



NYC Health Justice Network: Overview and Preliminary Impact Report

About the NYC Health Justice Network

The NYC Health Justice Network (HJN) is an NYC Health Department program available to New Yorkers who have experienced incarceration within three years of enrollment. The program helps participants reenter their communities as easily and respectfully as possible by helping them set and meet their own priorities and goals.

Involvement with the criminal legal system is a social determinant of health. It intersects with racism, poverty, trauma, and physical and behavioral health conditions to perpetuate health disparities and to unjustly increase disease and mortality risks in Black and Latino communities. The NYC HJN has succeeded in linking people who were recently released from incarceration with primary health care services. The program also pairs trained, professional community health workers (CHWs) who have lived experience of reentry with participants to help meet their essential social, health and material needs as they reenter their communities. Further, the NYC HJN aims to improve the behavioral health and well-being of people involved with the criminal legal system by:

- Increasing access to primary health, behavioral health and substance use care
- Improving health care utilization, chronic disease and behavioral health outcomes
- Establishing a robust network of primary health care and community-based reentry social service providers to improve health and reduce recidivism

The NYC HJN partners with two federally qualified primary health care clinics — the Institute for Family Health and Community Healthcare Network — and works with two community-based reentry organizations — Osborne Association and the Center for Justice Innovation's Harlem Community Justice Center. All partners have proven experience in working with people involved with the criminal legal system.

Medicaid Match Evaluation

The NYU-CUNY Prevention Research Center conducted a five-year, CDC-funded Medicaid match evaluation of the NYC HJN to compare its participants on a wide range of health outcomes, six and 12 months after joining the NYC HJN, with a control group of people who did not participate in the NYC HJN. The results from the Medicaid match evaluation show significant impacts, including:

Health Care Utilization

- NYC HJN participants spent significantly more months enrolled in Medicaid than people in the control group.
- NYC HJN participants were significantly more likely to engage in primary care and had more engagement with primary care providers than people in the control group.
- NYC HJN participants were significantly more likely to receive mental health care in the months following enrollment than people in the control group.
- NYC HJN participants received more substance use treatment than people in the control group.

Health Treatment Differences

- NYC HJN participants were more likely to receive medication for asthma, cardiovascular disease and diabetes than people in the control group.

Accomplishments from the NYC HJN's Inception in September 2019 Through July 2024

- The NYC HJN has received 1,993 referrals from partner sites and community organizations.
- Out of the 1,993 referrals, 1,495 people have been enrolled into the NYC HJN, receiving peer support and linkages to services from CHWs.
- NYC HJN participants received:
 - 553 referrals to primary health care
 - 249 referrals to behavioral health care
 - 504 referrals to housing support
 - 1,162 referrals to employment services
 - 457 referrals for vital documents
 - 247 referrals to health insurance connection

Ongoing NYC HJN Activities

City's Mental Health Plan

- Working with NYC Health + Hospital's [Point of Re-entry and Transition \(PORT\) program](#) to engage and enroll people with mental health disorders who were recently released from jail or prison in health care programs
- Working with [ideas42](#) to create a primary care enhancement toolkit

- Collaborating with PORT on a set of health literacy trainings for community health workers to increase uptake in primary and behavioral health care, address common barriers to accessing care, and demonstrate the relevance of health care to people undergoing reentry
- Creating a checklist tool for patients for pre-appointment preparation, day-of-appointment preparation and post-appointment follow-up

Partnerships for the Early Diversion of Youth

- Contributing expertise as part of the NYC Health Department’s Partnerships for the Early Diversion of Youth’s core team
- Providing guidance on working with community-based organizations that deal with both people involved with the criminal legal system and health care providers
- Advising on how to use trauma-informed and anti-racist approaches to public health issues

Expansion of Behavioral Health and Crisis Services

- Expanding health care delivery services, including behavioral and substance use disorder, to support the NYC Health Department’s mental health goals
- Expanding the number of behavioral health partners, including groups that specialize in the criminal legal system, prerelease transition behavioral health planning, crisis stabilization and community reentry

Funding

Beginning in May 2024, the NYC HJN received approval for ongoing funding from the NYC Health Department to continue and expand its work with New Yorkers involved with the criminal legal system. This funding will support the expansion of primary health care and behavioral health and substance use disorder treatment to other people involved with the criminal legal system. The NYC HJN will focus on enrolling members who reside in neighborhoods identified by the Taskforce on Racial Inclusion as having a high percentage of health and socioeconomic disparities. Funding from the NYC Health Department will allow the NYC HJN to continue making progress on the goals set forth in the NYC Health Department’s [HealthyNYC campaign](#), particularly among New Yorkers involved with the criminal legal system.