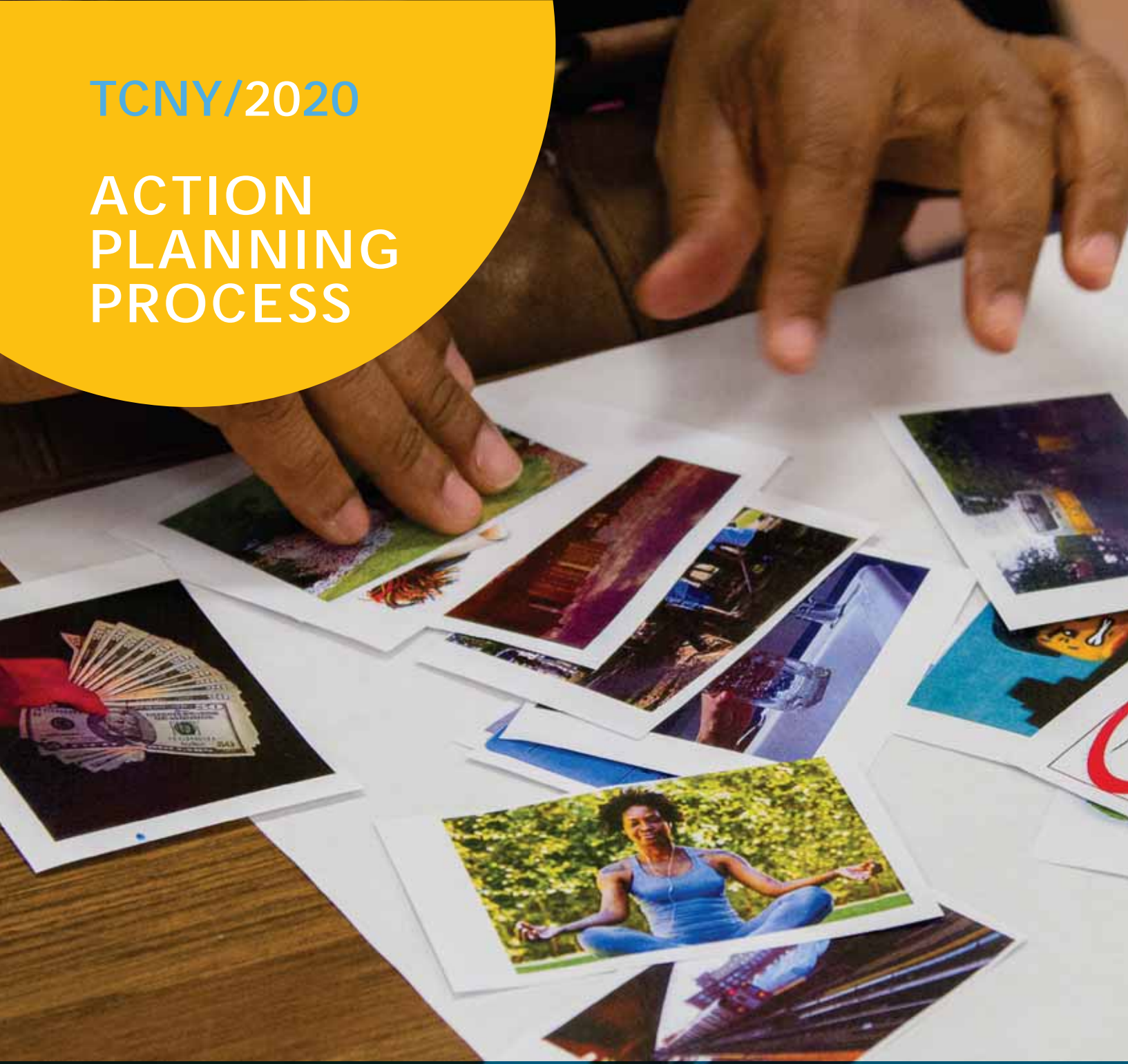


TCNY/2020

ACTION
PLANNING
PROCESS



INTERVENTIONS
REFERENCE
MANUAL



DECEMBER
2016

ABOUT THE AUTHORS



**hester street
collaborative**

Hester Street Collaborative (HSC) empowers residents of underserved communities by providing them with the tools and resources necessary to have a direct impact on shaping their built environment. We do this through a hands-on approach that combines design, education, and advocacy. HSC seeks to create more equitable, sustainable, and vibrant neighborhoods where community voices lead the way in improving their environment and neglected public spaces.

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INTRODUCTION

The TCNY 2020 Action Planning Process will not only identify the top health priorities in 8 communities across all 5 boroughs but also select strategic interventions that resonate with community members, leverage local resources and have the most potential to address the most pressing community health needs.

To support the TCNY Planning Partners in identifying strategic interventions, Hester Street Collaborative compiled descriptions of sample interventions⁽¹⁾ and case studies of interventions that have been successfully implemented in a wide range of communities across the country for each of the 23 TCNY Health indicators. The interventions are grouped by the four overarching goals of TCNY 2020: **Promote Healthy Childhoods**, **Create Healthier Neighborhoods**, **Support Healthy Living** and **Increase Access To Quality Care**. The inclusion of an intervention in the following Intervention Reference Guide does not imply review or constitute endorsement by the New York City Department of Health and Mental Hygiene, the Fund For Public Health in New York City, or the New York State Department of Health.

For each of the 23 TCNY Health Priorities, the guide includes:

1. A brief description of that particular health issue and the health inequities that exist;
2. A list of causes and contributing factors;
3. Example intervention types; and
4. A case study of an intervention that has been implemented.

For each example intervention, the scope of impact based on the levels of influence in the following chart is included to help partners make decisions about potential intervention strategies with the understanding of who or what will be affected.

LEVELS OF INFLUENCE⁽²⁾

Individual/Behavioral Level: any intervention designed to influence individual behavior

Social/Community Level: any intervention designed to influence social norms and community resources

Environmental Level: any intervention designed to influence the physical and built environments

Policy Level: any intervention intended to influence the legal/regulatory environment

The Intervention Reference Guide is intended to provide partners with a resource to refer to as they explore interventions and brainstorm innovative strategies that address the top TCNY Health Objective prioritized for each community. Planning Partners are encouraged to choose or refine any of the interventions from the guide.

In keeping with the collaborative spirit of and out-of-the-box thinking encouraged by the TCNY 2020 Action Planning Process, please draw on local knowledge and community assets to create new ideas for strategic interventions that are not necessarily evidence-based.

HSC also encourages TCNY Planning Partners to connect with each other and identify common causes of poor health outcomes across neighborhoods and potential collaborative solutions. HSC will support Partners in sharing information amongst each other about common barriers to health, as identified by community members at the first round of Community Convenings.

⁽¹⁾ An evidence-based Intervention is an interdisciplinary approach that has been proven effective at achieved targeted outcome if implemented.

⁽²⁾ <http://www.healthypeople.gov/2010/hp2020/advisory/pdfs/EvidenceBasedClinicalPH2010.pdf>



PROMOTE HEALTHY CHILDHOODS



BABIES BORN IN “BABY FRIENDLY” FACILITIES



ISSUE

A maternal facility is designated baby friendly facility for offering an optimal level of care for infant feeding and mother/baby bonding.⁽¹⁾ Among NYC mothers who gave birth in 2009-2011, at eight weeks after the baby was born:

Sixty-nine percent of mothers engaged in some form of breastfeeding and 26% were exclusively breastfeeding;

Rates of some and exclusive breastfeeding were lower among Black non-Hispanic, Hispanic, and Asian/Pacific Islander mothers compared with White non-Hispanic mothers;

Mothers with less than a high school education had lower breastfeeding rates compared with college graduates (23% vs. 31% exclusive breastfeeding; 60% vs. 80% some breastfeeding).⁽²⁾

SOURCES

(1) Take Care New York 2020, DOHMH, 2015

(2) Epi Data Brief, DOHMH, August 2015, No. 57 <https://www1.nyc.gov/assets/doh/downloads/pdf/epi/databrief57.pdf>



CAUSES

- Lack of access to pre-natal care
- Lack of education
- Access to breast-feeding resources
- Lack of flexibility at places of work
- Substance abuse



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Breastfeeding Promotion Program P	Individual + Community Level	How many pregnant women were enrolled in the program?	What Works for Health by Robert Wood Johnson Foundation Program
Business case for breastfeeding to encourage employers to implement breastfeeding-friendly policies P	Community Level + Policy	Number of employers that have implemented lactation support policies?	New York State Department of Health Prevention Agenda 2013 -2021
Recruit pediatricians, obstetricians and gynecologists and other primary care providers to become breastfeeding-friendly practices P	Social/Community Level	Number of primary care practices that are designated breastfeeding friendly?	What Works for Health by Robert Wood Johnson Foundation Program

RESOURCES

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/wic/focus_area_1.htm

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=healthy+babies+born&items_per_page=10&=Go

CASE STUDY

READY, SET, BABY

WHO: N.C. Women's Hospital, North Carolina

DEVELOPED BY:
International Board Certified Lactation Consultants at Carolina Global Breastfeeding Institute

INTERVENTION TYPE:
Campaign/Informational Approach

MORE INFORMATION AT:
<http://breastfeeding.sph.unc.edu/what-we-do/programs-and-initiatives/healthcare/breastfeeding-friendly-healthcare-trainings/>

DESCRIPTION: Ready, Set, BABY (RSB) is an educational program designed to raise awareness among prenatal women about baby friendly facilities (especially the changes that are occurring with the Baby-Friendly Hospital designation and other related state designations). The program helps prenatal women make informed decisions, counsels them about evidence-based maternity care best practices, discusses the benefits and management of breastfeeding and supports them in meeting their feeding goals and responding to infant cues. Along with guidance for facilitators, the program includes an action toolkit with a 28-page color patient booklet suitable for women of all trimesters of pregnancy, in addition to a matching educator flip chart that can be used by a clinician or health educator in order to keep them engaged in the process.

OUTCOMES: The program ensures that families can carefully consider their options and make a decision about which facilities are more suitable for them and their child. Until the right facility is found, it supports them with prenatal care and preparation.

OTHER BENEFITS: It is an efficient and cost-effective response. Instead of adding a new facility, it deals with educating interested families about those that already exist.



1CATEGORIZING THE EFFECTIVENESS OF THE POTENTIAL INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
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CHILD CARE ACCESS



ISSUE

Without subsidized childcare, a family of three in New York, living at the poverty level, would have to pay almost 58% of their income for full-time infant care.⁽¹⁾ Low-income children who attend intensive, high-quality early education programs have greater school success, higher graduation rates, and lower levels of juvenile crime, decreased need for special education services, and lower teen pregnancy rates than their peers.⁽²⁾

According to studies, children in center-based cares have better cognitive and language development than children in home-based child care.⁽³⁾

SOURCES

(1) Calculations based on NYC Administration for Children's Services' 2015 monthly fee schedule. Source: Policy Report: Childcare in New York City by New York City Public Advocate Letitia James in 2015. Link: http://pubadvocate.nyc.gov/sites/advocate.nyc.gov/files/child_care_report_nov_2015.pdf

(2) Campbell, F. A. (2000). Early learning, later success: The Abecedarian study: Executive summary. Chapel Hill, NC: Frank Porter Graham Child Development Center, University of North Carolina. Available at: <http://fpg.unc.edu/resources/early-learning-later-success-abecedarian-study> from website: http://www.childtrends.org/?indicators=child-care#_edn5

(3) <http://www.cckm.ca/ChildCare/EvidenceQuestion1.htm>



CAUSES

- Cost
- Affordability
- Eligibility information on subsidies
- Mismatch between day care schedule and job schedules
- Scarcity of affordable childcare facilities and programs



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Increase availability of Early Head Start (EHS) programs P	Individual Level + Social/Community Level	How many new programs are introduced? How many children have access to EHS programs?	What Works for Health by Robert Wood Johnson Foundation Program
Enforcement of Child Care Quality Rating and Improvement System P	Policy level	How many elected officials were contacted about the issue?	What Works for Health by Robert Wood Johnson Foundation Program
Introduce preschool program with family support services P	Individual Level + Social/Community Level	How many new preschool programs are introduced? How many children are in these programs? How many families are connected to support services?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=head+start&items_per_page=10&=Go

CASE STUDY

FAMILY DAY CARE NETWORK (FDC)

WHO: Cypress Hills Child Care Corporation (CHCCC), Brooklyn, New York

SUPPORTED BY: Cypress Hills Local Development Corporation

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT:
<http://www.cypresshillsschildcare.org/program/family-day-care-network/>

DESCRIPTION: The Cypress Hills Child Care Corporation trains and supports neighborhood residents to open family day care businesses in their homes and refer parents to child care services through their Family Day Care Network. The FDC Network provides licensed, safe, affordable child care options to Cypress Hills families while simultaneously helping community women become family day care providers/owners of their own business. The FDC Network has approximately 48 participants including dedicated English and Spanish Network providers who care for nearly 350 children per year.

Services for FDC providers include health and safety classes, technical assistance, advocacy, business start-up workshops, marketing and regulatory courses and Child Development Associate (CDA) classes. The Network also administers the Child and Adult Care Food Program (CACFP), which provides family day care providers with subsidies to serve nutritious meals to low income children. Services provided to FDC parents in the network include community outreach and referrals to FDC providers.

OUTCOMES: The FDC Network expands the availability of child care in Cypress Hills by training and supporting low-income women from the community to be providers.

OTHER BENEFITS: Local capacity-building; Community building; Workforce development; Personal wealth development; Robust network of organized, mobilized and trained residents to tap into for other services (Network recently launched a financial literacy program to empower women to make wise financial choices and advance their families economically).



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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TEENAGE PREGNANCY



ISSUE

Despite a general decline, roughly 1 in 4 teen girls in the U.S. will get pregnant at least once by age 20.⁽¹⁾

In United States in 2011, the teen pregnancy rate among non-Hispanic black and Hispanic teen girls age 15-19 was more than twice as high as the teen pregnancy rate among non-Hispanic white teen girls age 15-19.⁽¹⁾

The poorest neighborhoods in New York City have the highest teen pregnancy rates.⁽²⁾

SOURCES

(1) Curtin, S.C., Abma, J.A., Ventura, S.J., & Henshaw, S.K. (2013). Pregnancy Rates for U.S. Women Continue to Drop. NCHS Data Brief, 136, 1-8. Retrieved from: <http://www.cdc.gov/nchs/data/databriefs/db136.htm> website: https://thenationalcampaign.org/sites/default/files/resource-primary-download/fast_facts_-_teen_pregnancy_in_the_united_states.pdf
(2) Deborah Kaplan. Teen Sexual and Reproductive Health in New York City. Citizens' Committee for Children of NY Policy Briefing. October 2013. Link: <http://www.ccn-ewyork.org/wp-content/uploads/2013/11/DOHMHPresentation.pdf>



CAUSES

- Lack of sex education programs
- Peer pressure
- Lack of access to condoms
- Poor family functioning
- Lack of economic opportunity
- Substance abuse
- Lack of social networks
- Lack of access to birth control



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Teen pregnancy prevention programs include comprehensive sex education, HIV prevention, youth development, service learning, abstinence approaches, or combinations thereof (see case study on next page) P	Social/Community Level	What are the number of campaigns? How many teens does it reach? What is the teenage pregnancy level after program intervention?	What Works for Health by Robert Wood Johnson Foundation Program
Condom availability programs P	Individual + Policy Level	What is the number of programs?	What Works for Health by Robert Wood Johnson Foundation Program
School-based education campaigns P	Individual Level	What are the number of campaigns? How many teens does it reach? What is the teenage pregnancy level after program intervention?	What Works for Health by Robert Wood Johnson Foundation Program

RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=teen+pregnancy&items_per_page=10&=Go

CASE STUDY

CHANGING THE ODDS - TEEN OUTREACH PROGRAM (TOP)

WHO: Morris Heights Health Center (MHHC), The Bronx, New York

SUPPORTED BY: New York City Department of Education, U.S. Department of Health and Human Services Office of Adolescent Health

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT:

http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/successes/morris_heights.htm

<http://thenationalcampaign.org/effective-programs/teen-outreach-program-top>

DESCRIPTION: More than 10,000 school children in 16 high-risk elementary, middle and high schools are provided with confidential sexual and reproductive health care services, and comprehensive medical, behavioral and dental care by the School Based Health Center (SBHC) network of the Morris High Health Center in The Bronx. Being uninsured and based in low-income neighborhoods, many children depend on these services exclusively for their medical needs. *Changing the Odds* is a project from this center that implements the evidence-based Teen Outreach Program (TOP) in 12 middle and high schools in the Bronx. The program is 9 months and includes weekly curriculum-based meetings as well as 20 hours of community service annually. Trainings are provided to teachers, guidance personnel, or youth workers to encourage discussions as a part of the curriculum.

OUTCOMES: An experimental evaluation found that teens from a variety of racial/ethnic groups and socioeconomic levels who participated in TOP were less likely to experience pregnancy or become pregnant, and less likely to get suspended from school or to fail a school course during the time they were in the program than teens in a control group.

OTHER BENEFITS: Eighty-six percent of 6th graders and 9th graders felt the programs helped them make good choices about their health and well-being, while 77% of 6th graders and 69% of 9th graders said that their participation in TOP helped them get good grades.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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HIGH SCHOOL GRADUATION



ISSUE

Education is associated with living longer, experiencing better health, and practicing health-promoting behaviors such as exercising regularly, refraining from smoking, and obtaining timely health checkups and screenings.⁽¹⁾

Every year, over 1.2 million students drop out of high school in the United States alone. That's a student every 26 seconds – or 7,000 a day.⁽²⁾

High School dropout rates are higher among Blacks and Hispanics.⁽³⁾

For African-American and Hispanic male students, New York has the worst four-year high school graduation rate in the country.⁽⁴⁾

SOURCES

- (1) Ross CE, Wu C. The Links between Education and Health. *Am Social Rev.* 1995;60: 719-45.; Cutler D, Lleras-Muney A. Education and Health: Evaluating Theories and Evidence. Bethesda, MD: National Bureau of Economic Research, 2006.; Braveman P, Egerter S. Overcoming Obstacles to Health: Report from the Robert Wood Johnson Foundation to the Commission to Build a Healthier America. Washington, D.C.: Robert Wood Johnson Foundation Commission to Build a Healthier America, 2008.; Richards H, Barry R. U.S. Life Tables for 1990 by Sex, Race, and Education. *J Forensic Econ.* 1998;11(1): 9-26
- (2) <https://www.dosomething.org/us/facts/11-facts-about-high-school-dropout-rates>
- (3) U.S. Department of Education, National Center for Education Statistics. (2016). The Condition of Education 2016 (NCES 2016-144), Status Dropout Rates. Website: <https://nces.ed.gov/fastfacts/display.asp?id=16>
- (4) <http://www.nbcnewyork.com/news/local/NY-GRADUATION-RATES-TRAGIC-FOR-BLACK-HISPANIC-BOYS-171043271.html>



CAUSES

- Unplanned pregnancy
- Quality of high schools
- Support services for at-risk high school teenagers
- Low income family – teens take job to support themselves or families
- Association with delinquent peers
- Drugs and/or gang related activity



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Youth peer mentoring (see case study on next page) P	Individual Level + Social/Community Level	How many youth mentoring programs have been created? How many youth participate?	What Works for Health by Robert Wood Johnson Foundation Program
Community Schools Model that offer academics, physical and mental health, and social service resources for students and families through partnerships with a variety of community service organizations E	Individual Level + Social/Community Level	How many community school models have been implemented?	What Works for Health by Robert Wood Johnson Foundation Program
Career Academics Programs that focus on specific vocational fields P	Individual Level + Social/Community Level	How many youth participate in the career academic program?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=high+school+graduation&items_per_page=10&=Go

CASE STUDY

GIRL TALK

WHO: Haley Kilpatrick,
Georgia

SUPPORTED BY: Albany
and Atlanta businesses and
families

INTERVENTION TYPE:
Individual Level + Social/
Community Level

MORE INFORMATION AT:
[http://www.mygirltalk.org/
AboutGirlTalk/OurTeam/
Staff.aspx](http://www.mygirltalk.org/AboutGirlTalk/OurTeam/Staff.aspx)

[http://www.
countyhealthrankings.
org/policies/youth-peer-
mentoring](http://www.countyhealthrankings.org/policies/youth-peer-mentoring)

[http://educationnorthwest.
org/sites/default/files/
building-effective-peer-
mentoring-programs-intro-
guide.pdf](http://educationnorthwest.org/sites/default/files/building-effective-peer-mentoring-programs-intro-guide.pdf)

DESCRIPTION: Youth peer mentoring programs are often conducted in order to make connections between older youth or young adults, often a high school or college student. Girl Talk is an international non-profit peer-to-peer mentoring program through which high school girls mentor middle school girls to help them deal with the issues they may face during their transitional, early teenage years. The program aims to support young women facing personal or academic related issues, at every level. More than 40,000 girls in 43 states and 7 countries have participated in this program since 2002. Weekly chapter meetings are facilitated by high school Girl Talk Leaders.

OUTCOMES: Participants have responded with positive results in terms of their confidence, leadership skills and developing compassion or solidarity among peers. High school students who are mentors experience an increase in self-esteem and are less likely to drop out.

OTHER BENEFITS: Elementary school children also benefit as mentees and can relate with more ease to school friends and parents than classmates without mentors. They have also been observed to have a more positive attitude about school than their classmates and greater affection for their parents.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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CREATE HEALTHIER NEIGHBORHOODS



VIOLENCE



ISSUE

Violence is an issue that affects perceptions of safety and physical surroundings in every neighborhood,⁽¹⁾ and includes domestic violence. This issue affects certain segments of the population disproportionately. Homicide is the leading cause of death for African Americans age 10 to 24 years and Homicide rates are almost eight times higher among African Americans than among white Americans ⁽²⁾. In NYC, while crime as a whole has been decreasing,⁽³⁾ certain neighborhoods and population groups are more deeply impacted. Since 2001, female adults accounted for 79% of intimate partner homicides as a result on domestic violence in NYC.⁽⁴⁾



CAUSES

- Poverty and unemployment
- Drug, alcohol, or tobacco use
- Lack of economic opportunity
- Lack of strong social and familial support systems
- School absenteeism and poor grades
- Association of delinquent peers (gangs)

SOURCES

- (1) Vest, J., Valadez, A. Perceptions of neighborhood characteristics and leisure-time physical inactivity—Austin/Travis County, Texas. MMWR. 2005.
 (2) Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System. National Center for Injury Prevention and Control. Centers for Disease Control and Prevention 2007. Available from www.cdc.gov/injury. Accessed June 14, 2010.
 (3) http://www.nyc.gov/html/nypd/html/home/poa_crime.shtml
 (4) New York City Violence Fatality Review Committee: 2015 Annual Report. New York City Mayor’s Office to Combat Domestic Violence. 2015



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Develop violence prevention program such as SNUG, Cure Viole, or CEASEFIRE in high-risk communities P	Social/Community Level + Campaigns/Informational Approach	What is the number of violence prevention programs being implemented? How many people are the programs reaching?	New York State Department of Health Prevention Agenda 2013 -2019
School-Based Programs to reduce violence & bullying P	Social/Community Level + Campaigns/Informational Approach	What is the number of school-based programs being implemented? How many children are the programs reaching?	The Guide to Community Preventive Services
Cognitive-Behavioral Therapy (CBT) programs to reduce psychological harm from traumatic events among children and adolescents P	Individual/Behavioral Level	How many children and adolescents in the program reaching?	The Guide to Community Preventive Services



RESOURCES

- https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/healthy_environment/focus_area_4.htm#sector
<http://www.thecommunityguide.org/violence/index.html>

CASE STUDY

NATIONAL NIGHT OUT PROGRAM

WHO: National Association Of Town Watch; Community-Based Organizations

SUPPORTED BY: Bureau of Justice Assistance, U.S. Department of Justice

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT: <https://natw.org/>

<https://www.ncjrs.gov/pdffiles1/bja/180775.pdf>

DESCRIPTION: The National Night Out program is administered by the National Association of Town Watch as a crime prevention and community policing program that emphasizes building a partnership between the police and the community. Community involvement in crime prevention is generated through a variety of local events, such as block parties, cookouts, parades, contests, youth activities, and seminars.

Goals of the National Night Out program include refining the nationwide crime prevention campaign, documenting successful crime prevention strategies, disseminating information about successful community-based strategies, and providing technical assistance on crime prevention program development

OUTCOMES: Community policing programs build relationships of trust and respect among residents, police and city leaders resulting in stronger partnerships and improved communication and collaboration that help make neighborhoods safer.

OTHER BENEFITS: Improved citizen satisfaction in police, community building, community connections, increased sense of ownership and responsibility, reduce residents' fear of crime, and increase perceptions of police legitimacy.



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FALL - RELATED HOSPITALIZATION



ISSUE

Each year, more than 29 million people in the United States suffer a fall-related injury severe enough to warrant medical attention, and 180,000 people die from their injuries. ⁽¹⁾ This issue disproportionately impacts seniors. Every year about a third of adults aged 65 years and older experience a fall, and 20 to 30% of them suffer a moderate to severe injury (e.g. hip fracture, head trauma). ⁽²⁾ Falls are the leading causes of injury among older adults in NYC. ⁽³⁾

The number of people over age 65 has grown in New York City and removing fall hazards is a critical issue; among seniors, fall related-injuries are a common contributing factor to death.



CAUSES

- Trip hazards at home and on sidewalks/streets/bus stops
- Use of multiple prescription medications with side effects
- Increasing age
- Cognitive impairment and sensory deficits
- Physically unfit or frail adults

SOURCES

- (1) Martinez G, Abma J, Copen C. Educating teenagers about sex in the United States. NCHS data brief no. 44. Hyattsville, MD: U.S. Department of Health and Human Services, CDC, 2010.
- (2) Stevens JA, Corso PS, Finkelstein EA, Miller TR. The costs of fatal and nonfatal falls among older adults. Injury Prevention 2006;12:290-5.
- (3) New York City Department of Health and Mental Hygiene. NYC Vital Signs. Volume 13 No. 1. January 2014



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Promote physical activity opportunities through active design, particularly for older adults P	Environmental Level	How many all-age active design opportunities have been introduced in your neighborhood?	New York State Department of Health Prevention Agenda 2013 -2020
Promote implementation of Tai Chi Programs for Arthritis and Balance (see case study on next page) P	Individual/Behavioral Level	How many programs have been implemented? How many individuals completed the program? What is the reduction in falls as a result?	New York State Department of Health Prevention Agenda 2013 -2020
Outdoor improvement to reduce risk hazard to prevent falls among older adults P	Environmental Level	How many interventions have been implemented?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

To see more :

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/healthy_environment/focus_area_4.htm#g41

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=fall+among+older+adults&items_per_page=10&=Go

CASE STUDY

TAI JI QUAN: MOVING FOR BETTER BALANCE (TJQMBB)

WHO: Exercise
Alternatives, LIC., Eugene,
Oregon

DEVELOPED BY: The
Oregon Research Institute

INTERVENTION TYPE:
Individual/Behavioral Level

MORE INFORMATION AT:
www.tjqmbb.org

DESCRIPTION: TJQMBB is an evidence-based fall prevention program for older adults built around 7 of the 24 forms of Tai Ji Quan developed in China. Research on TJQMBB's effectiveness began in 2000 and the program continues to evolve as scientific evaluations are taken into consideration. It is an 8-week structured group intervention with the goal of reducing fear of falling and increasing activity levels. Through exercises that increase strength and balance, participants learn to view falls and fear of falling as controllable. They set goals to increase their activity and change their environment to decrease the risk of falling.

OUTCOMES: Consistent class attendance results in improved balance and mobility and reduced incidence of falls.

OTHER BENEFITS: Tai Ji Quan also involves exercises that improve respiration and mindfulness, and integrates these into exercises that focus on physical balance systems.



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AIR QUALITY



ISSUE

Outdoor Air Quality is the degree to which the ambient air is pollution-free. This is assessed by measuring the micrograms of fine particulate matter per cubic meter (PM 2.5) of pollution. Exposure to poor air quality has been linked to breathing problems, reduced lung function, heart disease and asthma.⁽¹⁾ Air quality is measured through the level of particulate matter, or PM, which is a term for particles found in the air, including dust, dirt, soot, smoke, and liquid droplets.⁽²⁾

People who live in poor neighborhoods suffer disproportionately from health issues related to poor air quality. Neighborhoods, shown in the DOHMH's Community Health Profiles⁽³⁾, throughout the Bronx, northern Manhattan and north Brooklyn struggle with both air quality issues and high poverty rates. These areas also have the highest rate of asthma emergency department visits per 10,000 residents.⁽⁴⁾

SOURCES

- (1) NYC DOHMH, Environment & Health Data. 2015
- (2) <https://www3.epa.gov/pmdesignations/faq.htm#0>
- (3) <https://www1.nyc.gov/site/doh/data/data-publications/profiles.page>
- (4) <http://blogs.ei.columbia.edu/2016/06/06/air-quality-pollution-new-york-city/>



CAUSES

- Location near high truck and traffic volumes
- Proximity to industrial or commercial facilities
- Poorly maintained homes with aging heating and cooling systems
- Location near utilities that burn coal, natural gas, oil and biomass produce



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Educate the community on Air Quality Index and how it is measured to raise awareness and to advocate for better control of Air Pollution (see case study on next page) P	Campaign/Informational Approach	What are the number of educational initiatives underway? How many people are reached through the initiative?	New York State Department of Health Prevention Agenda 2013 -2018
Initiatives to introduce alternative fuels in energy inefficient home boiler systems P	Individual/ Behavioral Level	How many homes can be transitioned from oil to gas boilers? What is the potential impact on the local Air Quality Index as a result of this change?	What Works for Health by Robert Wood Johnson Foundation Program
Introduce permeable pavement projects P	Environmental Level	How many square feet of permeable pavement can be built? What is the potential impact on the local Air Quality Index as a result?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

1. https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/healthy_environment/focus_area_1.htm#sector
2. [http://www.countyhealthrankings.org/policies?f\[0\]=field_program_health_factors%3A12061](http://www.countyhealthrankings.org/policies?f[0]=field_program_health_factors%3A12061)

CASE STUDY

CYPRESS HILLS AIR QUALITY (CHAQ) INITIATIVE

WHO: Cypress Hills Local Development Corporation (CHLDC), Brooklyn, New York

SUPPORTED BY: Public Laboratory, Massachusetts Institute of Technology, US EPA and BK PS 89

INTERVENTION

TYPE: Campaigns and Informational Approach

MORE INFORMATION AT:
<https://publiclab.org/tag/air-quality-egg>

DESCRIPTION: This program, funded by the U.S. Environmental Protection Agency, was created to educate a group of young students residing within the Cypress Hills/East New York community to raise awareness about issues related to air pollution and its ramifications. The project's goal is to equip young adults with the knowledge and skill sets to monitor and evaluate air quality data, as well as educate others about air quality.

The data collection was gathered through low-cost Air Quality Eggs, a sensor system designed to allow anyone to collect data temperature, humidity, Volatile Organic Compound (VOC), Carbon Monoxide (CO) and Nitrogen Dioxide (NO₂). The system is a user friendly device that enables students from PS 89 to participate in an informed conversation about air quality and the collected data.

OUTCOMES: Students were able to combine Public Laboratory's air quality experience with classroom experience based on science teachers' pedagogical expertise related to the mathematics and science therefore giving them a scientific basis to understand their air quality issues.

OTHER BENEFITS: There was also an advocacy and educational component as students were armed with the scientific knowledge of what contributes to air quality conditions in their neighborhood. Students were encouraged to share their findings and research with community members.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

P

PROVEN: Peer review via systematic or narrative review

P

PROMISING: Written program evaluation without formal peer review

E

EMERGING: Ongoing work, practice-based summaries, or evaluation works in progress

I

INNOVATIVE: New and interesting idea without documented evidence of effectiveness



HOUSING QUALITY



ISSUE

Poorly maintained housing is a contributor to both infectious and chronic diseases ^{(1) (2)} and people who live in those homes are at risk of not only getting sick but also, having poor mental health. This issue seeks to address renter-occupied units with maintenance deficiencies (defined as cracks or holes, water leakage into unit, additional heating required in winter, heating breakdowns, presence of mice or rats inside building, toilet breakdowns and presence of peeling plaster or peeling paint).⁽³⁾

Frequency of units with 3+ maintenance deficiencies (NYC)

All Housing Types	15.0%	
Owner Occupied	4.8%	
Market Rate Rental	10.6%	
Rent Regulated	24.4%	←
NYCHA	34.8%	←



CAUSES

- Old housing stock
- Lack of regular maintenance
- Lack of regulation and enforcement on repairs
- Lack of funds required to undertake repairs
- Poor quality housing stock
- Lack of affordable housing makes people rent illegal units with health hazards

SOURCES

- (1) NYC DOHMH, Environment & Health Data. 2015
 (2) <https://www3.epa.gov/pmdesignations/faq.htm#0>
 (3) <http://blogs.ei.columbia.edu/2016/06/06/air-quality-pollution-new-york-city/>



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Conduct home assessments and modifications (e.g. installing smoke and carbon monoxide detectors, testing for radon) P	Social/Community Level + Environmental Level	How many homes can be assessed and modified through the program? How much do these assessments and modifications impact the overall housing quality of those residents?	National Prevention Strategy
Housing rehabilitation loan & grant programs P	Individual/Behavioural Level + Environmental Level	How many units received grants/funds to repair homes?	What Works for Health by Robert Wood Johnson Foundation Program
Introduce a Weatherization Assistance Program to assist residents in upgrading their homes (see case study on next page) E	Environmental Level	How many units were weatherized? What are the average cost savings to residents as a result of weatherization?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

<http://www.surgeongeneral.gov/priorities/prevention/strategy/healthy-and-safe-community-environments.html>

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=housing&items_per_page=10&=Go

CASE STUDY

WEATHERIZATION ASSISTANCE PROGRAM (WAP)

WHO: Bed Stuy Restoration, Brooklyn, New York

SUPPORTED BY: New York State Division of Housing and Community Renewal

INTERVENTION TYPE: Environmental Level

MORE INFORMATION AT: <http://www.restorationplaza.org/affordable-housing/energy-conservation>

DESCRIPTION: Bed Stuy Restoration's Weatherization Program (WAP) is one of the top ranked Weatherization Programs in the City. It serves around 300 low-income households annually, helping them reduce energy costs and improve health and safety conditions. The goal of the program is to reduce energy costs and improve safety and health standards for low-income residents. Weatherization measures can improve the health and safety of indoor environments by preventing carbon monoxide leaks and childhood lead poisoning, and remediating mold and mildew conditions that can trigger symptoms of asthma. Services include installation of new windows, upgrade of heating systems, and the provision of energy efficient appliances such as air conditioners and refrigerators.

OUTCOMES: Weatherizations yield about \$3.15 million in savings each year for 300 households

OTHER BENEFITS: Restoration Program prepares residents for jobs in the high demand green sector and provides hands-on construction and weatherization training. Restoration recently launched HouseLift by Restoration, a fully insured contracting service which provides low-cost home improvement and energy efficient services to area residents while at the same time creating jobs for students of Restoration's green job training.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
- E** **EMERGING:** Ongoing work, practice-based summaries, or evaluation works in progress
- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



CHILD ASTHMA



ISSUE

Asthma is a chronic condition in which airways narrow and swell and produce extra mucus. This can make breathing difficult and trigger coughing, wheezing and shortness of breath.⁽¹⁾ It is a leading chronic illness among children and youth in the United States. On average, in a classroom of 30 children, about 3 are likely to have asthma, and it is one of the leading causes of school absences.⁽²⁾ One in eight New York City children has been diagnosed with asthma, with poor children nearly twice as likely to suffer from the respiratory disease.⁽³⁾

SOURCES

- (1) Mayo Clinic - <http://www.mayoclinic.org/diseases-conditions/asthma/basics/definition/con-20026992>
- (2) U.S. Department of Health and Human Services. Center for Disease Control and Prevention. National Center for Health Statistics: FastStats Homepage. 2009
- (3) DeFrances CJ, Cullen KA, Kozak LJ. National Hospital Discharge Survey: 2005 Annual Summary with Detailed Diagnosis and Procedure Data. National Center for Health Statistics. Vital Health Statistics 13 (165). 2007.



CAUSES

- Airborne allergens, such as pollen, animal dander, mold, cockroaches and dust mites due to poor housing quality
- Respiratory infections, such as the common cold
- Cold air
- Air pollutants and irritants, such as smoke
- Certain medications



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Introduce Smoke-free Policies for Indoor Areas P	Policy level	How many housing units are impacted by the smoke-free policies?	What Works for Health by Robert Wood Johnson Foundation Program
Education about asthma triggers in the home environment to control indoor conditions to reduce or stop exposure to these triggers P	Campaign/Informational Approach	What are the number of educational initiatives underway? How many people are reached through the initiative?	The Guide to Community Preventive Services
Training and Education to improve Asthma Self-management (see case study on next page) P	Individual/Behavioral Level	What is the number of educational initiatives that have been carried out? What is the number of participants reached? How does the program reduce asthma attacks?	The Guide to Community Preventive Services



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=child+asthma&items_per_page=10&=Go

<http://www.thecommunityguide.org/asthma/index.html>

CASE STUDY

SOUTH BRONX ASTHMA PARTNERSHIP

WHO: South Bronx Asthma Partnership Program and Bronx-Lebanon Hospital Center

SUPPORTED BY: New York City Department of Health and Mental Hygiene, the United Hospital Fund, Asthma Literacy Project, Asthma Action Plan, American Lung Association and others.

INTERVENTION TYPE: Individual Level + Campaign/Informational Approach

MORE INFORMATION

AT: <http://www.asthmacommunitynetwork.org/node/6162>

DESCRIPTION: A multi-prong program that established a framework for delivering comprehensive care through three principle domains—the clinical care component run by Bronx Lebanon Hospital Center (BLHC); the community education and intervention component run through the South Bronx Asthma Partnership (SOBRAP); and the hospital-community integrated programming component, in which BLHC and SOBRAP collaborate.

Jointly, the hospital and SOBRAP deliver a large number of programs that reach out to the community and support asthma patients and their families. One such jointly run program is BEAM, “Bronx Emergency Asthma Management,” an intervention targeting patients who frequently visit the pediatric ED. BLHC helps identify the patients and SOBRAP invites them to an educational “BEAM brunch” where they learn the importance of adhering to medical management, the benefits of following a tailored Asthma Action Plan, strategies for reducing exposures to environmental triggers, and the importance of regularly scheduled visits with a primary care provider. Following the BEAM brunch, SOBRAP staff coordinates follow-up care.

OUTCOMES: Since 2008, volunteer health educators, also known as “asthma literacy advocates,” have delivered 2,685 educational modules to 971 caregivers and increased asthma self-management knowledge/skills by a minimum of 77%. BLHC has seen a 42% decrease in asthma-related hospitalizations since 2003 (in relation to a relatively constant rate of asthma ED visits indicating a decrease in severity of exacerbations).



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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PEOPLE IN JAIL



ISSUE

The United States has the highest incarceration rate in the world with the total incarcerated population in the U.S. at a staggering 2.4 million — a 500% increase over the past 30 years.⁽¹⁾ Having a family member in jail impacts the entire family and currently, 1 in 28 American children have a parent behind bars.⁽¹⁾ There is an unfairly high number of “missing men”, residents who are in jail; the absence of these men hurt the well being of their families and neighbors. As of 2012, New York City’s prison population is overwhelmingly minority: 57% are black, 33% Hispanic, 7% white, 1% Asian, and the rest other or unknown⁽²⁾.



CAUSES

- Excessive punishment for non-violent crimes
- Lack of support and discharge planning for formerly incarcerated persons leading to recidivism
- Drug trafficking and consumption
- Felonies such as murder, rape, robbery, assault, burglary, etc.
- Poverty and unemployment

SOURCES

- (1) 19 Actual Statistics about America’s Prison System. Online Article at <https://mic.com/articles/86519/19-actual-statistics-about-america-s-prison-system#.ZNCNjk-Nam>
- (2) New York City: Independent Budget Office <http://ibo.nyc.ny.us/cgi-park2/2013/08/nycs-jail-population-whos-there-and-why/>



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Introduce or strengthen a local Community Policing model P	Social/Community Level + Policy level	What are the number of community policing initiatives in the area? How many partnerships are increased as a result?	What Works for Health by Robert Wood Johnson Foundation Program
Cognitive-Behavioral Therapy for offenders P	Individual/Behavioral Level	How many criminal offenders is the program reaching?	What Works for Health by Robert Wood Johnson Foundation Program)
Drug courts are specialized courts that offer criminal offenders with drug dependency problems an alternative to adjudication or incarceration P	Policy Level	How many criminal offenders is the program reaching? How does the court reduce adjudication or incarceration?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

To see more :

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=community+policing&items_per_page=10&Go

CASE STUDY

DRIVE CHANGE 1 YEAR YOUTH FELLOWSHIP

WHO: Drive Change,
Brooklyn, New York

SUPPORTED BY: For
profit / Non-profit hybrid
that receives initial funds
through Crowdfunding, The
New Challenge, Echoing
Green, the WellMet Group
and other sources.

INTERVENTION TYPE:
Social/Community Level

MORE INFORMATION AT:
www.drivechangenyc.org

DESCRIPTION: Drive Change is an award winning NYC based food truck and alternative education program that advocates to raise the age of adult criminal responsibility in New York from 16 to 18. They use the Snowday food truck workplace to run a year-long fellowship for young people returning home from jail or prison so they can improve their opportunities for employment and education. By providing quality employment, training in transferable, industry specific skills and credentials, and through mentorship, they work to empower youth and reduce recidivism. The food trucks also work as a mobile advocacy tool through the packaging of the food and by positioning LCD screens on the exterior to display messaging about childhood incarceration.

OUTCOMES: Trainees receive food safety and New York Food Handlers Certifications, classes on social media, marketing, hospitality, money management and small business development.

OTHER BENEFITS: The Snowday food truck is farm to truck with seasonal menus from local New York farms, it promotes healthy eating and supports New York State local businesses.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

P

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P

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EMERGING: Ongoing work, practice-based summaries, or evaluation works in progress

I

INNOVATIVE: New and interesting idea without documented evidence of effectiveness



SOCIAL COHESION



ISSUE

A neighborhood’s “social cohesion” is its sense of shared values and trust among neighbors. The data on this indicator is limited, but even small amounts of data have shown that how connected residents feel to one another is very important to community health. Social cohesion leads to better support among neighbors and improve not only social interaction but also mental health. ⁽¹⁾



CAUSES

- Unemployment
- Lack of social networks or protections
- Lack of physical places to gather
- Language isolation
- Isolation from cultural cohorts
- Unmet mental health needs
- Absence of access to quality education
- Crime
- Social exclusion

SOURCES

(1) Mettey A, Garcia A, Isaac L, Linos N, Barbot O, Bassett MT. Take Care New York 2020: Every Neighborhood, Every New Yorker, Everyone’s Health Counts. New York City Department of Health and Mental Hygiene. October 2015.



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Design community-wide extracurricular activities to promote social engagement P	Social/Community level	How many community wide activities can be planned? How many people participate?	What Works for Health by Robert Wood Johnson Foundation Program
Community art programs E	Social/Community level	How many art classes can be created? How many people participate in the art class?	What Works for Health by Robert Wood Johnson Foundation Program
Community Gardens P	Environmental Level	How many community gardens are created in the neighborhood? How many people actively use the space?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=social+cohesion&items_per_page=10&=Go

CASE STUDY

CADA PASO, COMMUNITY WALKING PROGRAM

WHO: Nullary, Inc, East Harlem, New York

SUPPORTED BY: Small donations. Recently awarded a \$25K Community Activation grant by DOHMH

INTERVENTION TYPE: Social/Community Level + Environmental Level

MORE INFORMATION AT:
<http://www.cadapaso.us/>

<http://www.nycfoodpolicy.org/community-partner-spotlight-cada-paso/>

DESCRIPTION: Started in 2014, Cada Paso is a monthly family walking program that connects residents with neighborhood resources. Cada Paso is addressing social determinants of health and each walk has a health theme chosen by the families. The program is comprised of teaching about and then walking to a resource to provide families with services such as educational content, conversations with allied health professionals, social networking and on-the-spot access to health resources. Along the way, participants exercise, enjoy fresh fruit, drink NYC's finest tap water in reusable bottles, and compost their waste at a community garden to endorse healthy habits for individuals and the neighborhood. The program also incorporates a Community Activation curriculum that is guided by parent leadership, focusing proactively on shaping the physical social, political, and economic environments.

The Program also partners with a local community garden and the NYC Health Bucks program. Along the walk participants use Health Bucks to buy a variety of produce, and then hold a cooking demonstration and tour of the foods grown in the community garden.

OUTCOMES: More than 300 persons have participated in the family walking program resulting in the community getting to know their neighbors, build trust and understand the assets and resources in their community and promoting social cohesion. The program is currently being formally evaluated.

OTHER BENEFITS: By combining the physical activity of walking with educational content, conversation with allied health professionals, social networking and on-the-spot access to health resources the programs provide families with the tools to preserve and enhance their health.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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SUPPORT HEALTHY LIVING



OBESITY



ISSUE

More than one-third (34.9% or 78.6 million) of U.S. adults are obese.⁽¹⁾ Low-income and minority neighborhoods are less likely to have access to recreational facilities and full-service grocery stores and more likely to have higher concentrations of retail outlets for tobacco, alcohol, and fast foods.⁽²⁾

Adolescents who grow up in neighborhoods characterized by concentrated poverty are more likely to be a victim of violence; use tobacco, alcohol, and other substances; become obese; and engage in risky sexual behavior.⁽³⁾

59% of NYC adult residents surveyed, responded that they were either overweight or obese with a Body Mass Index (BMI between 25.0 and greater).⁽⁴⁾

SOURCES

- (1) <http://jama.jamanetwork.com/article.aspx?articleid=1832542>
- (2) <http://www.nimhd.nih.gov/recovery/goSocialDeterm.asp>. Accessed May 16, 2011.; Sloane DC, Diamant AL, Lewis LB, Yancey AK, et al, and the REACH Coalition of the African American Building a Legacy of Health Project, Improving the Nutritional Resource Environment for Healthy Living Through Community-Based Participatory Research, Journal of General Internal Medicine. July 2003; 18(7): 568–75.
- (3) <http://www.nimhd.nih.gov/recovery/goSocialDeterm.asp>. Accessed May 16, 2011.
- (4) New York City Department of Mental Health and Hygiene. Community Health Survey. 2014.



CAUSES

- Lack of neighborhood sidewalks and safe places for recreation
- Lack of time to exercise
- Lack of access to healthy foods
- Inactive lifestyles
- Genetic predisposition
- Lack of nutrition education
- Physiological factors such as stress and lack of sleep
- Diseases such as hypothyroidism



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Increase the number of institutions with nutrition standards for healthy food and beverage procurement P	Policy Level	Number of institutions that have adopted policies to implement nutrition standards	New York State Department of Health Prevention Agenda 2013 -2019
Technology-supported coaching or counseling Interventions to Reduce Weight and Maintain Weight Loss P	Individual/Behavioral Level	Number of places that promote physical activities?	The Guide to Community Preventive Services
Streetscape design improvements (e.g., Complete Streets) that accommodate the needs of all users P	Environmental Level	How many streets were improved? How many miles?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

- http://www.countyhealthrankings.org/policies?search_api_views_fulltext=obesity&items_per_page=10&Go
- http://www.countyhealthrankings.org/policies?search_api_views_fulltext=obesity&items_per_page=10&Go

CASE STUDY

SALSA SALUD Y SABOR

WHO: Nationwide Program

SUPPORTED BY: Kraft Foods, National Latino Children's Institute

INTERVENTION TYPE: Individual/Behavioral Level

MORE INFORMATION AT:

<http://nlci.org/initiatives/salsa-sabor-y-salud/>

<https://www.cse.ucla.edu/products/reports/R747.pdf>

DESCRIPTION: Kraft Foods, in partnership with the National Latino Children's Institute (NLCI) created Salsa, Sabor y Salud (Food, Fun & Fitness), a healthy lifestyle program for Latino families. Salsa, Sabor y Salud is a completely bilingual national program focused on providing creative, comprehensive and culturally relevant tools designed to encourage healthy lifestyles among Latino families. It is a dynamic and interactive eight-week curriculum that teaches children and their families about healthy lifestyles in community-based settings. The program's unique approach builds on Latino family values, experiences, traditions, language and cultural strengths. It enhances family time, creating opportunities for families to play, cook and eat together. The entire family participates in a series of eight, hour and half sessions.

Every session reinforces healthy eating, sensible portion size and physical activity. It also provides experience and tips that promote healthier food choices compatible with the lifestyle and cuisine of Latino families, fun physical activities for the entire family and the connection between cultural heritage, lifestyle and wellness.

OUTCOMES: A 2008 evaluation study among three participating organizations implementing the Salsa, Sabor y Salud program conducted by the Center for Research on Evaluation, Standards, and Student Testing at the University of California, Los Angeles found that students had significantly higher healthier behavior, more frequent communication with their family and upper grade students demonstrated higher grade levels.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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SUGARY DRINKS



ISSUE

Sixty-three percent of adults and 84% of adolescents in America consume at least one sugar-sweetened beverage (e.g. soda, sport drinks, fruit drinks and punches, low-calorie drinks, sweetened tea) each day.⁽¹⁾

Sugar drinks have been linked to poor diet quality, weight gain, obesity, and, in adults, type 2 diabetes.⁽²⁾⁽³⁾

In a survey 23% of adult respondents in New York City stated they have on average one or more sugar-sweetened beverages (sodas, ice tea, sport drinks, etc.) per day.⁽⁴⁾



CAUSES

- Lack of nutrition education
- Lack of nutritional standards
- Affordability and availability of processed foods
- Marketing
- Convenience
- Lack of access to healthy foods

SOURCES

(1) Wang YC, Bleich SN, Gortmaker SL. Increasing caloric contribution from sugar-sweetened beverages and 100% fruit juices among U.S. children and adolescents, 1988-2004. *Pediatrics* 2008;121(6):e1604-14.; Bleich SN, Wang YC, Wang Y, Gortmaker SL. Increasing consumption of sugar-sweetened beverages among U.S. adults: 1988-1994 to 1999-2004. *Am J Clin Nutr*. 2009; 89(1):372-81.

(2) Malik VS, Schulze MB, Hu FB. Intake of sugar-sweetened beverages and weight gain: A systematic review. *Am J Clin Nutr* 84(2):274-88. 2006.

(3) Vartanian LR, Schwartz MB, Brownell KD. Effects of soft drink consumption on nutrition and health: A systematic review and meta-analysis. *Am J Public Health* 97(4):667-75. 2007.

(4) New York City Department of Mental Health and Hygiene. *Community Health Survey*. 2014.



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Encourage districts to prohibit advertising and promotion of less nutritious foods and beverages, to adopt and implement standards for competitive food P	Policy	Number of local wellness policies that prohibit advertising and promotion of less nutritious foods and beverage	New York State Department of Health Prevention Agenda 2013 -2021
Multi-component interventions with: nutrition education, aerobic/strength training and exercise sessions, training in behavioral techniques, and specific dietary prescriptions P	Social/Community Level	How many programs are you able to host? How many people participate?	What Works for Health by Robert Wood Johnson Foundation Program
Guideline for Prescribing Opioids for Chronic Pain E	Policy	Number of local policy implemented to regulate opioid prescription?	Center for Disease Control and Prevention



RESOURCES

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/chronic_diseases/focus_area_1.htm#sector

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=obesity&items_per_page=10&=Go

CASE STUDY

WELLNESS IN THE SCHOOL'S WELLNESS COMMITTEE

WHO: Wellness in the Schools

DEVELOPED BY: Public school parents

INTERVENTION TYPE: Policy

MORE INFORMATION

AT: <http://www.wellnessintheschools.org/program/tools/nyc-school-food101/>

DESCRIPTION: Wellness in the Schools is a national non-profit that works with schools to provide healthy, scratch-cooked meals, active recess periods, and fitness and nutrition education. The Wellness in the School's Wellness Committee is a group of school staff and administration, parents, and school food staff that advocate for an excellent lunch program. The Wellness Committee starts with the school principal, who serves as a liaison, and then gathers stakeholders to determine a Wellness Policy and collective goals.

Goals may include: Adopting the Alternative Menu; Eliminating chocolate milk (ask principal to write a letter to SchoolFood Manager requesting the elimination of chocolate milk; Requesting a Water Jet (a NYC DOHMH program that gives children access to a healthful, no calorie beverage: clean NYC tap water); Serving a salad bar and preparing tastings (tasting events are an effective way to promote the healthy meal options); and Creating a School Garden.

OUTCOMES: Organized group of concerned parents, and school staff and faculty that advocate for policy change in schools to provide healthy food and less sugary drink options for students.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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PHYSICAL ACTIVITY



ISSUE

Physical activity can improve health. People who are physically active tend to live longer and have lower risk of heart disease, stroke, type 2 diabetes, depression, and some cancers. Physical activity can also help with weight control, and may improve academic achievement in students.⁽¹⁾ About 1 in 5 (21%) adults in United States meet the 2008 Physical Activity Guidelines, which is 60 minutes of physical activity.⁽¹⁾

31% of adults in New York City did not meet the 2008 Physical Activity Guideline and they reported being insufficiently active or inactive.⁽²⁾ 22% of New York City's public elementary and middle school students are obese with a Body Mass Index (BMI) at or above the 95th percentile for their age.⁽³⁾

SOURCES

(1) <http://www.cdc.gov/physicalactivity/community-strategies/index.htm>

(2) Community Health Survey, NYC DOHMH, 2014

(3) NYC Department of Health and Mental Hygiene, Bureau of Epidemiology Services, FITNESSGRAM data (school years 2011); unpublished data.



CAUSES

- Lack of open space
- Un-affordable gym membership
- Lack of education
- Lack of motivation
- Lack of time
- Lack of neighborhood walkability and safety



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Mandatory Active Recess P	Policy	Number of schools with the mandatory active recess policy	What Works for Health by Robert Wood Johnson Foundation Program
Encourage early child care programs to enroll in the Child and Adult Care Food Program (CACFP) and in the Eat Well Play Hard Program (EWPH) P	Social/Community Level	How many programs are implemented? How many people participate?	New York State Department of Health Prevention Agenda 2013 -2021
Increase the number of schools with comprehensive and strong Local School Wellness Policies (LWPs) P	Policy	Number of local policy implemented in local schools?	New York State Department of Health Prevention Agenda 2013 -2021



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=physical+activity&items_per_page=10&=Go

<http://www.thecommunityguide.org/pa/behavioral-social/index.html>

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/chronic_diseases/focus_area_1.htm#sector

CASE STUDY

SAFE ROUTES TO SCHOOLS (SRTS)

WHO: Cornell Cooperative Extension, NEW YORK

SUPPORTED BY:
Department of Transportation

INTERVENTION TYPE:
Policy + Environmental Level

MORE INFORMATION

AT: <http://www.countyhealthrankings.org/policies/safe-routes-schools>

<https://www.dot.ny.gov/divisions/operating/opdm/local-programs-bureau/srts/applications>

DESCRIPTION: Safe Routes to Schools is a federally supported program that promotes walking and biking to school through education and incentives. The program also targets city planning and legislation to make walking and biking safer and provides resources and activities to help communities build sidewalks, bicycle paths, and other pedestrian-friendly infrastructure.

NYC DOT has implemented capital construction projects in support of SRTS that include roadway reconstruction, realignment of the curbs and sidewalks, curb extensions, installation of raised or extended medians, and bus pads, in addition to infrastructure or utility work.

Some projects also include installation of speed bumps and new traffic signals, as well as signal timing modifications.

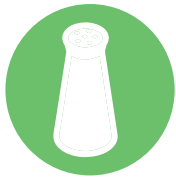
OUTCOMES: Increased active transportation by making it safer for students to walk or bike to school.

OTHER BENEFITS: Increased physical activity; improved health outcomes; reduced injuries; reduced emissions; reduced vehicle miles traveled.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
- E** **EMERGING:** Ongoing work, practice-based summaries, or evaluation works in progress
- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



SODIUM INTAKE



ISSUE

Sodium intake from processed and restaurant foods contributes to high rates of high blood pressure, heart attack, and stroke. Because nearly 400,000 deaths each year are attributed to high blood pressure, decreasing sodium intake could prevent thousands of deaths annually.⁽¹⁾

Most American adults consume more than twice the recommended average daily sodium intake level.⁽²⁾

A high-sodium diet is particularly dangerous for people who already have high blood pressure, also known as hypertension, which affects 27.8% of adult NYC residents.⁽³⁾



CAUSES

- Lack of nutrition education
- Lack of nutritional standards
- Affordability and availability of processed foods
- Marketing
- Convenience
- Lack of access to healthy foods

SOURCES

(1) Danaei G, Ding EL, Mozaffarian D, Taylor B, Murray CJ, et al. The preventable causes of death in the United States: Comparative risk assessment of dietary, lifestyle, and metabolic risk factors. PLoS Med. 2009;6(4):e1000058. doi: 10.1371/journal.pmed.1000058. Source: https://www.cdc.gov/salt/pdfs/Sodium_Fact_Sheet.pdf

(2) Gunn JP, Keenan NL, Labarthe DR. Sodium intake among adults—United States, 2005-2006. MMWR 59(24); 746-9.

(3) New York City Healthy Hospital Initiative: Sodium Reduction Initiative, August 2014, Source: http://www.cdc.gov/salt/pdfs/success_story_ny.pdf



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Enact and enforce school nutrition standards P	Policy	How many schools are compliant?	What Works for Health by Robert Wood Johnson Foundation Program
School breakfast programs offer students a nutritious breakfast, often incorporating a variety of healthy and culturally relevant choices P	Individual Level	How many students are participating in school breakfast programs?	What Works for Health by Robert Wood Johnson Foundation Program
Multi-component inter-generational programs seek to increase physical activity and improve nutrition education P	Social/Community Level	How many inter-generational programs exist? How many people participate?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=sodium+intake&items_per_page=10&=Go

CASE STUDY

HEALTHY COOKING FOR YOUR CONGREGATION

WHO: Bronx Health Reach,
Bronx, New York

SUPPORTED BY: The
Institute for Family Health

INTERVENTION TYPE:
Social/Community Level

MORE INFORMATION AT:
[http://www.institute.org/
bronx-health-reach/our-
work/faith-based-outreach-
initiative/culinary-initiative/](http://www.institute.org/bronx-health-reach/our-work/faith-based-outreach-initiative/culinary-initiative/)

DESCRIPTION: Bronx Health REACH developed a resource manual and six-week curriculum for healthy cooking with a church member trained in food service management. The manual can be downloaded by anyone looking to start the course in Healthy Cooking for Your Congregation. The manual gives instructions on how to prepare healthy versions of a congregation's favorite meals by reducing fat and salt, eliminating sugary beverages and emphasizing small portion sizes.

OUTCOMES: Churches serve healthier meals, and give valuable information about nutrition to their congregation so they can make healthy choices.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
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- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



SMOKING



ISSUE

Currently about 1 in 5 adults smoke.⁽¹⁾

Smoking is more common among people who live in poverty, live with mental illness or substance abuse disorders, have less than a high school education, or work at jobs that consist primarily of physical labor.⁽²⁾

It is estimated that 14% of the New York City residents are smokers.⁽³⁾



CAUSES

- Substance abuse
- Social reward (teens)
- Learned behavior
- Misinformation
- Genetic predisposition
- Media Influence

SOURCES

(1) Dube SR, Asman K, Malarcher, A, Caraballo R. Cigarette smoking among adults and trends in smoking cessation--United States, 2008. MMWR 2009;58:1227-32.; Dube SR, McClave A, James C, Caraballo R, Kaufmann R, Pechacek T. Vital Signs: Current Cigarette Smoking Among Adults Aged ≥18 Years --- United States, 2009. MMWR. September 10, 2010. 59(35); 1135-1140.

(2) Dube SR, McClave A, James C, Caraballo R, Kaufmann R, Pechacek T. Vital Signs: Current Cigarette Smoking Among Adults Aged ≥18 Years --- United States, 2009. MMWR. September 10, 2010. 59(35); 1135-1140

(3) New York City Department of Mental Health and Hygiene. Community Health Survey. 2014



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Encourage adoption and enforcement of smoke-free policies in public and privately operated housing P	Policy	How many home units have adopted smoke-free policy?	New York State Department of Health Prevention Agenda 2013 -2021
Cell phone-based tobacco cessation interventions rely primarily on cell phones to help participants quit using tobacco P	Individual	How many people are receiving the text messages?	What Works for Health by Robert Wood Johnson Foundation Program
Mass media campaigns seek to reach large audiences through television, radio broadcasts, print or digital media, or other displays P	Campaign/informational approach	How many campaigns were created? How long has the campaign been running?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/chronic_diseases/focus_area_2.htm#sector

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=smoking&items_per_page=10&=Go

CASE STUDY

QUIT AND WIN CONTESTS FOR SMOKING CESSATION

WHO: University of Minnesota, Minneapolis

DEVELOPED BY: Minnesota Heart Health Program

INTERVENTION TYPE: Individual/Behavioral Level

MORE INFORMATION AT:

<http://www.bhs.umn.edu/quitandwin/index.htm>

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD004986.pub3/abstract>

<http://www.countyhealthrankings.org/policies/tobacco-cessation-contests>

DESCRIPTION: During the *Quit and Win contest* held at the University of Minnesota-Twin Cities campus, participants accepted the challenge of quitting tobacco for one month, in exchange for a reward for those who succeeded. All participants were presented with a free, two-week supply of nicotine replacement patches and gum. For longer term impacts, the university offered tobacco cessation counseling with a licensed chemical dependency counselor who could help students develop a customized plan and had the capacity to educate, support and follow-up on their progress or failures. Every participant was encouraged to participate along with a non-smoking partner. Worksite-based competitions incentivize individual worker and team participation, while community-wide competitions reached out to the entire community, last a short time, and use mass media for promotion, recruitment, and motivation.

OUTCOMES: Reduced tobacco consumption and increased quit rates.

OTHER BENEFITS: The program helps in building community in residential neighborhoods, campuses or workplaces. It appeals to the youth in that it offers an opportunity for partnership, festivity and collective support to overcome a shared problem.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
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- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



BINGE DRINKING



ISSUE

Binge drinking is defined as a pattern of drinking that brings a person’s blood alcohol concentration (BAC) to 0.08 grams percent or above. This typically happens when men consume 5 or more drinks, and when women consume 4 or more drinks, in about 2 hours.⁽¹⁾ Excessive alcohol use is a leading cause of preventable death in the United States among all adult age groups, contributing to more than 79,000 deaths per year.⁽²⁾ It is estimated that 18% of the adults in New York City have indulged in binge drinking in the past 30 days.⁽³⁾

Baltimore City implemented a successful initiative as part of the Healthy Baltimore 2015, a plan to improve health including reducing alcohol abuse, which carries a tremendous cost in lost productivity, family and community disruption, crime, homelessness, and expensive healthcare utilization.



CAUSES

- Physiological: stress, anxiety and depression
- Socio-cultural: self-confidence, coolness through consumption
- Social pressure
- Misinformation

SOURCES

- (1) National Institute of Alcohol Abuse and Alcoholism. NIAAA council approves definition of binge drinking [PDF-1.62MB]. NIAAA Newsletter 2004; No. 3, p. 3.
 (2) Naimi TS, Cobb N, Boyd D, et al. Alcohol-Attributable Deaths and Years of Potential Life Lost Among American Indians and Alaska Natives --- United States, 2001-2005. MMWR. August 29, 2008 / 57(34); 938-41
 (3) New York City Department of Mental Health and Hygiene. Community Health Survey. 2014



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Mentoring programs on alcohol use (see case study on next page) E	Individual level	How many participants are enrolled?	What Works for Health by Robert Wood Johnson Foundation Program
Mass media campaigns to reduce alcohol-impaired driving aim to persuade individuals to avoid drinking and driving or to prevent others from doing the same P	Campaign/Informational Approach	How many campaigns were developed?	What Works for Health by Robert Wood Johnson Foundation Program
Campus Alcohol Bans P	Policy	Number of college campuses with alcohol ban policy?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=binge+drinking&items_per_page=10&=Go

🔍 CASE STUDY

LIFE UNPLUGGED CURRICULUM FOR YOUTH

WHO: Life Unplugged, Detroit, Michigan

SUPPORTED BY: Michigan Women's Foundation

INTERVENTION TYPE: Individual Level

MORE INFORMATION AT: www.life-unplugged.org

DESCRIPTION: Life Unplugged Youth Curriculum is an interactive program designed for students 12-18 that teaches them values and gives them skills in budgeting, choosing a career and working through other important life choices. Over approximately one hour, the program takes students ten years into their future through fifteen different stations that explore adult life decisions. Life Unplugged encourages students to model responsible behavior, develop high expectations and understand consequences, taking away lessons that they can then “plug” into their future plans. The goal of the program is to use financial budgeting and tools as a mechanism to help students be prepared to make healthy life choices and balance choices responsibly.

OUTCOMES: The Life Unplugged program has demonstrated positive effects and shows evidence of reducing excessive drinking and riding with inebriated drivers.

OTHER BENEFITS: Programs that focus on developing peer resistance and other life skills are more effective than programs that only teach alcohol resistance.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
- E** **EMERGING:** Ongoing work, practice-based summaries, or evaluation works in progress
- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



DRUG OVERDOSE DEATH



ISSUE

Drug overdose deaths is an increasing issue in the U.S., reaching levels similar to the H.I.V. epidemic at its peak.⁽¹⁾

Preliminary data shows a dramatic increase in the number of unintentional drug poisoning (overdose) deaths in New York City, with 886 confirmed deaths in 2015 compared with 800 deaths in 2014

The largest increase in overdose deaths was among Bronx residents, which increased 39% from a rate of 15.5 per 100,000 in 2014 to 21.5 per 100,000 in 2015.⁽²⁾



CAUSES

- Accidental overuse
- Intentional misuse
- Stress and pressure
- Dysfunctional homes
- Association with delinquent peers

SOURCES

(1) Park, Haeyoun; Bloch, Matthew. How the Epidemic of Drug Overdose Death Ripple Across America. The New York Time. January 2016. Source: http://www.nytimes.com/interactive/2016/01/07/us/drug-overdose-deaths-in-the-us.html?_r=0

(2) New York City Department of Health and Mental Hygiene, 2016 Advisory #8. Increase in drug overdoses deaths and increased presence of fentanyl in New York City. <https://a816-health30ssl.nyc.gov/sites/nychan/Lists/AlertUpdateAdvisoryDocuments/Fentanyl-HAN-advisory.pdf>



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Mentoring programs on drug use P	Individual Level	How many programs were implemented? How many participants attended the program?	What Works for Health by Robert Wood Johnson Foundation Program
Big Brothers Big Sisters (BBBS) matches volunteer mentors with disadvantaged or at-risk youth mentees (CEBC). P	Individual Level	How many participants are in the program?	What Works for Health by Robert Wood Johnson Foundation Program
Drug courts are specialized courts that offer criminal offenders with drug dependency problems an alternative to adjudication or incarceration. P	Individual/Community Level	How many elected officials were contacted about the issue? Was the drug court created?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=drug+overdose&items_per_page=10&Go

CASE STUDY

LIFESKILLS TRAINING (LST)

WHO: National Health Promotion Associates, White Plains, New York

DEVELOPED BY: Dr. Gilbert J. Botvin

INTERVENTION TYPE: Individual Level

MORE INFORMATION AT:
<http://legacy.nreppadmin.net/ViewIntervention.aspx?id=109#divContacts>

<http://www.lifeskillstraining.com/>

DESCRIPTION: Through the identification of social and psychological factors that promote the initiation of substance abuse, this school-based program has been designed to prevent alcohol, tobacco, and marijuana use and violence. By nurturing personal and social skills that help youth understand pro drug influences, along with providing culturally sensitive and age-appropriate information that help participants get through important life transitions like adolescence, the program aims to build resilience, reducing anxiety and raising awareness about the immediate consequences of substance abuse. It involves facilitated discussions, structured small group activities, and role-playing scenarios that are used to encourage participation and promote the acquisition of skills. They are available for elementary, middle and high schools and have been extensively evaluated in more than 30 scientific studies involving more than 330 schools/sites and 26,000 students in suburban, urban, and rural settings. Since 1995, an estimated 50,000 teachers, 10,000 schools/sites, and 3 million students have participated in the program, with a duration of implementation of around 5 years.

OUTCOMES: Positive results have been observed when dealing with substance use (alcohol, tobacco, inhalants, marijuana, and polydrug). It has helped students challenge normative beliefs about substance use and develop substance use refusal skills

OTHER BENEFITS: It has also been effective in dealing with issues of violence and delinquency among students.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
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- E** **EMERGING:** Ongoing work, practice-based summaries, or evaluation works in progress
- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



INCREASE ACCESS TO QUALITY CARE



UNMET MENTAL HEALTH NEED



ISSUE

In any given year, an estimated 18.1% (43.6 million) of U.S. adults ages 18 years or older suffered from a mental illness and 4.2% (9.8 million) suffered from a seriously debilitating mental illness.⁽¹⁾ In New York City 14% of the adults aged 18 and over were told by a doctor, nurse or other health professional that they have depression.⁽²⁾ The office of the Mayor of New York City released “ThriveNYC: A Mental Health Roadmap for All”, which is a public initiative with the goal to not only reduce the toll of mental illness, but also to promote mental health and protect New Yorkers’ resiliency, self-esteem, family strength, and joy.

SOURCES

- (1) Mettey A, Garcia A, Isaac L, Linos N, Barbot O, Bassett MT. Take Care New York 2020: Every Neighborhood, Every New Yorker, Everyone’s Health Counts. New York City Department of Health and Mental Hygiene. October 2015.
- (2) US Burden of Disease Collaborators. The state of US health, 1990-2010: burden of diseases, injuries, and risk factors. JAMA, 310(6): 591-608, 2013.



CAUSES

- Lack of health insurance
- Lack of access to services
- Inequalities such as lack of mental health services
- Stigma around mental health
- Affordability of treatment regimes



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Introduce a Parish Nursing Program in the community (see case study on next page) P	Social/Community Level	How many parish nurses are trained and/or recruited? How many persons use their services?	The Guide to Community Preventive Services
Mental Health First Aid Program to teach people how to respond to individuals with mental health crisis E	Social / Community Level	How many people were trained in these programs?	New York State Department of Health Prevention Agenda 2013 -2021
Community fitness programs P	Social/Community Level	How many programs are introduced? How many participants in these programs?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

<http://www.thecommunityguide.org/mentalhealth/index.html>

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=mental+health&items_per_page=10&=Go

CASE STUDY

PARISH NURSE MINISTRIES OF NEW YORK (PNMNY)

WHO: Parish Nurse
Ministries Of New York,
Inc., Buffalo, New York

DEVELOPED BY:
International Parish Nurse
Resource Center

INTERVENTION TYPE:
Social/Community Level

MORE INFORMATION AT:
www.pnmny.org

DESCRIPTION: PNMNY follows the model of Faith Community Nursing by educating licensed, registered professional nurses to serve their community as counselors, educators, referrers and health advocates. They focus on promoting health and spirituality and preventing injury. They often do not provide hands-on care. PNMNY functions a network of nurses and actively works to expand their network across faiths by disseminating educational material to help other faith communities establish their own parish nurse ministry.

OUTCOMES: Improved health and healthy behaviors.

OTHER BENEFITS: Small interventions such as a one hour education session can improve healthy behavior. Evidence suggests that Parish Nurse programs can also be effective in primary prevention, cancer-related efforts, and cardiovascular health.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
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- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



UNMET MEDICAL NEEDS



ISSUE

Easy access to high-quality, culturally appropriate care is essential to improving health. Unmet medical need is where persons are unable to receive needed medical care. While recent changes in legislation have resulted in 8 million additional adults gaining health care coverage between 2013 and 2014 in the US, there are still 44 million adults that were uninsured for at least part of the year in 2014.⁽¹⁾ 10% of the adults aged 18 and over in New York City did not get needed medical care in the past 12 months when they needed it.⁽²⁾ 20% of the adults surveyed aged 18 and over in New York City responded not having a personal doctor or health care provider. ⁽²⁾



CAUSES

- Barriers to accessing health insurance such as unemployment, legal status
- Lack of eligibility information
- Cost of medical needs
- Lack of availability of primary care providers

SOURCES

(1) Cohen RA, Martinez ME. Health insurance coverage: Early release of estimates from the National Health Interview Survey, 2014. National Center for Health Statistics. June 2015. Available from: <http://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201506.pdf>
(2) New York City Department of Mental Health and Hygiene. Community Health Survey. 2014



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Introduce a text message-based health interventions program E	Individual Level	What are the number of programs? How many people can it reach?	What Works for Health by Robert Wood Johnson Foundation Program
Promote a local Community Health Worker Model (see case study on next page) P	Social/Community Level	How many new Community Health Workers have been trained? How many people does the CHW reach?	What Works for Health by Robert Wood Johnson Foundation Program
Expansion of Medical Home model P	Policy Level	How many programs are created? How many people use the program?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=medical+access&items_per_page=10&=Go

CASE STUDY

PROMOTORAS AND HEALTH ADVOCATES TO REDUCE UNINSURED IMMIGRANTS

WHO: Make The Road, New York, New York

SUPPORTED BY: New York State Health Foundation

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT: nyshealthfoundation.org/uploads/gor/promotoras-health-advocates-august-2009.pdf

DESCRIPTION: To help the community's hardest-to-serve populations gain access to health care and health insurance, Make the Road New York developed a training program to turn community members into "promotoras" and paid staff of community-based organizations into health advocates. By promoting health in their own communities through leadership, peer education and links to services and resources, Promotoras remove barriers to enrollment by integrating information about health insurance and resources into the community's culture, language and value system. Health advocates help immigrants navigate the health care system. The program also helps organizations expand their capacity by training Health Advocates in popular education techniques, participatory health literary practices, community mapping and need assessment, and implementing their own Promotora programs.

OUTCOMES: 114 community presentations where 2,700 low-income individuals and families received information about how to access and navigate health care and health insurance. 1,100 received direct assistance.

OTHER BENEFITS: Community building and leadership development, capacity building for local nonprofits.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
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- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



CONTROLLED HIGH BLOOD PRESSURE



ISSUE

Coronary heart disease and stroke account for the largest proportion of inequality in life expectancy between whites and blacks, despite the existence of low-cost, highly effective preventive treatment.⁽¹⁾

About 70 million American adults (29%) or 1 in 3 adults have high blood pressure.⁽²⁾

In addition to lifestyle modifications, people diagnosed with high blood pressure have to consistently use the prescribed medication for lowering their blood pressure.

SOURCES

(1) Frieden TR, Jaffe HW, Stephens JW, Thacker SB, Zaza S. CDC Health Disparities and Inequalities Report – United States, 2011. MMWR 2011;60(Suppl): 1-114.

(2) Nwankwo T, Yoon SS, Burt V, Gu Q. Hypertension among adults in the US: National Health and Nutrition Examination Survey, 2011-2012. NCHS Data Brief, No. 133. Hyattsville, MD: National Center for Health Statistics, Centers for Disease Control and Prevention, US Dept of Health and Human Services, 2013.



CAUSES

- Stress caused by poverty
- Lack of access to spaces that promote health
- Lack of time to exercise
- Lack of access and resources for healthy and nutritious foods
- Low sodium intake
- Smoking
- Lack of physical activity
- Alcohol consumption
- Genetics
- Lack of nutrition education
- Medication



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Prescription for physical activity (see case study on next page) P	Individual Level	How many people are reached? What are the blood pressure levels before and after program?	What Works for Health by Robert Wood Johnson Foundation Program
Chronic disease self-management program P	Individual Level	How many people are reached? What are the blood pressure levels before and after program?	What Works for Health by Robert Wood Johnson Foundation Program
Introduce education campaigns through faith based organizations E	Social/Community Level	How many people are reached? What are the blood pressure levels before and after program?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=hypertension&items_per_page=10&=Go

CASE STUDY

PRESCRIBE A BIKE

WHO: Boston Medical Center (BMC), Boston

SUPPORTED BY: City of Boston

INTERVENTION TYPE:
Individual Level +
Environmental Level

MORE INFORMATION AT:
<http://www.bmc.org/about/news/BMC-innovations4.htm>

<http://www.countyhealthrankings.org/policies/prescriptions-physical-activity>

DESCRIPTION: As part of continuing efforts to address health disparities in and out of the hospital setting, BMC has partnered with the City of Boston to allow doctors to “Prescribe a Bike” to low-income patients, offering them access to the Hubway bike-sharing program for only \$5 per year.

Prescribe a Bike is a novel way for doctors to take an active role in helping patients manage chronic conditions such as diabetes, high blood pressure, high cholesterol, and heart disease by offering supplementary services that have a positive impact on their health and quality of life. Hubway riders in the Prescribe a Bike program are allowed an unlimited number of trips of up to 60 minutes. The city also provides a free helmet and waives security deposits that can be a barrier for low-income riders. To qualify for the prescription, participants must live in Boston, be 16 years or older, and be enrolled in a form of public assistance or have a household income of no more than four times the poverty level. Like many of BMC’s programs focused on treating the whole person, the bike prescription becomes part of the patient’s electronic medical record so that doctors can track what patients are doing to improve their health.

OUTCOMES: Increased physical activity due to free access to bike infrastructure



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

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NEW HIV CASES



ISSUE

More than 50,000 people become infected with HIV every year in United States.⁽¹⁾ New York City leads the nation in the number of new HIV cases.⁽²⁾ Of the approximately 129,000 people that are diagnosed with HIV/AIDS in New York State, almost 80% live in New York City⁽³⁾

“Ending the Epidemic” (EtE) is a New York City Department of Health and Mental Hygiene strategy that aims to reduce the number of new HIV diagnoses in New York State from nearly 3000 in 2013 to fewer than 750 by the end of 2020. Since New York City has about 80% of all HIV cases in the state, our citywide goal is to reach 600 or fewer new diagnoses by the end of 2020.

SOURCES

(1) Hall HI, Song R, Rhodes P, et al. Estimation of HIV incidence in the United States. JAMA 2008;300(5):520-9.

(2) Centers for Disease Control and Prevention. Estimated HIV incidence in the United States, 2007–2010. HIV Surveillance Supplemental Report 2012;17(No. 4). Published December 2012.

(3) New York State Department of Health. New York State HIV/AIDS Surveillance Annual Report for Cases Diagnosed Through December 2010. Published August 2012.



CAUSES

- Lack of sex education
- Unprotected sex
- Multiple sex partners
- Drug uses



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Behavioral Interventions to prevent HIV P	Individual/Community Level	What is the number of programs? How many teens are reached?	The Guide to Community Preventive Services
Condom availability programs P	Social/Community Level	What is the number of programs?	What Works for Health by Robert Wood Johnson Foundation Program
Facilitate access to Pre-Exposure Prophylaxis (PrEP) P	Individual level	What is the number of programs?	New York State Department of Health Prevention Agenda 2013 -2021



RESOURCES

<http://www.thecommunityguide.org/hiv/adolescents.html>

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=HIV+prevention&items_per_page=10&=Go

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/stds/ebi/index.htm#g26

CASE STUDY

PROJECT BEAT

WHO: Broward County Public Schools, Broward County, Florida

DEVELOPED BY: Broward County Chapter of the American Red Cross and the Center for Disease Control

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT: www.cdc.gov/healthyyouth/stories/pdf/2007/success_hiv.pdf

DESCRIPTION: To enhance secondary school education in HIV/AIDS and to maximize funding, Project BEAT (Bridging Education and Attitudes in Teens) was created by blended existing HIV curriculum in Broward County Public Schools with Red Cross standards and objectives and added peer and parental education components. By training students and parents as teachers of supplemental HIV curriculum, and training teachers to facilitate peer education clubs, it greatly expanded the reach of programming and depth of knowledge transmitted.

OUTCOMES: At the end of the third year it reached nearly 54,000 students and 2,200 parents and community members, more than 150 students were certified as Red Cross HIV/AIDS instructors, and students' HIV/AIDS related decision making skills increased.

OTHER BENEFITS: It also provides a new model for collaboration between public and private entities and gives young people leadership skills and training.

CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

- P** **PROVEN:** Peer review via systematic or narrative review
- P** **PROMISING:** Written program evaluation without formal peer review
- E** **EMERGING:** Ongoing work, practice-based summaries, or evaluation works in progress
- I** **INNOVATIVE:** New and interesting idea without documented evidence of effectiveness



HIV VIRAL SUPPRESSION



ISSUE

The HIV care continuum is a model that outlines the steps or stages of HIV medical care that people living with HIV go through from initial diagnosis to achieving the goal of viral suppression which can be defined as a very low level of HIV in the body.⁽¹⁾ More than one million people in the United States are estimated to be living with HIV infection.⁽²⁾

SOURCES

- (1) <https://www.aids.gov/federal-resources/policies/care-continuum/>
- (2) Hall HI, Song R, Rhodes P, et al. Estimation of HIV incidence in the United States. JAMA 2008;300(5):520-9.



CAUSES

- Lack of access to medication and support programs
- Lack of health insurance
- Patient-related factors such drug intolerance
- Regimen discontinuation
- Cost and affordability



POTENTIAL INTERVENTION TYPES

EXAMPLE ¹	TYPE	HOW COULD SUCCESS BE MEASURED?	SOURCE
Ensure presumed HIV-positive individuals identified as out-of-care are located, interviewed, and linked to medical care and necessary supportive services P	Individual Level	How many HIV positive individuals identified as out of care are located? How many are linked to medical care and support services?	New York State Department of Health Prevention Agenda 2013 -2019
Provide HIV testing to implement the NYS testing law, which set the protocol for organizations providing Rapid HIV Testing services P	Social/Community Level	How many testing programs are there? How many people are tested?	New York State Department of Health Prevention Agenda 2013 -2019
Partner counseling and referral services P	Individual Level	How many counseling and referral programs were created? How many people were served?	What Works for Health by Robert Wood Johnson Foundation Program



RESOURCES

http://www.countyhealthrankings.org/policies?search_api_views_fulltext=HIV+testing&items_per_page=10&=Go

CASE STUDY

IRIS HOUSE

WHO: Iris House, New York, New York, Plainfield & Irvington, New Jersey

SUPPORTED BY: New York City Division of AIDS Services, New York City Public Health Solutions, and other government sources, foundations and private donations.

INTERVENTION TYPE: Social/Community Level

MORE INFORMATION AT: www.irishouse.org

DESCRIPTION: Iris House gives comprehensive support for women, families and under served populations affected by HIV/AIDS and other health issues. Their continuum of care shows concrete results and demonstrates the importance of implementing comprehensive support as well as treatment. They provide education services, prevention, a safe environment, and also help people deal with the day-to-day difficulties of living with HIV/AIDS, Hepatitis C and other viral illnesses. Their comprehensive support includes housing, free and confidential testing services and emotional wellness groups.

OUTCOMES: More than 5 in 6 have stable or improved health outcomes, over half of clients diagnosed with AIDS have dramatic health gains, and less than 1 in 10 HIV positive clients receive an AIDS diagnosis.

OTHER BENEFITS: The design of services promotes independent functioning and improves overall quality of life.



CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS

P

PROVEN: Peer review via systematic or narrative review

P

PROMISING: Written program evaluation without formal peer review

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EMERGING: Ongoing work, practice-based summaries, or evaluation works in progress

I

INNOVATIVE: New and interesting idea without documented evidence of effectiveness

ABOUT TCNY/ 2020

TCNY 2020 is the City's blueprint for giving everyone the chance to live a healthier life. Its goal is twofold – to improve every community's health, and to make greater strides in groups with the worst health outcomes, so that our city becomes a more equitable place for everyone. TCNY 2020 looks at traditional health factors as well as social factors, like how many people in a community graduated from high school or go to jail.

In order to reach the goals set forth in the TCNY 2020, DOHMH created a multi-phased community engagement process with the aim of mobilizing community members and partners to advocate for and/or implement interventions that will help the City achieve the health targets outlined in TCNY 2020. Phase 1 of the process consisted of a community engagement process through Community Consultations in dozens of neighborhoods across five boroughs. In Phase 2, DOHMH is supporting community organizations in eight underserved neighborhoods as they convene local stakeholders to plan for action around one health priority.

