

OneNYC 2050

BUILDING A STRONG AND FAIR CITY

HEALTHY LIVES

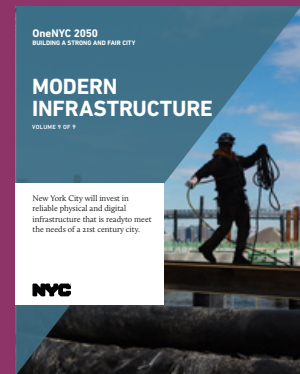
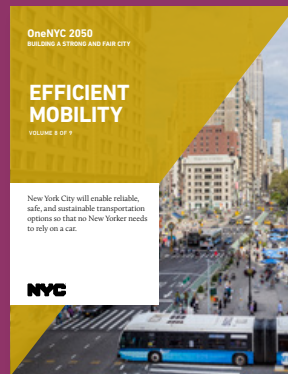
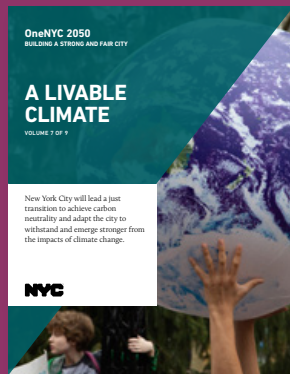
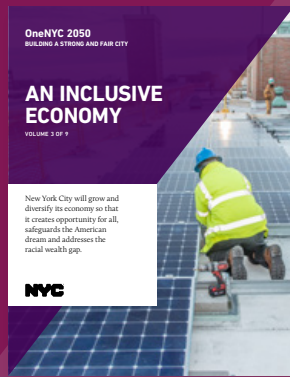
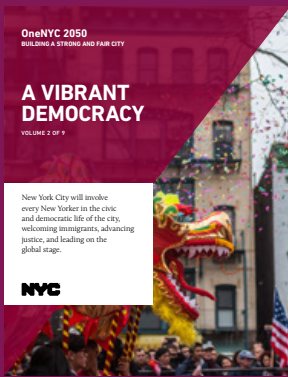
VOLUME 5 OF 9

New York City will reduce inequities in health outcomes by addressing their root causes in residents' daily lives, guaranteeing health care, and facilitating both healthy lifestyles and a healthy physical environment.

NYC



ONENYC 2050 IS A STRATEGY TO SECURE OUR CITY'S FUTURE AGAINST THE CHALLENGES OF TODAY AND TOMORROW. WITH BOLD ACTIONS TO CONFRONT OUR CLIMATE CRISIS, ACHIEVE EQUITY, AND STRENGTHEN OUR DEMOCRACY, WE ARE BUILDING A STRONG AND FAIR CITY. JOIN US.



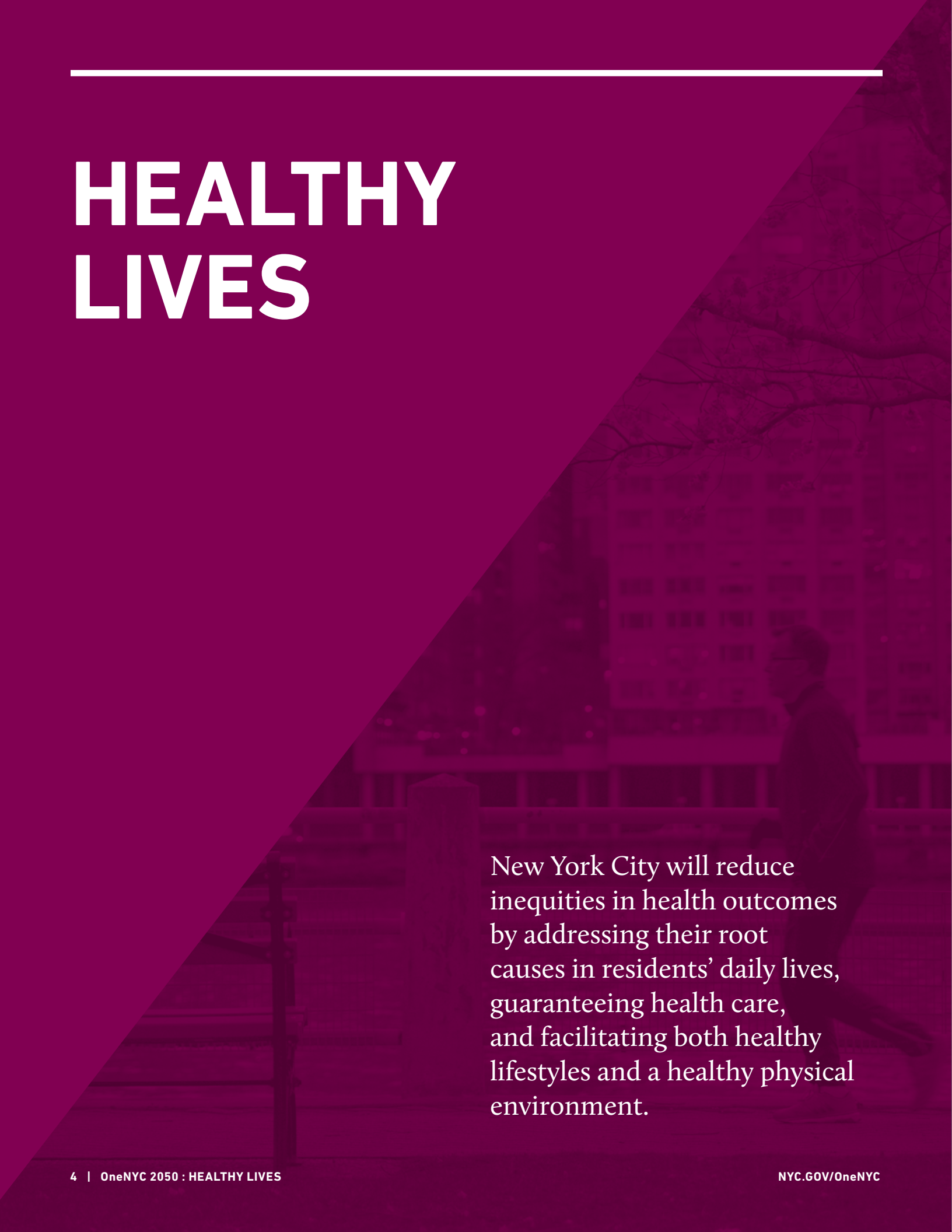
Learn more about how we are building a strong and fair city:
[NYC.GOV/OneNYC](https://nyc.gov/OneNYC)

Join the conversation on social media and tag us at **#OneNYC**

OneNYC 2050 CONSISTS OF 8 GOALS AND 30 INITIATIVES TO SECURE OUR CITY'S FUTURE.

A VIBRANT DEMOCRACY	1. Empower all New Yorkers to participate in our democracy
	2. Welcome new New Yorkers from around the world and involve them fully in civic life
	3. Promote justice and equal rights, and build trust between New Yorkers and government
	4. Promote democracy and civic innovation on the global stage
AN INCLUSIVE ECONOMY	5. Grow the economy with good-paying jobs and prepare New Yorkers to fill them
	6. Provide economic security for all through fair wages and expanded benefits
	7. Expand the voice, ownership, and decision-making power of workers and communities
	8. Strengthen the City's fiscal health to meet current and future needs
THRIVING NEIGHBORHOODS	9. Ensure all New Yorkers have access to safe, secure, and affordable housing
	10. Ensure all New Yorkers have access to neighborhood open spaces and cultural resources
	11. Advance shared responsibility for community safety and promote neighborhood policing
	12. Promote place-based community planning and strategies
HEALTHY LIVES	13. Guarantee high-quality, affordable, and accessible health care for all New Yorkers
	14. Advance equity by addressing the health and mental health needs of all communities
	15. Make healthy lifestyles easier in all neighborhoods
	16. Design a physical environment that creates the conditions for health and well-being
EQUITY AND EXCELLENCE IN EDUCATION	17. Make New York City a leading national model for early childhood education
	18. Advance equity in K-12 opportunity and achievement
	19. Increase integration, diversity, and inclusion in New York City schools
A LIVABLE CLIMATE	20. Achieve carbon neutrality and 100 percent clean electricity
	21. Strengthen communities, buildings, infrastructure, and the waterfront to be more resilient
	22. Create economic opportunities for all New Yorkers through climate action
EFFICIENT MOBILITY	23. Fight for climate accountability and justice
	24. Modernize New York City's mass transit networks
	25. Ensure New York City's streets are safe and accessible
MODERN INFRASTRUCTURE	26. Reduce congestion and emissions
	27. Strengthen connections to the region and the world
	28. Make forward-thinking investments in core physical infrastructure and hazard mitigation
	29. Improve digital infrastructure to meet the needs of the 21st century
	30. Implement best practices for asset maintenance and capital project delivery

HEALTHY LIVES



New York City will reduce inequities in health outcomes by addressing their root causes in residents' daily lives, guaranteeing health care, and facilitating both healthy lifestyles and a healthy physical environment.

IN MANY WAYS, NEW YORK CITY HAS NEVER BEEN HEALTHIER.

New Yorkers have a longer life expectancy than residents of other big American cities and record low rates of infant mortality. But a closer look reveals large gaps in the health outcomes of different groups, especially across racial and ethnic groups.

That’s why we worry about people without health insurance foregoing their family’s health care or building up huge medical bills they cannot pay. Women of color often do not receive the best prenatal care simply because they live in high-poverty areas with too few specialized health clinics, in addition to a range of other economic and social factors that may prevent access. For a teenager with mental health needs, or a loved one with substance misuse needs, help is not always available — or it comes too late.

OneNYC 2050 takes a holistic approach, focusing on health care as well as building healthy communities with recreational opportunities and strong social connections, ensuring economic security,



and advancing environmental justice. Our goal is to achieve health equity among all New Yorkers, regardless of race, ethnicity, zip code, age, gender, or socioeconomic status. We will formulate policies based on the belief that good health is part of a fair and equitable society, and address the root causes of health inequities, so all New Yorkers have an opportunity to live healthy lives.

INDICATORS

NEW YORK CITY WILL MEASURE PROGRESS BY TRACKING THE FOLLOWING INDICATORS:

INDICATOR	LATEST DATA	TARGET
NEW YORKERS WITH HEALTH INSURANCE	88.2% (2017)	INCREASE
PREMATURE MORTALITY RATE	189.4 DEATHS PER 100,000 (2016)	REDUCE BY 25% BY 2040
CITYWIDE OPIOID OVERDOSE DEATHS	17.4 PER 100,000 (2017)	REDUCE BY 60% BY 2030

CONTEXT

EVERY NEW YORKER DESERVES TO BE HEALTHIER, BUT NOT EVERY RESIDENT HAS THAT OPPORTUNITY BECAUSE WHERE THEY LIVE WITHIN NEW YORK CITY HAS A STRONG INFLUENCE ON HEALTH. Health outcomes can differ

significantly between geographically close neighborhoods, according to the New York City Community Health Profiles. In addition, not all neighborhoods have equal access to clean air, affordable and nutritious food, or safe and well-maintained housing and public spaces. A neighborhood's built environment can impact how much people exercise, or even the quality of their relationships with neighbors.

Inequities in neighborhood conditions have been shaped over decades by historical and ongoing racism. Discriminatory policies such as redlining, as well as a lack of investment in neighborhood sustainability, have historically disadvantaged many communities, particularly low-income communities of color, leaving these communities without adequate local services, housing, parks, or playgrounds, which contribute to health.



The Sustainable Development Goals (SDGs) are the global blueprint adopted by all countries at the United Nations to achieve a better and more sustainable future for all, encompassing strategies to end poverty, improve health and education, reduce inequality, spur economic growth, and tackle climate change. By demonstrating directly how OneNYC 2050 aligns with the SDGs, we strengthen our efforts to build a strong and fair city. Our goal to achieve Healthy Lives supports the following SDGs:



Learn more about the SDGs online at:
<https://sustainabledevelopment.un.org/sdgs>

Studies show income inequality and high rates of poverty are connected to poorer health outcomes such as reduced life expectancy, and increased infant mortality, obesity, and mental illness. Life expectancy in East Harlem, where residents are predominantly black and Hispanic, and poverty is more prevalent, is 8.6 years shorter than on the Upper East Side, a predominantly white community with lower poverty just a few blocks south. Black women are eight times more likely to die from pregnancy-related causes than white women, and babies born to black mothers are three times as likely to die in their first year of life as babies born to white mothers.

By adopting a holistic approach with OneNYC, we will address a range of factors that impact our health. These include gun violence and traffic fatalities, intensive heat waves due to climate change, and air pollution that exacerbates heart and lung problems, particularly for children with asthma.

PROGRESS

WE CANNOT ACHIEVE HEALTH EQUITY WITHOUT GUARANTEEING THE RIGHT TO QUALITY HEALTH CARE, AND ENROLLING AS MANY NEW YORKERS AS POSSIBLE IN HEALTH INSURANCE. New York City has steadily reduced the number of

uninsured residents since the Affordable Care Act was launched in 2013 — with nearly 70,000 enrolled in the past year alone — but there are still an estimated 600,000 New Yorkers without health insurance, and roughly 300,000 of them are considered “uninsurable.” We are working to ensure all New Yorkers can access high quality primary care, regardless of their immigration status, through NYC Care.

The City has also launched initiatives to protect residents from the harmful effects of tobacco use, redoubled efforts to end the AIDS epidemic, and created new air quality standards. We have started programs to expand mental health services and combat the opioid epidemic. Child exposure to lead has dropped by 90 percent since 2005.

In addition, the City has begun confronting pervasive racial and ethnic inequities in maternal morbidity and mortality, and infant mortality, launching a comprehensive strategy to improve health outcomes for mothers and babies, especially among women of color. Much of the focus has been on community health, with policies and programs informed by community members. Our Neighborhood Health Action Centers, for example, include Women's Health Suites, and also provide services ranging from primary care and mental health care to wellness classes and are connected to neighborhood-based social services.

“We need mental health strategies for early diagnosis and prompt treatment.”

– Resident of Bulls Head, Staten Island

Since 2015, we have seen improvements on many key health indicators, including the number of homes with no maintenance deficits, such as water leaks and pests, as well as reductions in children’s visits to an emergency department for asthma. Other improvements include reductions in the smoking rate and teen pregnancy, and increases in the number of high school students getting adequate physical activity.

WHAT WE WILL DO

ONENYC 2050 WILL ENSURE ALL NEW YORKERS HAVE THE OPPORTUNITY TO LIVE HEALTHY LIVES BY TAKING AN INTERDISCIPLINARY APPROACH TO ADVANCE HEALTH EQUITY AND CREATE A MORE EQUITABLE SOCIETY. Building on our commitment to guaranteed care, New York City will ensure access to high quality primary care. We will launch and expand programs to improve the health of marginalized communities, and address urgent issues such as the opioid overdose epidemic, mental health, and child exposure to lead. Embracing an interagency approach, we will also look at ways to improve air and water quality, mitigate heat exposure, and address the social and economic factors that drive poor health outcomes.



WHAT WE HEARD FROM NEW YORKERS

OF THE MORE THAN 14,000 RESPONDENTS TO OUR CITYWIDE SURVEY, 29 PERCENT SELECTED HEALTH CARE AS ONE OF THE CITY’S GREATEST CHALLENGES.

The key themes expressed include a call for affordable and universal health care, better access to care at the local neighborhood level, and targeted support for marginalized groups, including the need for better systems to help those dealing with mental health issues. As one New Yorker said, “Our health care system is expensive, confusing, and out of reach for too many,” while others emphatically called on the state to take bold action to address health care access and affordability.” A second New Yorker shared, “Health care outreach is needed in underserved communities — access for primary care services should be increased via transportation assistance and community advocates.”

HEALTH EQUITY AND THE SOCIAL DETERMINANTS OF HEALTH

EVERY NEW YORKER DESERVES TO BE HEALTHY. However, long-term disinvestment from low-income neighborhoods and communities of color, have created inequities in health outcomes. As a result, geographically close neighborhoods can present large gaps in how long people live and how healthy they are. The Community Health Profiles, developed by the Department of Health and Mental Hygiene, have put a spotlight on these gaps. For example, East Harlem is mostly black and Hispanic, and nearly a quarter of its residents live in poverty. The Upper East Side, a neighborhood just to the south is mostly white and wealthy. Even though these neighborhoods are close in proximity, people in East Harlem can expect to live eight fewer years than their neighbors on the Upper East Side. Addressing these kinds of inequities in life-expectancy requires focusing on the social determinants of health — the conditions in which people are born, grow, live, work, and age.

Education

There is extensive evidence that people with more education have better health outcomes, and live longer. In OneNYC 2050, we detail strategies to build a diverse and fair school system that serves as a leading national model for delivering a high-quality education to children of all backgrounds (see more in *Equity and Excellence in Education*).

Food

A core part of physical and mental health is providing access to nutritious and accessible food. Yet, not all neighborhoods in our city have access to healthy and affordable food, and too many New Yorkers face food insecurity. In OneNYC 2050, we are putting in place policies that expand healthy food choices and make healthy lifestyles easier to achieve in all neighborhoods.

Civic Engagement

When people have a voice in local decisions, resources are more likely to be distributed fairly, and in a manner to address neighborhood concerns. A healthy democracy supports a healthy neighborhood. In OneNYC 2050, we outline strategies to expand voting rights, ensure residents are better informed about democracy and create opportunities for residents to directly impact their communities (see more in *A Vibrant Democracy*).

Income Inequality

Studies show a linear relationship between income inequality and poorer health outcomes such as life expectancy, infant mortality, obesity, mental illness, among others. In OneNYC 2050, we are working to grow and diversify our economy to create opportunity for all, safeguarding the American dream and addressing the racial wealth gap (see more in *Inclusive Economy*).

Environment

Environmental hazards translate into poor health, loss of wages, and diminished quality of life, especially for residents of low-income communities that have historically been burdened with a disproportionate share of environmental risk. OneNYC 2050 will guide the design of a physical environment that creates the conditions for health and well-being (see more in *Thriving Neighborhoods*).

Climate Change

The impacts of climate change will severely impact New Yorkers. In particular, rising temperatures will starkly impact low-income neighborhoods with little green canopy but a lot of blacktop, creating heat-vulnerable communities. OneNYC 2050 supports resilience and health preparedness in the city's most heat-vulnerable communities (see more in *A Livable Climate*).

Housing

Housing is a key determinant of health outcomes. Unaffordable and unsafe housing can acutely impact the mental and physical health of New Yorkers. The goal of OneNYC 2050 is to ensure all New Yorkers have access to safe, secure and affordable housing (see more in *Thriving Neighborhoods*).

Healthy Lives

Health Care Services

Access to health care is critically important, and is a major part of the City's approach to advancing health equity. In OneNYC 2050, we are taking steps to guarantee high-quality, affordable, and accessible care for all New Yorkers.

Transportation

The safety and accessibility of our streets, the reliability of our public transportation systems, and level of greenhouse gas (GHG) emissions and noxious pollutants in our air all impact the health of residents. OneNYC 2050 proposes the investments necessary to enable reliable, safe and sustainable transportation options so that no New Yorker needs to rely on a car (see more in *Efficient Mobility*).

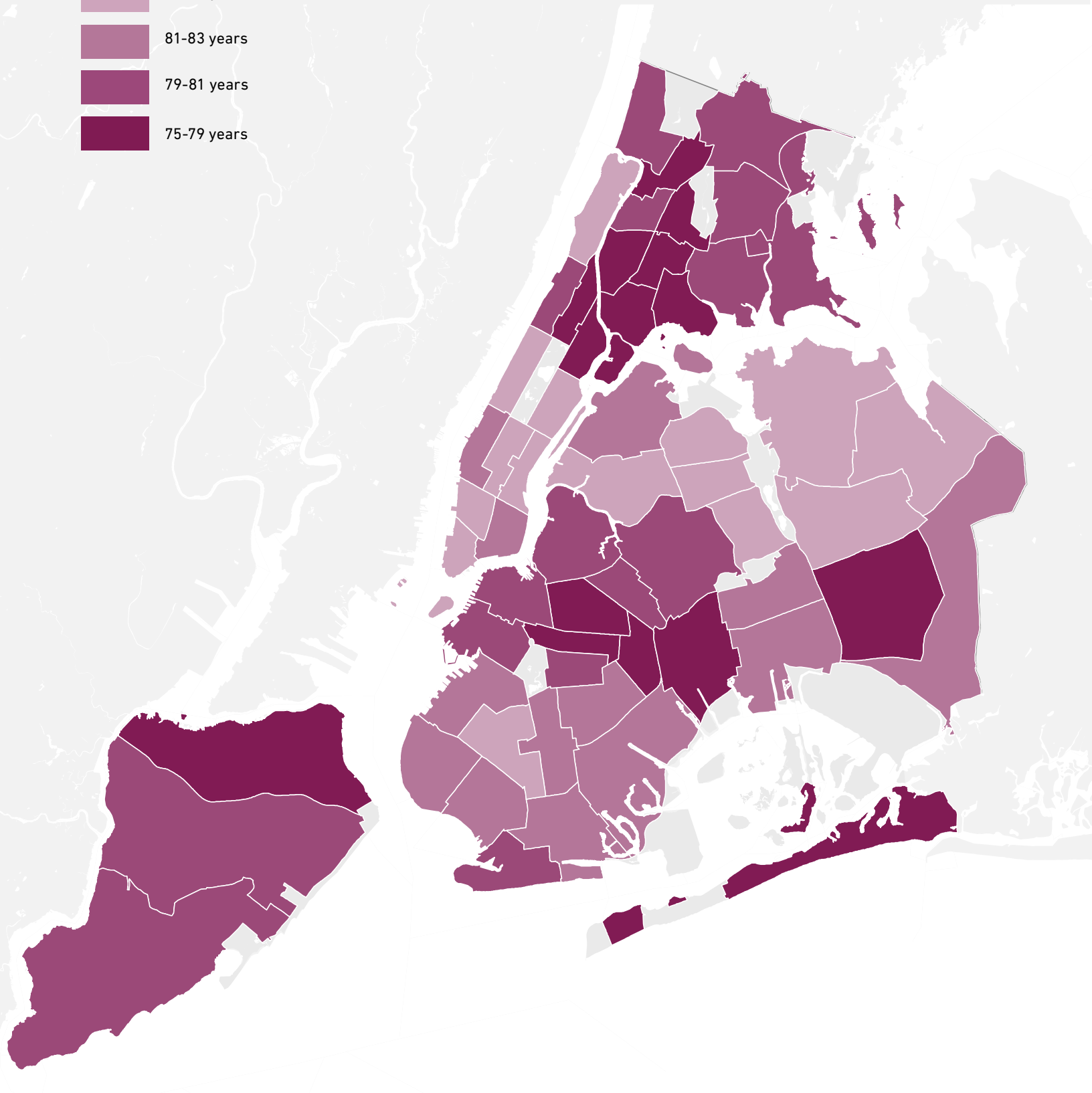
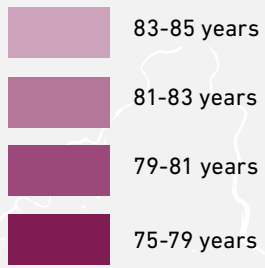
Neighborhoods

Where we live matters for our health, including the food we eat, how much exercise we get, and how much stress we experience. But not all neighborhoods support New Yorkers in living long and healthy lives. That's why we must make our neighborhoods safer, greener, and more affordable. In OneNYC 2050, we are fostering communities that have safe and affordable housing and are well-served by parks, cultural resources and shared spaces (see more in *Thriving Neighborhoods*).

Where we live impacts how long we live.

Source: DOHMH

LIFE EXPECTANCY BY COMMUNITY DISTRICT



INITIATIVE 13 OF 30

GUARANTEE HIGH-QUALITY, AFFORDABLE, AND ACCESSIBLE HEALTH CARE FOR ALL NEW YORKERS

ACCESS TO HEALTH CARE IS A CRITICAL COMPONENT OF NEW YORK CITY'S APPROACH TO ADVANCING HEALTH EQUITY.

Currently an estimated 600,000 New Yorkers are without health insurance, despite half of that number being eligible for coverage.

GUARANTEE HEALTH CARE FOR ALL NEW YORKERS

In January 2019, the City announced guaranteed care for all New Yorkers, a landmark initiative to 1) enroll New Yorkers in health insurance, including New York City's public health insurance option, MetroPlus; and 2) guarantee anyone ineligible for insurance — including undocumented New Yorkers — direct access to Health + Hospitals (H+H) primary and specialty care physicians, pharmacies, and mental health and substance abuse services through a new program called NYC Care.

• BOOST ENROLLMENT

The City will accelerate efforts to enroll eligible New Yorkers in insurance, particularly MetroPlus. MetroPlus provides free or affordable health insurance that connects insurance-eligible New Yorkers to a network of providers, and serves as an affordable, quality option for all New Yorkers, including those on Medicaid and Medicare, and those purchasing insurance from New York State of Health (New York's health insurance marketplace). The City will connect more independent workers, City vendors, and City workers to MetroPlus, while also improving the quality of the MetroPlus customer experience through improved access to clinical care, mental health services, and wellness rewards for healthy behavior.

• LAUNCH NYC CARE TO CONNECT NEW YORKERS TO HEALTH SERVICES

NYC Care, launching in summer 2019, will connect thousands of New Yorkers who are ineligible for health insurance — including undocumented New Yorkers and those who cannot afford insurance — to reliable care. Once the new program is fully implemented in 2021, those enrolled will be able to access the clinical services, coordinated care, and the customer service that people with health insurance are accustomed to experiencing. NYC Care is open to anyone who does not have an affordable insurance option, and will be priced on a sliding scale to ensure affordability. NYC Care will provide a primary care doctor and access to specialty care, prescription drugs, mental health services, hospitalization, and more.

“Health care is a right, not a privilege reserved for those who can afford it.” - Mayor de Blasio



A PHYSICIAN CARES FOR A PATIENT AT GOTHAM HEALTH VANDERBILT, ONE OF HEALTH + HOSPITALS' MORE THAN 70 COMMUNITY- AND SCHOOL-BASED HEALTH CENTERS.

Source: H+H

IMPROVE AND MODERNIZE PRIMARY AND SPECIALTY HEALTH CARE DELIVERY

New York City is revitalizing how H+H, the nation's largest public hospital system, can improve the quality of care for patients and streamline communication among providers. As we focus on strengthening place-based outpatient health care, we will leverage new technology to expand access to specialty doctors, and modernize our health records and billing infrastructure.

- **EXPAND PRIMARY CARE TO BETTER ADDRESS COMMUNITY HEALTH NEEDS**

H+H is transforming the health system's vast ambulatory care operations and improving access to primary care. In 2018, the system released a five-point strategy that will be adopted across more than 70 place-based health centers, including 11 hospital-based outpatient operations, which together provide more than five million outpatient visits to children and adults every year. We will open three new full-service ambulatory care sites by the end of 2021.

- **IMPROVE ACCESS TO SPECIALTY CARE THROUGH ECONSULT**

H+H will ensure patients can get the right care at the right time in the right place. To do so, the City is expanding its eConsult system to all H+H facilities by the end of 2020. The use of eConsult expands access to ambulatory specialty care by enhancing communication among primary care providers and specialists. Today, eConsult is live in more than 100 clinics across 11 facilities, including adult medical and surgical subspecialties, behavioral health, and pediatric subspecialties.

- **IMPLEMENT AN ELECTRONIC HEALTH RECORD AND FINANCIAL SYSTEM ACROSS ALL NYC H+H FACILITIES**

To support expanded access to care and services, H+H is moving to a modern IT and financial infrastructure that features a single electronic health record and billing system. This will help to more accurately document health care delivery and correctly bill insurers. Most importantly, it will improve patient care by strengthening communication across more than 70 patient care sites. This timely access to patients' complete medical records will enhance our clinicians' ability to make better care decisions, and will allow them to spend less time managing paper records and more time caring for patients.

EMERGENCY DEPARTMENT STAFF AT CONEY ISLAND HOSPITAL.

Source: H+H



HOW eCONSULT WORKS FOR PATIENTS



*Over 28,000 eConsults
completed since 2016*

eConsult can allow primary care providers to give their patients access to the advice of specialty care providers before the patient visits a specialty clinic. For example, one Bronx resident – we'll call him Jose – saw his primary care doctor and complained of ringing in his ears. The primary care doctor believed Jose was experiencing tinnitus, a condition that would normally be treated by a specialty care provider. However, before the primary care doctor sent Jose to an Ear, Nose and Throat (ENT) specialist, she sent an eConsult to a specialist in the ENT department. The specialist reviewed the chart and recommended he see an

audiologist before coming to the ENT department. The specialist also gave Jose's primary care doctor instructions for the tests he needed, and an appointment for a visit to the audiologist was scheduled. When Jose finally went to the ENT, the diagnosis was already determined, and Jose and his healthcare provider were able to immediately focus on a plan of action for Jose's care. As a result of eConsult, Jose was able to see the appropriate specialists in the right order all while saving time by avoiding unnecessary specialist appointments.

INITIATIVE 14 OF 30

ADVANCE EQUITY BY ADDRESSING THE HEALTH AND MENTAL HEALTH NEEDS OF ALL COMMUNITIES

PEOPLE AND COMMUNITIES HAVE DIFFERENT HEALTH NEEDS.

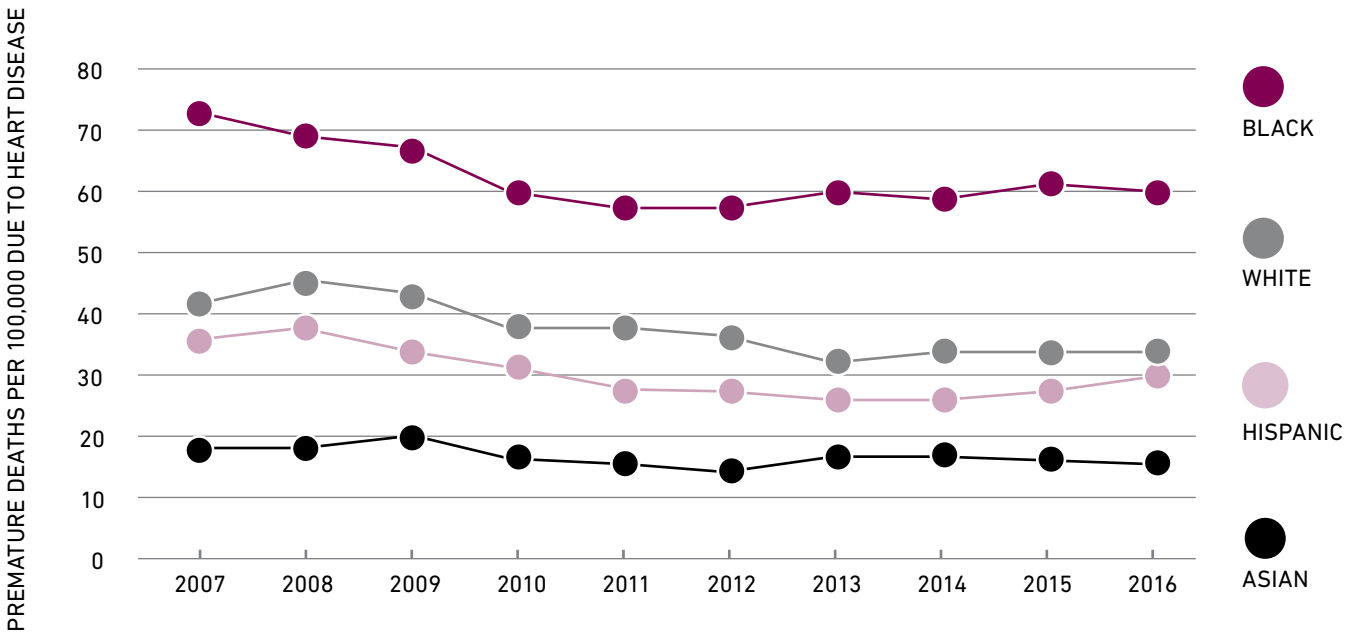
We will ensure all New Yorkers, regardless of race and ethnicity, gender identity, or sexuality, are well served by our public health care system. We will continue to address racial and ethnic inequities in premature mortality and will confront the stark inequities between white women and women of color in maternal morbidity and mortality, and in infant mortality, paving the way for greater equity around childbirth. We will continue to close gaps in our mental health system, connecting people with support and treatment options and reverse the opioid overdose epidemic in our communities.

REDUCE THE LEADING CAUSES OF PREMATURE MORTALITY

The leading causes of premature mortality citywide are cancer, heart disease, accidental drug overdose, and diabetes. The City is continuing to advance programs to prevent and control high blood pressure and reduce related health inequities, as well as reduce adult and adolescent obesity—a risk factor for diabetes. Ensuring safety is also an important way that the City works to reduce inequities in premature mortality—for example, reducing traffic fatalities through Vision Zero and reducing gun violence using evidence-based, community-driven strategies.

Heart disease especially impacts black New Yorkers.

Source: DOHMH



Communities of color are disproportionately impacted by inequities in health outcomes.

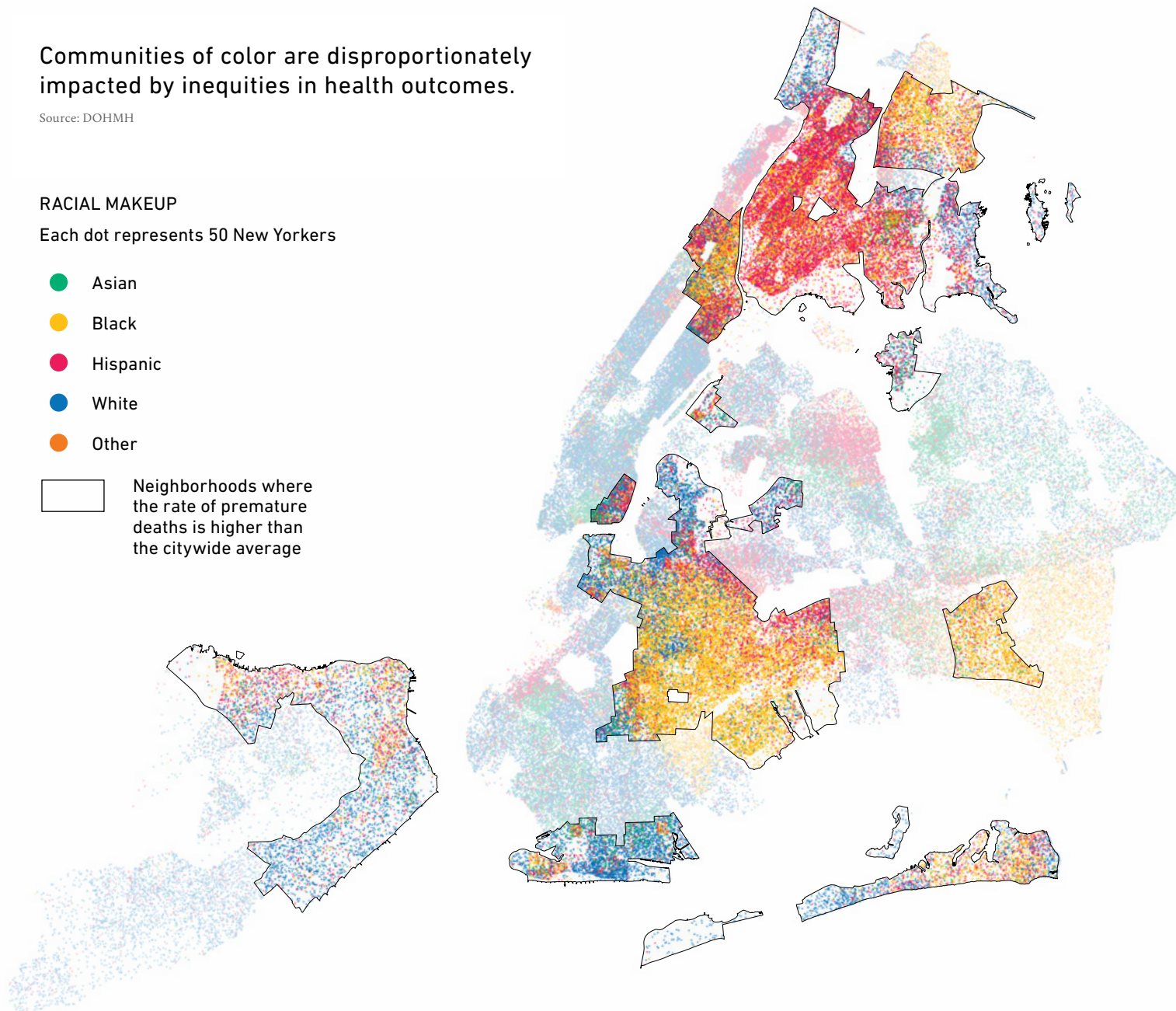
Source: DOHMH

RACIAL MAKEUP

Each dot represents 50 New Yorkers

- Asian
- Black
- Hispanic
- White
- Other

Neighborhoods where the rate of premature deaths is higher than the citywide average



- **IMPROVE HEART HEALTH ESPECIALLY AMONG BLACK NEW YORKERS**

While heart disease and stroke affect New Yorkers of all races and ethnicities across the socioeconomic spectrum, black New Yorkers and those living in low-income neighborhoods are disproportionately affected. The premature mortality rate due to heart disease among those living in very high-poverty neighborhoods was 2.4 times higher than among those living in low-poverty neighborhoods. Further, black New Yorkers have a premature mortality rate for heart disease that is 1.8 times higher than for white New Yorkers and 3.3 times higher for stroke. We will continue to make targeted investments to address these disparities.

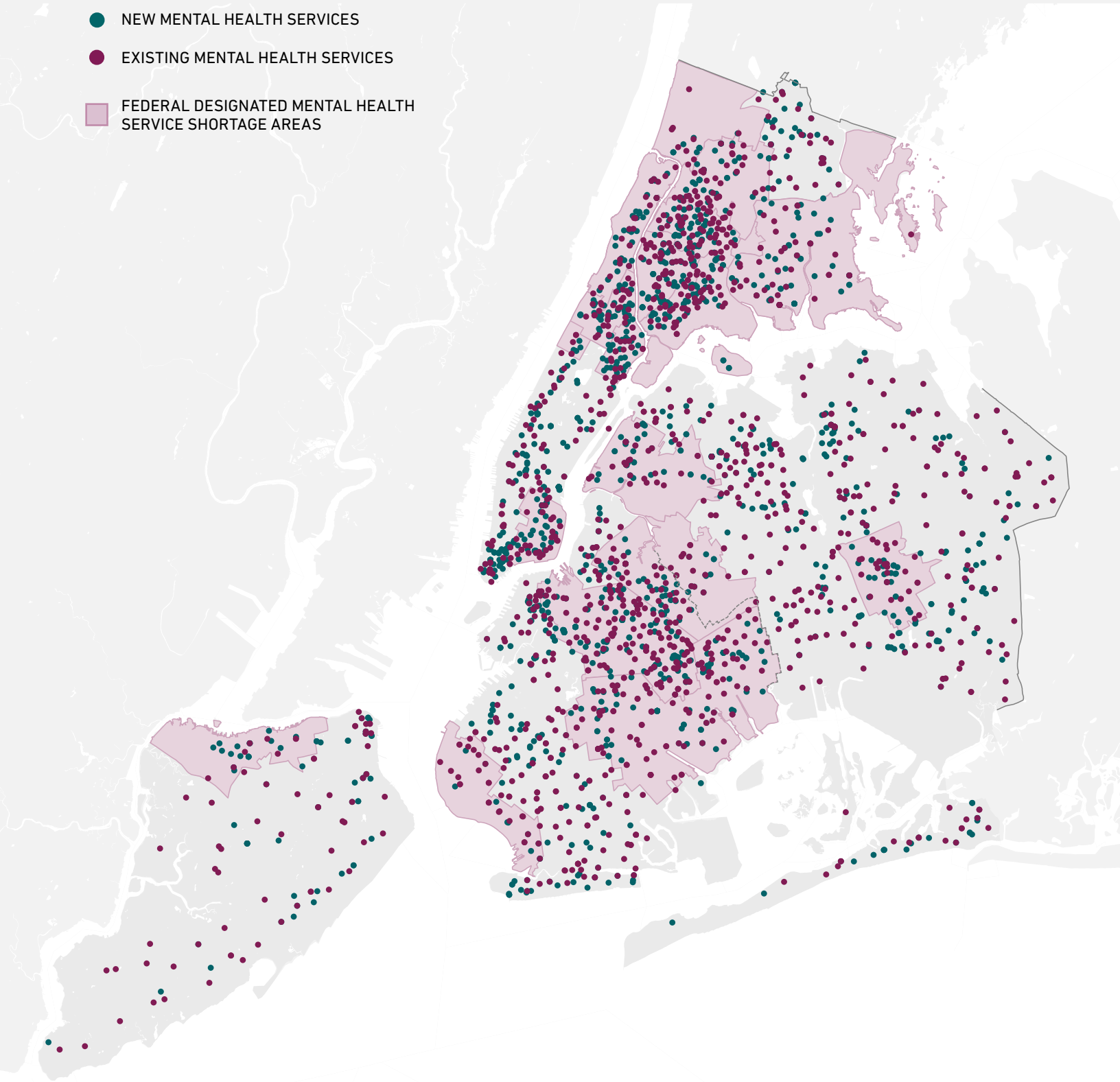
- **ENCOURAGE HEART-HEALTHY CHOICES**

Sugary drinks are a risk factor for heart disease alone, but also through the development of obesity and type 2 diabetes. The City has supported legislation to replace sugary drinks as the default beverage option for children's meals offered at certain food service establishments. In addition, tobacco is the leading contributor to the development of, and complications from, heart disease. The City will expand its ban on the sale of flavored tobacco products to include menthol cigarettes, e-cigarettes, and other tobacco products, in addition to all other flavored e-cigarettes.

75 percent of ThriveNYC-funded clinicians are working in mental health care shortage areas.

Source: ThriveNYC

- NEW MENTAL HEALTH SERVICES
- EXISTING MENTAL HEALTH SERVICES
- FEDERAL DESIGNATED MENTAL HEALTH SERVICE SHORTAGE AREAS



ENSURE EVERY NEW YORKER HAS ACCESS TO MENTAL HEALTH SUPPORT

With at least one in five adult New Yorkers experiencing mental health disorders, ThriveNYC is working to ensure every New Yorker who needs mental health support has access to it, where and when they need it. Launched in 2015, ThriveNYC pilots innovative strategies to address needs that have gone unmet by traditional services. This includes implementing new services for historically underserved populations, expanding the range of mental health care and support available to all New Yorkers, and improving mental health equity across the city. The City will deepen this work in the years ahead.

• EXPAND SERVICES FOR PARTICULARLY VULNERABLE POPULATIONS

Before ThriveNYC, the Department of Youth and Community Development's (DYCD) youth shelters and drop-in centers, which predominantly serve LGBTQ young people, had few on-site mental health resources. Now, clinicians are on site in all 33 DYCD-funded runaway and homeless youth shelters. In the last three years, these clinicians have helped more than 10,000 young people. Additionally, through ThriveNYC, 147 shelters — those for youth, single adults, and families — have new on-site clinical services they did not have before.

• REACH PEOPLE IN NEW AND INNOVATIVE WAYS

Before ThriveNYC, health care professionals were visiting low-income, new parents in their homes to offer support during what is a stressful time under any circumstances. Now, through ThriveNYC, health care workers are also visiting every new parent living in a shelter. This program has served more than 3,800 families in shelters since 2015.

• INTEGRATE MENTAL HEALTH SUPPORT AND SOCIAL SERVICES THROUGH CONNECTIONS TO CARE (C2C)

By partnering with community-based organizations to reach people who are unlikely to seek care on their own, we are building the capacity of trusted neighborhood organizations — such as community day cares, job training programs, and immigrant service providers — who are often closest to those in need. C2C enables these organizations to act as frontline responders, screening their clients for mental health needs, offering direct support, and linking them to local health providers for further care.

• ENHANCE CLINICAL CARE IN SENIOR CENTERS

Through the Department for the Aging (DFTA), the City has added on-site mental health services to 25 senior centers within the agency's network. In the coming year, more licensed clinicians will be placed in centers across the city to provide older adults with access to mental health services and help them overcome the stigma attached to mental health. Mental health professionals will treat the range of mental health conditions — with services provided by bilingual and culturally-competent social workers.

• INCREASE ACCESS TO CARE FOR YOUNG NEW YORKERS

Now, every student in every public school in New York City has access to clinical mental health support. Before ThriveNYC, a fraction of the City's public schools had a clinician onsite. Now, over 1,000 public schools have access to a clinician, onsite or offsite. And through ThriveNYC, 380 pre-K sites across the city also have access to clinical mental health support.

• PROVIDE NEW SERVICES FOR PEOPLE WITH SERIOUS MENTAL HEALTH NEEDS

New Yorkers with serious mental illness have complex needs and hospitalization isn't always the answer. To complement the many services that the City already provides for these individuals, ThriveNYC created and expanded mobile treatment teams to serve people with serious needs. These teams work to intervene before crisis and stabilize people afterwards, helping people stay in their communities. They often connect clients to housing and treatment, re-connect clients to family members and offer help with medication if they have stopped taking it. There are currently over 50 mobile teams in the city with the capacity to serve more than 3,500 people at any given time.

PARTICIPANTS AT A MENTAL HEALTH FIRST AID TRAINING IN MANHATTAN.

Source: ThriveNYC



THRIVENYC: ACCESS TO MENTAL HEALTH SUPPORT FOR ALL NEW YORKERS



THRIVENYC IS AN UNPRECEDENTED COMMITMENT BY NEW YORK CITY TO ENSURE THAT EVERY NEW YORKER WHO NEEDS MENTAL HEALTH SUPPORT HAS ACCESS TO IT, WHERE AND WHEN THEY NEED IT. Launched in 2015, it is a bold response to a challenging reality: one in five adult New Yorkers faces a mental health disorder each year. Eight percent of high school students report attempting suicide, and one in four report feeling persistently sad or hopeless. At any given time, half a million adult New Yorkers are estimated to have depression, yet less than 40 percent report receiving care. If we can build more resilience, mitigate trauma, and address mental health needs, we will have a stronger, safer, and healthier city.

THRIVENYC WORKS IN THREE KEY WAYS:

- 1. THRIVE INNOVATES**, piloting evidence-driven strategies to address needs that have gone unmet by traditional mental health services.
- 2. THRIVE ENHANCES EQUITY** with a focus in underserved neighborhoods by increasing access to mental health support outside of traditional clinical settings in locations such as shelters, senior centers, schools, and community-based organizations.
- 3. THRIVE PROMOTES INCLUSION** by reducing cultural barriers to care and partnering with communities to ensure that particularly vulnerable populations know about and have access to services.

All ThriveNYC programs are informed by six principles for achieving sustainable innovation: change the culture; act early; close treatment gaps; partner with communities; use data better; and strengthen government's ability to lead.



PARTICIPANTS AT A MENTAL HEALTH FIRST AID TRAINING IN MANHATTAN.

Source: ThriveNYC



CHILDREN PARTICIPATE IN TRAUMA SMART EVENT.

Source: ThriveNYC

THRIVENYC IN ACTION

The Mayor's Office of ThriveNYC, along with partner agencies and mayoral offices, leverages the full expertise and reach of the City government to improve the lives of New Yorkers in need. ThriveNYC:

- **CHANGES THE CULTURE BY REDUCING CULTURAL BARRIERS TO CARE.**

More than 100,000 New Yorkers have been trained in Mental Health First Aid— 48,000 are front-line City workers such as shelter staff, police officers, or parks employees, while 52,000 are residents who have made the commitment to take this training on their own time. These New Yorkers are now more comfortable talking about mental health, recognizing signs and symptoms of mental illness, and helping connect people in need to relevant services.

- **BROADENS THE RANGE OF MENTAL HEALTH SUPPORT AVAILABLE TO NEW YORKERS, BECAUSE WE KNOW HELP CAN COME IN MANY FORMS.**

NYCWell is now the most comprehensive mental health helpline in the country, available to anyone with any level of mental health need. NYCWell has answered more than 560,000 calls, texts, and chats since it launched in fall 2016. Thrive is also meeting people where they live, work and learn by embedding clinicians in community-based organizations across the city.

- **EXPANDS ACCESS TO MENTAL HEALTH SERVICES TO NEW YORKERS WHO ARE PARTICULARLY VULNERABLE TO MENTAL ILLNESS — AND HAVE BEEN HISTORICALLY UNDERSERVED.**

As one example, the Crime Victim Assistance Program is now available in all 77 police precincts and nine police service areas in the city, and has helped more than 110,000 victims navigate the emotional, physical and financial aftermath of crime.

- **DEEPENS COMMUNITY-BASED EARLY INTERVENTION AND ONGOING TREATMENT OPTIONS AVAILABLE TO THOSE WITH SERIOUS MENTAL HEALTH NEEDS.**

As an example of the more than 50 mobile teams the City has in place to serve people with serious needs in the community, Co-Response Teams, staffed by one clinician and two police officers, have served more than 900 people. Ninety-five percent of their contacts with clients have been successful, leading to many fewer interactions with police and increased stability in clients' lives. These clients are not only mentally ill, but also have demonstrated escalating violent behavior.

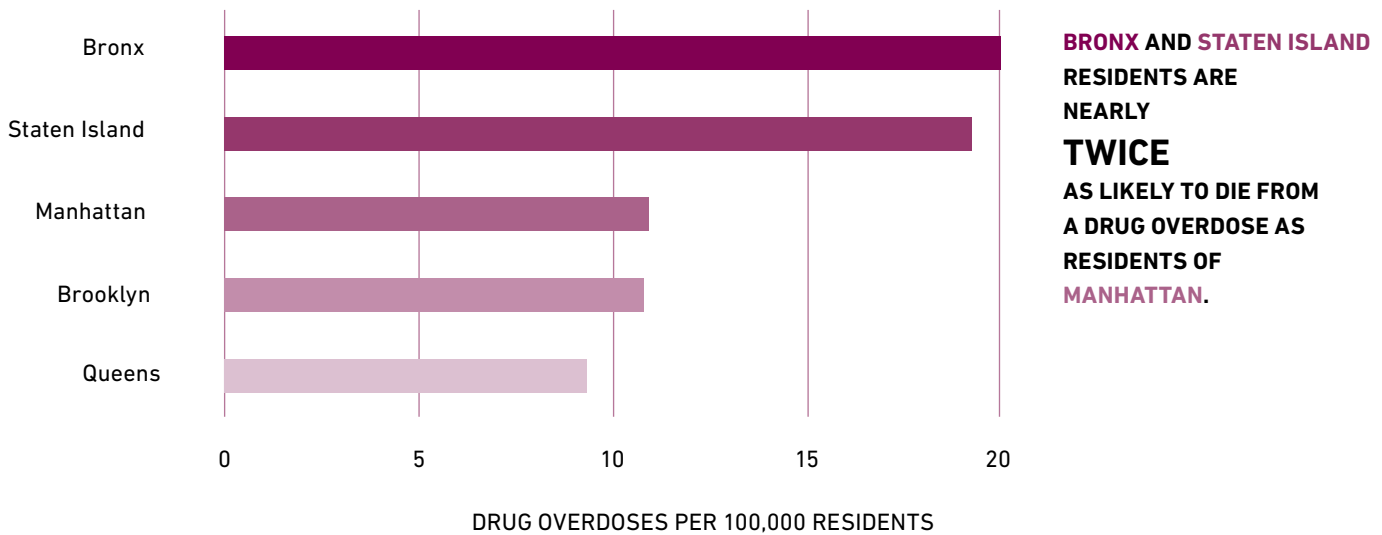
- **ENHANCES MENTAL HEALTH CARE EQUITY.**

There are currently 21 federally designated mental health care shortage areas in New York City. As we have built our ThriveNYC programs, we have paid particular attention to adding resources to these underserved neighborhoods: 75 percent of Thrive-funded clinicians are based in mental health care shortage areas.

The first three years of ThriveNYC focused on getting new services and strategies up and running and expanding our reach to New Yorkers in need. As we move forward, ThriveNYC is focused on effectively implementing Thrive programs, maximizing their impact, and ensuring their sustainability.

Nearly 1,500 New York City residents died from unintentional drug overdoses in 2017.

Source: DOHMH



END THE OPIOID EPIDEMIC

In 2017, the City launched HealingNYC, a \$38 million initiative to reduce opioid overdose deaths citywide. In 2018, funding increased to \$60 million to bolster naloxone kit distribution and overdose prevention trainings; expand peer services in hospital emergency departments; and establish the Health Engagement and Assessment Teams (HEAT), which serves as an alternative response for people with mental health and substance misuse needs who encounter police and other first responders. The City will target implementation of these resources in communities with the highest rates of overdose, such as the Bronx.

- #### • INCREASE NALOXONE DISTRIBUTION

The City will continue to equip frontline staff and community members with naloxone, the overdose reversal drug, and the Fire Department of New York Emergency Medical Services will leave behind 5,000 naloxone kits every year when responding to 911 calls for overdoses. In addition, the City will train New Yorkers, including frontline City workers, to administer and distribute naloxone.

- #### • EXPAND PROGRAMS FOR JUSTICE-INVOLVED NEW YORKERS

To support the diversion of people arrested on low-level drug offenses from the criminal justice system, the City will continue to support HOPE programs in Staten Island and the Bronx that refer individuals to resources and other services including medication-assisted treatment (MAT), which combines withdrawal medications, therapy, and counseling.

- #### • EXPAND PEER SERVICES IN HOSPITAL EMERGENCY DEPARTMENTS

H+H will expand its peer advocate program to all of its 11 emergency departments, with the goal of embedding peers with substance misuse lived experience and social workers with addiction specialization directly into emergency department units, so that their expertise is woven through emergency response. DOHMH will expand its peer-response initiative, Relay, to 15 private hospitals by June 2020. With the expansion of these two programs, New Yorkers with an opioid misuse disorder will have access to peer support at the 26 hospitals that provide nearly 75 percent of all emergency services for overdose.

- #### • IMPLEMENT THE BRONX ACTION PLAN

The City will implement the Bronx Action Plan to reverse the opioid overdose epidemic in the borough, where rates of fatal drug overdoses outpace those citywide. With a focus on place-based programs, the City will connect Bronx residents who misuse substances to treatment, care, and community support. The plan directs resources to assist first responders, increase naloxone-kit distribution, run a public awareness campaign to educate New Yorkers about the dangers of the powerful synthetic opioid fentanyl, and expand harm-reduction outreach and services.

REDUCE RACIAL AND ETHNIC INEQUITIES IN BOTH MATERNAL MORTALITY AND INFANT MORTALITY

New York City has a comprehensive approach to addressing the root causes of persistent, intolerable, and preventable racial and ethnic inequities in maternal mortality, severe maternal morbidity (life-threatening complications in childbirth), and infant mortality. Achieving birth equity requires coordinated activities across government agencies, health care systems, and community partners. Our strategy will transform women's health care by addressing implicit bias, enhancing maternity care, increasing surveillance, and expanding public education.

- **IMPLEMENT A QUALITY IMPROVEMENT INITIATIVE WITH MATERNITY HOSPITALS**

DOHMH will work with a network of 24 public and private maternity hospitals to implement hospital-specific recommendations to reduce the number of life-threatening complications during and after childbirth. Working in neighborhoods with the highest rates of pregnancy-related complications, hospitals will review severe maternal morbidity data to identify problem areas in care and design improvements, including adopting trauma and resilience-informed care training, to better serve women of color.

- **PROVIDE COMPREHENSIVE MATERNITY CARE AT NYC HEALTH + HOSPITALS**

New York City's public hospitals will continue to provide comprehensive care to women through simulation training for providers to identify and respond to the three leading causes of pregnancy-related deaths: pulmonary embolism, bleeding and severe hypertensive disease; and by offering high-risk patients a medical home model that provides clinical, mental health, and other social supports and linkages to care. We will also make it easier for women to receive postpartum care by co-locating postpartum and newborn appointments and establishing pre-pregnancy planning in primary care.

- **ENHANCE DATA QUALITY AND TIMELINESS**

Reviewing population data on the treatment of mothers in childbirth is essential to developing policies and interventions that can improve patient outcomes. The City will enhance data quality through the NYC Maternal Mortality and Morbidity Review Committee, and will also reduce the two- to three-year data lag in mortality estimates.

- **LAUNCH A PUBLIC AWARENESS CAMPAIGN AROUND SAFE AND RESPECTFUL CHILD BIRTH AND PREGNANCY-RELATED HEALTH RISKS**

This campaign will include educating community residents and health care providers on the NYC Standards for Respectful Care at Birth, which were developed in collaboration with the Sexual and Reproductive Justice Community Engagement Group (SRJ CEG).



INITIATIVE 15 OF 30

MAKE HEALTHY LIFESTYLES EASIER IN ALL NEIGHBORHOODS

A CORE PART OF SUPPORTING PHYSICAL AND MENTAL HEALTH IS PROVIDING ACCESS TO NUTRITIOUS AND ACCESSIBLE FOOD ACROSS ALL COMMUNITIES AND A BUILT ENVIRONMENT THAT SUPPORTS HEALTH AND WELL-BEING.

New York City has developed strong programs that support knowledge of and access to healthy food options. However, there continue to be barriers to consistent access to healthy and affordable food options. To ensure equitable access to nutritious food and environments that support health, we must continue to develop partnerships between urban planning and public health to tackle persistent health inequities that are the result of social determinants such as community retail corridors, income, transportation, housing, and public safety. Uneven development of these underlying factors have contributed to unfair and unjust differences in life expectancy of more than 10 years between New York City neighborhoods. The City will continue to promote strategies that support improved design of buildings, streets, and neighborhoods and connection to social and health resources that support health beyond just physical activity. The City will also be a catalyst for changes to our food environment, making it easier for all New Yorkers to have meaningful access to healthier foods.

EXPAND HEALTHY FOOD CHOICES

About 20 percent of New Yorkers live in poverty, and nearly 1.6 million New Yorkers rely on the Supplemental Nutrition Assistance Program (SNAP) to purchase food. Adults in high-poverty neighborhoods consume fewer fruits and vegetables on average than those in low-poverty neighborhoods. The City will work to close this gap by expanding the Health Bucks program to help New Yorkers access fresh, locally grown fruits and vegetables, increasing the Health Bucks SNAP incentive to a \$1 for \$1 match at local farmers markets, and will continue to offer interactive nutrition education programs across the city.

New York City will also improve the foods and beverages served by City government by implementing a Good Food Purchasing Policy across key constituent food serving agencies, providing a transparent metrics-based, flexible framework that encourages large institutions to direct their buying power toward five core values: local economies, environmental sustainability, valued workforce, animal welfare, and nutrition. Applying these principles in the work to purchase food through agencies will help increase consumption of high-quality nutritious food and increase knowledge of the desirability of healthy food. The City will also update the NYC Food Standards to phase out purchases of processed meat, which has been linked with increased risk of cancer and is often high in saturated fat and sodium which is linked to heart disease. Processed meat will be replaced by healthier proteins, including an increase in plant-based options. In addition, the City's 11 public hospitals have begun offering plant-based options, and beginning in the 2019–2020 school year, all schools will serve vegetarian meals on Mondays.

In addition, the City will focus on reducing risk factors for heart disease and cancer by limiting access to added sugar. Through the National Salt and Sugar Reduction Initiative, a partnership of organizations and health authorities from across the country and convened by DOHMH, the City will finalize sugar reduction targets in packaged foods and beverages. To make food and beverage options at stores healthier, we will encourage companies to meet these voluntary sugar-reduction targets. Access to affordable, quality food is an essential component of building strong neighborhoods, and the City will continue the Food Retail Expansion to Support Health (FRESH) program, which promotes the establishment and expansion of grocery stores in underserved communities by lowering the costs of owning, developing, and renovating retail space.



SCALLIONS AND SWISS CHARD AT THE BRONX BOROUGH HALL GREENMARKET.

Source: Molly Hartman/Mayor's Office of Photography

CREATE A BUILT ENVIRONMENT THAT ENCOURAGES PHYSICAL ACTIVITY, COMMUNITY BUILDING, AND BETTER MENTAL HEALTH

The City will update and expand the Active Design Guidelines (ADGs) to include physical design strategies for buildings, streets, urban agriculture, and public spaces, including farmers' markets, that support mental health and social well-being, and promote environments that make healthy choices easier for all New Yorkers. First published in 2010, the ADGs outline innovative approaches to the challenges of chronic disease, with a focus on obesity. The updated guidelines will further ensure the City is promoting evidence-based built-environment design strategies that support not just physical health, but also mental and social health, across all neighborhoods.

"Continue to support access to healthy food initiatives."

- Resident of Hamilton Heights, Manhattan

INITIATIVE 16 OF 30

DESIGN A PHYSICAL ENVIRONMENT THAT CREATES THE CONDITIONS FOR HEALTH AND WELL-BEING

ENVIRONMENTAL CONDITIONS ARE A FOUNDATIONAL COMPONENT OF HEALTH EQUITY. Environmental hazards lead to poor health, loss of wages, and diminished quality of life, especially for residents in high-poverty communities and communities of color that have historically been burdened with a disproportionate share of pollution and other environmental risks.

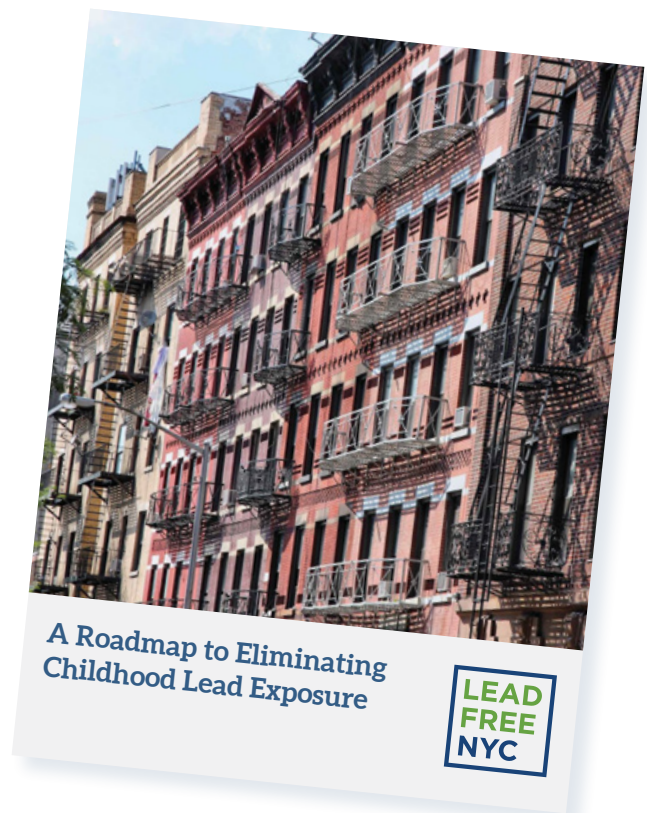
Many communities have not enjoyed equal access to the region's environmental resources, including its natural areas, to the detriment of health and quality of life. We will work toward creating a safe and healthy environment for all people through improved data, policies aimed at reducing greenhouse gas emissions and increasing climate resiliency, and targeted interventions that ease access to natural areas in historically resource-deprived neighborhoods.

Complementing other significant environmental initiatives featured in the “A Livable Climate” and “Efficient Mobility” volumes of OneNYC 2050, New York City will improve air quality and the cleanliness of waterways; mitigate and adapt to the urban heat island effect and the warming climate; remediate brownfields; and protect the city's natural areas while simultaneously making them more accessible to all New Yorkers. A common thread in these strategies is the role of community stakeholders in identifying problems and helping to craft effective strategies.

REDUCE CHILDHOOD EXPOSURE TO LEAD

Elevated lead levels in the blood can lead to irreversible developmental effects in children, including adversely affecting physical and mental growth and causing learning and behavioral problems. Young children are at particular risk because exposure to lead primarily comes from ingestion of lead-based paint. New York City prohibited the use of lead paint in homes in 1960, becoming one of the first jurisdictions to do so, 18 years before it was banned by the federal government. Yet many older buildings still have lead paint on walls, windows, doors, and other surfaces.

Since the passage in 2004 of New York City's stringent Local Law 1, childhood lead exposure has plummeted 90 percent. This year, the City launched LeadFreeNYC to reduce that exposure to zero, and released a “Roadmap to Eliminating Childhood Lead Exposure,” which includes a two-fold approach to preventing exposure to lead hazards and responding quickly and comprehensively whenever a child has an elevated level of lead in the blood. In addition, the City will increase resources and support for children, parents, and health care providers to make sure every child younger than three is tested for lead exposure — and that any child who has an elevated blood lead level gets the services they need. We will also target bad actor landlords, lower the lead paint and dust standards in order to remove hazards, and increase oversight of unsafe consumer goods and construction work, with a focus on high-risk neighborhoods.



EXPAND HEAT-HEALTH PROGRAMMING AND EDUCATION

Heat threatens New York City's health and livability, particularly as our climate continues to change. New York City has made progress toward lowering temperatures in our neighborhoods. In addition to expanding shade and tree-canopy cover, the City and partners have increased the albedo — the reflection of the sun's light and heat — to more than 9 million square feet of building roofs. Still, each year, hundreds of New Yorkers experience heat-related injuries and deaths, with most exposed at homes without air conditioning. Heat vulnerability is highest in low-income neighborhoods and communities of color where discriminatory policies have resulted in inequitable distribution of social and economic resources and opportunities. New York City will promote awareness of the health impacts of hot weather and tips to stay safe for those in need. In addition, the City will continue to train home health aides and community health workers on extreme-heat safety and how to help keep their clients safe, while DOHMH's Be A Buddy Program enables communities to help our neighbors who are most at risk (see *A Livable Climate*).

ADVANCE EQUITABLE IMPROVEMENTS IN AIR QUALITY

New York City's air is the cleanest it has been in more than 50 years, and continues to improve, due to the City's effort to curtail and phase out pollutants such as residential heating oil. The City also launched the NYC Retrofit Accelerator and Community Retrofit NYC to help building owners and operators make energy-efficiency improvements. The City now owns one of the largest alternative fuel municipal fleets in the world. Still, air pollution remains a leading environmental threat, especially to the health of low-income New Yorkers. Particulate matter (PM2.5) is estimated to contribute to more than 2,000 deaths and just under 6,000 emergency room visits and hospitalizations for cardiovascular and respiratory disease each year. All neighborhoods are affected by these health impacts, but they disproportionately occur in high-poverty communities. Air quality in New York City is determined by local policies and regulations, as well as State and federal regulations that govern the fuel efficiency of the vehicles on our roads, the fuel choices of power plants upwind of the city, and the regulation of the transportation system, among other sectors. The City will continue to improve air quality through more stringent regulations increased electrification, and the greening of the City's building stock.

- **ENFORCE THE UPDATED AIR POLLUTION CONTROL CODE USING A HEALTH-EQUITY LENS**

Over the next four years, New York City will expand initiatives to curtail vehicular emissions, working with the New York City Council to introduce legislation that will further restrict engine idling, particularly for vehicles with secondary engines. We will also launch an aggressive anti-

idling outreach campaign targeted at stakeholders responsible for heavy-duty vehicles that produce the greatest emissions — such as school bus operators, and truck delivery fleet owners — and focus on neighborhoods with the greatest air quality impacts. In addition, we will increase control of previously unregulated sources of particulate matter emissions by exploring new options for infrastructure to control emissions from commercial charbroilers, expanding oversight to establishments that were originally exempt, and further lowering the threshold of charbroil meat pounds per week in order to continue realizing air quality improvements. The City will also continue the Clean Heat Initiative to support the transition to cleaner heating fuels, with a focus on environmental justice communities.

PRE-TEENS EXERCISE IN THE FRESH AIR WITH THE NYC FOOTBALL CLUB AT THE GRACIE MANSION SPRING KICK-OFF.

Source: Ed Reed/Mayoral Photography Office



CLIMATE AND HEALTH

GREENHOUSE GAS EMISSIONS CAN FEEL ABSTRACT, BUT THEIR IMPACTS ON OUR WARMING CLIMATE ARE RESULTING IN VERY REAL HEALTH CONSEQUENCES, SUCH AS HEAT-RELATED ILLNESSES AND DEATH.

Addressing climate change can have additional health impacts. The burning of fossil fuels, produces air pollutants such as NO_x, SO_x, and PM_{2.5} that directly impact human health. Thus, programs to reduce greenhouse gases by decreasing fossil fuel use — for instance, building retrofits will improve health both by combating climate change and through improving local air quality (see more in *A Livable Climate*).

AIR QUALITY AND HEALTH

- **IDENTIFY ADDITIONAL TARGETED AIR QUALITY IMPROVEMENTS THROUGH DATA COLLECTION AND ANALYSIS, AND COMMUNITY ENGAGEMENT**

Since December 2008, DOHMH has monitored criteria for air pollutants at street-level sites around the city through the New York City Community Air Survey, which provides essential data on air quality. In 2017, the City funded the construction of 10 real-time streaming PM_{2.5} sampling units to be deployed and maintained at critical locations throughout New York City to augment our understanding of how levels of pollution vary throughout the day across the City's diverse neighborhoods. The City will continue to invest in its data infrastructure by deploying cutting-edge technologies.

- **RELEASE AND PROMOTE A CITIZEN SCIENCE TOOL KIT**

In 2017, DOHMH collaborated with CUNY Queens College to pilot air-quality monitoring programs with two place-based organizations, and are creating a tool kit for groups to collect data to advocate for resources. The City will release and promote the tool kit among community groups seeking an understanding of air pollution patterns in their neighborhoods, and provide an opportunity for participants to exchange ideas and data, and improve the state of air-quality-related citizen science.

- **ADVANCE CLIMATE LEADERSHIP INITIATIVES WITH HEALTH EQUITY AND AIR QUALITY CO-BENEFITS AS PRIORITIZATION CRITERIA**

DOHMH will continue to provide health impact data and air quality surveillance to support an equity and health-focused implementation of transportation, energy efficiency, and waste programs, including congestion pricing, building energy mandates, and commercial waste zones.

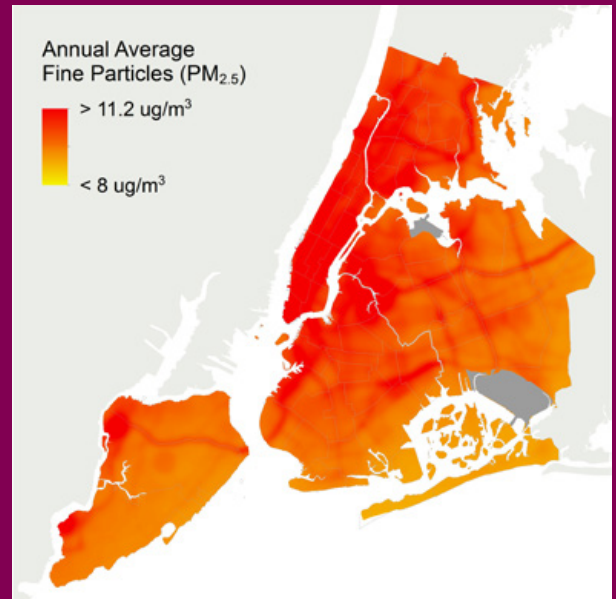
- **ADVOCATE FOR STATE AND FEDERAL REGULATORY REFORMS TO ADDRESS POLLUTION SOURCES BEYOND LOCAL CONTROL**

Forty-five percent of fine particulate matter in the city comes from emission sources outside the city. Faced with threatened and actual rollbacks of key environmental protections, New York City will continue to forcefully advocate for State and federal air quality regulations, and document local impacts from deregulation. Similarly, in light of federal assaults on science, the City and other localities must lead the way in air quality and sustainability initiatives, as well as expanded research, collaboration, data sharing, and development of professionals in applied science. The City will continue to advocate for federal regulatory reforms, and has joined seven other states in a lawsuit to force the U.S. Environmental Protection Agency to clamp down on pollution coming from Rustbelt states.

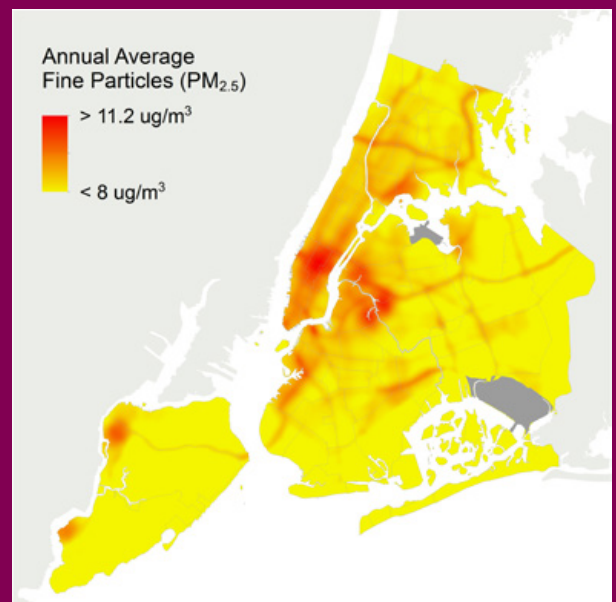
New York City has substantially decreased dangerous PM_{2.5} particles over the past decade. As air quality improves, health incidents attributable to the noxious emissions such as heart or lung disease are expected to decline.

Source: DOHMH

2009



2017



IMPROVE THE QUALITY OF OUR WATERWAYS

New York Harbor is cleaner and healthier today than it has been in more than a century, thanks to the nation's most ambitious green infrastructure program, significant investments into the City's wastewater system, and a steady decrease in water consumption over the past three decades. Today, New Yorkers enjoy more recreational opportunities and the return of wetlands and wondrous aquatic life such as humpback whales, harbor seals, dolphins, and birds, including herons and egrets. And as habitats are restored and oyster populations return, the harbor is better able to filter water and protect coastlines from storms. The City will continue to reduce and prevent pollution to protect the harbor and connected waterways through capital investments, regulation, and partnerships with community groups and industry.

- **EXPAND THE GREEN INFRASTRUCTURE PROGRAM**

Green infrastructure softens the city's built environment, naturally absorbing stormwater and diverting it from the sewers and wastewater treatment plants. The New York City Department of Environmental Protection (DEP) has constructed more than 4,000 green infrastructure assets, including rain gardens and permeable pavers. To further this effort, the City will partner with other City agencies to expand the right-of-way program into medians and other new areas, launch an incentive program for private property, and launch an "Adopt-a-Rain Garden" program. In addition, DEP will expand the Mid-Island Bluebelt (a wetland that receives and filters stormwater) in Staten Island, and explore opportunities to install Bluebelts in other advantageous locations citywide.

- **EXPAND SEWER INFRASTRUCTURE IN UNDERSERVED AREAS**

Some parts of the City lack a completely built-out sewer system and often experience street flooding. In 2015, the City launched an unprecedented investment of \$1.5 billion over 10 years to expand the sewer network in Southeast Queens, which will help mitigate flooding. The City will continue to use this investment to expand access to sewer infrastructure in currently underserved areas.

- **IMPLEMENT WATER RECIRCULATION PROJECTS**

DEP is becoming a leader in resource recovery and an essential partner in the circular economy. Every year, City-owned properties use drinking water for activities wherein recycled water could be used, such as irrigation and refilling lakes inside public parks. To conserve potable water, the City will implement water recirculation projects in Central Park. Projects such as this will encourage large water consumers to substitute at least some of their potable water with recycled water, which will reduce both demand for drinking water resources and water discharged into New York Harbor.

- **REDUCE FLOATABLES IN CITY WATERS**

In early 2019, DEP launched "Fatberg Free NYC" a public awareness campaign to discourage the improper disposal of grease, "flushable" toilet wipes, and other items such as floss and paper towels, called "Trash it. Don't Flush it." Working with local communities, DEP will continue its work to reduce "floatables" through targeted beach and park clean ups, anti-litter advertisements, and a plastic-bag exchange program.

FATBERGS FORM WHEN GREASE, WIPES, AND OTHER STUFF GET FLUSHED, CLOGGING PIPES AND DRAINING WALLETS.

Source: City of New York



PROTECT, RESTORE, AND CONSERVE THE CITY'S NATURAL ENVIRONMENT

New York City is located in an estuary, where ocean and river meet to create a highly productive ecosystem. While it is not always apparent, the metropolitan area is home to abundant plant and animal life. Yet New York's ecological history is not a simple tale of decline, as evidenced by improving air and water quality and the recent return of wildlife. We must carefully conserve and manage our natural environment to strengthen our region's ecology and cultural heritage. Long-term conservation of our wild natural areas is also an essential part of New York City becoming resilient in the face of climate change. At the same time, we can make these beautiful spaces more accessible for New Yorkers to enjoy.

• MANAGE AND REVITALIZE NEW YORK CITY'S URBAN FOREST

Our urban forest, composed of trees in streets, parks, and forested areas, offers many benefits for New York City. Trees absorb carbon dioxide and remove air pollutants, lower summertime temperatures, provide shade, and help retain stormwater. To protect, maintain, and enhance the city's tree canopy, the City will continue to implement its Forest Management Framework, a long-term plan to fully support management and restoration efforts in forested natural areas citywide. We will plant street trees in neighborhoods with high vulnerability to heat, and, on streets and in parks, replace trees that die or are downed by extreme weather and pests (see more in *Thriving Neighborhoods*).

• INCREASE ACCESS TO THE CITY'S NATURAL AREAS

The City will make a concerted effort to make its natural areas more accessible to New Yorkers, beginning with an analysis of impediments and opportunities to experience natural areas that examines factors such as access points, public transit routes, proximity to communities, and trail signage.

The City will also expand environmental education by highlighting the city's diverse ecosystems in school curriculums, and continue to offer Urban Park Ranger programming to connect youth to natural areas through nature-based activities and hikes. We will continue to standardize and improve walking trails in parks with sensitive ecosystems to improve accessibility and reduce environmental impacts. The City will also develop illustrative wayfinding guidance to make natural areas easily navigable and welcoming to diverse audiences.

The City is advancing initiatives to manage, protect, and restore coastal and freshwater wetlands and streams, which provide such benefits as neighborhood cooling, habitat for fish and wildlife, and opportunities for recreation and access to nature. Tibbetts Brook, in particular, represents a great opportunity for the City to restore a vital natural area to greater ecological health while simultaneously providing recreational benefits through a greenway. This conservation and education work is complemented by WildlifeNYC, the City's initiative to raise public awareness about how to safely enjoy — and coexist with — the hundreds of different species that call New York City home.

NYC NATURE GOALS 2050

THE NATURAL AREAS CONSERVANCY, with the NYC Parks Department, convened a coalition of more than 75 organizations from different sectors and disciplines including academia, nonprofits, government, local stewards and environmental justice groups, and the private sector to advance the cause of urban nature in New York City. Over five years, the coalition met frequently to develop shared goals and targets, based on the common belief that urban nature is vital to both our collective wellness and happiness, and the sustainability of our city. The coalition also wrote a Declaration of Rights to New York City Nature: a bill of rights for good local nature. The connective tissue among all the participating organization is five foundational conservation and restoration goals. They include:

- Support for biodiversity and habitat
- Provision and enhancement of clean air and water
- Resilience and protection from coastal storms
- Connectivity for plants and animals
- Inspiration for city residents

To achieve the five principal goals by 2050, the Nature Goals coalition also identified 25 actionable targets to guide conservation efforts in New York City. The overall aim of the coalition is to ensure all New Yorkers experience the benefits of nature in their home city and local community by 2050. To learn more about Nature Goals 2050, please visit: naturegoals.nyc.



JAMAICA BAY PARK IMPROVEMENTS PROJECT — BAYSIDE NATURE TRAIL

THE ROCKAWAY PARKS CONCEPTUAL PLAN, released in spring 2014, notes the need for completing and improving a bayside nature trail network throughout parks and public land along the Jamaica Bay shoreline on the Rockaway Peninsula. The Bayside Nature Trail provides an opportunity for increased access to public lands and the waterfront, while creating new recreational opportunities for residents and visitors.

In 2018, the Jamaica Bay-Rockaway Parks Conservancy — in partnership with the Department of Parks and Recreation, the New York State Department of Parks, Recreation, and Historic Preservation, and the Natural Areas Conservancy — funded and implemented a project to improve trails in Jamaica Bay Park. This work included the construction of a new bayside walking

trail and improvements to existing trails within the park, along with invasive-plant removal and erosion-control measures. The new trail also linked the City park to the adjacent Bayswater Point State Park, adding 3,000 feet of new trails and forming a contiguous trail network nearly a mile in length. In the coming year, additional restoration work will take place along the shoreline and upland area adjacent to the trail, which will focus on removing invasive plant species and seeding native maritime plants.

The new Jamaica Bay park trail is part of a larger trail network connecting parks and open spaces within Rockaway to one another, allowing for better park and waterfront access for local residents and visitors. The Bayside Nature Trail will increase access to many new or renovated parks across the Rockaway Peninsula, which are funded by over \$100M in FEMA funds following Hurricane Sandy and other local sources.



THE PATH FORWARD

TO ACHIEVE OUR GOALS, WE MUST HAVE A PLAN AND HOLD OURSELVES ACCOUNTABLE. Here, we identify the actions that are necessary to achieve our goals, the owners of each action, and the indicators that will help us measure progress and ensure success. We are also constantly working to raise our ambitions, with several opportunities in the near future to add more detail to select indicators and targets. For further information and a complete set of interim milestones, see our detailed action plans at nyc.gov/OneNYC.

INITIATIVE #13: GUARANTEE HIGH-QUALITY, AFFORDABLE, AND ACCESSIBLE HEALTH CARE FOR ALL NEW YORKERS		
STEPS TO GET THERE	AGENCY OWNER	FUNDING STATUS
Guarantee health care for all New Yorkers	H+H	Funded
Improve and modernize primary and specialty health care delivery	H+H	Funded
INDICATORS	LATEST DATA	TARGET
New Yorkers with health insurance	88.2% (2017)	Increase
New Yorkers who enroll in NYC Care	N/A	100K by 2021
New Yorkers that felt they received the medical care they needed in the past 12 months	90% (2017)	Increase

INITIATIVE #14: ADVANCE EQUITY BY ADDRESSING THE HEALTH AND MENTAL HEALTH NEEDS OF ALL COMMUNITIES		
STEPS TO GET THERE	AGENCY OWNER	FUNDING STATUS
Reduce the leading causes of premature mortality	H+H, DOHMH	Funded
Ensure every New Yorker has access to mental health support	ThriveNYC	Funded
End the opioid epidemic	DOHMH, H+H, NYPD	Funded
Reduce racial and ethnic inequities in both maternal mortality and infant mortality	DOHMH	Funded
INDICATORS	LATEST DATA	TARGET
Adult New Yorkers with raised blood pressure	14.7% (2010)	Reduce by 30% by 2030
Citywide opioid overdose deaths	17.4 per 100,000 (2017)	Reduce by 60% by 2030
Preventable severe maternal morbidity rate	277.8 per 10,000 (2014)	Reduce by 50% by 2030
Infant mortality rate	4.1 per 1,000 (2016)	Reduce by 4% by 2025
Inequity in infant mortality between babies born to Black and White women	3.07 (2016)	Reduce by 8% by 2023
Adults with psychological distress who did not get treatment	23% (2015)	Reduce by 5% by 2025

INITIATIVE #15: MAKE HEALTHY LIFESTYLES EASIER IN ALL NEIGHBORHOODS

STEPS TO GET THERE	AGENCY OWNER	FUNDING STATUS
Expand healthy food choices	DOHMH, MOFP	Funded
Create a built environment that encourages physical activity, community building, and better mental health	DOHMH, DDC	Partially Funded
INDICATORS	LATEST DATA	TARGET
New Yorkers eating the recommended number of servings of fruits and vegetables	13.3% (2017)	Increase by 25% by 2035
Adult New Yorkers who exercised in the past 30 days	74.5% (2017)	80% by 2035
New Yorkers in high school who get the recommended level of physical activity	20.8% (2017)	30% by 2035

INITIATIVE #16: DESIGN A PHYSICAL ENVIRONMENT THAT CREATES THE CONDITIONS FOR HEALTH AND WELL-BEING

STEPS TO GET THERE	AGENCY OWNER	FUNDING STATUS
Reduce childhood exposure to lead	DOHMH	Funded
Expand heat-health programming and education	DOHMH	Funded
Advance equitable improvements in air quality	DEP, DOHMH, DOT, DCAS	Funded
Improve the quality of our waterways	DEP	Funded
Protect, restore, and conserve the City's natural environment	DPR	Partially Funded
INDICATORS	LATEST DATA	TARGET
Street segments with recurring confirmed sewer backup in the last 12 months	0.3%	0.6%
Citywide NO ₂ levels	17.8 parts per billion (2017)	Reduce 25% by 2030 (relative to 2018)
Disparity in black carbon across city neighborhoods	3 (2017)	Reduce 25% by 2030 (relative to 2017)
Citywide 3-year average PM _{2.5} levels from internal and external sources	7.85 µg/m ³ (2017)	Decrease
Combined sewer overflow capture rate	79% (2017)	Increase

For more information on the funding status of OneNYC initiatives, please see the City of New York Fiscal Year 2020 Executive Budget and Ten-Year Capital Strategy



WHAT YOU CAN DO

BUILDING A STRONG AND FAIR CITY WILL REQUIRE THE HELP AND SUPPORT OF ALL NEW YORKERS. HERE ARE A FEW EASY STEPS YOU CAN TAKE:

1

SIGN UP FOR HEALTH INSURANCE. Receive free health insurance enrollment assistance from GetCoveredNYC, New York City's official outreach and enrollment program. You or someone you know may qualify year-round for low-or-no-cost options, including Medicare, Medicaid, and NYC Care.

2

COMMIT TO A HEALTHIER DIET. Get Health Bucks to buy fresh fruits and vegetables when using SNAP benefits on an EBT card at farmers markets. Enroll in Pharmacy to Farm Prescriptions and get Health Bucks when you fill a prescription for blood pressure medication at a participating pharmacy.

3

PROMOTE MENTAL HEALTH AWARENESS and reduce stigma. Attend a free eight-hour mental health first aid training or schedule a course for your community or organization through ThriveNYC. You'll receive a three-year certification in mental health first aid and learn how to recognize early signs and symptoms of mental illness and substance misuse, listen without judgment, and respond to someone in distress until they are able to receive professional care. Help reduce stigma and connect your fellow New Yorkers with the care they need.

4

EXPLORE NATURE New York's urban forests, streams, and wildlife are often just a subway ride away. Spot rare birds and catch great views at the Jamaica Bay Wildlife Refuge, or enjoy a brief hike in Central Park's North Woods, or Prospect Park's The Ravine.

For more ways you can get involved, visit [NYC.GOV/OneNYC](https://nyc.gov/OneNYC). Share your story of taking action on social media and tag us at [#OneNYC](https://twitter.com/OneNYC).



THE CITY OF NEW YORK
MAYOR BILL DE BLASIO

DEAN FULEIHAN
FIRST DEPUTY MAYOR

DOMINIC WILLIAMS
CHIEF POLICY ADVISOR

DANIEL A. ZARRILLI
OneNYC DIRECTOR

OneNYC

Learn more about how we are building a strong and fair city: [NYC.GOV/OneNYC](https://nyc.gov/OneNYC)



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