College graduate Some college school

**Sleep Quantity & Quality** 



## Conclusions

- Prevalence of depression is disproportionately distributed across demographic and socioeconomic factors.
- Future research should be designed to investigate causal relationships between socioeconomic status, health behaviors, and depression. Demographic groups (i.e. "Hispanic" or "Other") should be disaggregated.
- Limitations:
  - Cross-sectional design limits ability to make causal claims
  - Bias due to self-reporting
  - Estimates for certain subpopulations and neighborhoods must be interpreted with caution due to small sample size within the CHS

#### **Student Contribution**

- Conducted data analysis in SAS and SUDAAN using the CHS 2018 data set
- Created tables and graphs depicting analysis in Microsoft Excel
- Created GIS map depicting depression prevalence across the five boroughs
- Presented key findings within unit and to broader DOHMH audience

#### References

Muenning, P., Goldsmith, J.A., El-Sayed A.M., Goldmann, E.S., Quan, R., Barracks S., Cheung J., Behavioral Health in New York City: The Burden, Cost, and Return on Investment. Unpublished Raw Data, 2015.



