

Eighth Annual Report on Homeless Deaths
New York City Department of Health and Mental Hygiene
Bureau of Vital Statistics
Local Law 63
July 1, 2012 – June 30, 2013

Summary. For the eighth annual reporting period of July 1, 2012 through June 30, 2013, the NYC Department of Homeless Services (DHS), NYC Department of Housing Preservation and Development (HPD), and the Office of Chief Medical Examiner (OCME) reported a total of 208 homeless deaths. The highest number of deaths (n=63) occurred during the third quarter (January 1- March 30, 2013) of this reporting year (FY 2013). The NYC Human Resources Administration (HRA) reported 26 homeless deaths. Due to confidentiality reasons, HRA data could not be assessed for potential duplication with deaths reported by the other agencies, or matched to death certificates. As a result, findings from the 2 groups of deaths are reported separately.

Among homeless deaths reported by DHS, HPD, and OCME, during the current reporting period, most deaths (82%; n=170) were investigated by OCME, comparable to past annual reports. The majority of decedents were male (79%; n=165). More than half (57%; n=119) of homeless decedents were between the ages of 45 and 64. Fifty-two percent (n=108) were non-sheltered. Overall, 52% (n=109) of homeless decedents died in hospitals (59% of sheltered decedents and 46% of unsheltered decedents). Fifteen percent (n=32) of decedents died in a homeless shelter (32% of sheltered decedents). Fourteen percent (n=30) of decedents died outdoors (1% of sheltered decedents and 27% of non-sheltered decedents). Eighteen percent (n=37) of deaths occurred in other places (8% of sheltered decedents and 27% of non-sheltered decedents). Refer to Table 1 for definitions of outdoor and other place deaths.

The leading cause of homeless deaths was heart disease (25%; n=53) followed by drug overdose (20%; n=41), similar to the past four annual reports. The third leading cause of death was accidents (16%; n= 34), followed by deaths of undetermined intent (5%, n=11). Alcohol abuse and cancer tied for the next ranking, each contributing 4% of deaths (n=9 each).

Among the 26 HRA reported homeless decedents, most were male (77%; n=20) and most were between the ages of 45 and 64 (81%). All 26 homeless decedents were sheltered within an HRA emergency residence. Most decedents died in shelters (58%; n=15) and hospitals (42%; n=11). Information on OCME investigations of HRA homeless deaths and community board district of death is not available. Cause of death information cannot be extracted from the death certificate or analyzed as HRA does not provide identifying information for cases, due to laws protecting data confidentiality.

Introduction. This report has been prepared and submitted pursuant to Local Law 63 (LL63), amending the Administrative Code of the City of New York to track and report deaths of homeless persons in the City of New York. The original Local Law 63 of 2005 was extended on January 30, 2012. This report contains data provided by the NYC Office of Chief Medical Examiner (OCME), the NYC Department of Homeless Services (DHS), the NYC Department of Housing Preservation and Development (HPD), and the NYC Human Resources Administration (HRA) to the Department of Health and Mental Hygiene (DOHMH) throughout the annual period of July 1, 2012 – June 30, 2013.

DHS, HPD, and HRA maintain records on the homeless individuals for whom they provide temporary housing in New York City. OCME, responsible for investigating NYC deaths that are suspicious, unusual, violent, or criminal in nature, investigates most homeless deaths. Data presented herein were compiled from the agencies and matched against NYC death certificates and analyzed by the DOHMH Office of Vital Statistics.

Definitions. LL63 defines, a “homeless person” as “a person who at the time of death did not have a known street address of a residence at which he or she was known or reasonably believed to have resided.” A “homeless shelter resident” is “a person who at the time of death lived in a homeless shelter.” A “homeless shelter” is “(i) a residence operated by or on behalf of the Department of Homeless Services; (ii) an emergency residence operated by or on behalf of the Department of Social Services/Human Resources Administration which is available primarily for homeless persons with HIV or AIDS related illness; or (iii) a residence operated by or on behalf of the Department of Housing Preservation and Development to the extent that such residence houses clients of the Department of Homeless Services; provided, however that such term shall not include any residence that is available primarily for battered women.”

Outdoor and other place location of death categories are given in Table 1.

Methods. Based on the definitions above, DHS, HPD, and OCME provided incident reports. These reports were validated and duplicates (i.e. when DHS cases are, also, OCME cases) were removed. HRA did not disclose any identifiable information on HRA homeless residents, per Article 27-F of the New York State Public Health Law, which prohibits disclosure of information that could reasonably identify someone as having an HIV-related illness or AIDS. As a result HRA homeless deaths cannot be distinguished from DHS, HPD and OCME deaths, and total NYC homeless deaths cannot be ascertained.

Case reports from DHS, HPD, OCME, and HRA were compiled. Because HRA cases remain anonymous, only DHS, HPD, and OCME case reports were matched against NYC DOHMH Vital Statistics death certificates. DOHMH followed up with agencies to obtain any missing data elements. Some cases may have been determined not to meet the LL63 homeless case definition. Such cases were removed from the annual report.

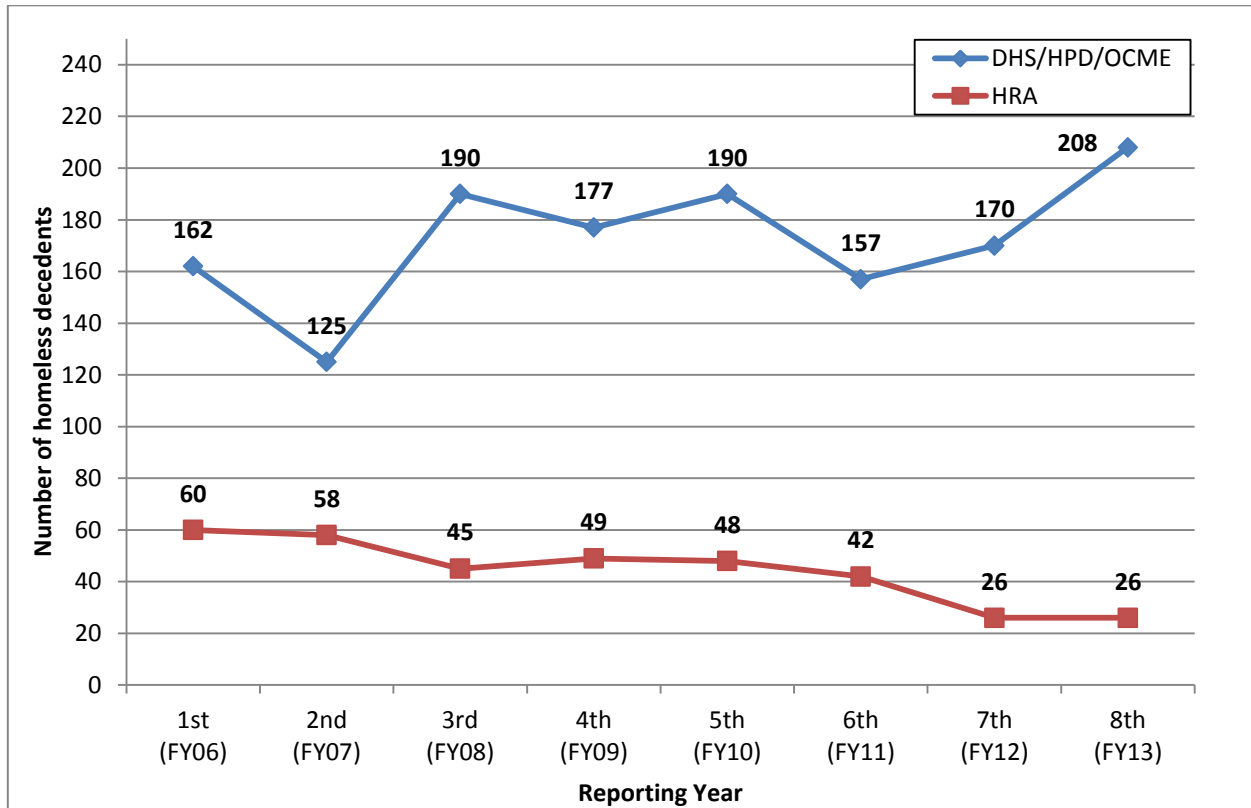
Percentages reported may total > 100% due to rounding.

DEATHS OF HOMELESS PERSONS

Reported Homeless Deaths

Collectively, DHS, HPD, and OCME reported 208 homeless deaths, between July 1, 2012 and June 30, 2013. HRA reported 26 homeless deaths (Table 2). Figure 1 displays deaths reported by year since the LL63 reporting period began (July 1, 2005 to June 30, 2013).

Figure 1. Deaths of Homeless Decedents by Reporting Agency and Reporting Year, July 1, 2005 - June 30, 2013



OVERALL FINDINGS FOR THE EIGHTH ANNUAL REPORTING PERIOD

The number of homeless decedents reported annually has ranged between 125 and 208, during 8 years of reporting (Figure 1). Of the 208 deaths reported by DHS, HPD, or OCME, 48% (100) of decedents were sheltered and 52% (108) were non-sheltered (Table 2). The highest monthly count of deaths was 30, occurring in January, 2013. The highest number of deaths during a quarter occurred from January 1 – March 30, 2013 (n=63) (Table 2).

Among sheltered decedents, 42% (n=42) were sheltered in Manhattan, 22% (n=22) in the Bronx, 27% (n=27) in Brooklyn, 8% (n=8) in Queens, and 1% (n=1) in Staten Island (Table 3).

OCME investigates the majority of homeless deaths: 81% (n=170) in the current report compared to 81-91% in previous reports (Figure 2). Among the 100 sheltered decedents, 75% (n=75) were investigated by OCME, and among the 108 non-sheltered decedents, 88% (n=95) were investigated by OCME (Figure 3, Table 2).

Figure 2. Percent of Homeless Decedents in NYC, Investigated by OCME, July 1, 2005 – June 30, 2013

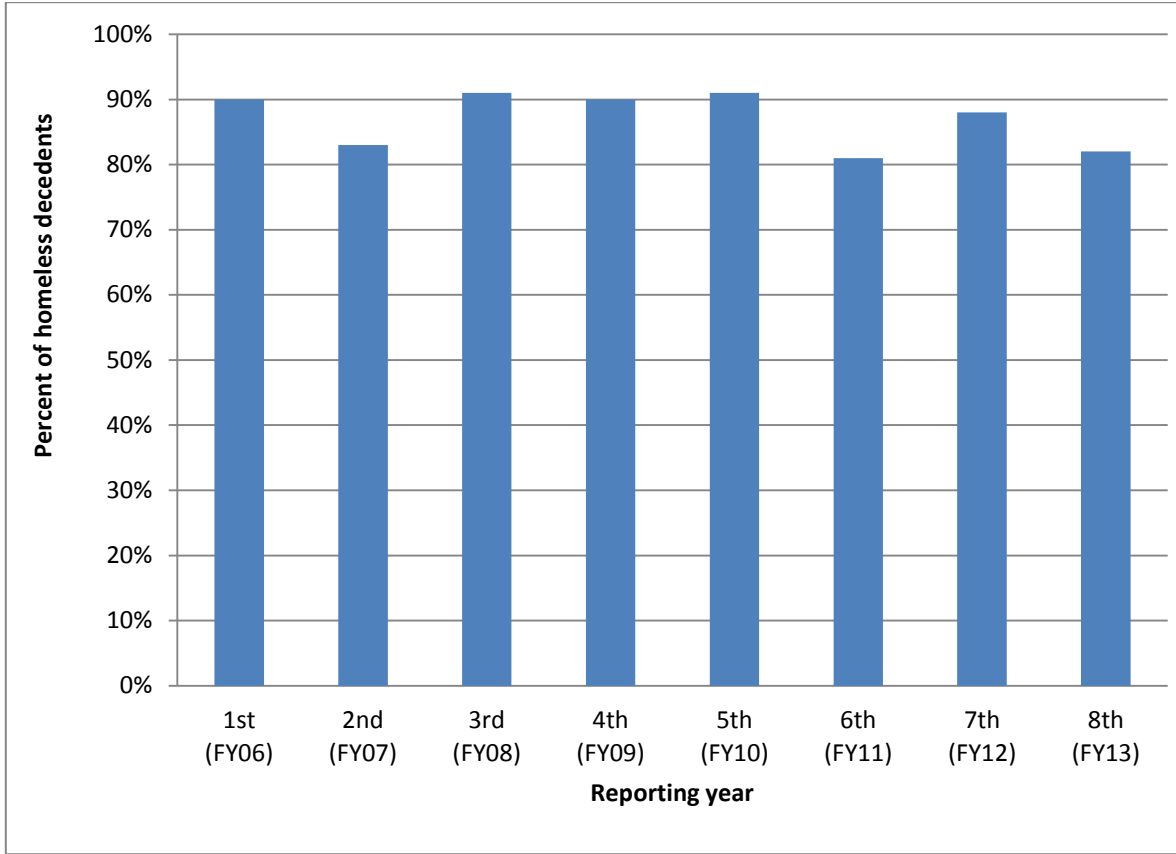
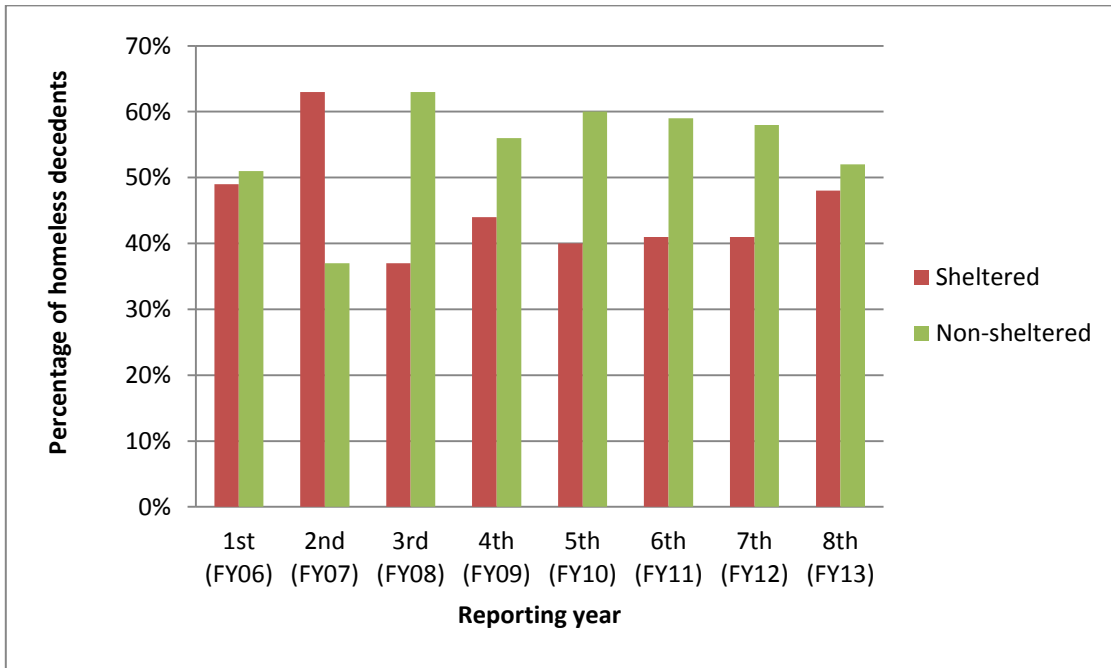


Figure 3. Percent of Homeless Decedents in NYC, by Shelter Residency Status, July 1, 2005 – June 30, 2013*



LOCATION OF DEATH

The locations (i.e., in a shelter, in a hospital, outdoors, or other place) of DHS, HPD, and OCME reported deaths, stratified by borough, community district, and shelter residency status are shown in Table 4a. Categories of outdoor and other place deaths are provided in Table 1. HRA-reported homeless deaths, stratified by location of death, are presented, separately, in Table 4b, by borough, only, as community district is not available for these deaths.

Location of Death among Sheltered Individuals

More than half (59%; n=59) of sheltered decedents died in hospitals (Figure 4, Table 4a). Thirty-two (32%) died in a shelter, 8 (8%) of decedents died in other places, and 1 (1%) died outdoors. The sheltered decedents, who died in other places, were found in the apartment of friends or family, on subway tracks or in a subway station, or in a public space in a building .

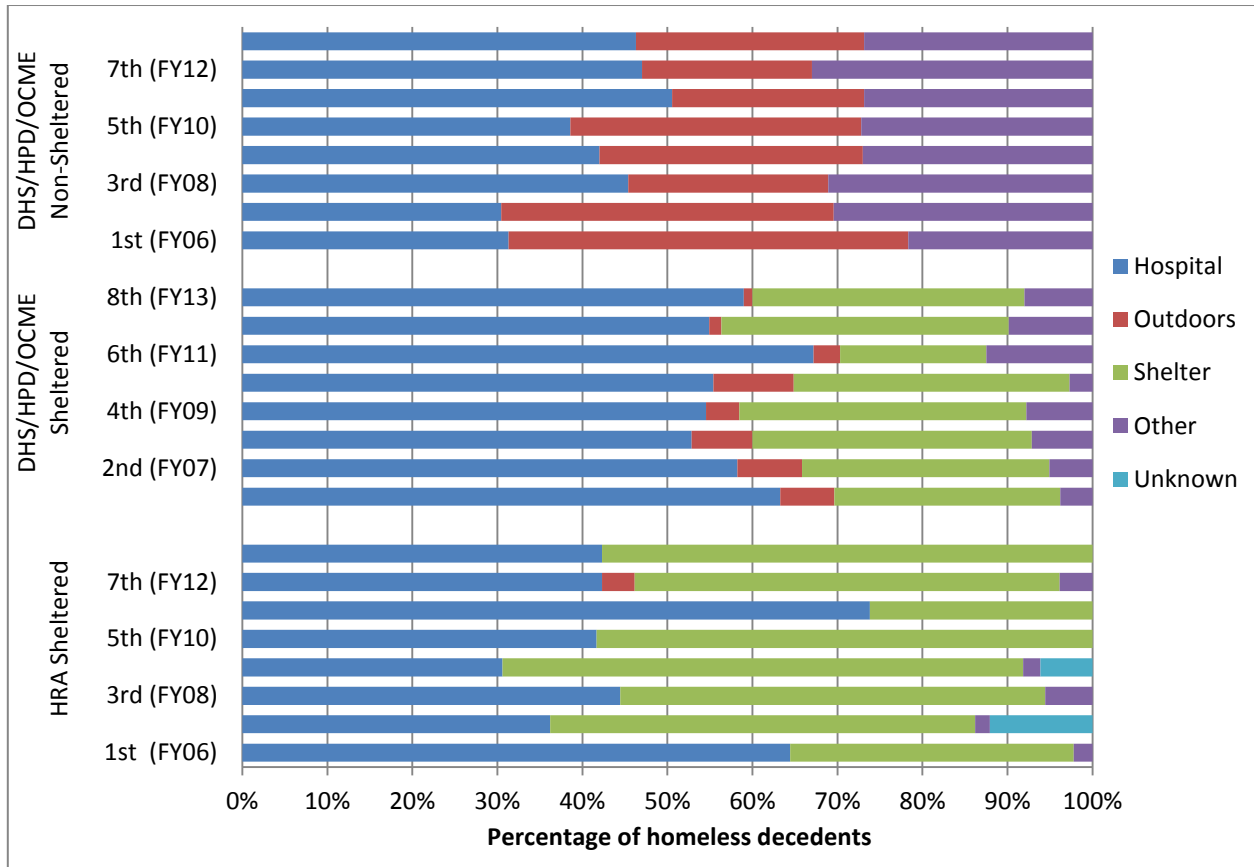
Location of Death among Non-Sheltered Individuals

Similar to sheltered decedents, many (46%; n=50) non-sheltered decedents died in hospitals (Figure 4, Table 4a). The proportion of non-sheltered decedents dying in hospitals has increased over the past seven surveillance years, up from 31% in the first annual report. Non-sheltered individuals also died in other places (27%; n=29), and outdoors (27%, n=29). The proportion of outdoor deaths among non-sheltered individuals has ranged from 47% in the first reporting year to 21% in the last (FY12) reporting year.

Non-sheltered decedents, who died outdoors, were found on the sidewalk or street, on or near an expressway, outside of a building including on a rooftop or in a backyard, in a park area, in a vehicle, and at a construction site. Non-sheltered homeless decedents, who died in other places, were found at their place of employment, at a friend or family member's apartment, on subway tracks or in subway stations, in an abandoned building, in a motel/hotel room, in a drop-in center or rescue mission, and in a public spaces in a building.

The 26 HRA reported homeless decedents died in shelters (58%; n=15) and in hospitals (42%; n=11), (Table 4b). The majority of deaths among HRA decedents occurred in Manhattan (65%; n=17), followed by the Bronx (19%; n=5). Two deaths (8%) occurred each in Brooklyn and Queens. None died in Staten Island (Table 4b).

Figure 4. Location of Death by Shelter Status in NYC, July 1, 2005 – June 30, 2013



AGE AND GENDER

Throughout all 8 years of reporting, males, between the ages of 45 and 64 years, followed by males, between the ages of 25 and 44 years, have ranked as the first and second largest age-gender classes of homeless decedents. In the current report, males between the ages of 45 and 64 years make up almost half of homeless decedents (48%; n=100) followed by males, age 25 – 44 years (18%; n=37), males, 65 years of age and older (10%; n=22), females, ages 45 – 64 years (9%; n=19), and females, ages 25 – 44 years (6%; n=12) (Figure 5a, 5b, Table 5). Decedents between the ages of 1 and 24 years account for 4% (n=8) of deaths, and children, under the age of 1, account for 3% (n=7) of deaths. This is an increase in the number of deaths among infants compared with last reporting period (FY12) when the number of infant deaths reached one, the lowest number reported since reporting began. The number of infant deaths has ranged from 1-14.

Figure 5a. Age among Male Homeless Decedents in NYC, July 5, 2005 - June 30, 2013

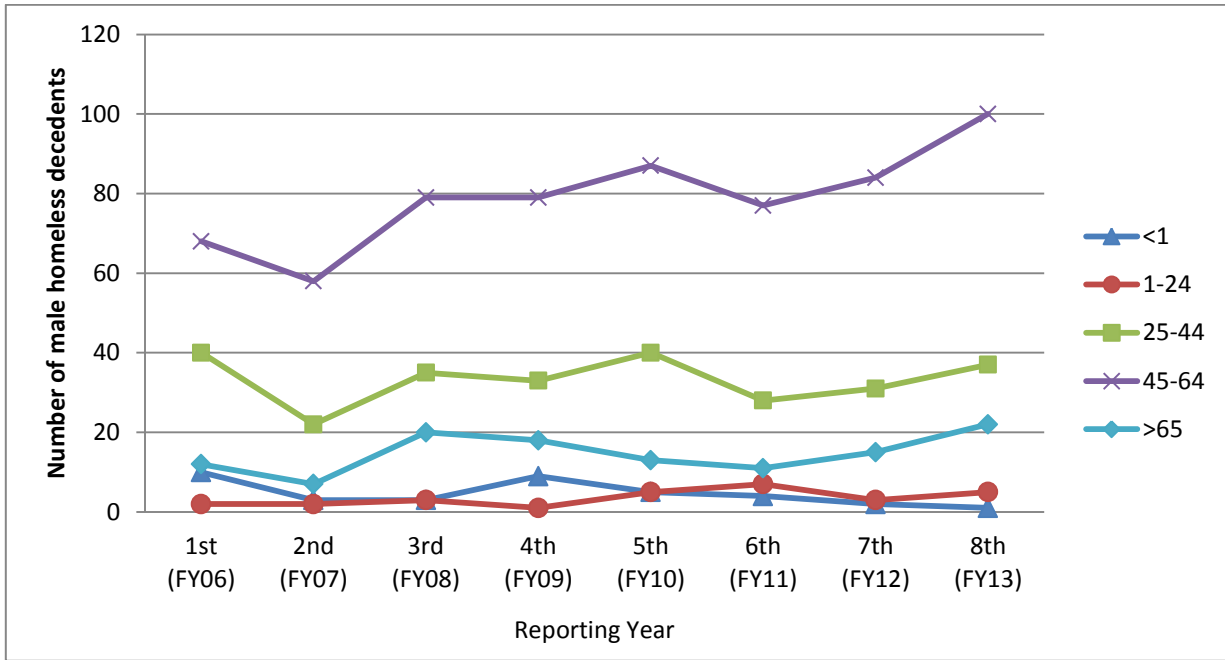
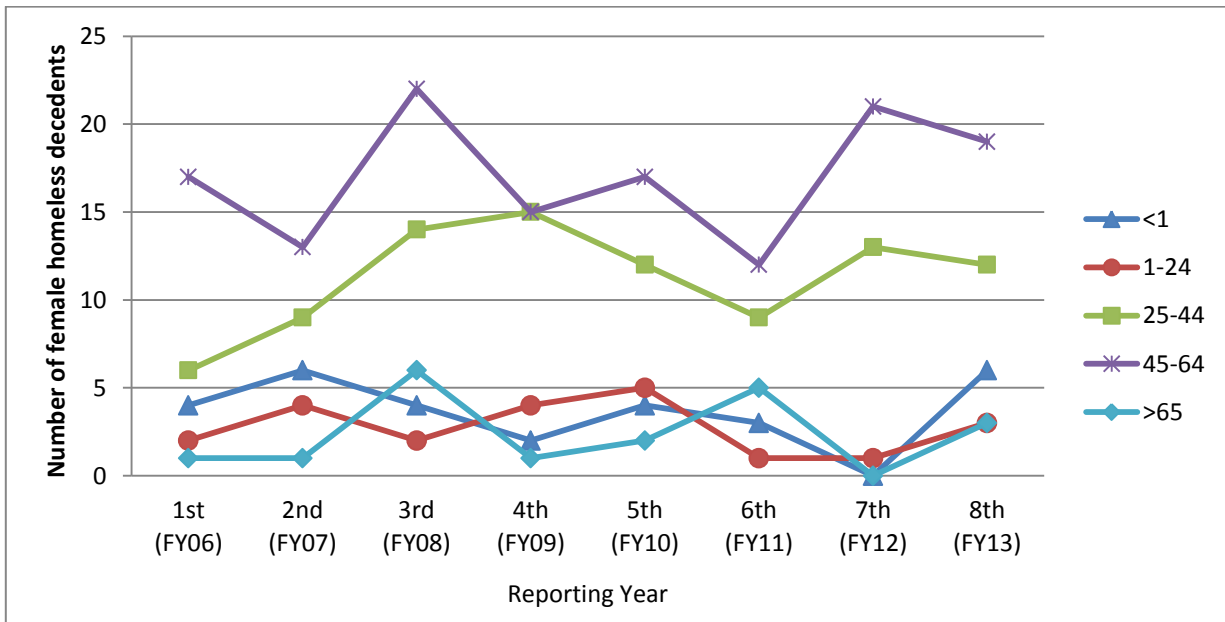


Figure 5b. Age among Female Homeless Decedents in NYC, July 1, 2005 – June 30, 2013



Among the 26 HRA homeless deaths, 77% (n=20) were male and 23% (n=6) were female. Most (81%; n=21) were between 45 and 64 years of age. Fifteen percent (n=4) were between 25 and 44 years, and only one decedent (4%) was 65 and older (Table 5).

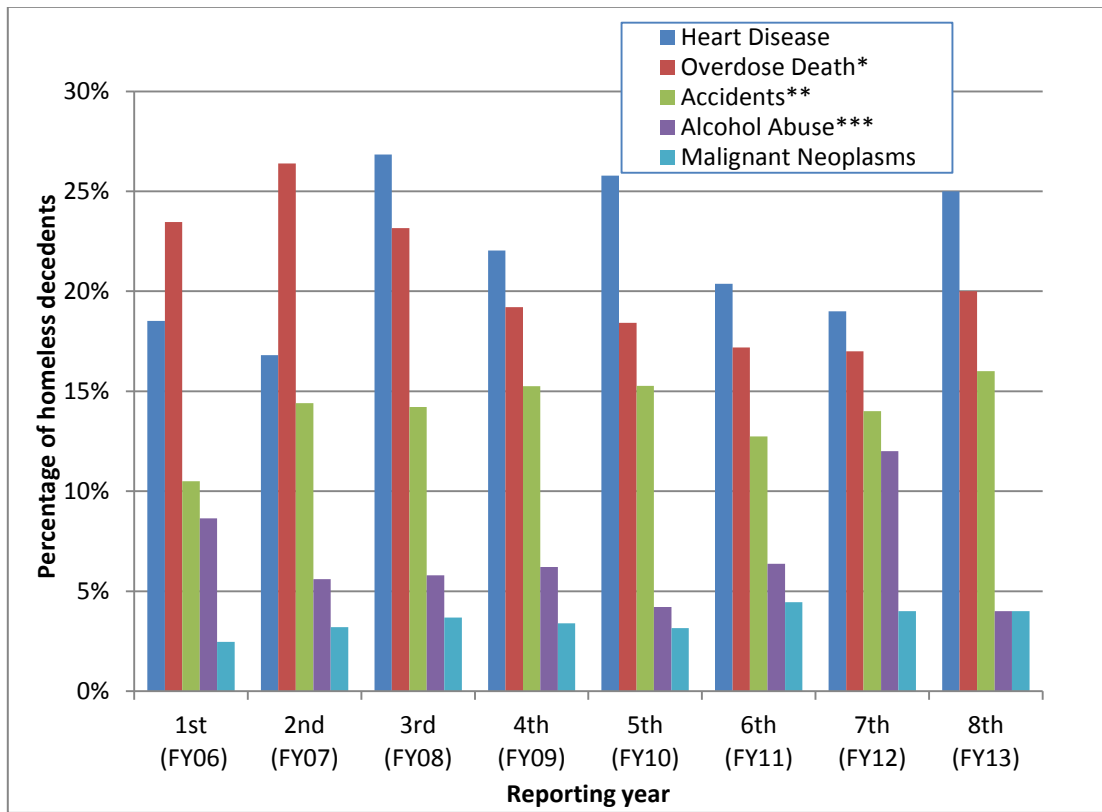
LEADING CAUSE OF DEATH

Heart disease was the leading cause of homeless deaths, accounting for 25% (n=53) (Table 6a). Drug overdose accounted for 20% (n=41) of deaths; non-drug related accidents accounted for 16% (n=34) of deaths; alcohol abuse accounted for 4% (n=9); and malignant neoplasms (cancer) accounted for 4% (n=9) of

deaths. The drug overdose category includes accidental and intentional overuse, or abuse of, illicit and/or therapeutic drugs. Additionally, the drug overdose and alcohol abuse categories include mental and behavioral disorders, which encompass acute intoxication, harmful use, dependence syndrome, and withdrawal state (Table 6a).

The leading causes of death among homeless continue to differ from the leading causes of death in NYC overall. From July 1, 2012 to June 30, 2013, heart disease (32%) was the overall leading cause in NYC followed by malignant neoplasms (25%), influenza and pneumonia (5%), diabetes mellitus (3%), and chronic lower respiratory diseases (3%).

Figure 6. Trends in Causes of Death among Homeless Decedents in NYC, by Leading Causes of Current Reporting Year, July 1, 2005 - June 30, 2013[†]



* Mental and Behavior Disorders Due to the Use of, or Accidental Poisoning by, Psychoactive Substances Excluding Alcohol and Tobacco

** Excluding Accidental Drug Overdose

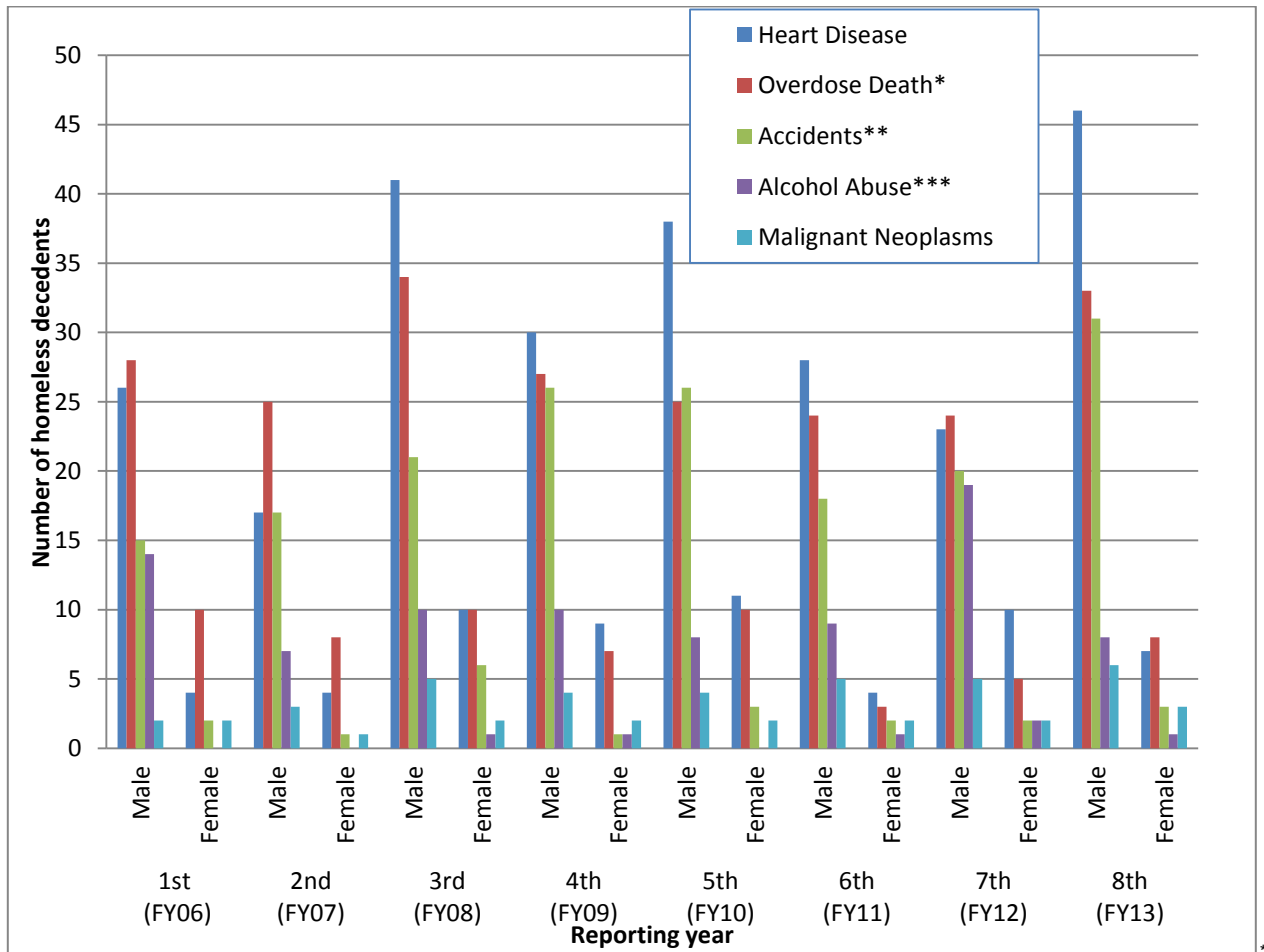
***Mental and Behavioral Disorders due to the Use of Alcohol

[†]Leading causes of death for each reporting year have been altered to reflect the current reporting year’s five leading causes.

Leading Causes of Death and Gender

During the current reporting year, the leading cause of death among males was heart disease (n=46) while drug overdose was the leading cause among females (n=8). (Figure 6b, Table 6a).

Figure 6b. Trends in Causes of Death by Gender among Homeless Decedents in NYC, by Leading Causes of Current Reporting Year, July 1, 2005 – June 30, 2013[†]



Mental and Behavior Disorders Due to the Use of, or Accidental Poisoning by, Psychoactive Substances Excluding Alcohol and Tobacco

** Excluding Accidental Drug Overdose

***Mental and Behavioral Disorders due to the Use of Alcohol

[†]Leading causes of death for each reporting year have been altered to reflect the current reporting year's five leading causes.

Leading Causes of Death and Shelter Residency Status

The leading causes of death differ by decedent shelter residency status (Table 6b). Among sheltered homeless decedents, the leading cause of death was heart disease (n=24), followed by drug overdose (n=22) accidents (n=7), malignant neoplasms (n=7), chronic liver disease and cirrhosis (n=4) and homicide (n=4) (Table 6b). Among non-sheltered homeless, the leading cause of death was heart disease (n=29), followed by accidents (n=27), drug overdose (n=19), alcohol abuse (n=7), diabetes (n=3), and suicide (n=3).

Non-sheltered outdoor deaths were due to accidents (n=8), heart disease (n=6), drug overdose (n=5), alcohol abuse (n=4), and homicide, stroke, congenital malformations, diabetes, and influenza/pneumonia (n=1 each). One non-sheltered outdoor death was due to undetermined intent: both cause and intent (or manner) of death is unknown.

Non-sheltered other place deaths were due to drug overdose, accidents, and heart disease (n=7 each), suicide (n=3), and diabetes (n=1). One non-sheltered other place death was due to undetermined intent.

The 1 sheltered outdoor death was due to an accident. Sheltered other place deaths were due to drug overdose (n=3), accidents (n=2), and homicide and heart disease (n=1 each). One sheltered, other place deaths was due to undetermined Intent.

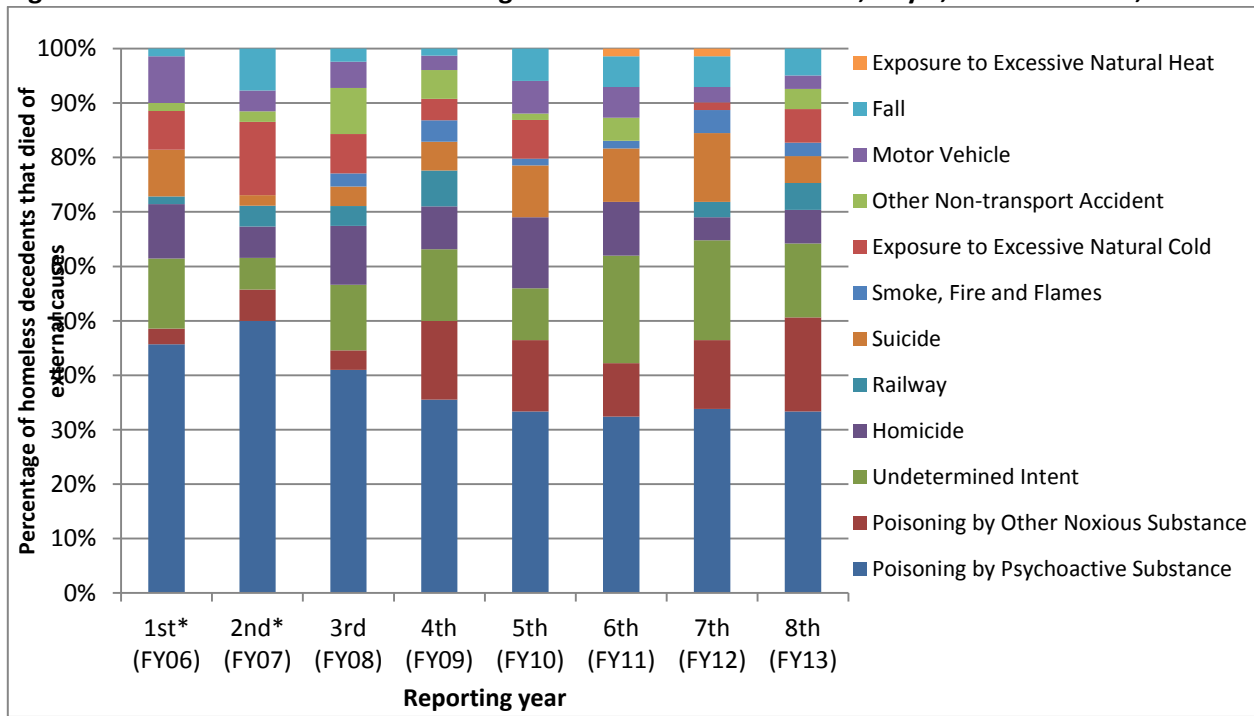
Leading Causes of Death among Homeless Infants

Since reporting began, in 2005, 66 homeless infant deaths were reported. All, but 10, deemed natural deaths, were investigated by OCME. Among the 7 infant deaths reported in this current reporting period, 2 were due to undetermined intent, one due to congenital malformations, one due to an accident, and the remaining three due to other causes. There was one positional asphyxia case.

External Causes of Death among DHS, HPD, and OCME Homeless Persons

The number of external cause deaths has ranged between 52 and 84, during 8 years of reporting. Among the 81 external deaths reported in this annual report, 33% (n=27) were due to poisoning by psychoactive substance (overdose) (Figure 7, Table 6c, 6d).

Figure 7. External Causes of Death among Homeless Decedents in NYC, July 1, 2006 – June 30, 2013



*Prior to 2007, the manner of some overdose deaths were coded as natural rather than external, underestimating those due to external causes. As a result, we have used cause of death codes provided by the National Center for Health Statistics (NCHS) to correct the first and second reporting year data for this change in coding. See Special Section: New York City Changes from Manual to Automated Cause-of-Death Coding: <http://www.nyc.gov/html/doh/downloads/pdf/vs/2007sum.pdf> for more information.

Poisoning by other noxious substance was the second leading cause, accounting for 17% (n=14) of external deaths. Poisoning by other noxious substance deaths includes accidental poisoning by and exposure to alcohol, as well as other substances. Five deaths (6%) were due to each of excessive exposure to natural cold and homicide. Four deaths each were due to each of railway, fall, and suicide, (5% each).

TABLES

Table 1: LL63 Categories for Classifying Deaths

Outdoor Deaths	Other Deaths
Sidewalk/Street	Friend or Family Member's Apartment
Expressway	Subway Car/ Subway Platform/Train Station
Outside of Building Entrance	Abandoned Building
Park Area	Public Space in a Building†
Encampment	Motel/Hotel Room
Vehicle	Drop-in Center
Vacant Lot	Building Vestibule
Bank/Shore of in Body of Water	Place of Employment
Construction Site	Storage Facility
Roof of Building	Other, not otherwise specified

* In the 1st annual report, subway and train deaths were categorized as outdoor; this was changed in the 2nd annual report based on discussions between agencies reporting these deaths

†Public spaces in buildings include lobbies, stairwells, elevators, and roofs.

Table 2: Deaths of Homeless Persons by Shelter Residency Status and Month of Death, July 1, 2012 – June 30, 2013

Month of Death	Deaths Reported by OCME, DHS, and HPD									Deaths Reported by HRA*		
	Total			Shelter Residency Status								
				Sheltered			Non-Sheltered					
	All	OCME	Non-OCME	All	OCME	Non-OCME	All	OCME	Non-OCME	Total	Sheltered	Non-Sheltered
All Months	208	170	38	100	75	25	108	95	13	26	26	0
July '12	10	9	1	4	3	1	6	6	0	1	1	0
August '12	16	12	4	6	4	2	10	8	2	3	3	0
September '12	20	14	6	9	6	3	11	8	3	2	2	0
October '12	12	8	4	4	2	2	8	6	2	3	3	0
November '12	15	12	3	5	3	2	10	9	1	1	1	0
December '12	19	18	1	7	7	0	12	11	1	5	5	0
January '13	30	25	5	11	7	4	19	18	1	1	1	0
February '13	13	12	1	9	8	1	4	4	0	0	0	0
March '13	20	17	3	13	10	3	7	7	0	1	1	0
April '13	21	16	5	10	7	3	11	9	2	2	2	0
May '13	19	16	3	14	11	3	5	5	0	5	5	0
June '13	12	11	1	8	7	1	4	4	0	2	2	0

* All HRA deaths occurred to homeless placed in Single Room Occupancy (SRO). SROs are not considered homeless shelters by HRA, but they are included in this report because they are homeless shelter residents according to Local Law No. 63 of 2005 (codified at New York City Administrative Code Section 17-190) definitions #2 Homeless shelter resident and #3 Homeless shelter were classified as homeless sheltered residents. See: <http://webdocs.nycouncil.info/attachments/66681.htm>

HRA homeless sheltered deaths are reported separately and should not be added to other homeless sheltered deaths as there may be duplication. To comply with Article 27-F of the New York state Public Health Law which prohibits disclosure of any information that could reasonably identify someone having an HIV related illness or AIDS, personal identifiers on HRA homeless deaths were not provided; hence corresponding death certificates could not be reviewed to determine whether deaths were also reported by OCME

Table 3: Sheltered Homeless Decedents by Shelter Location, July 1, 2012 – June 30, 2013

Borough	Community District	Deaths of Sheltered Homeless Persons Reported by OCME, DHS, and HPD
All Boroughs		100
Manhattan	Total	42
	Battery Park, Tribeca (01)	0
	Greenwich Village, SOHO (02)	1
	Lower East Side (03)	9
	Chelsea, Clinton (04)	1
	Midtown Business District (05)	1
	Murray Hill (06)	10
	Upper West Side (07)	2
	Upper East Side (08)	1
	Manhattanville (09)	2
	Central Harlem (10)	4
	East Harlem (11)	11
	Washington Heights (12)	0
Bronx	Total	22
	Mott Haven (01)	3
	Hunts Point (02)	3
	Morrisania (03)	4
	Concourse, Highbridge (04)	2
	University/Morris Heights (05)	1
	East Tremont (06)	5
	Fordham (07)	1
	Riverdale (08)	0
	Unionport, Soundview (09)	1
	Throgs Neck (10)	1
	Pelham Parkway (11)	0
	Williamsbridge (12)	1
Brooklyn	Total	27
	Williamsburg, Greenpoint (01)	3
	Fort Greene, Brooklyn Heights (02)	0
	Bedford Stuyvesant (03)	1
	Bushwick (04)	5
	East New York (05)	6
	Park Slope (06)	0
	Sunset Park (07)	0
	Crown Heights North (08)	0
	Crown Heights South (09)	1
	Bay Ridge (10)	0
	Bensonhurst (11)	0
	Borough Park (12)	0
	Coney Island (13)	0
	Flatbush, Midwood (14)	0
	Sheepshead Bay (15)	0
	Brownsville (16)	9
	East Flatbush (17)	1
Canarsie (18)	1	

Table 3: Sheltered Homeless Decedents by Community District of Shelter, July 1, 2012 – June 30, 2013

Borough	Community District	Deaths of Sheltered Homeless Persons Reported by OCME, DHS, and HPD
Queens	Total	8
	Astoria, Long Island City (01)	0
	Sunnyside, Woodside (02)	1
	Jackson Heights (03)	0
	Elmhurst, Corona (04)	0
	Ridgewood, Glendale (05)	0
	Rego Park, Forest Hills (06)	0
	Flushing (07)	0
	Fresh Meadows, Briarwood (08)	0
	Woodhaven (09)	0
	Howard Beach (10)	2
	Bayside (11)	0
	Jamaica, St. Albans (12)	4
	Queens Village (13)	1
The Rockaways (14)	0	
Staten Island	Total	1
	Port Richmond (01)	1
	Willowbrook, South Beach (02)	0
	Tottenville (03)	0

Tables 4a and 4b: Homeless Decedents by Location of Death: Shelter, Hospital, Outdoors, or Other place, July 1, 2012
– June 30, 2013

Table 4a

Borough		Community District		Deaths Reported by OCME, DHS, and HPD									
				Total					Shelter Residency Status				
									Sheltered				
				Total	Location of Death				Total	Shelter	Hospital	Outdoors	Other
Shelter	Hospital	Outdoors	Other										
All Boroughs		208	32	109	30	37	100	32	59	1	8	108	
Manhattan	Total	91	16	53	8	14	45	16	27	1	1	46	
	Battery Park, Tribeca (01)	3	0	2	0	1	2	0	2	0	0	1	
	Greenwich Village, SOHO (02)	1	0	0	0	1	0	0	0	0	0	1	
	Lower East Side (03)	7	6	0	0	1	7	6	0	0	1	0	
	Chelsea, Clinton (04)	14	1	9	2	2	3	1	2	0	0	11	
	Midtown Business District (05)	6	0	0	3	3	0	0	0	0	0	6	
	Murray Hill (06)	23	3	18	1	1	11	3	8	0	0	12	
	Upper West Side (07)	3	2	0	1	0	2	2	0	0	0	1	
	Upper East Side (08)	5	0	5	0	0	4	0	4	0	0	1	
	Manhattanville (09)	1	1	0	0	0	1	1	0	0	0	0	
	Central Harlem (10)	12	0	9	0	3	5	0	5	0	0	7	
	East Harlem (11)	11	3	6	1	1	8	3	4	1	0	3	
	Washington Heights (12)	5	0	4	0	1	2	0	2	0	0	3	
Bronx	Total	33	7	19	2	5	18	7	11	0	0	15	
	Mott Haven (01)	9	2	6	1	0	5	2	3	0	0	4	
	Hunts Point (02)	1	1	0	0	0	1	1	0	0	0	0	
	Morrisania (03)	3	2	0	0	1	2	2	0	0	0	1	
	Concourse, Highbridge (04)	3	0	3	0	0	2	0	2	0	0	1	
	University/Morris Heights (05)	0	0	0	0	0	0	0	0	0	0	0	
	East Tremont (06)	4	1	3	0	0	4	1	3	0	0	0	
	Fordham (07)	5	0	4	0	1	2	0	2	0	0	3	
	Riverdale (08)	0	0	0	0	0	0	0	0	0	0	0	
	Unionport, Soundview (09)	1	1	0	0	0	1	1	0	0	0	0	
	Throgs Neck (10)	1	0	0	1	0	0	0	0	0	0	1	
	Pelham Parkway (11)	4	0	3	0	1	1	0	1	0	0	3	
Williamsbridge (12)	2	0	0	0	2	0	0	0	0	0	2		

Table 4a

Table 4b

Borough	Deaths Reported by HRA*			
	Sheltered			
	Total	Location of Death		
Shelter		Hospital	Outdoors	
All Boroughs	26	15	11	0
Manhattan	17	10	7	0
Bronx	5	2	3	0
Brooklyn	2	2	0	0
Queens	2	1	1	0
Staten Island	0	0	0	0

Tables 5: Homeless Decedents by Age and Sex, July 1, 2012 – June 30, 2013

Age	Deaths Reported by OCME, DHS, and HPD			Deaths Reported by HRA*		
	Total	Male	Female	Total	Male	Female
Age Category	208	165	43	26	20	6
<1	7	1	6	0	0	0
1-24	8	5	3	0	0	0
25-44	49	37	12	4	3	1
45-64	119	100	19	21	16	5
>=65	25	22	3	1	1	0

* All HRA deaths occurred to homeless placed in Single Room Occupancy (SRO). SROs are not considered homeless shelters by HRA, but they are included in this report because they are homeless shelter residents according to Local Law No. 63 of 2005 (codified at New York City Administrative Code Section 17-190) definitions #2 Homeless shelter resident and #3 Homeless shelter were classified as homeless sheltered residents. See: <http://webdocs.nycouncil.info/attachments/66681.htm> HRA homeless sheltered deaths are reported separately and should not be added to other homeless sheltered deaths as there may be duplication. To comply with Article 27-F of the New York state Public Health Law which prohibits disclosure of any information that could reasonably identify someone having an HIV related illness or AIDS, personal identifiers on HRA homeless deaths were not provided, including community district of death.

Tables 6a and 6b: Leading Causes of Death by Gender and Shelter Residency Status, July 1, 2012 – June 30, 2013

Table 6a

Cause of Death		Gender					
		Total		Male		Female	
		All	Percent*	All	Percent*	All	Percent*
Rank	Total	208	100	165	79	43	21
1	DISEASES OF HEART	53	25	46	87	7	13
2	DRUG POISONING	41	20	33	80	8	20
3	ACCIDENTS EXCEPT DRUG POISONING	34	16	31	91	3	9
5	ALCOHOL	9	4	8	89	1	11
5	MALIGNANT NEOPLASMS	9	4	6	67	3	33
6	CHRONIC LIVER DISEASE AND CIRRHOSIS	6	3	4	67	2	33
8	DIABETES MELLITUS	5	2	4	80	1	20
8	ASSAULT (HOMICIDE)	5	2	5	100	0	0
9	INTENTIONAL SELF-HARM (SUICIDE)	4	2	4	100	0	0
10	INFLUENZA AND PNEUMONIA	3	1	3	100	0	0
12	MALFORMATIONS, DEFORMATIONS	2	1	1	50	1	50
12	CEREBROVASCULAR DISEASE (I60-I69)	2	1	2	100	0	0
12	ANEMIAS (D50-D64)	2	1	0	0	2	100
15	SEPTICEMIA	1	0	1	100	0	0
15	DISEASES (I10,I12)	1	0	1	100	0	0
15	CHRONIC LOWER RESPIRATORY DISEASES	1	0	1	100	0	0
15	NEPHROSIS	1	0	0	0	1	100
15	PEPTIC ULCER	1	0	1	100	0	0
15	VIRAL HEPATITIS	1	0	0	0	1	100
-	UNDETERMINED INTENT	11	5	6	55	5	45
-	All Other Causes	16	8	8	50	8	50

*All percentages were rounded to the nearest whole number. Causes of death are ranked based on total count.

Table 6b

Rank	Cause of Death	Shelter Residency Status					
		Total		Sheltered		Non-Sheltered	
		All	Percent*	All	Percent*	All	Percent*
	Total	208	100	100	48	108	52
1	DISEASES OF HEART	53	25	24	45	29	55
2	POISONING	41	20	22	54	19	46
3	ACCIDENTS EXCEPT DRUG POISONING	34	16	7	21	27	79
5	MENTAL DISORDERS DUE TO USE OF ALCOHOL	9	4	2	22	7	78
5	MALIGNANT NEOPLASMS	9	4	7	78	2	22
6	CHRONIC LIVER DISEASE AND CIRRHOSIS	6	3	4	67	2	33
8	DIABETES MELLITUS	5	2	2	40	3	60
8	ASSAULT (HOMICIDE)	5	2	4	80	1	20
9	INTENTIONAL SELF-HARM (SUICIDE)	4	2	1	25	3	75
10	INFLUENZA AND PNEUMONIA	3	1	2	67	1	33
13	MALFORMATIONS, DEFORMATIONS	2	1	1	50	1	50
13	CEREBROVASCULAR DISEASE (I60-I69)	2	1	0	0	2	100
13	ANEMIAS (D50-D64)	2	1	1	50	1	50
15	SEPTICEMIA	1	0	1	100	0	0
15	DISEASES (I10, I12)	1	0	1	100	0	0
15	CHRONIC LOWER RESPIRATORY DISEASES	1	0	0	0	1	100
15	NEPHROSIS	1	0	1	100	0	0
15	PEPTIC ULCER	1	0	1	100	0	0
15	VIRAL HEPATITIS	1	0	1	100	0	0
-	UNDETERMINED INTENT	11	5	7	64	4	36
-	All Other Causes	16	8	11	69	5	31

*All percentages were rounded to the nearest whole number. Causes of death are ranked based on total count.

Tables 6c and 6d: External Causes of Death by Gender and Shelter Residency Status, July 1, 2012 – June 30, 2013

Table 6c

Rank	Cause of Death	All	Gender	
			Male	Female
	Total	81	68	13
1	POISONING BY PSYCHOACTIVE SUBSTANCE	27	22	5
2	POISONING BY OTHER NOXIOUS SUBSTANCE	14	12	2
4	EXPOSURE TO EXCESSIVE NATURAL COLD	5	5	0
4	HOMICIDE	5	5	0
7	RAILWAY	4	3	1
7	FALL	4	4	0
7	SUICIDE	4	4	0
8	OTHER NON-TRANSPORT ACCIDENT	3	3	0
10	MOTOR VEHICLE	2	2	0
10	SMOKE, FIRE AND FLAMES	2	2	0
-	UNDETERMINED INTENT	11	6	5

Causes of death are ranked based on total count.

Table 6d

Cause of Death		All	Shelter Residency Status	
			Sheltered	Non-Sheltered
Rank	Total	81	36	45
1	POISONING BY PSYCHOACTIVE SUBSTANCE	27	17	10
2	POISONING BY OTHER NOXIOUS SUBSTANCE	14	3	11
4	EXPOSURE TO EXCESSIVE NATURAL COLD	5	0	5
4	HOMICIDE	5	4	1
7	RAILWAY	4	1	3
7	FALL	4	0	4
7	SUICIDE	4	1	3
8	OTHER NON-TRANSPORT ACCIDENT	3	1	2
10	MOTOR VEHICLE	2	2	0
10	SMOKE, FIRE AND FLAMES	2	0	2
-	UNDETERMINED INTENT	11	7	4

Causes of death are ranked based on total count.