

Best Practice: Health Policy Agenda with Measurable Targets

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CITY: NEW YORK CITY

POLICY AREAS: PUBLIC HEALTH

BEST PRACTICE

Take Care New York is the Department of Health and Mental Hygiene's (DOHMH) comprehensive health policy agenda to help New Yorkers live longer and healthier lives. First launched in 2004, Take Care New York identified 10 steps New Yorkers could take to improve their health and set ambitious goals for 2008. In 2009, the Department launched Take Care New York 2012 and set new goals for 10 key areas, selected for their public health importance and proven amenability to improvement.

ISSUE

Take Care New York presents the Health Department's plans to help New Yorkers live longer and healthier lives, and it offers recommendations for how individuals can improve their health, as well as how organizations can support these efforts. **Take Care New York 2012** builds upon progress made since 2004 and recognizes that improving health requires the involvement of all New Yorkers: individuals and families, health care providers, insurers, community organizations, businesses and government.

GOALS AND OBJECTIVES

Take Care New York 2012's objectives include: 1) *Policies*: developing laws, regulations and other policies that will improve environmental, economic, and social conditions affecting health; 2) *Prevention, Quality and Access*: emphasizing preventive health care, improving quality of care and expanding access to care; 3) *Health Promotion*: informing, educating and engaging New Yorkers to improve their health and that of their communities. The 10 Take Care New York 2012 key areas are:

- Promote Quality Health Care for All
- Be Tobacco Free
- Promote Physical Activity and Healthy Eating
- Be Heart Healthy
- Stop the Spread of HIV and Other Sexually Transmitted Infections
- Recognize and Treat Depression
- Reduce Risky Alcohol Use and Drug Dependence
- Prevent and Detect Cancer
- Raise Healthy Children
- Make All Neighborhoods Healthy Places

The Health Department selected these key areas for intervention because they represent health problems that present a large disease burden, killing thousands of New Yorkers and causing hundreds of thousands of preventable illnesses or disabilities each year; have proven to be amenable to intervention and public action; and are best addressed through coordinated action by City agencies, public-private partnerships, health care providers, businesses, and individuals. In each of the 10 areas, the Department reviewed trend data, assessed the health status among all New Yorkers, established 2007 baselines where possible, and set measurable targets to be reached by 2012.

Best Practice: Health Policy Agenda with Measurable Targets

The Health Department recognizes that some communities and populations bear a disproportionate burden of health problems, and that citywide rates often mask sizable disparities. **Take Care New York 2012** was launched with a renewed focus on reducing persistent health disparities in each priority area, with specific indicators and targets chosen to emphasize closing the health gap among New Yorkers of different races, ethnicities, income, and education levels.

The Department continuously monitors and evaluates progress towards 2012 goals, and released a two-year progress report in June 2011.

IMPLEMENTATION

When Take Care New York was conceived in 2004, the Health Department selected 10 key areas, reviewed baseline data, and set goals for 2008 in each area. In developing Take Care New York 2012, the Department updated the 10 new areas based upon evolving public health priorities and their potential to improve health. From its inception in 2004, Take Care New York has focused upon:

- Building on existing DOHMH programs and establishing new initiatives to achieve Take Care New York's goals.
- Developing and promoting a policy agenda that promotes broad environmental changes that make healthier choices easier.
- Increasing public awareness through media campaigns and broad distribution of educational materials.
- Building and engaging a network of partner organizations across the city that support Take Care New York.

Since 2004, more than 500 businesses, community groups, health care organizations, and other City agencies have become Take Care New York partners. Each partner works with the Health Department on one or more Take Care New York key area, thus increasing the Department's ability to reach New Yorkers in all neighborhoods.

Numerous initiatives and policies – among them the Smoke-Free Air Act, the elimination of trans fats in restaurant foods, and the Green Carts and Healthy Bodegas initiatives to increase access to fresh produce in underserved neighborhoods – have changed New York City's environment for the better. The Department and City continue to build on this progress to ensure that programs and resources are targeted to high-need neighborhoods and meet 2012 goals.

RESULTS AND EVALUATION

Take Care New York was launched in 2004 and set 16 objectives in 10 key areas. From 2004 to 2008, significant progress was made in most of the priority areas; by 2007, New Yorkers had surpassed goals in four of the priority areas –increasing regular access to primary care, reducing the number of adults who smoke, increasing colorectal cancer screenings, and reducing intimate-partner homicide. The progress of the original Take Care New York initiative was tracked and documented in annual reports available through the Department's [website](#).

Take Care New York 2012 was launched in 2009 and set 41 objectives in 10 key areas. Within two years of its launch, progress has been made in all 10 key areas, with four objectives surpassed in the areas of Prevent and Detect Cancer, Raise Healthy Children, and Make All Neighborhoods Healthy Places. The Health Department has tracked the progress of Take Care New York 2012; findings are available at the Department's [website](#).

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TIMELINE

March 2004 – Health Commissioner Thomas R. Frieden launches Take Care New York, the city's first comprehensive health policy agenda to help New Yorkers live longer and healthier lives. The four year policy outlines an agenda of 10 key areas for intervention that are based on New York City's leading causes of preventable illness and death.

June 2006 – The Department releases the Take Care New York Two-Year progress report at an event joined by the growing network of nearly 185 Take Care New York partners, including hospitals, clinics, insurers, and community-based organizations dedicated to improving the health and well-being of New Yorkers.

March 2009 – The Department releases Take Care New York's fourth year progress report. Mayor Michael R. Bloomberg and Health Commissioner Thomas R. Frieden announce that New York City has made significant progress in meeting seven out of the 10 key areas and surpassed 2008 targets within four of the program's priority areas. Mayor Bloomberg and Health Commissioner Frieden accept the Citizens Budget Commission's Prize for Public Service Innovation on behalf of Take Care New York, recognizing the initiative as a groundbreaking collaborative effort to improve the health of New Yorkers.

September 2009 – Mayor Michael R. Bloomberg and Health Commissioner Thomas A. Farley launch Take Care New York 2012.

Spring 2010 – Take Care New York 2012 launches the first partner e-newsletter to keep partners up-to-date on DOHMH news and resources, community health events, and policy priorities. The program also unveils Ideas for Action – innovative, measurable, and achievable activities tied to each priority area all partners can participate in to extend the reach of the Department's efforts.

Fall 2010 – The Department launches Take Care Staten Island in collaboration with the Staten Island Partnership for Community Wellness to reduce obesity, tobacco use, and alcohol and drug abuse in the borough. The Department also begins rewarding Take Care New York Champions, community partners that have demonstrated their commitment to Take Care New York 2012 by implementing three or more activities that address the 10 agenda items.

June 2011 – The Department publishes the Take Care New York 2012 two-year progress report describing the Health Department's efforts during 2009-2010 to make New York City healthier. The report highlights accomplishments in each of the 10 key areas. All progress reports are available on the Department's [website](#).

LESSONS LEARNED

Take Care New York was launched seven years ago as New York City's comprehensive health policy. It has since become the Health Department's organizing principle, unifying the agency with a common set of initiatives, indicators, and goals. Social, environmental, and economic factors all have a profound impact on health, and while the Department continues to address these factors, the determinants of health are much more wide-reaching than the Department alone can affect. While the Health Department has a strong record of implementing effective programs and policies proven to improve health outcomes, reaching the ambitious goals of **Take Care New York 2012** requires a continued collaborative effort from all New Yorkers – government agencies,

Best Practice: Health Policy Agenda with Measurable Targets

businesses, community- and faith-based organizations, health care providers and insurers, families, and individuals. The Department relies on the commitment of its partners to implement activities to reach these goals and to serve as advocates for the ground-breaking policies and programs for which the Health Department has come to be known.

TRANSFERABILITY

Take Care New York has served as a model for several other cities' efforts to develop their own comprehensive health policy agenda with measurable targets for improvement, including *Healthy Baltimore 2015*.

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Facts and figures in this report were provided by the highlighted city agency to New York City Global Partners.