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## Message from the CMO

Welcome to the seventh issue of ***The Bridge!*** We hope this newsletter keeps you updated, informed, and the connected with the NYC Health Department and the Office of the Chief Medical Officer (CMO). Your input and collaboration are vital to our mission of protecting and promoting the health of all New Yorkers. We would love to hear from you—please share your thoughts and feedback on what else you would like to see in this newsletter, or inquire about how to connect with the Health Department by emailing us at [chiefmedicalofficer@health.nyc.gov](mailto:chiefmedicalofficer@health.nyc.gov)

Thank you for your partnership and commitment to a more just and equitable New York City!

# CMO Strategic Plan Updates

Read below to learn more about each domain of the CMO Strategic Plan.

## Domain 1: Bridging Public Health and Health Care

The Health Department's **Birth Equity** efforts to bridge public health and health care are essential for continuing our mission of expanding access to quality prenatal and postnatal care, and addressing the social, environmental, economic, and structural factors that exacerbate birth inequities in NYC. Some of our birth equity programs include [Family Wellness Suites](#), the [Citywide Doula Initiative](#), and [Healthy Start Brooklyn](#). These and other programs deliver direct prenatal and postpartum support services, supplies, health education, and community resources to families in priority neighborhoods. Each of our [Neighborhood Health Action Centers](#), part of the Health Department's Center for Health Equity and Community Wellness (CHECW), have a variety of staff members that contribute to the well-being of expecting families and their infants via Healthy Start Brooklyn and the Citywide Doula Initiative. The Family Wellness Suites offer support from the following four positions:

1. Family Wellness Suite Coordinator,
2. Doula Community Liaison,
3. Reproductive Health Advocate, and
4. Health Education Associate.

Some updates on the work of the Neighborhood Health Action Centers include the following:

- [Brooklyn Neighborhood Health Action Center](#): Hosted their "Birth and Beyond" event during Black Maternal Health week. More than 75 community members attended.
- [Bronx Neighborhood Health Action Center](#): Graduated its first Parenting Journey Class since 2020. The weekly group offers social support, community, and skills-building to families.
- [Harlem Neighborhood Health Action Center](#): Has exceeded its goal for distributing car seats and cribs. The Mothership doula program's presence at two car-seat safety workshops inspired 16 birthing parents to request and receive doula services.

Note: The By My Side Support (BMS) program, which is a component of Healthy Start Brooklyn (HSB) is a part of the Citywide Doula Initiative (CDI). HSB aims to reduce perinatal health inequities and improve the health and wellness of expectant and new families in central and eastern Brooklyn through education and by supporting pregnancy, childbirth, parenting, breastfeeding, and healthy living. BMS provides free doula support for pregnancy, labor, delivery, and two months postpartum.

## Domain 2: Advancing the NYC Health Department's Commitment to Anti-racism in Public Health Practice and Policy

**Race to Justice** is the Health Department's internal reform process to eliminate racism and health inequities and promote racial equity within the agency and among its contracted partners and programs. This initiative aligns with the NYC Board of Health's resolution declaring racism a public health crisis. The Bureau of Mental Health (BMH) developed three racial equity action steps for all contracted providers:

1. Incorporate racial equity goals in organizations' visions and mission statements
2. Develop and implement a plan to address racism and reduce inequities in the workplace
3. Develop and implement a plan to address racism and reduce inequities in health service delivery and participant outcomes.

Through Race to Justice, the BMH team engaged in a year-long collaborative task force with 18 contracted providers to identify and explore best practices for implementing these racial equity action steps. This work covers a wide range of topics, including approaches to embedding racial equity and social justice in organizations' policies, practices, and procedures; eliminating barriers created by structural and systemic racism; and addressing unjust practices across organizations. It also supports a new paradigm for community governance that seeks to realign community power and expertise and redistribute community-government authority and decision-making. The first phase of this work has been limited to the contracted providers and BMH is looking forward to expanding access to this work across the agency in 2024.

### **Domain 3: Building Institutional Accountability**

**Joseph P. Gone, PhD**, Professor of Global Health and Social Medicine at Harvard University, spoke to the Health Department's Center for Health Equity and Community Wellness at our October All Staff meeting. Dr. Gone's research focuses on addressing the health inequities faced by Native Americans and highlights the effects of settler colonialism and colonial erasure of Native Americans.

Colonization has negatively impacted the historical, cultural, and spiritual experience of Native American communities. Dr. Gone's work aims to orchestrate a shift in the narrative of how the United States acknowledges the marginalization, historical trauma (e.g., through the forced removal of Native Americans from their homelands and the inherent violence of the Indian boarding school systems), and intergenerational impact of genocide on the physical and mental health of Native Americans.

Dr. Gone's presentation is entitled, "Rethinking American Indian Mental Health Services: Explorations in Alter-Native Psy-ence." As a clinically trained, community engaged psychologist, Dr. Gone guided our staff through a re-envisioning of conventional western mental health services and the work that must be done to advance the mental health and well-being of Indigenous peoples. Dr. Gone's poignant and insightful lecture revealed how western psychology tries to force the individual to adapt to society, regardless of whether society continues to inflict harm upon and rejects the individual's humanity.

As a nation, the United States has failed to acknowledge, reconcile, or offer redress to Native Americans. The systemic subjugation of Native Americans has had direct effects on their social determinants of health, such as poverty, lack of access to education and healthy food, and discrimination. [NYC has the largest urban Native American population](#), and the Health Department is committed to addressing health equity as a basic human right and racism as a public health crisis for Native Americans.

## New Resource(s)

New resource available! Healthcare providers and support staff can now access free coaching and sample scripts to improve conversations about COVID-19 vaccination with patients and colleagues. This resource empowers staff to answer questions confidently and address vaccine hesitancy effectively. Click here [COVID- 19 Vaccination Script](#)

## Publications

The latest [special issue of Health Equity](#) - guest edited by Michelle Morse, Adriana M. Joseph, Chandra Ford, Ruqaiijah Yearby, and Nichola Davis — contributes to a growing body of knowledge regarding de-implementation efforts needed to holistically address and eradicate race essentialism from practice and education. Specifically, this issue highlights scholarship in the following areas:

- Historical origins of race adjustment in medicine, clinical decision-making tools, and artificial intelligence tools in medicine;
- Current activities, successes, and challenges around removal of race from clinical decision-making tools at the institution- and system-level and its impact on patient outcomes;
- City, state, and federal policies and policy analysis supporting removal of race adjustment from clinical decision-making tools; and
- Programs, interventions, and policies intended to interrupt or end algorithmic racial discrimination in medicine and health care.

The Office of the CMO hopes this publication captures the latest work in addressing race-based medicine and facilitates the adaptation and implementation of initiatives to correct and mitigate the harmful effects of racial discrimination in health care. As we chart the next steps of this movement—which include equitable transplantation access, federal changes in Medicaid and Medicare policy on use of race-based algorithms, biases in artificial intelligence, application of public health critical race praxis (PHCRP) in research, to name a few emerging areas—it will be essential to remain informed of current and needed work to realize a healthier and more equitable and just society.

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## Agency Updates

The Health Department has discontinued the use of the term, “grandfathered,” and will instead use the term, “pre-existing,” to describe tobacco products that were commercially marketed in the United States as of February 15, 2007. This decision follows the [FDA's updated terminology](#). The term, “grandfathered,” was used in racist voting laws from the 19th century and indicated someone or something exempt from a new law or regulation.

For more updates, follow [@nychealthy](#) and [@nychealthcmo](#) on Twitter.

## Call to Action

The provider engagement branch of the CMO office was invited to visit the BronxCare Pediatrics Department this Fall. The visit involved a robust presentation of all community activities the department is involved in including the creation of the Bronx Human Trafficking Prevention and Response Task Force to combat labor and sex trafficking of minors citywide. Human trafficking, a modern form of slavery, exploits individuals for labor or sex through force, fraud, or coercion. As defined by the 2000 Trafficking Victims Protection Act, labor trafficking involves recruitment, harboring, transportation, etc. for involuntary servitude, while sex trafficking involves exchanging sexual services for money, drugs, or basic needs. The Bronx Human Trafficking Prevention and Response Task Force is a collaborative effort of local advocacy groups, government agencies, health organizations, community programs, and others. The task force aims to educate the community—with a particular focus on children and adolescents—about human trafficking, its warning signs, available resources, and how to get help when trafficking is identified. Additionally, the taskforce trains community organizations, medical providers, and other professionals on identification and available resources, empowering them to combat human trafficking. A resource guide is linked [here](#). For additional information, please contact:

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## New Staff

This Fall, the Bronx Bureau of Neighborhood Health expanded its team. **Robert Rock, MD, MHS**, is rejoining the Bronx Health Action Center as its new Clinical Director. He had interned at the Health Department's Center for Health Equity and Community Wellness, splitting his time between the Bronx Health Action Center and the Health Department headquarters. Born and raised in Queens, he is a family physician, health services researcher, and educator dedicated to using medicine to advance social justice. He received his master's degree in health sciences from Yale University through the National Clinician Scholars Program, earned his medical degree from the Yale School of Medicine, and trained in social and family medicine in the Residency Program for Social Medicine at Montefiore Medical Center. Dr. Rock simultaneously took courses in community-based participatory research and applied its philosophy to study community perceptions of Cancer Center accountability for health equity. A student activism award was named after Dr. Rock and a colleague at the Yale School of Medicine for their efforts in the service of equity and social justice. In 2020, the National Minority Quality Forum named Dr. Rock a top 40 under 40 Leader in Health, and the Josiah Macy Jr. Foundation named him the 2021 rising star for excellence in promoting Social Mission in Health Professions Education. When not working, Dr. Rock enjoys gardening on his balcony, learning new cooking recipes, going to art museums, and taking walks through the park.

For more updates, follow [@nychealthy](#) and [@nychealthcmo](#) on Twitter.

## Recent Community Events:

- On December 8, the Office of the CMO celebrated NYC's [Coalition to End Racism in Clinical Algorithms \(CERCA\)](#) and its accomplishments with members, funders, and other important stakeholders who have shaped this work over the last two years. This event will be held at the Doris Duke Foundation's headquarters in Manhattan. It will feature keynote addresses, breakout groups, and discussions on the future of race-based clinical algorithms, antiracism in medical education, and ensuring health equity in artificial intelligence.
- In June 2023, the NYC Department of Health & Mental Hygiene's Maternity Hospital Quality Improvement Network (MHQIN) kicked off its two-year Learning Collaborative with a cohort of fourteen hospital participants from all NYC boroughs. Participating hospitals are engaging in quality improvement projects to improve the identification and screening of perinatal patients with perinatal mood and anxiety disorders (PMADs) or substance use disorder (SUD), especially for Black New Yorkers who experience inequitable impacts due to structural racism. This work is led in partnership with the NYC Administration of Children's Services, Greater NY Hospital Association, and national subject content experts.
- From September 25 to October 7, the COVID and Flu Vaccine Clinic was held at the NYC Health Department's Morrisania Health Center. A total of 354 residents were vaccinated. We would like to recognize and thank Rosemary Lopez for leading the event, Jason Caraballo, the Director of Community Engagement, the immunization teams, and all the site leads for their work.
- On October 25, the Bronx Fall Festival took place. The event would not have been possible without the support and assistance of everyone at the Bronx Neighborhood Health Action Center, notably Kim Freeman and Richard Sierra.
- On October 25, Lauren Shiman, Brandon Brooks, and Fatoumata Diallo, of the Bronx Neighborhood Health Action Center, along with colleagues in the Center for Population Health Data Science (Christina Nieves, Rachel Dannefer, Sheena Dorvil, Maria Lejano, and Jennifer Pierre) at the Health Department published their COVID-19 recovery survey article, "Be Honest and Gain Trust," in the [Frontiers in Public Health](#). This was a cross divisional collaboration with research teams throughout the Health Department.
- The Bronx Neighborhood Health Action Center team received a \$470,000 award from the Gus Schumacher Nutrition Incentive Program (GusNIP) Produce Prescription Program, administered by the United States Department of Agriculture's National Institute of Food and Agriculture. We would like to recognize and thank Lauren Shiman and Rosemary Lopez, who organized the grant writing process, and Lissette Paulino, who conceived of the program idea and will lead the implementation.