

# NEW YORK CITY

## 2025 VOLUNTARY LOCAL REVIEW

GETTING THE GLOBAL GOALS DONE FOR NEW YORKERS



NYC

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# Forward from the Mayor



Dear New Yorkers and Global Partners:

As the host city of the United Nations (UN) Headquarters, home to the largest diplomatic community on the globe, and one of the world's most diverse metropolises, New York City understands the power of cooperation. We also know the urgency of local action. Our 8.5 million residents represent virtually every country and culture on Earth. What happens on our streets echoes far beyond our borders. That is why we are proud to lead the way on subnational diplomacy and the Sustainable Development Goals (SDGs).

I am pleased to share New York City's Voluntary Local Review (VLR) to the United Nations as part of the 2025 High Level Political Forum on Sustainable Development. The VLR, a renewed commitment to global sustainability, was crafted through a collaboration between the New York City Mayor's Office for International Affairs and the New York City Mayor's Office of Operations. This VLR highlights our progress on five SDGs: Good Health and Well-Being (SDG 3), Gender Equality (SDG 5), Decent Work and Economic Growth (SDG 8), Life Below Water (SDG 14), and Partnerships for the Goals (SDG 17). It reflects our vision for a healthier, more equitable, and resilient city.

This report is especially important because it is being released as we celebrate the 80th anniversary of the United Nations and our continued role as host city. From advancing maternal health equity through programs like the Citywide Doula Initiative to revitalizing our 520 miles of shoreline with investments in water quality and ecosystem restoration, we are turning global goals into local impact. Our robust tourism sector and workforce development programs empower economic opportunity, while partnerships like the Age-friendly New York City Commission foster inclusion across generations.

When we say we're "Getting Stuff Done," we mean we're turning policy into impact, especially for the New Yorkers who have historically been left behind. The VLR is not just a report; it's a commitment to transparency, shared learning, and global solidarity. As the world continues to face existential challenges, cities have never mattered more. New York City stands with local governments worldwide to prove sustainable development starts on the ground.

Through the leadership of the city's Mayor's Office for International Affairs, our city remains committed to working with the United Nations to achieve a better future for all through international knowledge-sharing. From the streets of the Bronx to the halls of the United Nations, we are forging a greener, fairer future, together.

Sincerely,



Eric L. Adams  
Mayor  
City of New York

# Foreword from the Deputy Mayor for Administration



Dear New Yorkers:

At the heart of every policy we advance and every partnership we forge lies one simple question: How will this improve the lives of New Yorkers? That question has guided every page of this year's Voluntary Local Review (VLR).

This report is far more than an accounting of programs, it is a reflection of the real, tangible ways our city government is working every day to deliver a healthier, safer, and more equitable New York City. It is also a reminder that the Sustainable Development Goals are not abstract ideals, they are everyday priorities for the working parents commuting across boroughs, the students stepping into classrooms, the seniors navigating their neighborhoods, and every resident who calls this city home.

Through this VLR, we demonstrate what it looks like when global commitments are grounded in local impact. Whether through our investments in maternal health and mental well-being, our expansion of workforce training programs, or our efforts to build more inclusive and resilient communities, we are centering people, particularly those historically left behind, in every initiative.

This year's VLR also comes at a pivotal moment. As we celebrate the 80th anniversary of the United Nations right here in New York City, we are reminded that the world looks to us not only as a diplomatic capital, but as a living example of what is possible when a city embraces its global responsibilities while putting its people first.

I am grateful to the Mayor's Office for International Affairs and the Mayor's Office of Operations for leading this effort and to the many city agencies that helped make this report a reality. The work captured here is a testament to the power of collaboration, and to the strength of a city that refuses to leave anyone behind.

Let this document serve as both a record of progress and a promise: that we will continue to harness every partnership, every innovation, and every resource available to deliver results for the people of New York City.

Sincerely,



Camille Joseph Varlack  
Deputy Mayor for Administration and Chief of Staff to the 110th Mayor  
City of New York

# Foreword from the Commissioner of the Mayor's Office for International Affairs

A photograph of a person sitting on a concrete wall, looking up at a large, modern architectural structure. The person is wearing a dark jacket and a hat, and has a bicycle leaning against the wall. In the background, there are blue plastic barriers and a line of trees with autumn-colored leaves. The sky is overcast.

Dear Partners and Colleagues:

As the Commissioner of International Affairs, I am proud to present New York City's 2025 Voluntary Local Review (VLR). More than a snapshot of progress, this report is a strategic policy instrument. It demonstrates how cities like ours are turning global goals into local action and embedding international frameworks into daily governance.

At a time of deep interconnection, where public health, climate resilience, digital transformation, and economic equity converge, the Sustainable Development Goals offer a shared architecture for collaboration and accountability. The VLR helps us assess how policy translates into impact, especially for those too often left behind. But more than that, it affirms that international cooperation must include local and regional governments. Cities are not simply participants in global affairs, we are architects of its future.

As host city of the United Nations and home to the world's largest diplomatic corps, New York occupies a singular position on the global stage. Our streets reflect every culture, our institutions host global decision makers, and our communities embody both the promise and the urgency of sustainable development. That proximity between diplomacy and daily life is not symbolic but operational. It demands that our international engagement produce measurable, people-centered outcomes.

Our office connects New York City's local innovations to global policy. We host heads of state and other foreign dignitaries at our agencies to share strategies on inclusion and resilience, engage in UN convenings to advance shared goals, and inspire cities worldwide through our local actions. Through subnational diplomacy, our office amplifies New York's voice, forging partnerships that drive sustainable progress from local communities to international stages.

Our work is anchored in the belief that global frameworks like the Sustainable Development Goals must be implemented locally to be effective. Through initiatives like Connecting Local to Global (CL2G), we create opportunities for diplomats to engage directly with city agencies and communities across the five boroughs. With the NYC Junior Ambassadors (NYCJA) program, we connect middle and high school classrooms to the United Nations, fostering global awareness among young New Yorkers. Through Global Vision | Urban Action (GVUA), we spotlight local leadership on the SDGs while driving international policy dialogue, most recently through our city-led summit on artificial intelligence and governance.

This year's VLR is the result of rigorous interagency collaboration, led by our office alongside the Mayor's Office of Operations. For us, the VLR is also a diplomatic tool, anchoring our global partnerships, city network leadership, and convenings in shared policy outcomes. It reinforces the core values of our city: transparency, equity, and data-driven collaboration. From launching the VLR Declaration to expanding subnational diplomacy worldwide, we are helping shape a new model of international affairs, one rooted in city leadership.

Cities are not waiting to be invited into global decision making; we are already leading it. The 2025 VLR is proof that when governance is transparent, policy is human-centered, and partnerships are built with intention, progress becomes possible.

We hope you will enjoy reading this VLR as much as we enjoyed writing it. Thank you for being part of this work.

Sincerely,



Aissata M.B. Camara  
Commissioner  
New York City Mayor's Office for International Affairs

# Opening Statement from the Director of the Mayor's Office of Operations



Dear Technical and Operations Colleagues:

New York City earned its reputation as a “global city” by serving as a primary economic and cultural node within the international system. But it can only achieve its promise as a “global city” through dialogue with other cities around the world. Municipal governments are faced with similar responsibilities and challenges that are increasingly global in nature, from extreme weather to political currents. It is imperative for governmental professionals to exchange ideas, policy and operational solutions, technologies, and data practices. The UN Sustainable Development Goals (SDGs) provide a common framework and discourse for this exchange, and New York City is proud of its pioneering role in compelling other cities around the world to submit SDG Voluntary Local Reviews, which UN Deputy-Secretary General Amina Mohammed called “an embodiment of cities’ willingness to do better when it comes to sustainability.”

The SDG’s comprehensive scope and focus on performance indicators has been particularly helpful as cities reconsider what they measure, how and why they measure something, what is not being captured as data, and how all of this information is deployed to make policy and deliver services. Despite New York City’s massive data infrastructure, which includes over 2,200 performance indicators representing every function of government, the city has much to learn from our counterparts around the world who are rapidly taking advantage of new analytical capacities.

We cherish New York’s unique responsibility to facilitate international knowledge-sharing, not just as host to the United Nations for 80 years, but as an international symbol of diversity and tolerance.

Sincerely,



Daniel Steinberg  
Director  
New York City Mayor’s Office of Operations

# Acronyms

ACRONYM	MEANING
<b>ACS</b>	New York City Administration for Children's Services
<b>BIPOC</b>	Black, Indigenous, and people of color
<b>BID</b>	Business Improvement Districts
<b>CAU</b>	Community Affairs Unit
<b>CBO</b>	Community-Based Organizations
<b>CCHR</b>	New York City Commission on Human Rights
<b>CDC</b>	U.S. Centers for Disease Control and Prevention
<b>CL2G</b>	Connecting Local to Global
<b>CGE</b>	New York City Commission on Gender Equity
<b>CMS</b>	U.S. Centers for Medicare & Medicaid Services
<b>CSO</b>	Combined Sewer Overflow System
<b>CUNY</b>	City University of New York
<b>DCAS</b>	New York City Department of Citywide Administrative Services
<b>DCWP</b>	New York City Department of Consumer and Worker Protection
<b>DDC</b>	New York City Department of Design and Construction
<b>DEP</b>	New York City Department of Environmental Protection
<b>DHS</b>	New York City Department of Homeless Services
<b>DOC</b>	New York City Department of Corrections
<b>DOT</b>	New York City Department of Transportation

# Acronyms



<b>DSNY</b>	New York City Department of Sanitation
<b>DSS</b>	New York City Department of Social Services
<b>DYCD</b>	New York City Department of Youth & Community Development
<b>EMS</b>	New York City Emergency Management Services
<b>ENDGBV</b>	New York City Mayor's Office to End Domestic and Gender-Based Violence
<b>EJNYC</b>	Environmental Justice Initiative
<b>FDNY</b>	Fire Department of New York City
<b>FGM/C</b>	Female Genital Mutilation and Cutting
<b>FJC</b>	New York City Family Justice Centers
<b>GMH</b>	Geriatric Mental Health Program
<b>GCP</b>	Gross City Product
<b>GVUA</b>	Global Vision   Urban Action
<b>Health Department</b>	New York City Department of Health and Mental Hygiene
<b>HPD</b>	New York City Department of Housing Preservation and Development
<b>HRA</b>	New York City Human Resources Administration
<b>HSE</b>	High School Equivalency
<b>H+H</b>	New York City Health + Hospitals
<b>IA</b>	New York City Mayor's Office for International Affairs

# Acronyms

<b>Judson</b>	New York City Judson Pride Clinic
<b>LAW</b>	New York City Law Department
<b>LGBTQ+</b>	Lesbian, Gay, Bisexual, Transgender and Queer
<b>MMRC</b>	New York City Maternal Mortality Review Committee
<b>MOIA</b>	New York City's Mayor's Office of Immigrant Affairs
<b>MOCEJ</b>	New York City Mayor's Office of Climate and Environmental Justice
<b>MOCJ</b>	New York City Mayor's Office of Criminal Justice
<b>MOERJ</b>	New York City Mayor's Office of Equity and Racial Justice
<b>MOPD</b>	New York City Mayor's Office for People with Disabilities
<b>M/WBEs</b>	Minority- and Women-owned Businesses
<b>NNY</b>	“New” New York
<b>NYC Aging</b>	New York City Department for the Aging
<b>NYC Parks</b>	New York City Department of Parks and Recreations
<b>NYC Talent</b>	New York City Mayor's Office of Talent and Workforce Development
<b>NYCEDC</b>	New York City Economic Development Corporation
<b>NYCEM</b>	New York City Emergency Management
<b>NYCHA</b>	New York City Housing Authority
<b>NYCJA</b>	New York City Junior Ambassadors
<b>NYCPS</b>	New York City Department of Education (NYC Public Schools)
<b>NYPD</b>	New York City Police Department

# Acronyms



<b>OCSIP</b>	New York City Office of Child Safety and Injury Prevention
<b>OSP</b>	Office of Strategic Partnerships
<b>RHY</b>	Runaway and Homeless Youth
<b>SBS</b>	New York City Small Business Services
<b>SDGs</b>	Sustainable Development Goals
<b>SHPAB</b>	Street Harassment Prevention Advisory Board
<b>SNAP</b>	Supplemental Nutrition Assistance Program
<b>SYEP</b>	Summer Youth Employment Program
<b>TGNCNB</b>	Transgender, Gender Non-conforming, and Non-binary
<b>TLC</b>	New York City Taxi and Limousine Commission
<b>TPC</b>	Tenant Protection Cabinet
<b>UN</b>	United Nations
<b>Unity Project</b>	New York City Unity Project
<b>U.S.</b>	United States of America
<b>VLR</b>	Voluntary Local Review
<b>VNR</b>	Voluntary National Review
<b>WIC</b>	Women, Infants, and Children
<b>WRP</b>	Waterfront Revitalization Plan
<b>WRRF</b>	Wastewater Resource Recovery Facilities
<b>311</b>	New York City 311

# Highlights



As the world marks the 80th anniversary of the United Nations, this 2025 Voluntary Local Review underscores the power of cities to advance global goals through grounded, local action. As the host city of the United Nations and home to over 8.5 million people, New York City continues to demonstrate leadership and innovation in the face of challenges. This 2025 Voluntary Local Review highlights the city's efforts on five Sustainable Development Goals (SDGs) under review at this year's High-Level Political Forum: Good Health and Well-Being (SDG 3), Gender Equality (SDG 5), Decent Work and Economic Growth (SDG 8), Life Below Water (SDG 14), and Partnerships for the Goals (SDG 17). Together, they reflect a vision for equity, resilience, and shared responsibility across all five boroughs.

New York City is advancing health equity by addressing chronic disease and mental health as interconnected drivers of inequality. Through the *HealthyNYC* agenda, New York City set measurable goals to reduce deaths from heart disease, diabetes, and screenable cancers by 2030. A complementary initiative, *Addressing Unacceptable Inequities: A Chronic Disease Strategy for New York City*, coordinates 19 cross-agency actions, from community nutrition investments to race conscious clinical standards. On mental health, the New York City Department of Health and Mental Hygiene's *State of Mental Health of New Yorkers* report surfaced long standing racial and income-based disparities in access to care. In response, new policy recommendations are guiding expanded prevention, stigma reduction, and early screening, particularly for children and adolescents. While progress is underway, challenges remain in closing data gaps for vulnerable populations and strengthening culturally responsive care across the system.

Gender equity is being built into systems, not just services. New York City has expanded its response to gender-based violence through survivor-centered shelters, legal aid, and trauma informed programs. The *Citywide Doula Initiative* and a new *Midwifery Initiative* aim to reduce maternal health disparities through culturally aligned support. The New York City Commission on Gender Equity and data collection mandates are helping to expose gender wage gaps, workplace discrimination, and gender-based violence, while programs like the *Women Forward NYC* address disparities in health, economic mobility and safety. Across these efforts, the city is working to shift from reactive interventions to structural change.

Economic growth is being pursued with inclusion and long-term resilience in mind. Through initiatives like *LifeSci NYC*, the Green Economy Action Plan, and workforce development partnerships with CUNY, the city is investing in sectors that offer mobility for historically underrepresented New Yorkers. Over 100,000 workers have participated in training or employment programs through city-backed initiatives, many of which prioritize immigrants,

young adults, and low-income residents. While job creation continues to rebound post-COVID, challenges persist in connecting vulnerable populations to quality employment with benefits, protections, and career pathways. New York City is addressing this through expanded apprenticeships, small business support, and sector-specific pipelines.

As a coastal city, New York City is linking ocean stewardship directly to community resilience. With over 520 miles of shoreline, the city is implementing nature-based solutions to confront rising sea levels and restore marine ecosystems. Support for the *Billion Oyster Project*, implementation of the *Waterfront Revitalization Program*, and the newly created *Bureau of Coastal Resilience* all serve dual purposes, advancing ecological recovery while reducing climate risk in heat- and flood-prone communities. These blue infrastructure projects demonstrate how environmental justice can guide climate adaptation in dense urban contexts.

Finally, New York City continues to elevate partnerships as a core strategy for sustainable development. Through subnational diplomacy led by the Mayor's Office for International Affairs, the city regularly engages with other national and local governments, diplomatic entities in New York City and globally, multilateral institutions, the private sector, and civil society partners. This VLR itself was developed through deep interagency collaboration.

Across all five goals, one lesson is clear: inclusive progress depends on listening to those most affected by inequity and translating insight into shared action. From community health programs in the Bronx to global roundtables at City Hall, New York City is committed to doing just that.



# Introduction



New York City's 2025 Voluntary Local Review (VLR) reflects the city's unwavering commitment to sustainability, equity, and global cooperation. As the host city of the United Nations and a global capital of culture, commerce, and diplomacy, New York City understands that meaningful progress on the Sustainable Development Goals (SDGs) must begin at the local level, where policy meets people.

This is a defining moment for New York City. The city now has more jobs than at any point in its history. Major crime is down. Tourism is surging, with over 62 million visitors in 2023. These are more than economic markers, they are signs of a city recovering with resilience and rebuilding with purpose. Our post-pandemic recovery isn't about returning to the past; it's about advancing toward a future that is more inclusive, more sustainable, and more just.

This third VLR builds on the city's groundbreaking reviews in 2018 and 2019, offering a renewed approach that reflects the SDGs under review in 2025. This report is grounded in the direct contributions of city agencies whose work powers systems change, from public health and gender equity to climate resilience and inclusive economic growth. Led by the Mayor's Office for International Affairs in partnership with the Mayor's Office of Operations, the review process involved deep interagency collaboration, mapping of local programs to global goals, and analysis of both outcomes and gaps.

The result is not just a progress report, but a reflection of how New York City continues to translate global ambition into local impact, particularly for communities historically left behind. From expanding mental health and maternal care to revitalizing our shorelines and investing in small businesses, the city is showing what localized SDG implementation can look like in action.

This VLR is a tool for transparency, accountability, and shared learning. In a city of 8.5 million people speaking more than 800 languages, sustainable development must be bold, inclusive, and community driven. This report affirms where we are, what we have built, and where we are determined to lead next.



# Methodology and process for preparation of the review



The 2025 Voluntary Local Review (VLR) was developed in partnership between the New York City Mayor's Office for International Affairs and the New York City Mayor's Office of Operations and is a revival of two New York City VLRs produced in 2018 and 2019. Whereas the previous two iterations were based on OneNYC 2050, the city's strategic planning effort at the time, this VLR effort was organized in consultation with New York City agencies whose everyday programming works toward the five SDGs reviewed in this year's report.

The format of the VLR is based on New York City's 2018 and 2019 VLRs, which draw from the outline provided in the handbook for the preparation of Voluntary National Reviews (VNRs) produced by the Division for Sustainable Development of the UN Department of Economic and Social Affairs (DESA). It was further shaped by advisement with city agencies. A review of previous New York City VLRs, VLRs written by other cities, VNRs, and VNR analyses was also conducted.

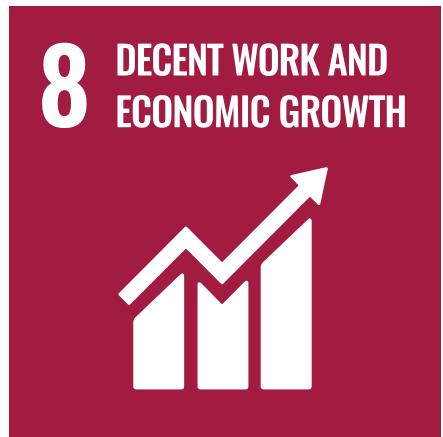
The 2025 VLR addresses the five SDGs prioritized for the 2025 High-Level Political Forum (HLPF) on Sustainable Development, namely Good Health and Well-Being (SDG 3), Gender Equality (SDG 5), Decent Work and Economic Growth (SDG 8), Life Below Water (SDG 14), and Partnerships for the Goals (SDG 17).

The information presented in the SDG review section in this VLR was selected based on a mapping of the SDGs to relevant citywide efforts. This VLR's preparers consulted with the city agencies responsible for implementing programs and initiatives which advance the five priority goals for the 2025 HLPF by selecting relevant content, asking city agencies to review the text, and requesting that they add any additional information that may be applicable based on the SDG indicators.

As New York City has no comprehensive SDG data reporting mechanism, this review presents a qualitative analysis of the city's goals and targets mapped to the relevant SDGs. New York City tracks more than 2,000 performance indicators through a monitoring system it has been developing since the 1970s, and examples of the data that New York City collects, including performance indicator names, descriptions, and sources, are included in the appendix.

# Progress on the Goals





# 3 GOOD HEALTH AND WELL-BEING





# Goal 3: Good Health and Well Being

## SDG Target 3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births

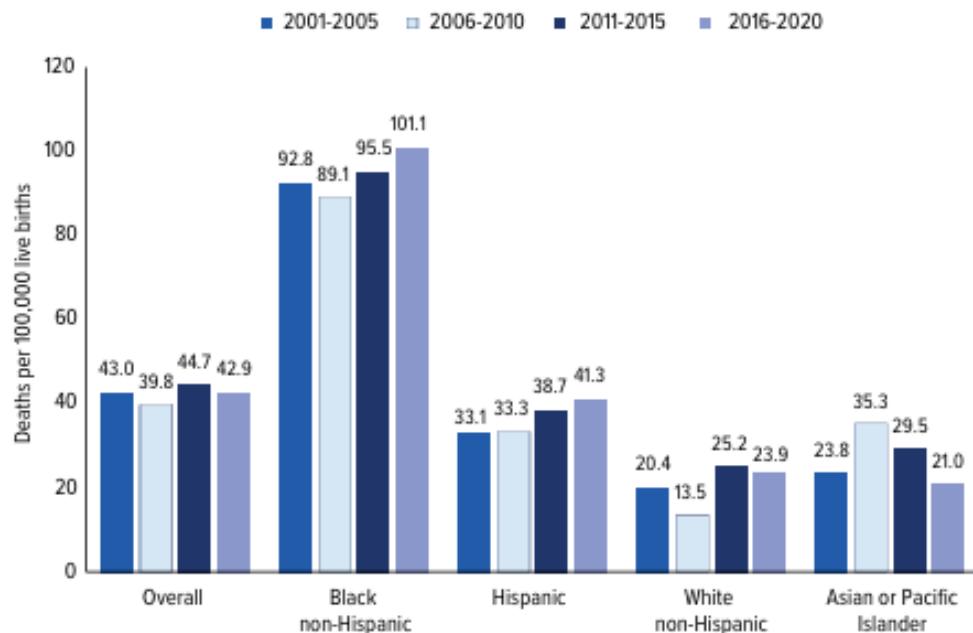
### CONTEXT

Since 2001, the New York City Department of Health and Mental Hygiene (Health Department) has conducted surveillance of pregnancy-associated deaths to develop five-year pregnancy-associated mortality reports. In 2018, the Health Department began reporting the data annually on its website and on the [New York City Open Data Portal](#), which contains free public data published by New York City agencies and other partners as required by local law. Pregnancy-associated deaths include deaths from any cause during pregnancy or within one year from the end of pregnancy, regardless of the outcome of the pregnancy. Pregnancy-related deaths, a subset of pregnancy-associated deaths, are deaths that occur during pregnancy or within one year from the end of pregnancy that are caused by a pregnancy complication, a chain of events initiated by pregnancy or the aggravation of an unrelated condition by the pregnancy.

In 2021, the citywide pregnancy-associated mortality rate was 48.6 deaths per 100,000 live births, achieving the United Nations goal of reaching less than 70 deaths per 100,000 live births. However, Black women and birthing people in New York City had a pregnancy-associated mortality rate 135% higher than the citywide rate, reaching 114.2 deaths per 100,000 live births in 2021. Pregnancy-associated mortality rates, both citywide and for Black women and birthing people, increased from 2020 to 2021, likely due to random variation among a small number of deaths. The Health Department only reports data through 2021 at this time because there is 2.75 years data lag due to Health Department protocol and Centers for Disease Control and Prevention (CDC) guidance on the case identification and review process timeline to accurately evaluate each death.

Since 2001, the pregnancy-associated mortality rate in New York City has remained steady, but inequities remain. In 2016-2020, Black non-Hispanic women and birthing people were four times more likely to die of a pregnancy-associated cause and six times more likely to die of a pregnancy-related cause compared with white non-Hispanic women and birthing people. Racism drives these disparities. This includes historical and current intentional under-investment in neighborhoods where Black non-Hispanic women and birthing people live, interpersonal racism that weathers the bodies of Black people earlier than white people, and anti-Blackness in health care. The city has sought to take steps to address these inequities.

## Pregnancy-Associated Mortality Ratio by Maternal Race and Ethnicity



The Health Department's five-year pregnancy-associated mortality ratio by maternal race and ethnicity in New York City from 2001-2020.

## PROGRESS AND NEXT STEPS

### Maternal Mortality Review Committee Commitments

In January 2018, in response to pregnancy-associated mortality inequities, the Health Department convened the New York City Maternal Mortality Review Committee (MMRC, or the Committee) to conduct [multidisciplinary reviews](#) of all pregnancy-associated deaths among New York State residents who died in New York City, starting with deaths that occurred in 2016. The Health Department uses standards and protocols developed by the CDC, which are used in 46 other states and jurisdictions. In 2020, the New York State Department of Health adopted this same methodology to convene a second MMRC that reviews deaths of New York State residents who died outside of New York City. The MMRC's vision is to make recommendations for New York City to reduce preventable maternal mortality and eliminate racial disparities in this outcome. The mission is to gain a holistic understanding of the contributing factors leading to death by reviewing each woman and birthing person's story and to use the information gathered during the review to inform recommendations to prevent future deaths.



The MMRC conducts in-depth reviews of all pregnancy-associated deaths, thoroughly examining each case to determine preventability. For preventable deaths, the MMRC identifies key contributing factors, and specific and feasible recommendations to prevent future deaths. A death is considered preventable if the MMRC determines that there was at least some chance of death being averted by one or more reasonable changes to factors at any of five levels: system, facility, provider, community, and patient/family. In 2021, the MMRC determined that 74.1% (43 out of all 58 deaths) had a good or some chance of being prevented. As for all pregnancy-associated deaths, the MMRC considered whether discrimination, obesity, substance use disorder and mental health contributed to the death and directly compromised the person's health or health care. The MMRC determined that discrimination, obesity, substance use disorder, or mental health conditions other than substance use disorder contributed to 69.0%, 13.8%, 39.7% and 48.3% of the 58 total deaths, respectively.

The Health Department continues to conduct maternal mortality surveillance and chairs and supports the functioning of the MMRC. The Health Department convened 11 maternal mortality review meetings in 2023, enabling the MMRC to complete its review of all pregnancy-associated deaths in 2021 by January 2024. The Health Department reported the 2021 cohort of deaths on the NYC Open Data Portal and posted this report to the Health Department's website on September 30, 2024. Health Department staff continued to participate in the New York State MMRC Steering Committee, and all 2021 city data were made available to the State's Department of Health for a statewide report. The Health Department also completed a new five-year "[Pregnancy-Associated Mortality in New York City for 2016-2020](#)" report and presented and circulated it at a public event on September 25, 2024.

Based on the review of deaths that occurred in 2021, the MMRC made specific, actionable recommendations to the Health Department to prevent future deaths. It also prioritized the recommendations based on their ability to reduce inequities in maternal mortality, cause of death, key contributing factors, impact, and feasibility. There were 20 recommendations prioritized by the MMRC in its review of the 58 deaths, including improving postpartum care, expanding access to doula care, supportive housing, and mental health services, decriminalizing substance use, and implementing adequate training for all health care providers to deliver comprehensive and holistic care. These recommendations and more serve as a blueprint for action for all stakeholders working to reduce maternal mortality.

Initiatives and programs across the city that help address maternal mortality outcomes are highlighted below.

### **Healthy NYC**

In November 2023, the Health Department launched [HealthyNYC](#), a comprehensive population health agenda to improve life expectancy and create a healthier city for all. HealthyNYC's overarching goal is to increase New Yorkers' life expectancy to at least 83 years of age by 2030. It sets specific goals to change health outcomes by targeting the major drivers of overall death, excess death, premature death and extreme racial inequities, including pregnan-



cy-associated deaths. Black women and birthing people are four times more likely than white women and birthing people to die from pregnancy-associated causes. Because of this, through HealthyNYC, the city has set a goal to reduce the pregnancy-associated mortality among Black, non-Hispanic women and birthing people by 10% by 2030. To do this, the Health Department will increase new families' access to health care and social support and increase access to and quality of sexual and reproductive health care for people of color who may become pregnant, are pregnant or have recently given birth. The city's goal will make significant progress toward closing the disparity, but the work cannot end there. The Health Department will continue to collaborate with its partners to deliver key services to pregnant, birthing, and parenting people by working with hospitals and clinicians, providing support through home visiting and doula services, educating New York City on the benefits of full-scope integrative midwifery care, and working with community partners, all to decrease maternal mortality and morbidity while uplifting modalities of birth equity and promote healthy families.

### **Maternal Medical Home**

New York City Health + Hospitals (H+H), the largest municipal health care system in the country, [houses a Maternal Medical Home](#) that seeks to improve high-risk obstetric outcomes by providing pregnant patients with referrals to specialty care, mental health services, socio-economic support services, and more. Initially piloted in 2019, the Maternal Medical Home launched systemwide in 2021. Since the program's launch, more than 8,500 of pregnant patients have been referred to additional care or support services, such as doula services, mental health resources, nutrition counseling, dental care, and housing assistance.

Patients can be referred to the Maternal Medical Home program at any point while receiving prenatal to postpartum care at H+H. Patients may be identified at their initial prenatal visit, from a visit to obstetrics (OB) triage during the pregnancy, from the high-risk OB practice, or once a postpartum issue has been identified. Once a need is detected the patient is referred to other necessary specialty care, such as substance use disorder treatments, dental care, mental health, or smoking cessation, or to socioeconomic support services, which can include financial counseling, food access programs (i.e. Women, Infants, and Children (WIC), Supplemental Nutrition Assistance Program (SNAP)), and affordable housing. In addition to working through the health system's social workers for wraparound services, more than 7,500 patients have been referred to community-based organizations for additional support.

### **Obstetric Simulation Training**

H+H also houses an Obstetric Simulation Training Program that trains the Obstetrics health-care team to manage the top three causes of maternal mortality: cardiovascular collapse, acute life-threatening blood loss, and severe hypertension. The program now conducts simulation exercises on shoulder dystocia, sepsis, and debriefing among the healthcare team and communicating with patients with substance use disorder. The team conducts nurse-specific trainings and most of the simulations occur in the H+H facilities themselves. To date, 562 of staff have been trained to prevent adverse outcomes during delivery.



### **Emergency Medical Services Pre-Hospital Lifesaving Care**

New York City Emergency Medical Services (EMS) and the New York City Fire Department (FDNY) play a critical role in reducing maternal mortality by delivering lifesaving care before in-need patients reach the hospital. EMS personnel are specially trained to provide care for Obstetrics patients, newborns, and pediatric patients, as well as non-pregnant adults. This comprehensive training is already in place and actively implemented. However, expanding EMS resources would amplify results by enabling faster response times.



## **SDG Target 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births**

### **CONTEXT**

In 2023, the Health Department reported the infant mortality rate for children under the age of one in New York City was 4.2 infant deaths per 1,000 live births, a slight decrease since 2022 (4.3 per 1,000 live births). Due to the small number of deaths, the rate will fluctuate from year to year. The infant mortality rate disparity between non-Hispanic Blacks and non-Hispanic whites decreased from the non-Hispanic Blacks rate being 5.1 times higher in 2021 to 2.8 times higher in 2022. The disparity in infant mortality rates between Puerto Ricans and non-Hispanic whites decreased slightly from the Puerto Ricans rate being 2.4 times higher in 2021 to 2.3 times higher in 2022. These changes may be due to small counts from year to year but are changing in the desired direction.

Pursuant to [Local Law 19 of 2018](#), New York City's Administration for Children's Services (ACS) is required to issue an annual report on its child fatality reviews within 18 months after the end of each calendar year. ACS is mandated to investigate alleged abuse and neglect among children under the age of 18 residing in the city. According to the most recent "[Systemic Child Fatality Review](#)" report, in 2022, ACS received more than 59,000 reports alleging specific child maltreatment, concerning more than 65,000 children. These reports were consolidated into a total of 44,186 Child Protective investigations and 6,901 Collaborative Assessment, Response, Engagement and Support (CARES) stages—CARES is an alternative, non-investigatory child protection response to reports made to the Statewide Central Register (SCR) of Child Abuse and Maltreatment. Among these, ACS investigated 74 child fatalities reported to the SCR of Child Abuse and Maltreatment. Of the 74 child deaths, almost half occurred in a family that had no contact with ACS within the last decade. The occurrence of a child fatality reported to the SCR with allegations of possible abuse or neglect continues to be a rare event, comprising about 0.1% of all cases investigated by ACS. Nonetheless, the loss of a child is tragic for a family and the community, and a death where there was past ACS contact requires special attention and review.



## PROGRESS AND NEXT STEPS

### **Citywide Doula Initiative, Midwifery Initiative, and Maternity Hospital Quality Improvement Network**

The [city addresses maternal and infant health inequities](#) in several ways, including through the Citywide Doula Initiative (CDI), launched in March 2022. The CDI provides free access to doula support during pregnancy, childbirth, and postpartum for birthing families living in 33 neighborhoods with the greatest social needs. Studies show that doulas can reduce rates of preterm birth and low birthweight, which are the leading causes of infant mortality. Rates of cesarean birth and medical pain management also improve with doula support. The city also created a Midwifery Initiative that will allow the Health Department, for the first time, to gather data on births and care with midwives, create partnerships with midwife organizations, private practices, and community members, and develop a report on midwives in New York City. Finally, the Maternity Hospital Quality Improvement Network (MHQI) works with birthing facilities across the city in an effort to improve maternal care at local hospitals and birthing centers.

### **Baby Friendly Hospital**

In 2008, H+H's Harlem location was the [first hospital](#) in New York City to receive the coveted "Baby Friendly" certification. Since then, each of H+H's 11 acute care hospitals has been designated as Baby-Friendly. Worldwide, more than 20,000 maternity facilities have received the Baby Friendly certification, while only 501 have been certified in the United States. The certification is granted by Baby Friendly USA, which is part of a global initiative sponsored by the World Health Organization and the United Nations Children Fund. The global Baby Friendly Hospital Initiative selects hospitals and birthing centers that successfully implement the recommended 10 steps of a comprehensive breastfeeding program, which includes limits on baby formula, initiating breastfeeding in the first hour of life, keeping mothers and babies in the same room, and support groups for women who breastfeed.

Breastfeeding exclusively for the first six months of an infant's life has many health benefits for babies and mothers, including a reduction in infectious diseases and mortality during infancy, improved bonding, and postpartum maternal weight loss. Breastfeeding also helps reduce the risks of common childhood infections, asthma, diabetes and other conditions that breastfed children are less likely to develop.

### **ACS's Safe Sleep Strategy**

In the 2022 child fatality review report, ACS reported that between 40 and 50 babies in New York City die from a sleep-related injury each year. The CDC estimates that nationally about 3,400 babies in the U.S. are lost to sleep-related deaths each year. The CDC's analysis also shows that the high-risk practice of placing babies on their side or stomach to sleep was more common among mothers who were Black/non-Hispanic, younger than 25, or had 12 or fewer years of education.



In 2015, a mayoral initiative established the New York City Infant Safe Sleep Initiative to prevent sleep-related infant injury deaths and address long-standing disparities to promote and protect the health and wellbeing of the youngest and most vulnerable New Yorkers. The initiative focuses on community engagement, public awareness campaigns, free training and resources, collaborations and stakeholder partnerships to increase infant survival in New York City. In addition, since 2017, the initiative has convened an annual summit of professionals and advocates to inform and unite a community of action focused on preventing the tragic loss of children to sleep-related infant injury deaths.

In August 2021, ACS established the Office of Child Safety and Injury Prevention (OCSIP) within its Division of Child and Family Well-Being, where efforts have continued on the agency's deep work to promote infant safe sleep practices. OCSIP offers free resources, supplies, including distribution of over 17,000 Safe Sleep Hospital Toolkits annually and distribution of sleep sacks and portable cribs, and trainings/public campaigns to heighten awareness about how to keep children safe.

During 2023, OCSIP continued its promotion of infant safe sleep practices, including through partnerships with several city government agencies, including the Health Department, H+H, FDNY, New York City Department for Homeless Services (DHS), New York City Housing Authority (NYCHA), NYC Department for the Aging (NYC Aging), New York City Police Department (NYPD) and New York City Department of Transportation (DOT), and other community stakeholders to deliver infant safe sleep training and distribute educational materials and resources to the parents and caregivers they serve.

### **Child Safety and Injury Prevention**

In 2023, ACS's OCSIP's guidance for parents and caregivers of infants and child-serving professionals was strengthened with the addition of new public awareness campaigns, expanded educational efforts and deeper collaborations with city agencies and community-based organizations to promote child injury prevention.

In March 2023, in recognition of National Poison Prevention Week, OCSIP collaborated with the Health Department and Cannabis NYC—an initiative by the New York City Department of Small Business Services (SBS) to promote education and equity in the cannabis industry—to develop language for a poison prevention social media campaign to raise awareness among parents, caregivers and other trusted adults about: 1) the poisoning risks associated with unintentional consumption of cannabis-infused edible products; 2) symptoms of cannabis intoxication in children; and 3) guidance on how to safely store cannabis out of sight and reach of children. OCSIP further collaborated with Cannabis NYC, H+H Harlem Hospital, H+H Gotham Health Clinics, the Southern Queens Park Association, and three licensed cannabis dispensaries—Dazed Cannabis, the Union Square Travel Agency Cannabis Store, and Housing Works Cannabis Company—to promote poisoning prevention in communities across the city. In partnership with these organizations, over 2,750 lockboxes were distributed to New Yorkers to keep cannabis products, medications and other potential poisons out of sight and reach of children.



In June 2023, OCSIP convened child-serving professionals, advocates, and parents at its first annual New York City Child Safety and Injury Prevention Summit. The goals of the summit were to enhance understanding, coordination, and strategic partnership around child injury prevention and promote strategies and interventions to prevent severe and fatal injuries, including related to unsafe sleep practices, Shaken Baby Syndrome, and child poisoning caused by exposure to cannabis-infused edibles.

From June through August 2023, OCSIP launched its Summer Safety Campaign—providing safety information and tips to prevent hot car/heatstroke, window falls, water, bicycle, scooter, and playground injuries from occurring. OCSIP also added guidance to prevent severe and fatal injuries related to Shaken Baby Syndrome. The new guidance provides prevention tips, including how to manage inconsolable crying in infants and strategies to manage caregiver frustration and exhaustion.

In November 2023, in recognition of National Injury Prevention Day, OCSIP hosted its annual Child Injury Prevention Resource Fair to increase awareness of the leading causes of unintentional child injuries and how to prevent them. OCSIP and its partners at the Health Department, FDNY, NYC Aging, the CORE Family Enrichment Center, and several community-based organizations distributed injury prevention information and resources to more than 150 families.

Over 2024 and 2025, OCSIP further enhanced its infant caregiver education by including stress-reduction strategies, calming techniques, and practical solutions to address caregiver overwhelm. In addition, OCSIP prioritized workshops that employ a conversational approach that fosters active engagement, real-time feedback, relationship building and peer-to-peer support that better supports infant caregivers to adopt safe sleep and other recommended practices to prevent injury to children.

## **Fire Safety**

Since 2019, ACS' Division of Child Protection has maintained a partnership with FDNY to co-deliver the FDNY & ACS Fire Safety Training, coordinated through FDNY's Fire Safety Education Unit. This training has been offered virtually and once in-person (during Fire Safety Week in October 2024). The last training delivery was held in February 2025 and to date, over 1,300 Child Protective Services staff have completed this training. The training focuses on smoke alarm and carbon detector installation and maintenance, lithium-ion battery safety and seasonal safety, such as precautions when using space heaters.

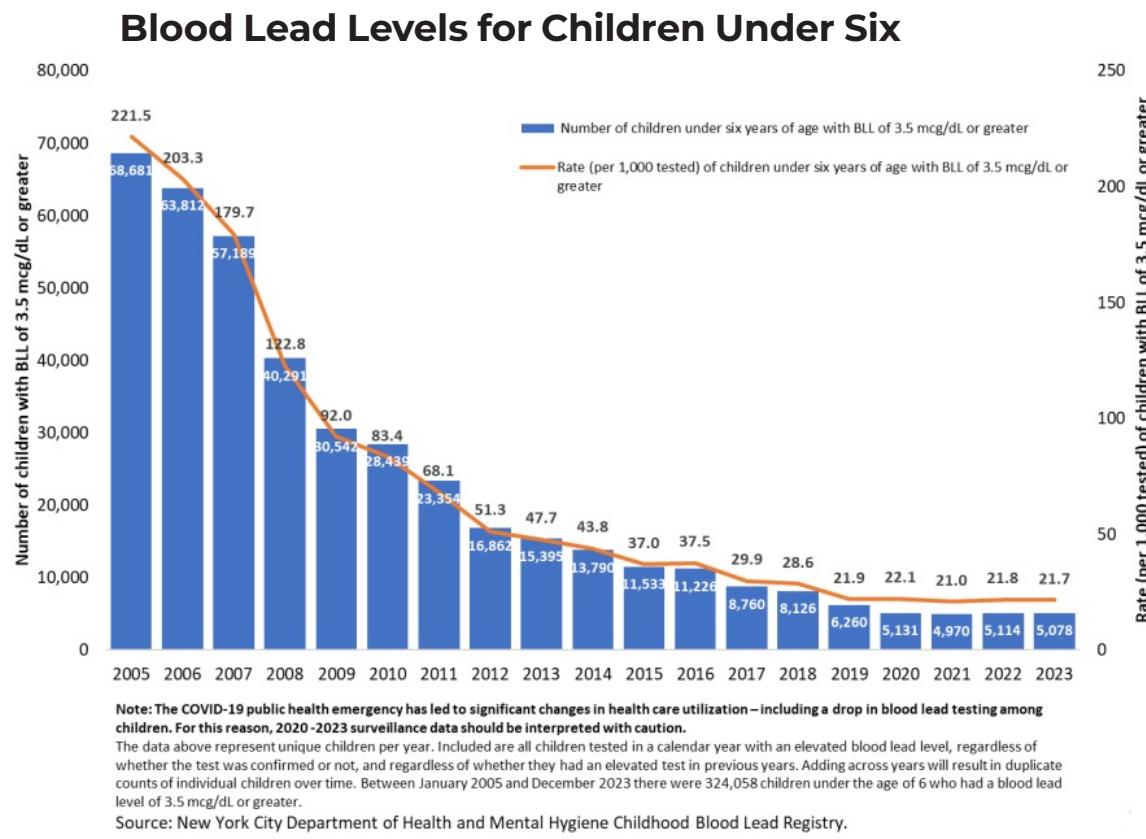
Additionally, during the training, the Division of Child Protection facilitator provides agency-specific context to child protection teams on the importance of checking that smoke/carbon monoxide detectors are operable and for including findings in the case record documentation. Also, child protection teams are informed that when smoke/carbon monoxide detectors are not observed/operable, follow up is to occur immediately to provide the family with a detector the same day if time permits, or with the support of their leadership team, request that ACS's Emergency Children Services deliver one to the family. Since 2021, ACS



also has a process for child protection teams to request installation of the detectors through the American Red Cross. Supportive resources and communications are shared with staff following presentations. These often include links to FDNY Smart resources, which offer videos and tip sheets on various topics.

### Childhood Lead Poisoning Reduction Initiatives

Lead exposure in childhood can lead to serious, long-term consequences, including learning difficulties and behavioral problems. Young children are especially at risk because they explore their environment by placing non-food items in their mouths, potentially exposing them to lead in dust and paint. Lead-based paint hazards remain the most commonly identified exposure source for New York City children with elevated blood lead levels. The number of New York City children with elevated blood lead levels are [reaching historic lows](#). Since 2005, there has been a 93% decline in the number of children under 6 years of age with blood lead levels of 3.5 mcg/dL or greater.



**The number and rate (per 1,000 tested) of New York City children under 6 years of age with a blood lead level (BLL) of 3.5 mcg/dL or greater.**



Lead exposure can also harm both the fetus and the pregnant person, increasing the risk of miscarriage, causing birth defects, and leading to learning and behavioral problems in children. New York State law requires medical providers to assess pregnant people for lead exposure at their first prenatal visit. Prior to 2019, the Health Department provided risk assessments to all pregnant people with blood lead levels of 10 mcg/dL or greater. Since April 2019, the Health Department provides risk assessments to all pregnant people with a blood lead level of 5 mcg/dL or greater. In 2023, 295 individuals with confirmed pregnancies were identified with elevated blood lead levels (5 mcg/dL or greater).

New York City has made great progress in reducing elevated blood levels in children as previously stated. This success is the result of a proactive and comprehensive approach to preventing lead exposure in childhood. Nevertheless, living in older, poorly maintained housing where lead-based paint exists continues to be the most commonly identified risk factor for lead exposure among New York City children.

### **WIC Program**

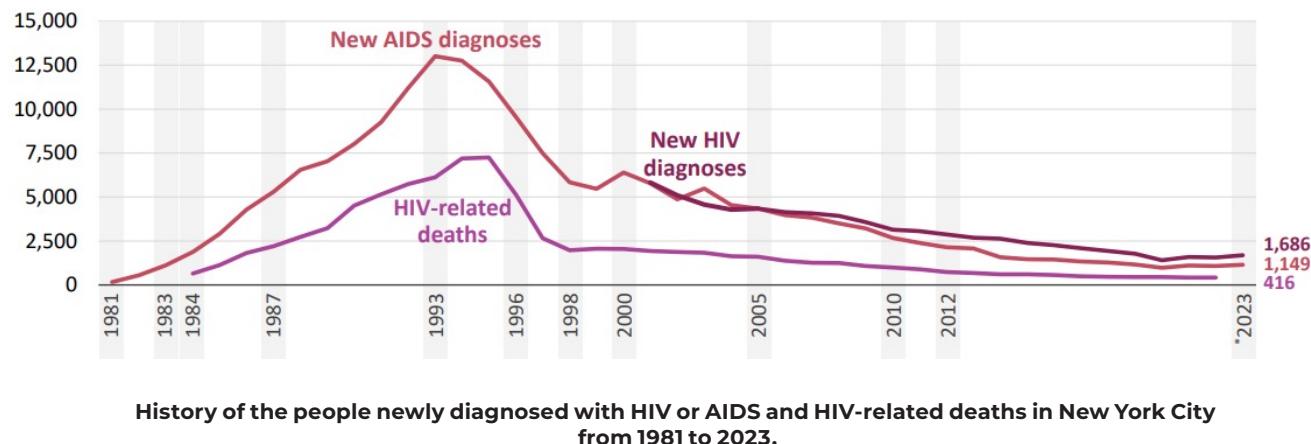
WIC is a federal program that provides nutritious foods, nutrition education, breastfeeding support, and referrals to other helpful services to eligible pregnant, including those breastfeeding, and postpartum individuals, infants, and children up to age five. Studies show that WIC eligible prenatal individuals who are enrolled in the WIC Program are more likely to have babies with a healthy birth weight, and children in WIC are more likely to do better in school.

## SDG Target 3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases

### CONTEXT

In 2023, the Health Department [reported](#) that 1,686 people were newly diagnosed with HIV in New York City, an increase of 7.6% from 2022, and in contrast with the year-over-year decline in new diagnoses between 2001 and 2022. While the number of new diagnoses increased in 2023, the estimated number of new HIV infections decreased by 17%, from 1,347 in 2022 to 1,122 in 2023. The number of estimated HIV infections is defined as the estimated number of people who newly acquired HIV infection. This differs from new HIV diagnoses, which is the number of people who were newly diagnosed with HIV, some of whom may have acquired HIV infection many years prior to their diagnosis. The divergence in new diagnoses and estimated new infections suggests that more existing infections were diagnosed, which may allow providers to link more people to care so that they can initiate HIV treatment and achieve viral suppression.

### HIV and AIDS Diagnoses and Related Deaths



In 2023, the Health Department [reported](#) that 684 patients were diagnosed with tuberculosis (TB) in New York City, a 28% increase from the 534 cases in 2022. Similar increases were seen in large cities across the U.S. in 2023. In New York City, increases were seen among various populations, including young children, people with a history of homelessness, and other vulnerable populations.



The COVID-19 hospitalization rate in New York City decreased 64% from 619.4 hospitalizations per 100,000 admissions in 2022 to 222.8 hospitalizations per 100,000 admissions in 2023. This is down nearly 70% from 2020, the height of the COVID-19 pandemic.

Climate change may increase the risk of people contracting communicable diseases. During extreme weather events, including, but not limited to, hurricanes and extreme rainfall/storm-water flooding, excess precipitation can trigger combined sewer overflows which send raw sewage, industrial waste, and other pollutants into the New York City waterways. Residents whose homes are flooded may be exposed to waterborne diseases such as norovirus and E. coli if these waters are contaminated by raw sewage.

## PROGRESS AND NEXT STEPS

### **HIV Prevention and Treatment**

Through city services, newly diagnosed New Yorkers with HIV can be linked to HIV medical care, start treatment, and achieve viral suppression, which can help prevent further transmission. In support of New Yorkers affected by HIV, the Health Department provides and facilitates services including: a routine HIV testing initiative focused on high-volume health care settings; the PlaySure Network, a citywide network of agencies and community partners funded to provide a one-stop shop model for comprehensive client-centered HIV and sexual health supportive services; citywide distribution of free safer-sex products; and ongoing provider and community engagement through direct communication (e.g., Dear Colleague Letters), webinars and trainings, networking events, and technical assistance.

Many members of the Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) community continue to face disproportionate rates of HIV and other sexually transmitted infections (STIs), making access to affirming and culturally responsive sexual health care essential. To confront this reality, the Health Department launched the "[New York City 2020: Ending the HIV Epidemic](#)" plan, a community-driven roadmap developed through a year-long planning process. This plan guides innovative, equity-focused HIV and sexual health initiatives that address social and structural factors driving disparities. It also prioritizes key populations most impacted by HIV, including Transgender, Gender Non-conforming, and Non-binary (TGNCNB) individuals, reinforcing the commitment to ending the epidemic through inclusive, data-driven strategies. Through strategic investments, the city is expanding inclusive primary care, gender-affirming services, sexual health programs, and HIV prevention efforts. Through the Building Equity: Intervening Together for Health initiative, the Health Department supports nine clinics to implement evidence-based HIV care models that address the needs of communities most impacted by HIV.

New York City's Unity Project (Unity Project)—which works across city agencies to develop programs, policies, communications, and engagements that advance equity for the city's LGBTQ+ community—and Judson Pride Clinic (Judson), H+H's flagship pride health center,



both support HIV prevention efforts and have improved access to confidential pre-exposure prophylaxis (PrEP) services for patients with privacy concerns. Judson is able to dispense PrEP medication directly to patients as part of a confidential visit for sexual and reproductive health care. Judson has also started offering the injectable form of PrEP, which allows patients to access PrEP medication confidentially and without worrying about adherence to daily medication, a barrier to consistent and effective use. Lastly, to further ensure high-quality, affirming health care, the Health Department partners with the local Callen-Lorde Community Health Center to provide comprehensive services for uninsured LGBTQ+ individuals. These services include primary care to behavioral health care, ensuring that care is accessible, holistic, and affirming.

### **Tuberculosis (TB) Treatment, Prevention and Surveillance**

The Health Department aims to prevent the transmission of TB and eliminate it as a public health problem in New York City. The Health Department is a leading provider of TB care in the city. TB services are available at three Health Department chest clinics located in the Bronx, Brooklyn and Queens. Physicians working at the chest clinics are specialists in internal, preventive and pulmonary medicine, and infectious disease.

The Health Department provides TB diagnostic services, including testing for TB infection (using blood-based QuantiFERON-TB Gold Plus [QFT-Plus] test and tuberculin skin test [TST]); sputum induction; laboratory tests; medical evaluation and chest radiographs; treatment for TB disease and Latent TB infections; and Directly Observed Therapy for patients of all ages. Most patients evaluated and treated at Health Department chest clinics are referred by city health care providers, other health departments or social service providers. Health Department staff also refer patients to other medical professionals for further evaluation and treatment of non-TB related conditions.

Health Department staff can assist with obtaining certain medications that are available under limited circumstances—including pretomanid, bedaquiline, clofazimine and delamanid—for the treatment of multidrug-resistant TB. Clofazimine and delamanid require the submission of a Single Patient Investigational New Drug application to the Food and Drug Administration and to the Health Department's Institutional Review Board for approval.

The Health Department also provides case management activities for city residents diagnosed with or suspected of having TB disease and their contacts, regardless of where the patient receives their TB care. Case management includes patient interviews, TB education, chart reviews, contact investigation, directly observed therapy and coordination with community providers to ensure optimal TB treatment and care. Health Department staff conduct home assessments to identify contacts and to determine whether patients with infectious TB can be discharged from the hospital. Health Department staff also coordinate with colleagues in other jurisdictions to ensure continuity of care for patients with confirmed TB disease and contacts who work or live outside New York City. Case managers perform monthly monitoring for treatment adherence and locate patients who have significant lapses in medical appointments or medication and help them return to medical supervision.



## COVID-19 Pandemic Health and Medical Operations Review

On March 2, 2020, the first COVID-19 case was confirmed in New York City. Within a month, New York City eclipsed Asian and European cities as the epicenter of the global COVID-19 pandemic. As a result of the rapid disease spread, city agencies and healthcare facilities were faced with the need to respond to simultaneous crises, unprecedented supply chain challenges, and patient and fatality surges.

While continuing to closely monitor healthcare and fatality trends, the city established the nation's largest testing and contact tracing operation. On June 1, 2020, New York City H+H launched Test & Trace (T2) with 1,000 contact tracers to investigate COVID-19 positive cases and identify, assess, and provide guidance to exposed contacts. Through a program named Take Care, T2 provided supportive services, treatment, and care to those in isolation and quarantine in-home or at hotels. As testing availability increased, the city encouraged all New Yorkers—not just those with symptoms—to get tested and limit the spread of COVID-19. More complex case and cluster investigations, such as those in congregate care settings, were referred to the Health Department for testing, case management, and contact tracing.

Once vaccines became available in late 2020, the city established the Vaccine Command Center (VCC) to coordinate vaccination opportunities for all New Yorkers through mass vaccination sites, mobile vaccination buses, on-site vaccination in congregate settings, in-home vaccination for home-bound individuals, and pop-up vaccination events throughout the city. Though Personal Protective Equipment (PPE) distribution, testing, contact tracing, and vaccination efforts were ultimately successful, initial organizational challenges led to operational delays that should be remedied before the next public health emergency. To evaluate the city's pandemic emergency preparedness and response strategies, the city conducted a [thorough review of its COVID-19 response](#). The review identified 74 recommendations for the city to address. One of these recommendations noted that clearly defining agency roles and staffing strategies for large-scale response efforts would help reduce operational challenges and inefficiencies for future public health emergencies.

In 2023, the COVID-19 hospitalization rate was down 70% from 2020, likely due to an increase in population immunity, more effective treatment options, and differences in circulating COVID-19 variants. The Health Department continues to provide COVID-19 related services and conducts community engagement through the Health Alert Network, virtual and in-person presentations, and consultations, among other activities.

## Health Department Vaccination Strategy

The New York State Department of Health's Bureau of Immunization's mission is to reduce illnesses, complications, and deaths from vaccine-preventable diseases in New Yorkers of all ages. In 2024, the Bureau of Immunization collaborated with programs from the Health Department to conduct outreach to the public (using media campaigns) and to providers (using provider letters, office hours, and the pharmacy standing-order program) to highlight the importance of vaccination, particularly in the 65 years and older population. This outreach



included use of the Continued Access to Vaccination for Uninsured Adults program, through which 17 locations across the city offered no-cost vaccination services and counseling on immunizations.

The percentage of New York City seniors age 65 and older who reported receiving a flu shot in the past 12 months decreased slightly from 72.4% in 2022 to 68.7% in 2023. The Health Department estimates this decline may be because the data for 2022 reflects the number of seniors who reported having a flu vaccination during the COVID-19 pandemic when there was a strong emphasis on co-administration of COVID-19 and influenza vaccines to prevent co-circulation of both viruses. The decline in 2023 may also be indicative of vaccine fatigue as the COVID-19 pandemic progressed.

Positively, rates of childhood vaccination in the city have started to improve as the Health Department made a strong push to get children caught up on routine vaccines that they may have missed during the height of COVID-19 pandemic. In 2023 and 2024, the Health Department focused on improving pediatric vaccination rates in communities with the lowest coverage through targeted outreach and education to health care providers, schools and families. Children ages 19–35 months with up-to-date immunizations increased almost four percentage points from 60.8% from July 2022–June 2023 to 64.7% from July 2023–June 2024, though this still lags behind the Health Department's target of 75%. The percentage of children in public schools in compliance with required immunizations also increased slightly from 96.4% from July 2022–June 2023 to 96.5% from July 2023–June 2024, though the improvement still remains behind the agency's 99% target. In New York City, children attending public schools are subject to vaccine requirements (unless an exemption applies), but children attending private schools do not necessarily have these same requirements.

The Health Department observed that immunization compliance rates in public schools have not returned to pre-COVID-19 pandemic levels due in part to new arrivals of school-age immigrants to New York City, many of whom are coming into the city's public school system with no vaccination records and/or missing some of the vaccines required for school attendance. The Health Department and other city agencies are working to link families to medical care to ensure that children are in compliance with school immunization requirements.

Human Papillomavirus Virus (HPV) vaccination coverage has decreased since the COVID-19 pandemic. A recent evaluation conducted by the Health Department found that earlier initiation of the HPV vaccine at nine and ten years old is associated with more timely series completion by the 13th birthday. The Health Department's strategies to advance early vaccine initiation and overall coverage include developing an HPV vaccine toolkit for providers and promoting vaccine administration with internal and external partners.

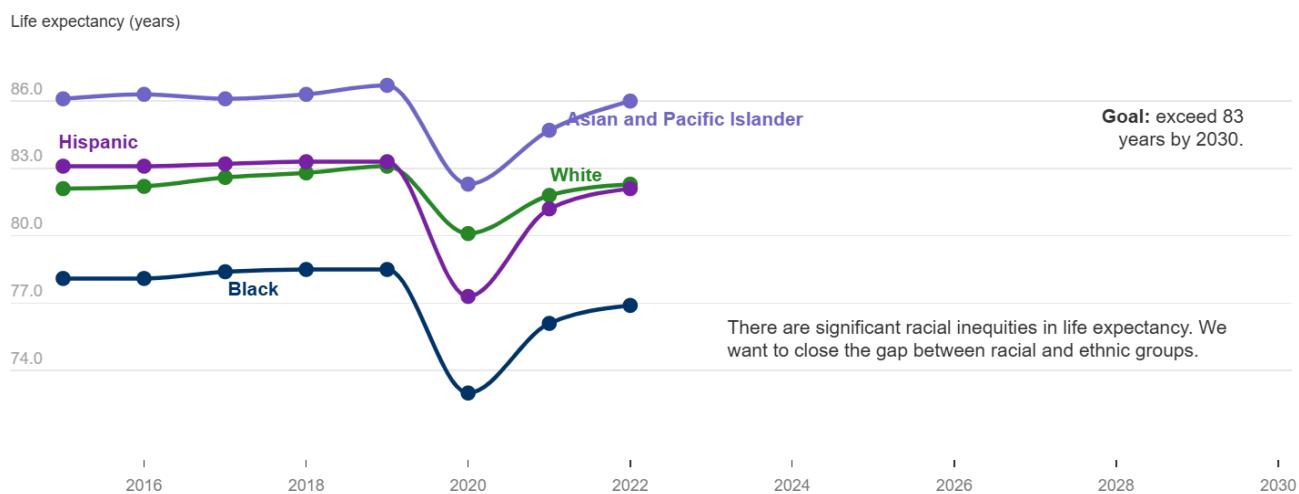


## SDG Target 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

### CONTEXT

Life expectancy in New York City has dropped dramatically and inequitably since the start of the COVID-19 pandemic, from 82.6 years in 2019 to 78 years in 2020, rising to 81.5 years in 2022. Between 2019 and 2020, the largest decreases were observed among Black and Latino New Yorkers, among whom life expectancy fell by 5.5 and 6 years, respectively. Inequities by race, ethnicity and income also exist for rates of premature death, or death before age 65.

### Life Expectancy by Race and Ethnicity



Created with [Datawrapper](#)

**Life expectancy for New Yorkers according to HealthyNYC by race and ethnicity from 2015-2022.**

Context and goals for specific preventable non-communicable diseases, including chronic diseases, and the state of mental health in New York City are highlighted below.

**Cardiometabolic conditions:** As part of HealthyNYC, the city has set a goal to reduce mortality caused by cardiometabolic conditions, such as heart disease, diabetes, and hypertension, by 5% by 2030 and will continue to address the upstream drivers of chronic diseases, by working to meet material needs (essential necessities such as medical supplies that affect people's health), address commercial determinants of health (private sector activities that



affect people's health), and promote opportunities for healthy living. Smoking and diet can impact an individual's risk of developing cardiotropic conditions. The proportion of adults who report smoking in New York City decreased slightly from 8.7% in 2022 to 7.9% in 2023. Similarly, the proportion of adults who reported they consume one or more servings of a sugar-sweetened beverage per day also decreased slightly to 14% in 2023 and adults with obesity decreased slightly to 26.1% of adults surveyed in the 2023 Community Health Survey.

**Screenable cancers:** The HealthyNYC campaign set a goal to decrease screenable-cancer deaths in New York City by 20% by 2030. As part of its focus on preventive care, the Health Department promotes cancer screenings among adult New Yorkers, including working directly with primary care providers and launching media campaigns to raise awareness. As of 2023, 68.5% of adults ages 45–75 surveyed were screened for colorectal cancer. At H+H, eligible women receiving mammogram screenings increased to 82.1% in July–October 2024, outperforming their 80% target.

**Diabetes:** In 2023, 13% of adults in New York City reported having been diagnosed with diabetes, with higher prevalence among Black, non-Hispanic adults (16.4%), Latino adults (16.0%) and Asian/Pacific Islander adults (14.6%) when compared to white non-Hispanic adults (7.6%). As a part of HealthyNYC, the city has set a goal to decrease diabetes deaths by 5% by 2023. In New York City, 75% of adults who had diabetes had successful blood sugar management in 2023. Aligned with HealthyNYC's goal, and in response to [Local Law 52 of 2023](#), in 2024 the Health Department launched a "Citywide Diabetes Reduction Plan" that identified strategies to address diabetes and related inequities. These strategies include expanding diabetes education, addressing health-related social needs, supporting primary care providers, strengthening the community workforce, and advocating for policy changes. At the city's public hospital system, the percentage of H+H patients diagnosed with diabetes who had controlled blood sugar in July–October 2024 reached 69.1%.

**Mental Health:** In 2021, 15% of children age three to 13 in New York City had a mental health diagnosis. The most common diagnosis was anxiety (8%), followed by depression (3%), then adjustment disorder (2%). Additionally, 4% of children had other behavioral concern diagnoses, such as conduct disorder. Hispanic, Black and white children were more likely to have mental health diagnoses compared with Asian or Pacific Islander children. Between 2011 and 2021, there was an increase from 27% to 38% of public high school students who reported feeling sad or hopeless. The percentage of New York City public high school students who reported seriously considering suicide in the past 12 months also increased over the last 10 years, from 12% in 2011 to 16% in 2021. In 2021, public high school students who reported seriously considering suicide in the past 12 months were more likely to be girls (21%) than boys (10%) and more likely to be Hispanic (16%) than white (11%). As of 2023, the estimated number of adult New Yorkers who have been diagnosed by a health care professional, by condition, include: 72,000 people (1%) diagnosed with schizophrenia, schizoaffective disorder or psychosis; 181,000 people (3%) diagnosed with bipolar disorder, mania or manic depression; 366,000 people (5%) diagnosed with post-traumatic stress disorder; 732,000 people (11%) diagnosed



with major depressive disorder or severe depression; and 1,243,000 people (18%) diagnosed with anxiety. Additionally, an estimated 541,000 adult New Yorkers (8%) had serious psychological distress (SPD), a term used to describe the feelings of people who have recently been having problems functioning due to negative emotional or mental experiences (not a diagnosis). In 2023, Black, Hispanic and Middle Eastern or North African adults and adults who identify as multiple races were more likely to have SPD than white adults.

## PROGRESS AND NEXT STEPS

### **HealthyNYC**

The chronic and diet-related disease goals established by HealthyNYC in 2024 include reducing deaths due to heart- and diabetes-related diseases by 5% by 2030 and deaths due to screenable cancers by 20% by 2030, as these are leading causes of death among all racial and ethnic groups in New York City. However, social and economic inequities create conditions such that certain communities are disproportionately affected by chronic disease.

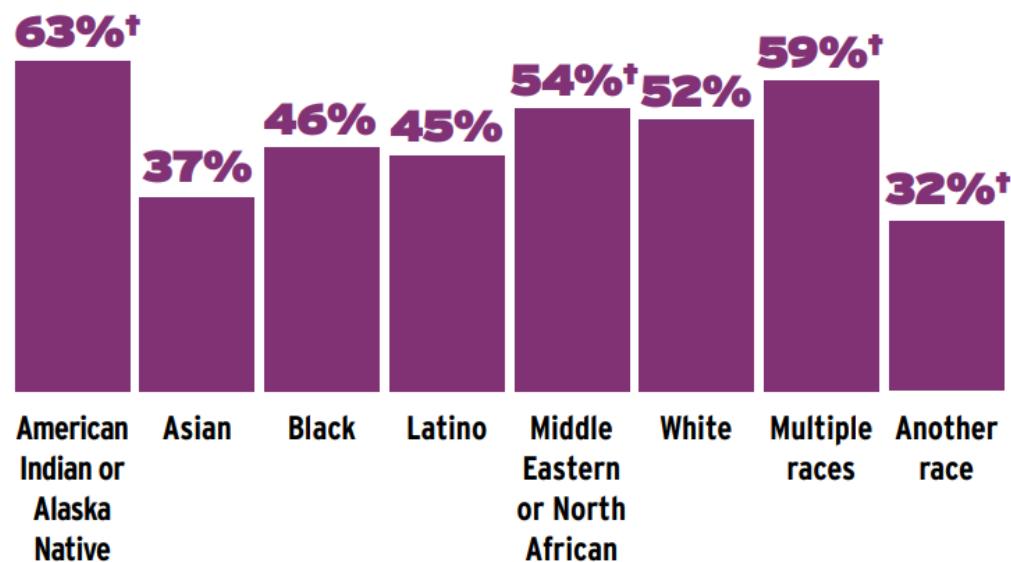
In support of HealthyNYC, the Health Department released "[Addressing Unacceptable Inequities: A Chronic Disease Strategy](#)" for New York City—a multiagency strategy that addresses the root causes of chronic diseases such as heart disease, diabetes, and screenable cancers and outlines interventions that support longer, healthier lives for New Yorkers. The proposed interventions in the report, taken together, center agency collaboration, with 14 of the 19 initiatives involving multi-agency efforts. These initiatives aim to help the city secure the future of health equity infrastructure and emergency response readiness by solidifying priority community health worker and nutrition security programs. By expanding place-based and race-conscious programming, they aim to deepen a community-centered, dynamic infrastructure that can meet the needs of New York City neighborhoods that have historically been overlooked. Finally, these initiatives underscore the city's role as a leader and standard setter by continuing to build on the innovative approaches the city has committed to for many years, such as those pertaining to food procurement and service standards, leadership in active design, and a comprehensive worksite wellness approach. Through this strategy, the Health Department will continue to increase opportunities for all New Yorkers to live healthier, longer lives.

### **The State of Mental Health of New Yorkers Recommendations**

In 2024, the Health Department released a groundbreaking data report on mental health, titled "[The State of Mental Health of New Yorkers](#)," which underscores racial inequities. The report concluded that significant gaps remain in meeting the mental health needs of New Yorkers. The Health Department reported that in 2023, 14%, or about 945,000, of all adult New Yorkers reported an unmet need for mental health treatment in the past 12 months. This percentage was higher among New York City adults with SPD.



## Unmet Mental Health Needs for Adults with SDP by Race and Ethnicity



Unmet needs for mental health treatment among adults with SDP by race and ethnicity according to the 2023 New York City Neighborhood Wellness Survey. Note that data for Native Hawaiian or other Pacific Islander are suppressed due to imprecise and unreliable estimates.

Despite advancements, there is still much work to do in order to promote mental health for all New Yorkers. To that end, the following modes of policies are recommended and actively being used to guide planning within the Health Department. Several initiatives are also underway to advance these recommendations.

**Prevention:** Prevention policy recommendations are designed to proactively address mental health challenges among children and youth in New York City. Recommendations include establishing standardized mental health screenings (e.g., depression screening for teens and anxiety screening for children), expanding evidence-based parenting programs to support early childhood social and emotional development, creating safer online environments by regulating social media and providing parental monitoring tools, and increasing funding for school-based mental health clinics to ensure accessible and culturally responsive care.

**Social Determinants of Health:** Policy interventions are needed to address the conditions in which people are born, grow, work, live, and age—also known as social determinants of health—which shape an individual’s ability to lead a healthy life and their physical and mental health status. Policy guidance for this include addressing structural stigma in organizations, policies, and health systems by eliminating discriminatory practices (e.g., ending mandatory drug testing for employment), and prioritizing policies that address social determinants of health—such as improving equitable access to education, employment, healthy food, affordable housing, and green spaces—to support better mental health and substance use outcomes.



**Payment:** The fragmentation of mental health and substance use services has made it very difficult for people to access the resources they may need. The Health Department's recommendations aim to reduce financial barriers to treatment by enforcing mental health parity laws to lower out-of-pocket costs and improve insurance reimbursement, expand telehealth services by ensuring payment parity and removing technical barriers, and modify existing Medicaid policies to ensure more comprehensive coverage. Each of these steps is crucial for making mental health care more affordable and accessible to all New Yorkers.

**Workforce:** A skilled workforce is critical to delivering mental health and substance use services. Strategies are aimed at enhancing the skill set, diversity, and capacity of both specialized and general healthcare providers in mental health care. The Health Department aims to bolster the mental health workforce by increasing insurance reimbursement rates, expanding training and incentives for providers in underserved areas, promoting equity, diversity and cultural safety in the workforce, and supporting behavioral health scholarships and loan forgiveness. Additionally, policy recommendations include strengthening the peer support workforce through providing funds for hiring, standardized training, career development, and allowing peer support workers to participate providing mental health services under the Medicare program, a federal health insurance program for people age 65 or older and younger people with disabilities, to improve outcomes and reduce costs.

**Service Delivery:** Key service gaps exist for specific populations and contribute to worse outcomes for people who identify as LGBTQ+ and people with co-occurring conditions. Specific changes can help close these gaps and address these health inequities. This includes: developing tailored, affirming substance use services for LGBTQ+ New Yorkers by addressing discrimination, creating supportive environments, and reforming care to be compassionate and inclusive; investing in integrated care systems for individuals with co-occurring conditions (e.g., mental health, substance use, and developmental disabilities) through care coordination models like Certified Community Behavioral Health Clinics (CCBHCs); and expanding access to community-based rehabilitative supports, including psychosocial rehabilitation programs and connections to clubhouses.

**Legislation and Regulation:** Specific legislative and regulatory measures are needed to strengthen care within community settings, establish secure environments for substance use treatment, broaden the availability of essential medications and introduce innovative approaches to public safety. Recommendations to achieve this include: lifting/modifying the Medicaid Institutions for Mental Disease exclusion to allow coverage for inpatient mental health care in larger facilities; authorizing more overdose prevention centers (e.g., supervised drug use sites) to reduce overdose deaths and promote public health; expanding access to evidence-based substance use treatment for individuals and families impacted by incarceration, including consistent availability of medications for opioid use before, during and after incarceration; reducing barriers to substance use disorder treatment access and retention by easing methadone regulations; and adopting a public health approach to public safety through initiatives like the People's Response Act, which supports noncarceral, health-focused crisis interventions.



## New York City Unity Project LGBTQ+ Care

With Unity Project support, the Judson Pride Clinic is building more robust programming and helping a greater number of patients access mental health and community support. Their work includes peer support groups, mental health and wellness groups, vocational workshops, and staff training in workshop facilitation. In addition, the Unity Project has supported the renovation of the second floor of the clinic's century-old facilities to create a community space for this programming.

The Family Acceptance of LGBTQ+ Youth Initiative, supported by the Unity Project and implemented by the Health Department, is a groundbreaking program dedicated to fostering acceptance for LGBTQ+ youth, particularly TGNCNB youth, among parents, caregivers, families, and communities. Recognizing that family support plays a crucial role in the mental health and well-being of young people, the initiative provides resources to bridge gaps in understanding and reduce familial conflict. The initiative offers support groups for parents and caregivers; educational workshops for families, community members, educators, and service providers; and one-on-one counseling and conflict mediation to strengthen families. Additionally, it empowers youth through a filmmaking initiative for individuals up to 21 years old, allowing them to share their stories and experiences through creative expression. Social marketing campaigns further amplify messages of acceptance. By emphasizing mental health, education, and cultural competency, the initiative works to create a more supportive environment where young people feel valued, respected, and loved.

Additionally, the Pride and Care health resource booklet, funded by the Unity Project and developed by the Health Department, provides information specifically for TGNCNB individuals. This booklet, available in multiple languages, offers critical information on gender-affirming care, primary care, sexual health, safety tips, and community resources.

The Health Department provides essential tools to help LGBTQ+ individuals find knowledgeable, affirming, and LGBTQ+-competent healthcare providers. The NYC Health Map's LGBTQ+ Health Services Directory serves as a vital resource for those seeking safe, accessible, and high-quality medical care tailored to their needs. The online directory features a diverse network of New York City providers. Beyond simply listing providers, the LGBTQ+ Health Services Directory is designed to help individuals make informed decisions about their health care by highlighting providers with a demonstrated commitment to cultural competency and inclusive practices.

Additionally, the Health Department maintains a suite of LGBTQ+ webpages that offer health information for men who have sex with men, women who have sex with women, TGNCNB individuals, intersex individuals, and suicide prevention. These webpages provide affirming and compassionate care guidance, outline health care rights, and include resources for individuals and their families to make informed health care decisions.



## **Geriatric Mental Health Programs**

NYC Aging's contracted mental health programs include the Geriatric Mental Health Program (GMH) which embeds and co-locates mental health clinicians in community-based older adult centers. There, mental health clinicians provide engagement activities and programs, conduct mental health assessments, consultation to staff and provide mental health treatment. In March 2025, the data show clinically significant improvement within three months of starting treatment. This includes a 63.4% improvement in depression and a 43.8% improvement in anxiety. NYC Aging's Hub and Spoke is a similar initiative to GMH in that mental health clinicians are embedded at older adult centers where the clinician provides clinical services at the main site (Hub sites) with the addition of providing only engagement activities/programs and assessments at other older adult centers (Spoke sites) within the same communities where the main clinical site is located. By the end of the Hub and Spoke initiative in March 2024, there were clinically significant improvements in depression (55.3%) and anxiety (48.6%).

Through the Cabinet for Older New Yorkers, NYC Aging partners with the New York City Department of Parks and Recreation (NYC Parks), on the Geriatric Mental Health Connections initiative. On a weekly basis, a mental health clinician provides engagement activities and programs for older adult participants at NYC Parks recreation centers. Like GMH, the goal is to increase access and decrease stigma around mental health services among older adults.

NYC Aging has a history of providing mental health services to victims of abuse and crime through the use of evidenced-based programs. Beginning in July 2025, a new demonstration program, Building Options and Opportunities for Survivors of Trauma (BOOST) will offer clinical services for victims of elder abuse and/or crime. NYC Aging also has a grant through the Jewish Federation of North America to provide person-centered trauma informed care (PCTI) clinical services to crime victims through a partnership with Greenwich House and PCTI training for up to 300 NYC Aging and community provider staff. Through a federal Department of Justice grant, videos and companion guides were developed to introduce the topic of the mental health needs arising when an older adult has experienced either abuse or a crime. The videos were created in multiple languages to match the diversity of the population served by NYC Aging.



NYC Aging's Senior Independence Month 2025 celebration at Krakus Older Adult Center in Brooklyn.

### **EMS Lifesaving Care and Initiatives**

EMS and FDNY play a vital role in reducing premature mortality from non-communicable diseases by providing pre-hospital lifesaving care. EMS personnel are specially trained in de-escalation techniques and can provide immediate, on-scene stress reduction. For individuals with more severe conditions, EMS can transport patients to facilities that offer expert care.

EMS has significantly evolved over the years, particularly in improving patient care and ensuring rapid response to a wide range of incidents. One of the most notable advancements is the implementation of specialized initiatives such as the Behavioral Health Emergency Assistance Response Division, a unit specifically designed to assist individuals experiencing mental health crises. This program prioritizes compassionate, appropriate care and reduces unnecessary interactions with law enforcement during mental health emergencies.

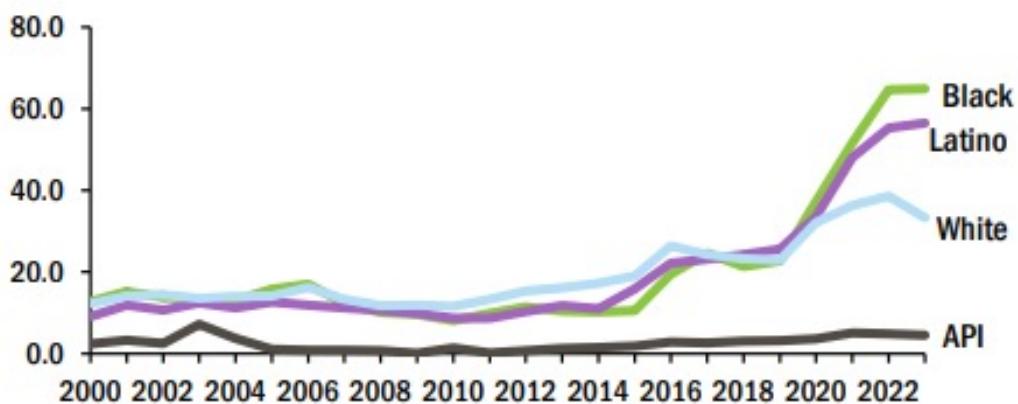


## SDG Target 3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

### CONTEXT

Deaths from unintentional drug overdose in New York City decreased by slightly less than 1% from 3,070 deaths in 2022 to 3,046 deaths in 2023 (the latest date for which data is available). While the number and rate of overdose deaths remained mostly stable between 2022 and 2023, disparities persisted in overdose death by race, ethnicity, age, income, and neighborhood of residence. Overdose deaths [remain at epidemic levels](#) and have more than doubled since 2018. They are primarily driven by the presence of fentanyl in the unregulated and rapidly changing drug supply. In 2023, fentanyl was present in four out of five overdose deaths in New York City, making it the most common substance involved in overdose deaths.

**Age-adjusted rate per 100,000 residents of unintentional drug poisoning (overdose) deaths, New York City, 2000-2023**



<sup>^</sup>Asian/Pacific Islander (API), Black, and white race categories exclude Latino ethnicity. Latino includes Hispanic or Latino of any race.

*Sources: NYC Office of Chief Medical Examiner and NYC Department of Health and Mental Hygiene Bureau of Vital Statistics, 2000-2023. 2022 and 2023 data are provisional and subject to change.*

**In New York City, disparities in overdose death continue to widen among racial and ethnic groups.**

Alcohol is consistently the most used substance among New York City residents. It is readily available across a range of outlets. People who drink alcohol frequently or excessively are at risk of experiencing negative health outcomes. Binge drinking, defined as drinking four or more drinks on one occasion for females or five or more drinks on one occasion for males,



can increase the risk of acute and chronic health problems. The estimates of New Yorkers who report alcohol use and who binge drink remained relatively stable between 2011 and 2020. Between these years, approximately 55% of New Yorkers indicated they drank alcohol in the past 30 days and around 18% of New Yorkers reported engaging in binge drinking within the past 30 days. In 2022, 45% of New York City adults reported drinking at least one alcoholic drink in the past 30 days, a decrease from 50% in 2021. During the same period, the estimate of adults who reported binge drinking also decreased, from 23% in 2021 to 21% in 2022. In 2022, among city residents, males were more likely to binge drink (24%) compared with females (19%), and white residents were more likely to binge drink compared with all other race and ethnicity groups. New Yorkers age 25 to 44 were more likely to binge drink (30%) compared with those age 18 to 24 (18%), 45 to 64 (17%) or 65 and older (9%). Residents of Manhattan are the most likely to binge drink (31%) compared with residents of the Bronx (17%), Brooklyn (20%), Queens (18%) and Staten Island (14%).

Cannabis is the second most commonly used substance in New York city after alcohol. As of March 31, 2021, adults age 21 and older can legally possess up to three ounces of cannabis and up to 24 grams of concentrated cannabis (e.g., oil) for personal use. In a national survey conducted during 2018 and 2019, approximately 18% of New York City residents reported using cannabis in the past year. In 2023, a different survey found that nearly one in four New York City residents (23%) used cannabis in the past year.

Prescription drug misuse is the use of a prescription medication without a prescription or in a manner other than prescribed. Misuse of prescription benzodiazepines or opioids increases the risk of accidental overdose, particularly when combined with other depressant substances like alcohol. In 2022, 12% of accidental overdose deaths involved prescription opioids and 13% involved benzodiazepines. Despite this risk, some people may see prescription drugs as safe and underestimate their potential risk because they are prescribed by a medical provider. In a national survey conducted during 2018 and 2019, 2.9% of New Yorkers age 12 and older reported misuse of prescription opioids, and 3.1% reported misuse of benzodiazepines. In 2023, 2.9% of New Yorkers reported misuse of at least one prescription medication in the past year. That survey found that 1.4% of New Yorkers misused an opioid and 2.0% misused a benzodiazepine.

Use of other drugs, including cocaine, crack, heroin, fentanyl, and methamphetamine, can pose significant health risks. A unique risk to these substances is their unpredictable and volatile unregulated supply. The proliferation of fentanyl in recent years has been the largest contributing factor to the overdose crisis in the city.



## PROGRESS AND NEXT STEPS

### Substance Use Treatment and Prevention Programs

HealthyNYC, New York City's population health agenda, sets out a goal to reduce deaths due to overdose by 25% by 2030. There are many prevention, harm reduction, treatment, and recovery services and programs available in New York City to reduce overdose death and improve the health and well-being of people who use drugs. Prevention programs include prevention resource centers and coalitions that work with youth to promote the development of protective factors against substance use. Opioid overdose prevention programs have made naloxone, a medication that reverses the effects of an opioid overdose, freely and widely available citywide. In addition, there are numerous syringe service programs across the city that offer low-threshold services such as syringe exchange, HIV and hepatitis C testing, buprenorphine, and referrals to care. Some syringe service programs also offer drug-checking and overdose prevention services. There is also a wide range of treatment and recovery programs available to people living with a substance use disorder (SUD) in New York City. Treatment is provided across outpatient, inpatient, and residential settings. Recovery programs provide employment, social and other supports to promote health and well-being.

### Overdose Prevention Centers

Overdose prevention center (OPC) programs are spaces where individuals can use drugs they previously obtained under supervision. OPCs are health care facilities that aim to improve individual and community health, increase public safety and reduce consequences of drug use, including overdose deaths, public drug use and syringe litter. The nation's first publicly recognized OPC sites opened in New York City in November 2021, and early results have been very promising. State authorization of OPC programs would ensure the sustainability of these lifesaving services by facilitating the development of regulations and removing potential legal obstacles to the provision of public funding.

### City Funding for Addiction Services and the Opioid Crisis

With more than 78,000 patients each year relying on its behavioral health services, H+H has an outsized role caring for New Yorkers' mental health and substance use treatment needs. Its dedicated behavioral health team includes nearly 5,000 staff at 11 hospitals and over 30 community health care centers, and it provides approximately 60% of behavioral health services in New York City. Since 2018, H+H has integrated addiction services, known as ED Leads, in the Medical Emergency Department (ED) at all 11 acute care facilities. These teams provide patients with SUD, many of whom have co-occurring mental health and housing needs, with screenings, brief interventions, individual counseling, and referrals to addiction services and medication-assisted treatment (MAT). ED Leads teams consist of social workers/licensed counselors and peer counselors who engage ED patients at risk for SUD. Additionally, the teams provide patients with harm reduction supplies and education, including



naloxone kits and fentanyl and xylazine test strips. In 2024, there were over 24,000 ED Leads encounters with 4,600 referrals to outpatient services (19%) and 1,800 naloxone kits provided (8%).

A key development is the ED Buprenorphine Project (ED Bupe Project), a multi-pronged approach ensuring that patients with opioid use disorder (OUD) who seek care in the ED are offered lifesaving buprenorphine treatment. Supported systemwide, the initiative works on multiple levels to ensure that eligible patients receive buprenorphine as a critical intervention. Additionally, patient education materials are translated into the most commonly spoken languages to improve harm reduction, medication knowledge, overdose prevention, urgent care access, and outpatient follow-up.

To strengthen workforce capacity, the system introduced the Addiction Services Workforce Training Program (WTP), the first-ever systemwide behavioral health training focused on SUDs. This program includes opioid overdose simulations for ED providers and Behavioral Health Nursing Support. The WTP is designed to transform the approach to SUD care by addressing stigma, improving communication and referral strategies, and enhancing expertise in treatment modalities. Once the WTP has been fully delivered, at least 3,000 H+H staff will have been trained to achieve systemic culture change in how people with SUD are treated, facilitate appropriate SUD care management, and enhance the use of technology to improve coordination of patient care, reporting, and responsiveness.

In a major policy initiative, New York City has [allocated funding](#) for addiction counselors to support peri-natal patients with SUD in birthing units across all 11 public hospitals in 2024. This critical initiative will provide much-needed support for expecting families at a high-risk time and aligns with the administration's broader goals to decrease maternal mortality.

In April 2025, the city also announced the launch of Addiction Response Teams (ART) at H+H Harlem, Jacobi, and Queens. This new model expands addiction services by enabling the rapid delivery of medication-assisted treatment in emergency rooms and inpatient units while ensuring immediate access to ongoing outpatient addiction services.

To further enhance addiction care, a new Ancillary Withdrawal program has been introduced at H+H Bellevue, supporting individuals experiencing mild to moderate withdrawal from alcohol and opioid use. Ancillary Withdrawal services are also available at five outpatient Addiction Clinics. These clinics operate on a walk-in basis, allowing patients to receive same day assessment and treatment without an appointment.

H+H also houses the Consult for Addiction Treatment and Care in Hospitals (CATCH) program that serves inpatient medical and surgical patients who exhibit symptoms of SUD. CATCH teams consist of medical providers with addiction medicine expertise, licensed clinicians, and peer counselors. The teams provide SUD evaluation, diagnosis and assessment, MAT, individual and peer counseling, and harm reduction resources including overdose education prevention, naloxone kits, and fentanyl/xylazine test strips. Additionally, teams offer post-discharge follow-up via bridge clinic services.



H+H has also expanded virtual ExpressCare, its telehealth portal, to include convenient on-demand urgent mental health and substance use treatment services. Virtual ExpressCare behavioral health clinical services are available city/state-wide with 24/7 coverage to address health equity gaps by bringing care into the homes of all New Yorkers in their preferred language. H+H is also able to prescribe bridge buprenorphine through its virtual ExpressCare.

H+H's Street Health Outreach and Wellness (SHOW) program utilizes mobile units to provide health screenings, wound care, basic material necessities such as socks and bottled water, behavioral health and social service referral supports, including harm reduction services to New Yorkers who are unsheltered. Each mobile unit is staffed by a Mobile Harm Reduction roving team consisting of a social worker, an addiction counselor and a peer counselor. Harm reduction services equip SHOW vans with staff who specialize in treatment of substance use disorders, and provision of overdose prevention supplies such as naloxone, fentanyl and xylazine test strips. They help street homeless patients to access shelter, housing, and benefits. These staff engage patients where they are, earn their trust by showing empathy and respect while helping to connect the individual to ongoing treatment when the patient is ready. SHOW vans had about 13,000 encounters in 2024.

### **Department of Social Services (DSS) Opioid Antagonist Training**

In September 2016, DHS, under the umbrella of DSS, established an agency policy requiring staff from all shelters to be trained on overdose prevention and naloxone administration. The Department of Homeless Services (DHS) developed and continues to provide biweekly training on the epidemiology of overdoses, types of opioids, identification of overdoses, instructions on how to use naloxone to reverse opioid overdoses, as well as risk reduction counseling and linkage to care guidance and resources tailored for DHS clients. DHS provides each trainee with a naloxone kit, as well as supplies DHS facilities with communal kits. In November 2016, the DHS Office of the Medical Director (OMD) became a state-certified Opioid Overdose Prevention Program and as such OMD started training DHS facility staff, as well as continued to train DHS security and police as Opioid Overdose Prevention trainers and responders, using a train-the-trainer model. OMD established an Overdose Prevention Champion position and asked all DHS sites to select a Champion. Champions serve as liaisons with OMD, train staff and clients at their respective facility, ensure DHS naloxone administration training and procedures are conducted and followed, and ensure naloxone kits are available at the facility at all times. From September 2016 to June 30, 2022, DHS trained 34,099 staff and DHS clients.

In 2021, DHS began conducting systematic follow-up after every non-fatal overdose, ensuring shelter staff provide prevention counseling and linkage to harm reduction and substance use services including medications for addiction treatment. From July 2021 to June 2022, DHS secured 1.5 million dollars in funding from the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) and HealingNYC to enhance overdose prevention services, including direct outreach to clients at risk, shelter-based risk reduction counseling, naloxone, and fentanyl test strip training and distribution to clients, and linkage to care.



## **EMS and NYPD Overdose Treatment and Training**

EMS personnel are specially trained to use Narcan to reverse opioid overdose, which can be a life saving treatment before patients reach a hospital or medical facility. For those more seriously affected by substance use, EMS can transport patients to a facility that offers expert care.

The Medical Emergency Response and Critical Intervention Training Unit trains uniformed and civilian members of the NYPD on a recurring biennial basis to provide lifesaving intervention techniques to those experiencing a medical emergency. This includes instruction on basic first aid procedures, the administration of intranasal naloxone/Narcan medication in response to opioid overdoses, and the use of a trauma kit comprised of a tourniquet and hemostatic agent to slow or stop bleeding.



## SDG Target 3.6: By 2020, halve the number of global deaths and injuries from road traffic accidents

### CONTEXT

New York City has made significant strides in street safety, with 8 of the 10 safest years recorded since 2014. In 2014, New York City launched Vision Zero, a multi-national road traffic safety project. During the Vision Zero era, the city's work has saved countless lives and reduced traffic fatalities to a historic low. The city's Vision Zero partners achieved this through robust coordination between agencies and by implementing a "safe system" approach to transportation planning. This approach acknowledges all road users are humans; humans make mistakes and those mistakes, in a truly safe system, do not need to lead to consequences like serious injury or death.

Vision Zero works to redesign roads, increase automated enforcement, and educate the public on safe driving practices, specifically aimed to reduce speeding. Studies have shown that for every 10 miles per hour (mph) of increased speed, pedestrian deaths double. Between 2010 and 2019, speeding related crashes resulted in 108,300 fatalities on American roads, which accounted for nearly 25% of all road deaths.

Marking the 10th anniversary of Vision Zero in 2024, New York City saw 252 traffic fatalities that year. This represented the lowest level of traffic fatalities since a COVID-19 pandemic-era spike, declining year over year since 2020. This [success has continued into 2025](#), which has already seen declines in traffic deaths and injuries

among all road users including pedestrians, cyclists, motorized-two-wheeler operators, and motor vehicle occupants. There were 41 fatalities reported in the first quarter of 2025, 24 fewer compared to the same period in 2024, and there were 7,936 traffic injuries reported through March 12, 2025 (the latest date for which data is available) compared to 9,599 during the same period last year. This year's positive trends reflect a longer-term shift and show significant progress under Vision Zero. During the first quarter of 2013 (the year before Vision Zero launched), there were over 40% more traffic fatalities, a total of 70 fatalities, compared to the



Vision Zero's safe system approach.



first quarter in 2025. In 1990, there were 166 traffic fatalities in the first quarter of the year—75% more compared to 2025.

While even one traffic death is too many, the success of these efforts over the last 10 years is clear. Pedestrian fatalities (the city's most vulnerable road user) have declined overall by 20%. Despite a nationwide surge in pedestrian fatalities during the years following the onset of the COVID-19 pandemic, New York City has seen a return to the early successes of Vision Zero initiatives since its launch in 2014.

## PROGRESS AND NEXT STEPS

### **Vision Zero Initiative**

New York City recognizes that deaths and serious injuries in traffic are not inevitable “accidents,” but preventable crashes that can be avoided through engineering, enforcement, and education. No level of fatality on city streets is inevitable or acceptable. Vision Zero is New York City’s citywide initiative to eliminate death and serious injuries from traffic incidents. Vision Zero is woven into the operations of all city agencies on the Vision Zero Task Force: the Business Integrity Commission, NYC Aging, the Department of Citywide Administrative Services (DCAS), the Health Department, H+H, DOT, the District Attorney’s Offices, the Law Department (LAW), the Mayor’s Office Community Affairs Unit, Mayor’s Office of Data Analytics, Mayor’s Office of Operations, Metropolitan Transit Authority, Office of Management & Budget, NYPD, Sheriff’s Office, and Taxi & Limousine Commission.

This inter-agency collaboration has contributed to the successful implementation of key Vision Zero initiatives, including the 25 mph default speed limit on residential streets, targeted and data-driven enforcement of violations, such as speeding and failure-to-yield to pedestrians, extensive public outreach, and the legislative agenda to deter dangerous driving. By addressing areas with the greatest safety and transportation needs, the city has equitably picked locations for Street Improvement Projects (SIPs), which are safety-oriented engineering improvements that use multiple treatments like street redesigns, traffic signals, markings, or concrete on both corridors and intersections. These redesigns are generally aimed at better-organizing traffic, improving travel times, and creating shorter, safer pedestrian crossings, and safe routes for bicycle travel.

In 2024, the city achieved major legislative victories including the passage of Sammy’s Law, which required the city to reduce the speed limit to 20 mph and expanded the number of intersections with red light cameras from 150 to 600. DOT is currently working on plans to implement these life-saving tools to improve safety in the upcoming year.

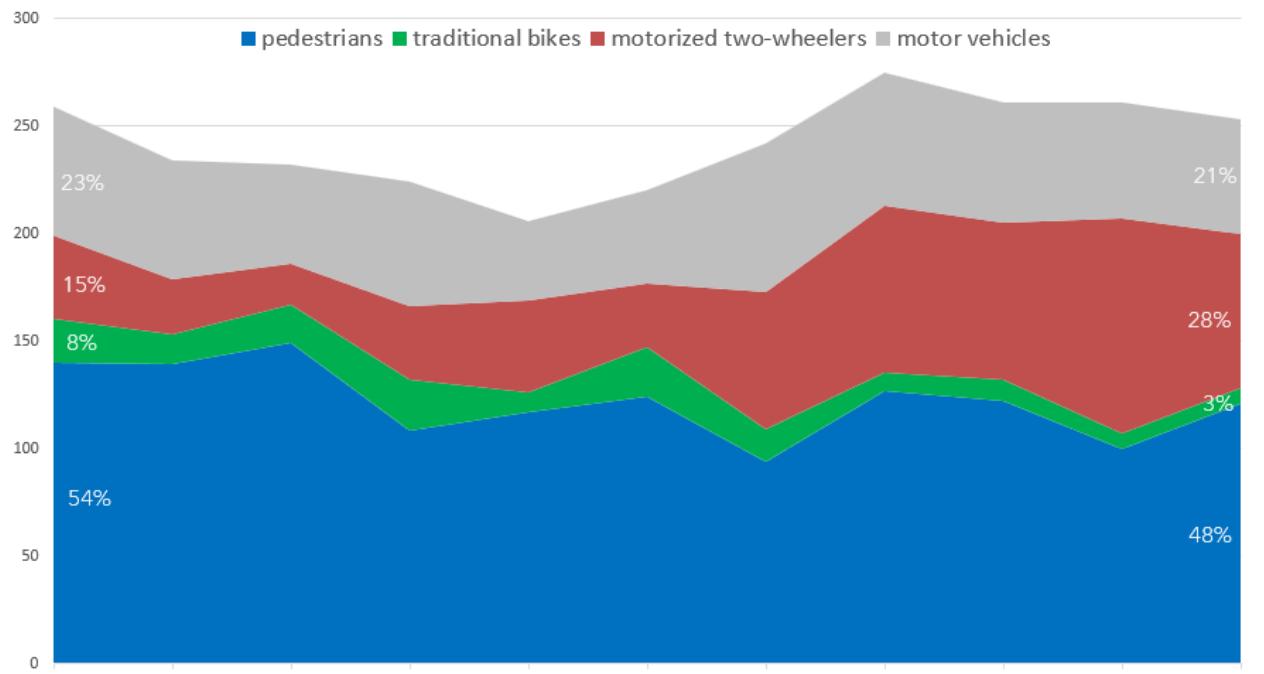
The Vision Zero Task Force is committed to ensuring safety projects reach all New Yorkers, using data to prioritize interventions where they are most needed and can provide the greatest benefit. Through this commitment across the last decade, safe street redesigns have



been more concentrated in neighborhoods with high poverty rates, with these neighborhoods and neighborhoods with the most non-white residents seeing more street redesign work per mile of street and experiencing the greatest decreases in pedestrian fatalities over the course of Vision Zero. Neighborhoods of all races experienced declines in total and pedestrian fatalities on average, but neighborhoods where Asian, Black and/or Hispanic residents made up approximately 80% of the population saw the sharpest declines: 26% decline for all fatalities and 32% decline for pedestrian fatalities. Vision Zero will continue to work towards its goal of zero deaths and serious injuries.

New York City has developed robust engagement strategies meant to educate members of the public including through a multi-agency approach involving street teams that focuses engagement on high-crash corridors to provide on-the-ground education to anyone who bikes, drives, or walks, with an emphasis on how their choices matter. Additional outreach efforts focus on providing education specifically for some of the city's most vulnerable road users, including older adults, children and youth, and cyclists. As the past 10 years have shown, Vision Zero can create real culture change in communities by focusing engagement on changing how New Yorkers' view traffic safety.

## Fatalities by Mode



**Traffic fatalities by mode (pedestrian, cyclists, motorized two-wheelers, motor vehicles) from the launch of Vision Zero in 2014 to 2024.**



## SDG Target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

### CONTEXT

Sexual and reproductive justice exists when all people have the power and resources to make healthy decisions about their bodies, sexuality, and reproduction. In New York City, New Yorkers have the right to access sexual and reproductive health care, including abortion. As the right to access abortion care has been stripped away from over one-third of U.S. women, New York City announced in February 2024 that the city is further enshrining its commitment to reproductive rights, releasing the [Sexual and Reproductive Bill of Rights](#). This Bill of Rights defines health as inclusive of access to sexual health care, birth control, gender-affirming health care, and abortion services, and will help ensure that all patients in New York City are protected from discrimination and harassment related to their sexual and reproductive health care decisions. The Sexual and Reproductive Bill of Rights was distributed to the Health Department network of health care providers, advocacy groups, and partner organizations across the city to share with patients.

Sexually transmitted infections (STIs) reported to the Health Department continue to increase and remain a public health concern. The Health Department observed large increases in chlamydia and gonorrhea rates in 2021 compared to 2020. A combination of reduced screening and testing and decreased transmission in 2020, likely related to the COVID-19 public health emergency, reduced detection of STIs in 2020 and continue to impact detection today. Nonetheless, notable inequities persisted in 2021 among reported cases of gonorrhea, chlamydia, and syphilis, underscoring the need to improve access to timely, high-quality sexual health services for all New Yorkers.



## PROGRESS AND NEXT STEPS

### **NYC Nurse-Family Partnership**

The Health Department provides personal nurses for first-time parents to support a healthy pregnancy and a healthy baby. NYC Nurse-Family Partnership is available to anyone in New York City who is 28 weeks pregnant or less with their first baby and who is eligible for Medicaid or WIC.

### **New Family Home Visits Initiative and Program**

The Health Department's New Family Home Visits Initiative offers support, services, and referrals to new and expectant parents. Through this initiative, a trained health worker—such as a nurse, doula, or community health worker—makes in-person or virtual visits to the home of a parent who is pregnant or has an infant or young child. This includes through the Newborn Home Visiting Program, which provides no-cost in person and virtual home visits for eligible people and parenting families, regardless of age or immigration status. The program has social workers, nurses and lactation professionals to provide additional support to families as needed. New parents can get support within the first weeks of birth.

### **Abortion Access Hub**

The New York City Abortion Access Hub provides confidential help finding an abortion provider in New York City, scheduling an appointment, getting financial assistance, and finding transportation and lodging. This help is available regardless of age or immigration status. Individuals do not need to live in New York City to contact the Abortion Access Hub or receive a referral.

### **Access to Birth Control**

New Yorkers can get birth control at health centers, family planning clinics or through their health care provider. Health insurance plans are required to cover birth control with no copay. New Yorkers may also be eligible for the Family Planning Benefit Program, a public health insurance program for New Yorkers that pays for family planning services.

Additionally, the Health Department's NYC Condom Availability Program gives away more than 30 million free safer sex products every year to over 3,500 locations throughout the city's five boroughs. These free products include male NYC Condoms, internal condoms, and lubricant.

### **Sexual Health Clinics**

The New York City Sexual Health Clinics provide low- to no-cost services for STIs, including HIV, as well as reproductive health services such as medication abortion, contraception methods (including long-acting reversible contraception), emergency contraception, and pregnancy tests. Anyone who is 12 or older can receive services at any clinic, regardless of immigration status. Parental consent is not necessary. The Health Department is unwavering



in its commitment to providing low- and no-cost services and creating safe, affirming spaces for all people. Clinics proudly serve all New Yorkers, regardless of immigration status, and support LGBTQ+ communities. The Health Department believes everyone deserves access to compassionate care without barriers.

### **NYC Health + Hospitals Reproductive Health**

New York State has historically been considered a beacon for abortion care. New York State permitted abortion in 1970, three years before *Roe v. Wade*, the landmark decision of the U.S. Supreme Court in which the Court ruled that the Constitution of the United States protected the right to have an abortion prior to the point of fetal viability. Still today, New York's abortion laws include very few barriers to abortion care. For this reason, people often travel great distances in order to receive abortion care in New York State and New York City.

H+H provides medication and procedural abortion at all 11 of its acute care hospitals, including provision of care for miscarriage management. H+H services include comprehensive reproductive health services, offering the full range of contraceptive options throughout its hospital-based and community-based facilities, including complex contraceptive care. The health care system also offers preventative gynecologic services, gynecologic care at the ends of the age spectrum, and specialized Obstetrician-Gynecologist (OBGYN) services.

In early October 2023, H+H became one of the first public health systems in the nation to launch a telehealth abortion service. The service used an existing telehealth platform to expand abortion care. Services include on demand visits seven days a week with a physician or Advanced Practice Clinician (APC) for options counseling, medication abortion by mail or to participating pharmacies within New York City, or connection to in-person care for evaluation or procedure. The service has expanded access to abortion care meeting the SDG's call for universal access by using technology to eliminate geographic and logistical barriers to care.

In 2022, H+H hired a Reproductive Health Navigator to support patients in need of accompaniment with coordination of appointment scheduling, logistics such as transportation and lodging, and financial support; H+H also provides navigation support to those patients who are traveling from outside of the five boroughs of the city. The Navigator works closely with a network of national, state, and city organizations such as the National Abortion Federation, the New York Abortion Access Fund, Brigid Alliance, and more to ensure patients facing financial and logistical barriers can still access care.

H+H has a long history of providing abortion care and education dating back to the 1980s. The health care system trains medical students, residents, and fellows in abortion care, as well as attending physicians and advanced practice clinicians who want to expand their scope of practice. In addition to training its own residents and medical students, H+H hosts OBGYN residents from restricted states in a rotation for hands-on training in abortion care.



H+H also developed a model for integrating APCs into abortion care and training them in medication and procedural abortions. This model has been presented at a national conference.

In addition, H+H has trained several physicians in the Dilation and Evacuation (D&E) procedure, expanding second trimester care at its institutions. H+H has also designed and implemented a training on feticidal injection, which builds capacity in a necessary skill for abortion care later in pregnancy.

In 2019, H+H created the Reproductive Health Working Group, a group of Family Planning Directors from facilities across H+H, that began meeting monthly to tackle clinical issues, set system-wide standards, and ensure consistent access to high-quality care. This group has led and sparked work such as building the Reproductive Health Dashboard to track abortion care metrics systemwide and restructuring H+H's referral system to reduce barriers to abortion care and improve internal efficiency.

H+H engages in policy and advocacy work with partners including the Health Department, American Civil Liberties Union, New York Civil Liberties Union, and the National Institute of Reproductive Health. H+H clinician-advocates, in coordination with the H+H Office of Legal Affairs, have provided declarations (sworn statements) that serve as evidence of the harms caused by restrictions to abortion access at the national level.

For more information on New York City's work on improving universal access to sexual and reproductive health and reproductive rights, see SDG 5 (specifically target 5.6) in this VLR.



## SDG Target 3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

### CONTEXT

The United States does not have universal health care coverage. In the absence of a federal solution, New York City has developed a patchwork of programs and initiatives aimed at providing affordable and low-cost health care options, with the goal of increasing the number of New Yorkers who are covered.

In 2023, 12% of New Yorkers reported being uninsured, up nearly one percentage point from 2022 and lagging behind the city's target of 10.5%. As of February 2025, approximately 4 million New York City residents were enrolled in Medicaid, a joint federal and state program that helps cover medical costs for some people with limited income and resources. Medicaid is administered by New York City Human Resources Administration (HRA).

During the COVID-19 public health emergency, the U.S. Centers for Medicare & Medicaid Services (CMS) suspended annual Medicaid renewal requirements, allowing enrollees to maintain uninterrupted coverage without the need to submit ongoing income verification. In June 2023, the COVID-19 pandemic-era easements ended; however, under guidance from CMS, the New York State Department of Health initiated a temporary remediation plan to extend renewals due to the lack of an administrative renewal process. Under this plan, clients who did not respond to their renewal or a request for information had their coverage extended for 4-6 months and were provided additional opportunities to renew. In April 2025, New York State resumed the auto-close process for recipients who fail to respond to their renewal. It is anticipated that a significant number of households will lose coverage due to lack of response. Additionally, barriers such as lack of time, awareness, or understanding of the paperwork, which may require technical assistance, hinder New Yorkers from accessing insurance. The Health Department continues to work to improve and expand access to health insurance, including coordinating media campaigns and conducting policy work to further expand eligibility and decrease barriers to insurance enrollment and renewal.

From August 2019 to April 2025, H+H saw a significant increase in the reported number of uninsured patients served, rising to 313,559 patients. Enrollment in NYC Care, a coverage plan that helps New Yorkers access affordable medical care at the city's public hospital system,



grew to 138,135 members as of April 2025. This growth can be attributed to ongoing community outreach and public awareness campaigns expanding the program's presence in target communities.

## PROGRESS AND NEXT STEPS

The following are health care coverage and insurance programs currently available to New Yorkers.

### **New York State of Health Essential Plan**

The New York State of Health Essential Plan offers a free or low-cost insurance plan for adults with low incomes who do not qualify for Medicaid.

### **Qualified Health Plans**

Qualified Health Plans are available on the New York State of Health Marketplace and directly from insurance companies, and are managed by private insurance companies, rather than New York State. These private insurance plans follow the rules set by the federal Affordable Care Act, which include covering essential health services and meeting certain standards of cost sharing. Financial help is available to make these plans more affordable.

### **Child Health Plus**

This is New York State's health insurance plan for children under the age of 19. Depending on the family's income, the child may be eligible to join either Children's Medicaid or Child Health Plus. How much families have to pay for this affordable plan also depends on their income.

### **Employer or School-Sponsored Plan**

Many employers offer health insurance to employees, often at a reduced rate. New York City students may be able to get health insurance through their college or university.

### **Medicaid**

New Yorkers may qualify for Medicaid, which is a public health insurance for people with low incomes, depending on their income. Undocumented immigrants age 65 and older may, as of January 2024, qualify for full Medicaid (as opposed to only emergency Medicaid) depending on income.

### **Medicare**

Though Medicare is most commonly known as a public health insurance for people at least 65 years old, other people who could qualify include those with disabilities or end-stage renal disease.



## NYC Care

Launched in August 2019, NYC Care is a health care access program that guarantees low-cost and no-cost services to New Yorkers who do not qualify for or cannot afford health insurance at the city's H+H system. The program ensures that New Yorkers who cannot access insurance are being connected with affordable, high-quality primary, preventive, and specialty care, regardless of their ability to pay. Comprehensive primary and preventive care are provided through NYC Care including chronic disease testing and management and age-appropriate screenings and vaccinations, outpatient specialty care, behavioral health, care management, and pharmacy. Members also receive a membership card with their primary care provider's name, a dedicated customer service hotline, and a member handbook available in the top 13 languages spoken by New Yorkers. Dental care is available through H+H Options, which provides low and moderate-income H+H patients affordable healthcare, and emergency and inpatient services are covered through Emergency Medicaid. Membership is also open to patients that have primary care providers at other Federally Qualified Health Centers (commonly known as community health centers) so they can receive specialty care at H+H if needed without interrupting their existing primary care relationship.

## New York City Health + Hospitals insurance commitment

H+H partners with 22 community-based organizations (CBOs) in all five boroughs, as well as GetCoveredNYC and the Mayor's Public Engagement Unit, to spread the word about opportunities for insurance enrollment for those who qualify, and for NYC Care for those who cannot access insurance. H+H will continue working collaboratively with stakeholders across the city to continue achieving health equity for all New Yorkers.

## EMS Improvements and Commitment

EMS is a critical part of essential health care as they deliver timely, equitable, and lifesaving support, and provide medicines and interventions in emergencies. The city's EMS has significantly evolved over the years, particularly in improving patient care and ensuring rapid response to a wide range of incidents. Several programs have been key to improving this essential health service, including the Hospital Liaison Unit (HLU), which focuses on optimizing ambulance availability by streamlining hospital patient hand-offs and ensuring that units return to service more efficiently. This initiative directly impacts response times and improves health systems readiness across the city.

EMS has also embraced the use of social media platforms to promote safety awareness and provide crucial information about accessing emergency care. These platforms serve as an essential bridge between EMS and the communities they serve, helping to build public trust and encourage timely use of resources. Additionally, there has been a renewed focus on community involvement across all EMS divisions. Engaging with the public fosters mutual respect and reliability, reinforcing their role not just as responders, but as integral members of the neighborhoods they serve.



Looking ahead, EMS is committed to continuous improvement through the ongoing review and update of protocols to meet and exceed national standards. These forward-thinking initiatives reflect the EMS Department's dedication to enhancing care quality, increasing efficiency, and ensuring that all individuals receive the services they need with dignity and respect.



## SDG Target 3.9: By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

### CONTEXT

Air quality in New York City improved significantly after local regulations required building owners to convert to cleaner heating oils by 2015. These heating oils were a major source of sulfur dioxide (SO<sub>2</sub>), a hazardous chemical and major pollutant, in New York City. In 2023, only one of the Health Department's 84 sites detected any SO<sub>2</sub>, and the level at that site was similar to SO<sub>2</sub> levels measured on Whiteface Mountain in the Adirondack Mountains, demonstrating the success of the clean heating oil requirements.

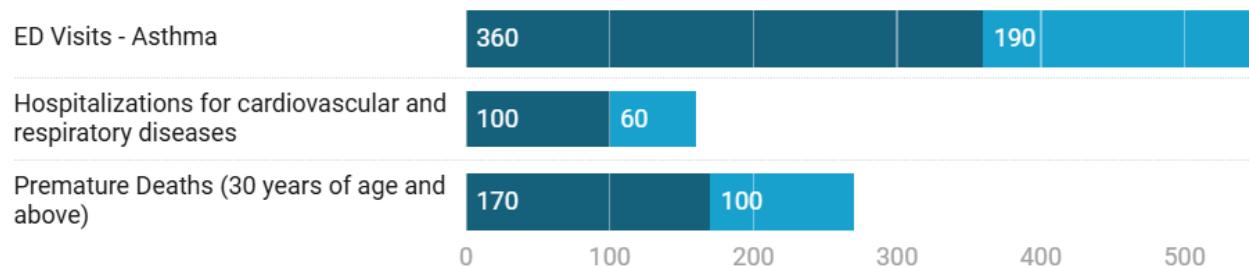
Despite this progress, two air pollutants, ozone (O<sub>3</sub>) and PM2.5, cause about 2,400 deaths per year in New York City, and thousands more emergency department (ED) visits and hospitalizations for asthma, heart and lung problems. Those most at risk include older adults, children, and people with pre-existing health conditions. PM2.5 pollution from traffic specifically contributes to an estimated 320 premature deaths and 870 ED visits and hospitalizations each year in New York City.

O<sub>3</sub> levels were higher in 2023 than any previous year of [New York City Community Air Survey](#) (NYCCAS) monitoring. O<sub>3</sub> is produced when there are oxides of nitrogen and volatile organic carbon emissions in the presence of sunlight and heat, which is why there are higher levels in the summer. Summer 2023 was one of the hottest and driest in recorded history globally, likely causing higher O<sub>3</sub> levels. There has not been a consistent trend in O<sub>3</sub> levels over the history of NYCCAS monitoring, but the Health Department expects O<sub>3</sub> levels to trend higher in the future with further increases in average temperatures due to climate change.

Correlated to chemical and pollutant exposure, in 2022, the Health Department saw a large increase in asthma-related ED visits among children ages 5–17, from 79 visits per 10,000 children in 2021 to 127 visits per 10,000 children in 2022.



## Adverse health effects caused by PM2.5 from trucks and buses and cars within NYC



In 2022, PM2.5 pollution from traffic caused an estimated 550 asthma ED visits, 160 hospitalizations because of heart and lung problems, and 270 premature deaths in New York City.

Lead is also a prominent hazardous chemical and pollutant that poses an ongoing threat to public health in New York City. The New York City Department of Environmental Protection (DEP) [monitors the quality of water](#) in the city, which is delivered lead-free through 7,000 miles of lead-free aqueducts, tunnels, and water mains in the city's water supply system. However, homes built prior to 1961 may have lead service lines (which connect the house to the city's water main in the street), and some homes, regardless of the year they were built, could have household plumbing and internal fixtures that contain lead. Property owners in New York City are responsible for maintaining their water service lines. Although New York City takes extensive steps to protect water in homes that may have lead in their private plumbing, lead could still be released into a home's drinking water. Additionally, more than half of the city's residential buildings were built before lead paint was banned in 1960. Many of these older buildings still have lead paint on their walls, windows, doors, and other surfaces.

Blood lead levels of 5 mcg/dL or more in children is considered high and requires action to mitigate health effects and remove or control exposure sources. In 2023, the Health Department reported that there were 3,456 children under the age of 18 with blood lead levels at or above 5 mcg/dL, an increase of almost 7% since 2022. Similarly, there were 2,803 children under the age of six with blood lead levels at or above 5 mcg/dL in 2023, about 3% more than in 2022. The observed rise in cases may be due to a variety of complex factors, including, but not limited to, changes in health care utilization during and after the COVID-19 pandemic.



## PROGRESS AND NEXT STEPS

### Comprehensive Asthma Strategy

The Health Department's comprehensive asthma strategy seeks to help families improve their children's asthma control by increasing referrals to community-based asthma counseling and education; expanding home-based environmental interventions to address asthma triggers; increasing medication prescribing, utilization, and adherence; and providing school-based asthma management. The city's Healthy Neighborhoods Program (HNP) can help children and adults with persistent asthma by identifying asthma triggers in their home and finding ways to address them. This includes safely fixing the problems that cause them, such as leaks and cracks. The Office of School Health (OSH), a joint program of the city's Health Department and Department of Education (NYC Public Schools), provides various clinical services in school for children with asthma, including asthma medication administration at no cost to students. OSH provides asthma education to all students including Open Airways for Schools, an evidence-based self-management program for students in grades three through five, provided by OSH nurses and asthma case managers. OSH nurses and physicians also provide asthma assessments and referrals to other Health Department asthma programs and CBOs.

### Lead Poisoning Prevention

The Health Department works to promote blood lead testing with a special focus on populations that are at increased risk for lead exposure. Blood lead testing outreach focuses on young children, pregnant people and occupations known to work with lead-containing materials. New York State Public Health Law requires health care providers to test all one- and two-year-old children for lead annually. The law also requires that children should be assessed for continued risk for lead exposure by their health care provider every year until they are six years old and tested if deemed at risk. Health care providers should also assess pregnant people for lead exposure during their first prenatal visit. Additionally, workers at risk for lead exposure because of their job should be monitored by their employer. If employees work around lead, it is recommended that employers have a blood lead monitoring program. If not, workers should speak with their doctor about getting a blood lead test.

The Health Department's Education and Community Partnerships Unit offers free presentations and trainings on environmental health hazards in the home. General trainings and workshops are offered for parents, community and any other interested residents, and focused professional trainings are offered for community organization staff through a four-module series on environmental home health topics.

Additionally, NYCHA, the city's public housing authority that provides public and affordable housing to New Yorkers, has a Lead-Based Paint Abatement Program in their Healthy Homes Department. This program is currently conducting lead-based paint testing at a rate of 700 to 800 apartments per week and abating at a rate of 300 to 400 apartments monthly, a [historic number](#) for any landlord of this scale. As of October 2024, 86,000 apartments were success-



fully tested at the newer, stricter 0.5 milligrams per square centimeter (mg/cm<sup>2</sup>) threshold and more than 48,000 apartments also tested negative for lead-based paint at the stricter 0.5 mg/cm<sup>2</sup> threshold.

### **Environmental Justice New York City Initiative**

The Mayor's Office of Climate and Environmental Justice (MOCEJ) launched the Environmental Justice Initiative (EJNYC) in order to implement the city's environmental justice (EJ) legislation ([Local Laws 60](#) and [64 of 2017](#)), which led to the publication of the [EJNYC Report](#), a comprehensive study detailing the existing environmental inequities experienced by New Yorkers. Six interconnected EJ issues were identified, including but not limited to exposure to polluted air and water, hazardous materials, and climate change. New York City neighborhoods with the greatest number of pollution-attributable hospital emergency department visits are all considered EJ neighborhoods, and residents in these EJ neighborhoods are also subject to emissions from heavy-duty diesel vehicle traffic, hazardous waste generators, and storage facilities.

Climate change can be an amplifier for environmental injustice and exacerbate the already-disproportionate burden and impacts communities of color and low-income communities face due to generations of racism, disinvestment, and inequality. Extreme heat is the top extreme weather-related cause of death in New York City and nationwide. The Health Department estimates that more than 500 heat-related deaths occur each summer, driven by climate change and a recent plateau in the levels of air conditioning ownership. Most of the city's population living in neighborhoods with high heat vulnerability of Heat Vulnerability Index (HVI)-5 and HVI-4 live in EJ areas. Black New Yorkers are more likely to die from heat stress, with death rates twice as high compared to white New Yorkers. This is an example of how past and current structural racism creates an imbalanced system that disadvantages people of color. Effective heat mitigation measures, such as tree canopy and access to green spaces, are not equitably experienced across the city. The distribution of urban tree canopy coverage is lower in areas with lower household incomes and higher percentages of people of color, and residents in EJ areas have fewer acreage of accessible park space per 1,000 residents compared to residents in non-EJ areas.

The city is undertaking several initiatives to combat these issues, including:

- Developing and releasing the EJNYC Plan, which will identify city policies and programs to help address environmental justice issues citywide.
- Developing the city's first Urban Forest Plan, which is a plan to equitably expand tree canopy to cover 30% of New York City, with particular attention to heat vulnerable areas.
- Improving air quality through increasing the adoption of electric vehicles and school buses, building systems, and more.



- Addressing heat vulnerability through a policy that will set a maximum indoor temperature, requiring landlords to install cooling units (like ACs) into existing buildings, and requiring that all new construction include cooling.
- Prioritizing Cool Roof outreach and installations in heat-vulnerable areas, through the NYC CoolRoofs program that provides New Yorkers with paid training and work experience installing energy-saving, reflective rooftops.
- Collaborating with trusted messengers and CBOs to spread protective messaging about who is at risk and how to stay safe in hot weather.

### Fair Share Laws

Adopted in the 1989 New York City Charter Revision, “Fair Share” provisions require the city to make a concerted effort to ensure that communities are both getting their fair share of amenities, like parks and libraries, and doing their fair share to confront citywide problems like homelessness. When facilities are sited unfairly, the burdens and benefits of those city facilities are unevenly distributed, exacerbating racial, environmental, and economic disparities. The goals of the “Fair Share” provisions align closely with the city’s EJ legislation, Local Laws 60 and 64 of 2017, which are now being implemented by MOCEJ through the EJNYC Initiative. Additionally, MOCEJ is committed to integrating EJ into city systems and decision-making processes such as climate budgeting to ensure distributional equity of environmental amenities and benefits.

In November 2023, the New York City Comptroller [completed an audit](#) of the Fair Share System and ultimately determined it was not working as intended. Specifically, environmental ‘goods’ like parks, and environmental ‘bads’ like waste transfer stations are far from equally distributed in New York City. One blatant example of environmental inequity in the distribution of city facilities is the siting of waste transfer sites. As measured by capacity for tons of waste processed (at both marine transfer stations and contracted private waste haulers) per day per 1,000 people, 73% of the total citywide permitted capacity for waste disposal is allocated to stations in just five community districts in Brooklyn, Staten Island, and the south Bronx. Though meaningful strides have been made in recent decades to help correct for these historic, unfair sitings, inequity remains.

### Idling Law

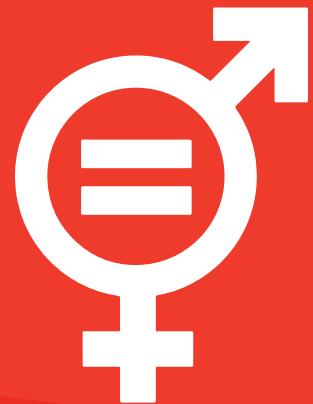
The New York City [idling law](#) protects air quality by reducing vehicle emissions released into the atmosphere. In New York City Administrative Code, Title 24, Section 24-163, it establishes that no person should allow the engine of a motor vehicle to idle for longer than three minutes while parking, standing, or stopping. Additionally, the legal idling time around public and private school facilities is one minute, as set forth in the [Local Law 5 of 2009](#).



### **EMS and FDNY Preparedness for Deaths from Hazardous Materials and Contamination**

In addition to the city's EMS response and transport services, FDNY is prepared for any manner of attack, including Chemical, Biological, Radiological, and Explosive (CBRE), which could have environmental impacts. FDNY's Center for Terrorism and Disaster Preparedness (CTDP), in partnership with other agencies, has established protocols and conducts mass-casualty drills and trainings in preparation for worst case scenarios.

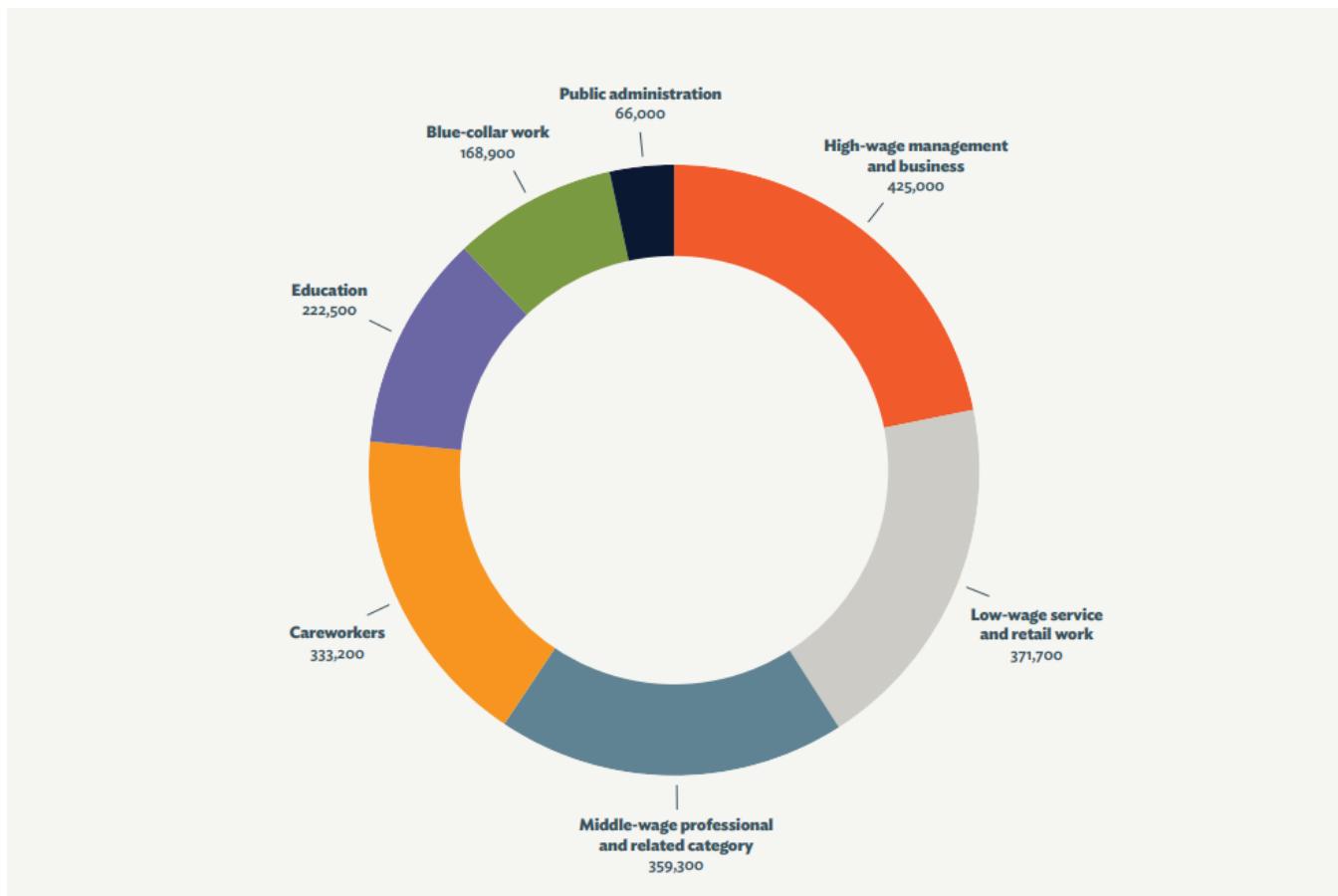
# 5 GENDER EQUALITY



# Goal 5: Gender Equality

## CONTEXT

Decades of data show persistent and longstanding gender disparities in education, health, social services, and safety. These disparities have been further exacerbated by the COVID-19 pandemic and continue to create roadblocks for women's economic advancement and overall wellbeing in New York City. In New York State, women continue to be paid 86 cents for every dollar a man makes. This gap is even wider for women of color as Black women earn 64 cents, and Hispanic women earn 57 cents for every dollar a man makes. Black women are also four times more likely to die from a pregnancy-associated death than white women. Despite women making up a significant portion of New York City's workforce, there remains underrepresentation in high-growth sectors of technology, green economy, and life sciences. This disparity not only affects women's economic development but also contributes to wider gaps in gender and racial pay equity, venture capital funding, and leadership roles.



New York City Women's Workforce (2022) according to the [Economic Policy Institute](#) report.

Note: CNYCA Analysis of EPI CPS extract; sample are economically active and are ages 16 and over. New York City Women's Workforce (2022) according to the Economic Policy Institute report. Note: CNYCA Analysis of EPI CPS extract; sample are economically active and are ages 16 and over.

Care and caregiver work is one of the fastest-growing components of New York City's economy but frequently one of the most neglected. New York City is home to an estimated 1.3 million unpaid/family caregivers who are overwhelmingly women, and on average are significantly older, less white, and more likely to be immigrants than non-care workers. Because of the city's large and diverse unpaid/family caregiver population, as well as its growing population of older adults, it is vital that their needs are prioritized. The city is committed to providing a variety of services targeted toward caregivers, as well as other supports that have the potential to benefit caregivers. At the same time, there is opportunity to leverage existing resources to reach and serve more unpaid/family caregivers. The COVID-19 pandemic highlighted the importance of care workers to the city's economy and families but also caused a great deal of disruption. The number of personal care aides grew significantly from 2019 to 2021, but the number of child care workers and pre-school and kindergarten teachers declined. While care work is compensated at rates far lower than non-care work, public policy actions in recent years have shown the potential for meaningful impact.

One particularly troubling manifestation of gender disparities today is the rates of gender-based violence that persist within New York City. In 2024, the New York Police Department (NYPD) responded to 240,077 domestic violence incidents, which averages to nearly 658 every day. Domestic violence felony assaults increased 4.9% in 2024 compared to 2023, making up 39.8% of all felony assaults in the city. In that same year, the number of reported rapes increased 18.9%, up to 1,748 in 2024 compared to 1,470 in 2023. New Yorkers also experience less violent forms of gendered violence at high rates; a 2023 survey of over 3,700 city residents on their experiences with street harassment found that 52.1% of respondents experienced unwanted street harassment within the past six months. Additionally, Women Forward NYC, an initiative tasked with addressing women's issues in the city, reports that 75% of women in New York City have been harassed during their daily commutes. The city is committed to supporting these survivors through a network of social and legal services as well as through ongoing education and awareness efforts.

The life of expectancy of women living in New York City is 81.4 years, nearly seven years more than that of men. Therefore, aging issues are women's issues. Women continue to outnumber men within the 60+ age group and the number of women in the 85+ age group is almost double that of men. This greater longevity results in more women in New York City living alone during their later years, which has various implications related to income, social isolation, health, and other concerns. Correspondingly, the majority of older New Yorkers served by the New York City Department for the Aging (NYC Aging) are women.

New York City's commitment to gender equity recognizes that true equity must include and uplift all, including women, girls, Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+), and Transgender, Gender Non-conforming, and Non-binary (TGNCNB) individuals. Through leadership from the New York City Commission on Gender Equity (CGE), the New York City Mayor's Office of Equity and Racial Justice (MOERJ), the New York City Unity Project (Unity Project), and partners across city government, the city works to advance inclusive policies



and programs that address economic opportunity, health and reproductive justice, safety, and representation for these individuals. By centering the experiences of historically marginalized communities, including those at the intersection of gender and race, New York City continues to build a city where all people, especially women and those facing gender-based discrimination, can thrive with dignity, opportunity, and full participation in public life.

## SDG Target 5.1: End all forms of discrimination against all women and girls everywhere

### Women Forward NYC

Launched in January 2024, and supported through city funding, private and public partnerships, academic institutions, and federal and grant funding, Women Forward NYC employs a holistic approach to address immediate needs, tackle long-standing disparities, and position New York City as a national leader for advancing women's issues. The initiative addresses gender disparities by connecting women, including transgender and gender expansive New Yorkers of all ages, to professional development and higher-paying jobs; dismantling barriers to sexual, reproductive, and maternal healthcare; reducing gender-based violence against women; and provide holistic housing services, including for formerly incarcerated women and domestic violence survivors. It encompasses new and ongoing investments dedicated to supporting gender equity totaling over \$62 million.

Women Forward NYC's action plan focuses on three key areas, with a special emphasis on supporting historically marginalized populations:

#### 1. Economic Mobility

- Build pipelines toward higher-wage, in-demand career pathways
- Improve financial literacy and access to financial resources
- Dismantle barriers to work and increased incomes

#### 2. Health

- Address inequities in sexual, chronic, and reproductive health
- Reduce Black and Brown maternal mortality rates
- Improve access to comprehensive medical treatment
- Enhance mental health education and outreach

#### 3. Public Safety & Housing Stability

- Increase initiatives that reduce violence toward women, LGBTQ+ women, nonbinary New Yorkers, and women of color
- Expand interventions to prevent domestic violence and support survivors
- Provide a continuum of services for low-income families to keep them in their homes or accelerate their leave from shelter and back into their communities

**Through Women Forward NYC, New York City has committed to pursue these goals for 2030:**

### **Economic Mobility Goals**

- Close the gender pay gap for the same work
- Close the female labor force participation gap
- Drive to parity in gender representation among the top 40 highest paying occupations
- Drive to parity in gender representation among NYC business ownership

### **Health Goals**

- Reduce pregnancy-associated mortality among Black women by 10%
- Reduce breast cancer mortality by 10%, with a focus on reductions among Black women
- Increase percentage of 13-year-olds with completed HPV series by 40%
- Reduce annual HIV diagnosis rates for Black and Latina women by at least 50%
- Reduce the percentage of public high school girls who report feeling sad or hopeless by 10%

### **Public Safety & Housing Stability Goals**

- Reduce felony domestic violence assaults by 25%
- Reduce homicides involving women victims by 30%
- Increase families with children exiting shelter into permanent housing by 25%

Initiatives and programs across the city that help achieve these goals are highlighted below.

### **Community and Public Engagement Accomplishments**

In 2024, the Communications and Public Engagement unit of CGE [reported](#) its progress on making New York City more gender-equitable by fostering inclusivity and accessibility for New Yorkers. By improving the interactivity and reach of CGE's digital platforms, CGE expanded its online audience, ensuring vital resources and information are widely accessible to diverse communities. Simultaneously, CGE deepened its impact through in-person outreach, participating in 43 public engagement events across the five boroughs to provide New Yorkers with essential information and access to city resources.



**CGE 2024 outreach event at Brooklyn Public Libraries.**

CGE played a pivotal role in two 2024 campaigns. April is Sexual Violence Awareness Month and Denim Day is an annual campaign held on the last Wednesday in April to raise awareness about sexual violence and to support survivors. The year 2024 marked the 25th anniversary of Denim Day in the United States. CGE and the New York City Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV) are members of the Denim Day NYC coalition and helped coordinate the campaign through digital campaigns, public events, and advocacy. Additionally, founded in 1991, the annual international 16 Days campaign is a movement to prevent and end all forms of gender-based violence. The campaign runs every year from November 25, International Day for the Elimination of Violence Against Women, to December 10, Human Rights Day. CGE, supported by MOERJ, and in partnership with ENDGBV, co-led the 2024 campaign in New York City. By hosting events, sharing online and in-person educational resources, and collaborating with partner organizations and city agencies, CGE helped raise awareness and engage new audiences to amplify the message of ending gender-based violence.

In 2024, CGE also made significant strides in developing and enhancing informational resources tailored to the needs of New Yorkers. Through a combination of research, design, and content refinement, CGE produced materials that address issues tied to CGE's focus areas and mission. Among these efforts were the creation of three new one-pagers focused on CGE's priority areas and the repurposing and enhancement of the CGE produced Menopause at Work booklet, with user-friendly insights for employees and employers.



CGE's 2024 16 Days presentation.

### Pay Equity Cabinet

[Executive Order 84 of 2021](#) established the Pay Equity Cabinet (PEC), which sits under the MOERJ, to address race- and gender-based pay disparities in the New York City government workforce and builds on the work of the Task Force on Racial Inclusion and Equity (TRIE). The PEC uses the intersection of gender, race, and tenure to address the factors contributing to pay inequity and occupational segregation across the city. In 2024, the PEC issued a request for proposals to identify a Minority- and Women-Owned Business Enterprise (M/WBE) vendor to complete an analysis of approximately 60 job titles throughout city government. This two-year project will focus on the titles with the largest gender and racial disparities and other factors that can affect pay equity, such as occupational segregation.

### The New York City Unity Project

The Unity Project is the city's LGBTQ+ interagency coordinating body, housed at MOERJ. As an innovation hub of novel programming, the Unity Project coordinates across city agencies to incubate culturally competent services tailored to meet the needs of the LGBTQ+ community, particularly TGNCNB people, people of color, and youth. The Unity Project works across three main sectors: economic mobility, acceptance and anti-discrimination, and health equity. The Unity Project implements programming through a community-driven approach, investing in community-based organizations, and developing strategic partnerships across the private sector, nonprofit organizations, and academia. Beyond fostering culturally compe-



tent services, the Unity Project focuses on four additional pillars: interagency coordination, community engagement and education, policy and protections, and resource access.

With regards to policies and protections, the robust protections of the New York City Human Rights Law prohibit discrimination based on several protected classes, including, but not limited to, sexual orientation, gender, gender identity, and gender expression in employment, housing, and public accommodations. The law safeguards employment rights related to sexual and reproductive health, including gender-affirming care and hormone therapy. To uphold these protections, the New York City Commission on Human Rights (CCHR) enforces the Human Rights Law through a combination of investigations, legal action, settlements, penalties, and public education.

CCHR is deeply committed to community engagement and education. CCHR's lead advisors and liaisons play a vital role in educating New Yorkers about their rights and responsibilities. CCHR provides extensive training, including Human Rights Law 101 and Working with Transgender and Gender Non-Conforming Communities. They also engage in widespread outreach to raise awareness of these protections.

Lastly, the Unity Project Website serves as a digital hub for LGBTQ+ New Yorkers. The newly launched digital platform serves as a comprehensive and user-friendly resource hub, connecting individuals with vital services, programs, and support networks tailored to their unique needs. Whether seeking health and wellness resources, legal assistance, housing support, or community-building opportunities, the Unity Project website offers a centralized destination designed specifically for LGBTQ+ New Yorkers. The platform ensures that individuals can access the information and services they need to thrive. By bringing together citywide initiatives and nonprofit and advocacy organizations under one digital roof, this hub fosters a stronger, more connected community, while considering privacy needs. From mental health resources to legal assistance, the website is more than just an information portal, it is a lifeline, a support system, and a multimedia celebration of the creativity and diversity of LGBTQ+ individuals across New York City.

### **Supporting Minority- and Women-Owned Business Enterprises (M/WBE)**

[Executive Order 26](#) was signed in February 2023 to increase participation by Black American, Hispanic American, Native American, and Asian American WBEs, all groups that have been persistently and negatively impacted by procurement inequities. Shortly after, [Executive Order 34](#) was also signed to further facilitate the city's full M/WBE performance outcome tracking and ensure city agencies have a senior staff member that prioritizes M/WBE programming. Between July 2022 and June 2023, the city set a new record for spending on city-certified M/WBEs, awarding over \$6 billion in total. In 2024, the New York City Economic Development Corporation (NYCEDC) issued a [Commercial Real Estate Disparity Study](#) to assess the racial and gender disparities in the Commercial Real Estate industry. Once complete, NYCEDC will apply the recommendations to provide greater accessibility for minority-women and women-owned businesses.



## **Addressing Gender-Based Discrimination through CCHR**

CCHR remains steadfast in its commitment to ending all forms of discrimination against women and girls in New York City. They recognize that true equity requires both proactive engagement and strong enforcement, and continue to pursue both with urgency and care.

In 2024, CCHR launched the Together NYC campaign to engage New Yorkers in conversations about discrimination, bias, and belonging. That campaign concluded in November 2024, and the data analysis phase is currently underway, reviewing more than 8,000 responses to better inform CCHR's next steps in policy and outreach.

CCHR also partnered with ENDGBV on a citywide survey focused on street harassment. While ENDGBV served as the lead agency, CCHR supported the effort by providing expertise on the [New York City Human Rights Law](#) and community-based outreach. Together, the two are working to better understand the scope and impact of gender-based harassment in public spaces and advance responses that center safety, dignity, and equity.

In early 2025, CCHR revamped their Sexual Harassment Prevention Training to ensure that the content reflects the most up-to-date legal protections, inclusive language, and real-world scenarios. Many New York City employers across the public and private sectors have made this training mandatory for their employees. The training remains accessible online and is a critical tool for educating New Yorkers on their rights and responsibilities under the law.

CCHR continues to investigate and prosecute cases of gender-based discrimination, including sexual harassment and discrimination based on gender and gender identity/expression. Notable 2025 rulings include two decisions which underscore the city's commitment to holding violators accountable and securing justice for complainants.

Through these and other efforts, CCHR continues to uphold the rights of women and girls across the five boroughs and advance a city where everyone can live, work, and thrive free from discrimination.

## SDG Target 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation

### Establishing the New York City Domestic Violence Task Force

In response to the persistently high incidence of domestic violence, New York City established the Domestic Violence Task Force (Task Force) in November 2016 to develop and implement a comprehensive strategy to reduce such violence. Under the leadership of the previously named New York City Mayor's Office to Combat Domestic Violence, now ENDGBV, and the Mayor's Office of Criminal Justice (MOCJ), the Task Force brought together representatives from city agencies, domestic violence prevention and intervention organizations, and survivors to identify existing domestic violence programs and interventions that were working well, those that needed attention, as well as promising practices to implement or expand. The Task Force gathered a wealth of information, including statistics on domestic violence complaints to police and criminal case outcomes, data on shelter and social service involvement of victims and abusers, and research on promising models for combating domestic violence that were in use either in New York City or elsewhere in the country. This inquiry resulted in a set of recommendations for targeted investments to create durable and effective solutions to domestic violence citywide, including the creation of new, trauma-informed programs for people who cause harm to change abusive behavior and prevent further abuse. Since its inception, the Task Force has [announced](#) 32 initiatives and secured \$11 million in new city funding to reduce violence, enhance the safety and wellbeing of those impacted by domestic violence, and hold abusive partners accountable.



CGE 2024 outreach event at Brooklyn Public Libraries.



## Launch of ENDGBV under Executive Order 36 of 2018

Executive Order 36 of 2018 was signed into law in September 2018, which expanded the authorities and responsibilities of the city's Mayor's Office to Combat Domestic Violence and changed the Office name to the Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV). Executive Order 36's launch of ENDGBV enhanced the city's strategic response to intimate partner and family violence, as well as sexual assault, stalking, and human trafficking. Under the new mandate, ENDGBV was charged with developing and expanding services for survivors of sexual assault, family violence, and trafficking; launching a citywide outreach team and enhancing trainings for City agencies and community stakeholders; creating opportunities for data collection and information sharing; and developing a legislative agenda for domestic and gender-based violence. Additionally, Executive Order 36 created a Fatality Advisory Committee (FAC), chaired by ENDGBV, to review individual case level data of domestic and gender-based violence fatalities. The FAC launched in March 2025 and is the first committee of its kind in the country to engage in an intensive review of gender-based violence fatalities and develop innovative recommendations to enhance responses and interventions.

## Expanding the Network of Family Justice Centers

ENDGBV is responsible for operating the New York City Family Justice Centers (FJCs), which are city-funded holistic service centers, located in each borough, that provide free and confidential vital social services, civil legal, and criminal justice assistance for survivors of domestic and gender-based violence and their children. All are welcome, regardless of age, income, sexual orientation, gender identity, immigration status, or language spoken (spoken translation services are available at every location). FJCs are co-located with the District Attorney's Office in each city borough and engage CBOs to provide contracted and in-kind services. City agencies like the NYPD and the New York City Department of Social Services (DSS) also provide support to survivors and their children onsite. Since 2005, when the Brooklyn Family Justice Center (FJC) opened as a public-private partnership, New York City has continued to expand the presence of the FJCs, with the Queens FJC opening in 2008, the Bronx FJC in 2010, the Manhattan FJC in 2014 and the Staten Island FJC in 2016. New York City has the largest network of FJCs in the country and over 100 onsite and off-site partners. In April 2021, the FJCs became formally affiliated with the FJC Alliance/Alliance for Hope International, joining a network of over 50 affiliated centers across the nation. In 2024, the FJCs saw 57,656 visits from 15,207 unique clients.

## NYC HOPE Web-portal Connecting Community to Services

In February 2018, ENDGBV launched NYC Hope, an innovative web-portal where community members can learn more about domestic and gender-based violence, and survivors can connect to information and resources, including community-based organizations and city agencies. The site features information for survivors and allies, such as ways to recognize signs of abuse and get help, and an easy-to-search database for locating community resources, which also offers filters for special populations. In 2025, the service directory was

updated to include a mapping resource so that survivors of domestic and gender-based violence can more easily access resources that are convenient to where they live, work, and learn. Developed by New York City's Department of Technology and Innovation with feedback from over 100 city FJC clients, the NYC HOPE website uses user interface/user experience (UI/UX) best practices to ensure that it is intuitive and easy to navigate. In 2024, there were 80,036 unique visits to the NYC Hope web-portal.

### **NYPD Training Advisory Committee**

The NYPD Domestic and Gender-Based Violence Training Advisory Committee was established in 2021 to provide expert feedback on the police department's training related to gender-based violence. Comprising of ENDGBV staff, survivors, advocates, service providers, district attorneys, and NYPD leaders, the Committee's goal is to develop recommendations that increase the degree to which NYPD's trainings are trauma-responsive, accountable, and effective.

Since its inception, the NYPD Training Advisory Committee has met to review NYPD training materials, highlight training strengths, identify common challenges or gaps, and develop actionable recommendations. The Committee created three specialized subcommittees focused on domestic violence, sexual violence, and human trafficking. These committees helped ensure that recommendations, which are currently being finalized, include targeted feedback and considerations based on different forms of gender-based violence.

### **Domestic and Gender-Based Violence Workplace Policy**

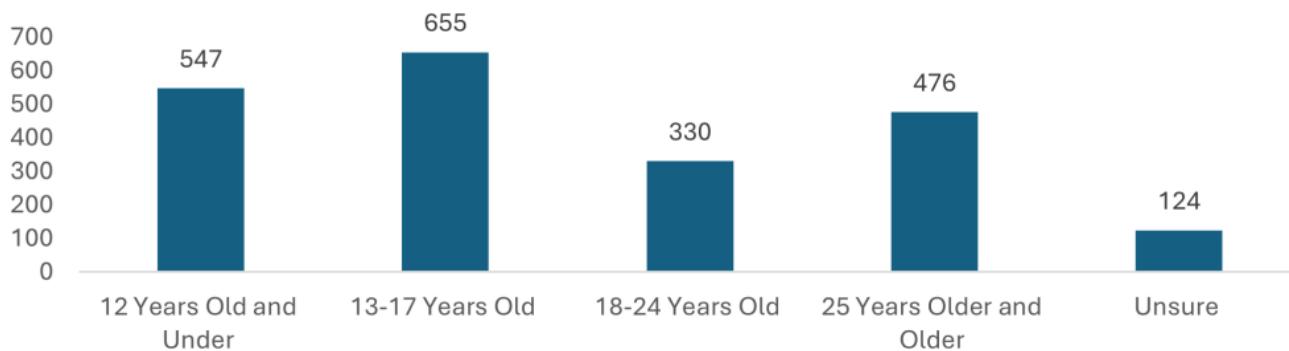
In 2022, ENDGBV was tasked with developing and implementing a domestic and gender-based violence workplace policy for all city agencies through [Executive Order 85 of 2021](#). The policy aims to enhance trauma-informed support for city employees experiencing domestic and gender-based violence as part of the city's commitment to a healthy and safe workplace that prioritizes employee wellbeing and access to mental health support. ENDGBV developed the policy and related trainings with the support of Workplaces Respond to Domestic and Sexual Violence, a national resource center operated by Futures Without Violence. The policy has been adopted by all agencies and standardizes survivor-centered and trauma-informed responses for employees experiencing domestic and gender-based violence in the workplace or in their personal lives. Each city agency has a domestic/gender-based violence liaison who can provide confidential support and direct connection to ENDGBV and the city's resources for survivors within that office. New York City was the first municipality in New York State to adopt a Workplace Policy that includes all forms of domestic and gender-based violence in addition to existing protections against sexual harassment in employment within the New York City Human Rights Law.

### **Street Harassment Prevention Advisory Board and Survey**

[Local Law 46 of 2022](#) established the Street Harassment Prevention Advisory Board (SHPAB, the Board), co-chaired by ENDGBV and CGE, and requires it to conduct a survey of members

of the public to assess the prevalence of street harassment across New York City.

The survey, conducted online and in person in the fall of 2023, generated 3,736 responses. The 2023 results showed that 71.5% (2,672 of 3,736) respondents reported experiencing street harassment at some point in their lifetimes. And more than half (1,948 of 3,736) of respondents reported being harassed in the past six months.



**Age at which New Yorker first experienced street harassment (N=2,132) according to the 2023 SHPAB Survey.**

In 2024, SHPAB convened to review the results of the 2023 Street Harassment Prevention Survey, develop policy recommendations based on the survey results, and provide feedback on drafts of the public report. On December 5, 2024, the board hosted its annual public meeting where it presented findings reported in, and promoted the publication of, the ["Survey Report on Street Harassment in New York City."](#)

Based on survey results, SHPAB made the following recommendations for New York City to consider to raise awareness around the prevalence of street harassment and the supportive services available.

**Ongoing Public Awareness Campaigns:** A public awareness campaign to raise awareness of street harassment and highlight the role New Yorkers can play in creating safe public spaces should be developed. A public awareness campaign about street harassment could educate New Yorkers about verbal and physical street harassment and the broad effects of street harassment on individuals' mental health, safety, and day-to-day decision-making. Such campaigns could also bring attention to the communities and individuals who may be disproportionately targeted by street harassers on the basis of actual or perceived age, race, gender, sexual orientation, national origin, disability, or religious affiliation. Any public awareness campaign would also ideally spread awareness of resources and services available to individuals who have been street harassed or who want to learn to safely intervene to prevent or deescalate street harassment. Public awareness campaigns could be launched in or around transit hubs and busy pedestrian areas to raise awareness of all forms of street harassment and elevate the impact of street harassment and available resources. The awareness campaign could include information displayed on kiosks and on television screens within taxis, as well as social media campaigns and public art installations.

**Training and Workshops:** Bystander intervention and de-escalation training provides individuals with the tools and strategies to safely and nonviolently respond when they witness street harassment and discrimination. This type of training already exists in New York City: CCHR and Right To Be, a nonprofit organization working to end harassment, both host bystander intervention trainings. By supporting the expansion or increased frequency of these and other existing trainings, the city can educate more New Yorkers, while leveraging existing expertise and resources. The city can also assess whether new or updated trainings are necessary based on the results of this survey, and ongoing and future engagement with community members and community-based organizations. In addition, to raise awareness of street harassment, community workshops could describe street harassment, its impacts, and how to support individuals who are being or have been street harassed while also holding one another accountable to prevent street harassment. To further increase awareness, ENDGBV, CGE, and other city agencies should consider incorporating street harassment, where appropriate, into ongoing training activities.



**SHPAB public survey day of action.**

SHPAB is committed to implementing both of these recommendations. As part of this commitment, ENDGBV is planning to execute numerous aspects of the ongoing public awareness campaign, and, in 2025 and beyond, ENDGBV and CGE are planning to conduct the following future research:

- **Focus groups with interested individuals:** During the survey process, almost 400 respondents expressed interest in participating in focus groups to further explore the occurrence of street harassment. As part of the continued work of SHPAB,



ENDGBV and CGE will conduct focus groups to gain a better understanding of the survey data and refine the recommendations in this report.

- **Engage underrepresented groups:** ENDGBV and CGE plan to engage and learn from individuals whose demographics were underrepresented in the survey results. Men, transgender, gender-nonbinary, gender-nonconforming, and Hispanic/Latina/ Latino and Middle Eastern/North African individuals were underrepresented in this survey.
- **Engage young people:** The survey results discussed in this report include only adults over the age of 18. Additional surveys, focus groups, or engagement with people under the age of 18 could help the city understand how they experience street harassment in New York City. ENDGBV, CGE, and SHPAB are planning to engage and learn from young people to inform the ongoing work of the Board.

### **Consolidation of Victim Service Contracts at ENDGBV**

In 2024 and 2025, ENDGBV expanded immediate and long-term supports for individuals and survivors impacted by crime and abuse through consolidating a portfolio of contracts at MOCJ. Many of the city's programs that support New York residents impacted by crime and abuse were previously housed across ENDGBV, and the New York City Office of Crime Victim Supports (OCVS), under the MOCJ's management. Consolidating these services into ENDGBV's robust portfolio of trauma-informed and survivor-centered programs will enhance access for crime victims, particularly marginalized individuals, to holistic resources such as responsive case management, individual and group counseling, and survivor advocacy that help meet their immediate crisis needs and aid in recovery from the long-term effects of victimization. This move bolsters the city's longstanding and ongoing commitment to supporting survivors of crime and abuse, aligns with national best practices for victim services provision, and provides access to New York State victim services funding not previously available.

### **Women Forward NYC Public Safety and Housing Stability**

Women Forward NYC hosted a Mayoral Summit on Women's Safety, in partnership with New York University Marron Institute of Urban Management, bringing together service providers and city agencies to discuss interventions and strategies to reduce violence against women, girls, transgender and gender-expansive New Yorkers.

In 2024, the city expanded the Home+ program, Women Forward NYC's initiative that provides free and confidential security resources to survivors of domestic and gender-based violence who want to stay in their homes instead of entering shelter or going somewhere else, to include lock, door, and window repair and replacement services, as well as offering flexible funding. Additionally, Women Forward NYC provided reentry services to over 400 women leaving incarceration, including parenting education, mental health services, employment services, housing assistance and more.

## SDG Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation

### Female Genital Mutilation and Cutting Advisory Committee

The Female Genital Mutilation and Cutting (FGM/C) Advisory Committee was established by [Local Law 109 of 2021](#) and is chaired by ENDGBV. The Advisory Committee aims to make [recommendations](#) that engage communities and agencies to decrease and eventually eliminate FGM/C in the city. The Advisory Committee also identifies supportive community-based and culturally responsive resources for people who have undergone FGM/C. To achieve this, the Advisory Committee will make recommendations to address:

1. Enhancing access to guidelines and trainings for educators, non-profit organizations, law enforcement and healthcare providers to assist in: (i) the identification and protection of individuals at risk of undergoing FGM/C, and (ii) reporting instances of FGM/C;
2. Preventing and responding to the practice of FGM/C, including through culturally sensitive public information about FGM/C;
3. Improving the collection of data concerning the practice of FGM/C among individuals and communities in the city, to the extent allowed by law;
4. Improving the coordination of systems and services for, as well as the response of agencies to, individuals and communities affected by the practice of FGM/C;
5. Providing opportunities for input from, as well as soliciting and considering the recommendations of stakeholders including, but not limited to, community and faith-based groups, advocacy organizations, survivors of FGM/C and social service providers.

From October 2024 through December 2024, the Advisory Committee partnered with community-based organizations to host listening sessions with community members. The goal of these listening sessions was to hear from community members who have been or may be impacted by FGM/C to further understand how community members engage with systems and resources related to FGM/C and to learn whether, and in what way, community members would like to receive information and resources related to FGM/C. These listening sessions, which were conducted in partnership with Sauti Yetu Center for African Women, the African Services Committee, and the Arab American Family Support Center, resulted in the FGM/C Advisory Committee developing and releasing a set of recommendations in early 2025.

## SDG Target 5.4: Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate

### Legal and Policy Wins for Care Workers

Over the past 15 years, New York's care workers—working together through organizing groups (such as Domestic Workers United, National Domestic Workers Alliance, CAAAV, Andolan, Damayan, We Dream in Black), labor unions (including SEIU 1199 and DC37), advocacy organizations (including Citizens' Committee for Children, Jews for Racial and Economic Justice), and some employers (such as United Neighborhood Houses, Day Care Council of NY, FPWA, Hand-in-Hand Domestic Employers)—have had [several major legal and policy wins](#) at the city and state level:

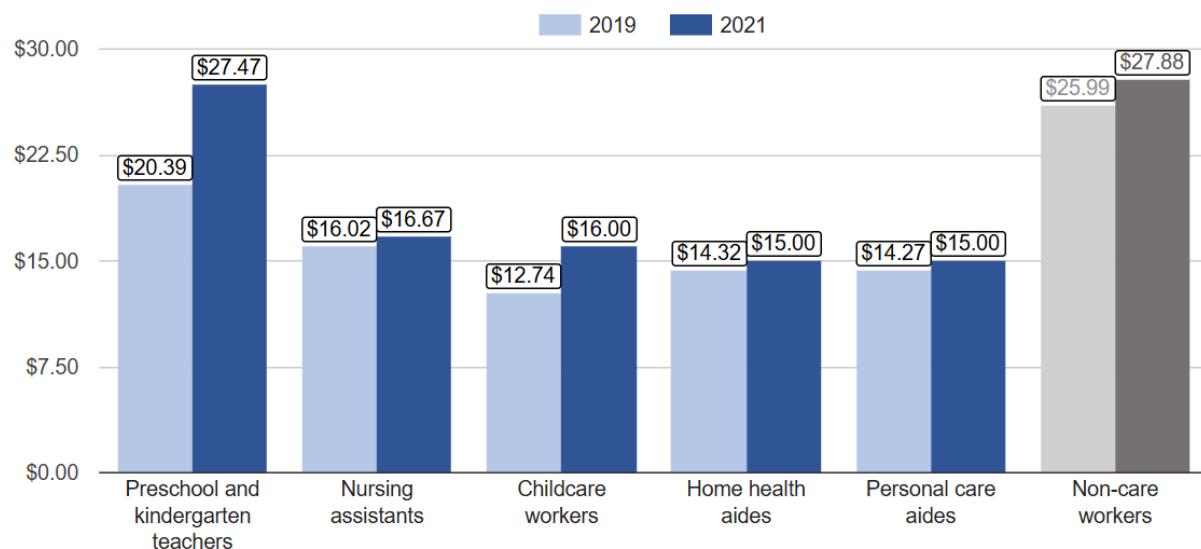
- The New York State Domestic Workers' Bill of Rights (initially passed in 2010 and updated in 2021) guarantees domestic workers overtime pay, paid rest days, and discrimination and harassment protection.
- The New York State Home Care Worker Wage Parity Law requires Medicaid-reimbursed home care workers receive \$4.09 per hour in benefits on top of the state minimum wage.
- The New York City Earned Safe and Sick Time Act (or Paid Safe and Sick Leave Law), first passed in 2013, entitles domestic workers to at least forty hours of paid safe and sick leave per year.
- The increase of the state's minimum wage from \$7.25 per hour in 2012 to \$15 per hour by 2019 raised wages for the majority of care workers.
- The Pay Parity campaign dramatically raised salaries for early childhood educators in community-based organizations contracting with New York City.
- In 2022, New York State Public Health Law section 3614-F raised the minimum wage for all home care aides to \$17 per hour in New York City and surrounding counties, which will increase to \$19.65 per hour in January 2026.

Legislative efforts to better care workers' pay and working conditions continue today:

- The Fair Pay for Home Care campaign, led by SEIU 1199 and New York Caring Majority, would peg home care wages to 150% of the minimum wage to address the worker shortage in this growing industry.
- Enforcement efforts by the New York State Attorney General and federal prosecutors led several major New York-based home health care agencies to have to pay multi-million-dollar settlements for repeatedly violating labor laws.
- Home care workers and advocates have been pushing to end 24-hour shifts (for which, under state law, workers are only paid for 13 hours).
- Proposed Universal Just Cause legislation would protect many city workers, including care workers, from at-will firings without just cause for termination. Such a policy already protects fast food workers in New York City.
- The Raise Up NY proposal would increase the minimum wage in New York City and surrounding counties by \$6.25 by 2026 and tie it to inflation and labor productivity thereafter.

### Median implied hourly wage of care workers by occupation, 2019 vs. 2021

*(employed workers only, self-employed excluded, 2021 inflation-adjusted dollars)*



**American Community Survey (IPUMS-ACS) 1-year estimate of median hourly wage for care workers in 2021 according to Office of the New York City Comptroller.**



## Leverage and Expand Awareness about Existing Resources for Caregivers

While many unpaid/family caregivers do not know about services available to them, the city has made investments in caregiver support and has existing programs that have the potential to benefit unpaid/family caregivers. For example, the city committed to a major investment to help alleviate the needs of unpaid/family caregivers by doubling NYC Aging's caregiver program from \$4 million to \$8 million in 2018 and increasing funding for Home Care and Case Management services. NYC Aging also operates the Aging Connect contact center (212-AGING-NYC), which consists of specialists who offer aging services, support and information to New Yorkers, including unpaid/family caregivers and provides consultation opportunities for professionals. In addition, NY Connects—a statewide program that provides free, unbiased information and assistance to individuals, families, and caregivers seeking long-term services and supports—employs a “no wrong door” approach to help connect New Yorkers with appropriate services. These resources are leveraged and communicated to unpaid/family caregivers.

Many unpaid/family caregivers do not know where to go for information about caregiving or whether they are eligible for services. To make services and information easier to find, NYC Aging explores and implements strategies, laid out in the “[Plan to Support Unpaid Caregivers in New York City](#),” to help more caregivers access information about caregiving and the services available to them. These strategies include efforts to make the process of locating services quicker and easier, as many unpaid/family caregivers are referred to various agencies and nonprofits in search of help before locating the service they need or giving up entirely. NYC Aging works with New York City 311 (NYC 311)—an agency that provides access to non-emergency city government services and information about city government programs—to be able to refer caregivers directly to services. Additionally, by leveraging several existing touchpoints within city agencies that are often not overtly associated with caregiving, including, but not limited to, NYC Health + Hospitals (H+H)—the city’s public hospital system which serves more than one million New Yorkers annually across the five boroughs, including caregivers and care recipients—the city can amplify its messaging and help make services more accessible. NYC Aging continues to engage and collaborate with H+H sites to educate staff about caregiver program services.

In 2021, NYC Aging released its [Community Care 5-year plan](#). The vision is to build on the elements already in place in order to promote independence, self-reliance, and well-being for the aging cohort and support unpaid/family caregivers. In 2022, NYC Aging created the Cabinet for Older New Yorkers and has leveraged this multi-agency partnership to amplify the reach of information about supporting caregivers and available services.

## Encourage New Yorkers to Identify as Caregivers

Unpaid/family caregivers often do not recognize themselves as caregivers and thus often do not seek out the benefits and services for which they may be eligible. NYC Aging has a consistent outreach plan developed to raise awareness about the challenges caregivers face and the services that may alleviate those challenges. One aspect of the plan is meeting the

target audience in the spaces where they are the most active. Communication in the form of strategic public messaging, as well as other mediums like photography and graphic design, reflects the diversity of New York City. This messaging speaks to caregivers of different ages and ethnicities and depicting a range of caregiving situations and responsibilities. The goal is to help more people recognize themselves as caregivers and empower New Yorkers to take the next step toward finding and obtaining services, specifically before they reach a moment of crisis. NYC Aging in 2018 and 2021 released caregiver advertising campaigns as part of its outreach to caregivers, the campaigns encouraged caregivers to contact 311 and ask for Caregiving Support to provide caregivers a connection to NYC Aging's contracted caregiver services programs. NYC Aging continues along with its contracted caregiver service programs to reach out to communities and different sectors throughout the city to raise awareness about caregiver issues and available services. Information is widely shared on social media. As detailed in the community care plan, NYC Aging continues to advocate for the various components and services that would allow older adults to age in place in their communities.

### **Marshall Plan for Moms Task Force**

Created by [Local Law 99 of 2022](#), the Marshall Plan for Moms Task Force unites over 20 dedicated community members, advocates, and leaders from key city agencies—including New York City's Administration for Children's Services (ACS), Department of Health and Mental Hygiene (DOHMH), DSS, NYCEDC, New York City Public Schools, Mayor's Office for Economic Opportunity, Mayor's Office of Child Care and Early Childhood Education, Mayor's Office of Community Mental Health, Office of Labor Relations, and the Comptroller's Office. The task force also includes advocates and representatives from the education and child care sectors, including experts on immigrant communities. The task force provides support to New York City's working parents and caregivers.

CGE chairs the task force and holds quarterly meetings, including one meeting open to the public. The task force leads research and coordinates the recommendations on relevant policies and issues. These include best policies for working mothers, other parents, and caregivers; best practices for workplaces to support working parents and caregivers; public assistance, and financial support; the child care industry infrastructure and support for child care workers; and access to healthcare. In 2024, CGE continued this work, and held a virtual public hearing, where parents and workers across the city testified about barriers they face and ideas to improve their lives. In 2025, CGE will complete the report and continue the task force's work.



## **The Mayor's Office for Child Care and Early Childhood Education**

In 2023, the city created the Mayor's Office for Child Care and Early Childhood Education (OCCECE) to build on the city's [Blueprint for Child Care and Early Childhood Education](#). The Office leads the city's strategy around child care and coordinates planning among city agencies; fosters innovation in partnership with families, providers, experts, and the private sector; and promotes effective communication, policy advocacy, and public engagement. In April 2023, the Office helped to host the administration's first-ever Reimagining Early Education and Child Care System Summit, convening parents, child care providers, policy advocates, and government agencies to discuss how to strengthen New York City's early childhood and child care system, including for child care givers.

Launched in August of 2024, a [10-point Plan for Affordable and Accessible High-Quality Child Care](#) included a new \$100 million investment to implement a roadmap for outreach and seat allocation across the city. The total investment in the Fiscal 2025 (July 2024 – June 2025) city budget for early childhood education was \$3 billion, comprised of \$2 billion for early childhood education programming and approximately \$1 billion for preschool special education. The Department of Education (NYC Public Schools, NYCPS) expanded 3-K capacity, allowing 100% of families to receive a 3-K offer. The plan also included 450 additional preschool special education seats and the expansion of Promise NYC, from \$16 million to \$25 million, allowing approximately 1,000 undocumented children to enroll in child care.

## SDG Target 5.5: Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life

### The Women.NYC Network

High-growth sectors (including tech, green economy, and life sciences) are expected to generate tens of thousands of jobs and business opportunities in New York City in the coming years. Currently, women are underrepresented in these sectors and will remain left behind without intentional efforts to prioritize their inclusion. The Women.NYC Network (Network) is an action-oriented platform designed to raise awareness of the economic growth offered by these sectors. Members of the Network can have 1:1 conversations with professionals in these sectors as well as participate in group conversations and events. The initiative also offers programs and events that help women pivot their job or business to a growing field. The Network has demonstrated significant positive outcomes, underscoring the achievement of goals and progress toward impact on professional growth and community building among women seeking to grow their career in high-growth sectors. Since it launched in December 2024, over 100,000 New Yorkers have been reached about opportunities in New York City's emerging industries. More than 9,000 have engaged in the programs and more than 3,000 women have directly participated attending at least one session. Across all five boroughs in the city, 65% of participants identified as Black, Indigenous, and People of Color (BIPOC) women (compared to 47.2% BIPOC women total in the city), reflecting the program's success in reaching a diverse audience.

In 2024, 84% of participants [reported](#) an expansion of their professional network due to attending Women.NYC programming, while 56% made strategic connections they wouldn't have accessed otherwise. Additionally, 85% of respondents agreed or strongly agreed that they learned from industry experts, indicating the program's effectiveness in delivering valuable industry-specific knowledge. Participants also reported tangible career advancements, including obtaining new roles, promotions, and salary increases. Furthermore, 14% of the self-reported jobseekers who attended a Network event achieved a promotion or raise, and 10% of entrepreneurs launched a new small business within the first year of the program.

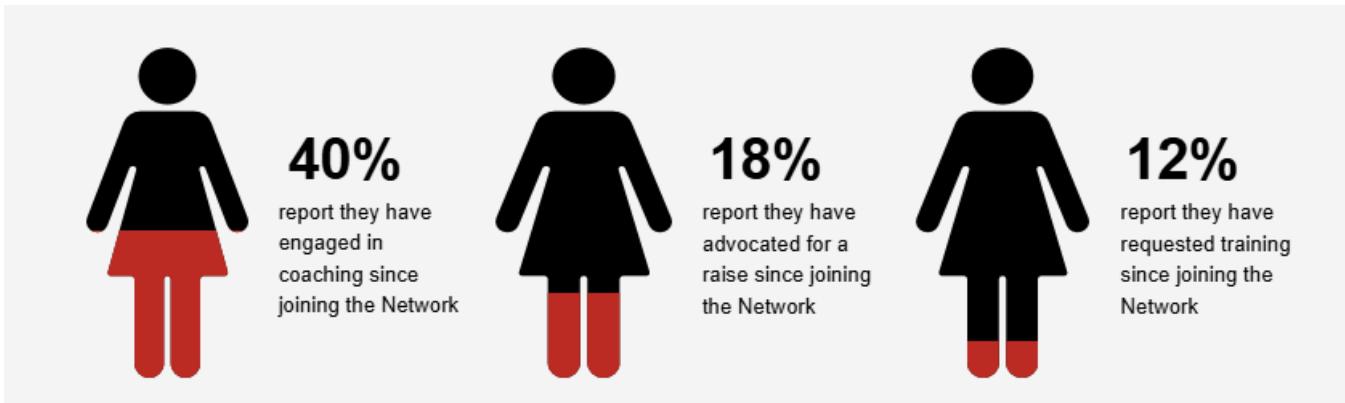


**Former First Deputy Mayor, Maria Torres Springer, speaking at the Network launch event.**

### **Tracking Behavior Change from Women.NYC**

The exclusive LinkedIn group for Women.NYC Network participants is a strategic way to track outcomes after interventions, in addition to creating continuity in the Women.NYC Network community. Attendees of any Women.NYC associated program, as well as advisors and program team members, are invited to join. As of January 2024, about 32% of Network participants have joined the group. Through the LinkedIn group, women are invited to share their journey, build connections with others, and make connections with advisors. Exclusive Network information and advance notice of opportunities are also pushed out through the community. Not only does LinkedIn provide critical infrastructure for community-building efforts, but it also provides insights into career pathways and status of the members, allowing the organization to find correlations between the interventions and the participants' career progress. For instance, 49% of the members in the group have changed roles and 38% have spent less than a year with their current company indicating specific changes after joining the Network.

This LinkedIn Group provides a critical space for women in Women.NYC targeted industries, where they tend to be underrepresented in managerial positions. Interestingly, in reviewing the top seven most common job titles of women in the LinkedIn group, the majority (78%) are in leadership or managerial positions. The needs of this specific group may differ from those of the Network at large.



Women Forward NYC 2024 Impact Report metrics.

### New York City Human Rights Law Protection Against Gender-Based Discrimination in Employment

CCHR is firmly committed to promoting the full and effective participation of women and ensuring equal opportunities for leadership across all levels of political, economic, and public life. The New York City Human Rights Law provides some of the strongest protections in the nation against gender-based discrimination in employment, including protections based on gender identity, gender expression, and pregnancy. Through rigorous enforcement, CCHR works to eliminate barriers that impede women's access to hiring, advancement, and leadership roles.

CCHR also utilizes critical equity tools, such as New York City's Salary Transparency Law, which mandates that employers disclose salary ranges in job postings. This law advances pay equity by providing women and gender-expansive individuals with essential information to advocate for fair compensation. Through these combined efforts, CCHR continues to advance a more inclusive and equitable workforce for all New Yorkers.

### New York City Women's Caucus

The Women's Caucus of the New York City Council seeks to advance women and women-identifying people's rights and promote the goal of gender equity in New York City through public policy, education, legislation, and advocacy. The Caucus serves as a nonpartisan organization, encouraging the informed and active participation of women that are legislators within the New York City Council. The Women's Caucus of the New York City Council envisions women achieving their true potential, contributing their diverse talents, and participating equally and fully in society.

### Summer Youth Employment Program (SYEP)

SYEP Pride, implemented through the Department of Youth and Community Development (DYCD) and the Unity Project, connects young New Yorkers to supportive and welcoming early career opportunities by engaging with employers specifically committed to LGBTQ+ youth through their organizational missions and/or employee resource groups. SYEP Pride Project-based learning for 14 to 15-year-olds, focuses on developing work readiness skills and



exploring career pathways while providing young people with the opportunity to explore LGBTQ+ history, culture, and/or community issues. Short-term jobs and internships for 16 to 24-year-olds focus on paid work experience and skills building. DYCD works closely with the Unity Project to provide training and programming to providers, worksite supervisors, and participants. SYEP Pride has partnered with a variety of private partners, including Google, Disney Theatrical Group, Louis Vuitton, ABC7, Hermes, Republic Records, Fendi, Playbill, Nordstrom, and others to deliver innovative career exploration, career mentorship, and pride-related events.

For more information about achieving full and productive employment and decent work for all people, including youth, in New York City, see SDG 8 (specifically targets 8.5 and 8.6) in this VLR.

## SDG Target 5.6: Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences

### **Sexual and Reproductive Health Care Bill of Rights**

New Yorkers have the right to access sexual and reproductive health care, including abortion. These rights exist for anyone in New York City, no matter where they might live. This Bill of Rights is a critical part of the city's efforts to achieve sexual and reproductive justice for all New Yorkers. Sexual and reproductive justice exists when all people have the power and resources to make healthy decisions about their bodies, sexuality, and reproduction.

The New York City Human Rights Law protects individuals from discrimination, harassment, and retaliation based on their reproductive health decisions. Employers are prohibited from taking adverse actions, such as firing, demotion, or denial of benefits, against employees because of decisions related to fertility treatments, contraception, pregnancy termination, family planning, or any other reproductive health choices. These protections ensure that individuals can make personal health decisions without fear of discrimination in the workplace. This Bill of Rights does not create any new rights not already established in law and is not a substitute for legal advice.

### **Menstrual Equity Workgroup**

The Menstrual Equity Workgroup, led by CGE, brings together key city agencies to assess compliance with [Local Laws 82, 83](#) and [84 of 2016](#), which mandate free menstrual products in schools, shelters, and correctional facilities. The group also works to develop a comprehensive citywide menstrual equity strategy. Members include NYCPS, the New York City Department of Correction, the New York City Department of Homeless Services (DHS), the Health Department, and others.

In 2023, CGE partnered with Weill Cornell Graduate School of Medical Sciences to research menstrual equity in shelters. Graduate students conducted stakeholder interviews and produced a final report with preliminary survey recommendations. That same year, CGE testified on legislation to expand menstrual equity, and NYCPS began offering free menstrual products to students in grades four and five, reflecting evolving understanding of students' needs.



In 2024, in partnership with NYCPS and in accordance with [Local Law 11 of 2024](#), CGE created Know Your Period: The NYC Student Guide. It answers questions about puberty and menstruation, informing and empowering students in every borough, and reminds students that free menstrual products are available in restrooms at school. As students grow up, they can return to the guide year after year, as a supplement to lessons taught in their required health education classes. Educators, families, nurses, counselors, and other adults who support students can use this guide as a resource. The guide is printable and available in 12 languages. CGE was charged with creating the booklet after testifying at a 2023 New York City Council hearing regarding menstrual equity. This collaboration helps ensure that young New Yorkers have access to inclusive, relevant education about menstruation and the products available to them.

### **Sexual Health Education Task Force**

In September 2024, [Executive Order 44](#) was issued, formally relaunching the Sexual Health Education Task Force. The task force, building on the 2018 “[Sexual Health Education](#)” report issued by the 2017-2022 task force, seeks to gather and promote best practices and up-to-date policies on sexual health education to better serve students in all five boroughs. CGE chairs the task force, and NYCPS, the Health Department, and a sexual health advocate serve as co-chairs.

Earlier in the year, CGE, the co-chairs, and leaders across the city worked to identify appointees who would represent a cross-section of perspectives and bring diverse areas of expertise. On December 9, 2024, CGE convened for the first time this multidisciplinary group, including pediatricians, educators, and policy advocates. Throughout 2025, the task force will continue to meet and move this work forward by building stakeholder support, engaging students, and identifying opportunities to expand existing sexual health education programs.

### **NYC Health + Hospitals Reproductive Health**

New York State has historically been considered a beacon for abortion care. New York State permitted abortion in 1970, three years before *Roe v. Wade*, the landmark decision of the U.S. Supreme Court in which the Court ruled that the Constitution of the United States protected the right to have an abortion prior to the point of fetal viability. In June 2022, *Roe v. Wade* was overturned by the U.S. Supreme Court, stripping away access to abortion care from over one-third of U.S. women. However, New York’s abortion laws still include very few barriers to abortion care. For this reason, people often travel great distances in order to receive abortion care in New York State and New York City.

H+H provides medication and procedural abortion at all 11 of its acute care hospitals, including provision of care for miscarriage management. H+H services include comprehensive reproductive health services, offering the full range of contraceptive options throughout its hospital-based and community-based facilities, including complex contraceptive care. The health care system also offers preventative gynecologic services, gynecologic care at the ends of the age spectrum, and specialized Obstetrician-Gynecologist (OBGYN) services.

In early October 2023, H+H became one of the first public health systems in the nation to launch a telehealth abortion service. The service used an existing telehealth platform to expand abortion care. Services include on demand visits seven days a week with a physician or APC for options counseling, medication abortion by mail or to participating pharmacies within New York City, or connection to in-person care for evaluation or procedure. The service has expanded access to abortion care meeting the SDG's call for universal access by using technology to eliminate geographic and logistical barriers to care.

In 2022, H+H hired a Reproductive Health Navigator to support patients in need of accompaniment with coordination of appointment scheduling, logistics such as transportation and lodging, and financial support; H+H also provides navigation support to those patients who are traveling from outside of the five boroughs of the city. The Reproductive Health Navigator works closely with a network of national, state, and city organizations such as the National Abortion Federation, the New York Abortion Access Fund, Brigid Alliance, and more to ensure patients facing financial and logistical barriers can still access care.

H+H has a long history of providing abortion care and education dating back to the 1980s. The health care system trains medical students, residents, and fellows in abortion care, as well as attending physicians and advanced practice clinicians who want to expand their scope of practice. In addition to training its own residents and medical students, H+H hosts OBGYN residents from restricted states in a rotation for hands-on training in abortion care. H+H also developed a model for integrating APCs into abortion care and training them in medication and procedural abortions. This model has been presented at a national conference.

In addition, H+H has trained several physicians in the Dilation and Evacuation (D&E) procedure, expanding second trimester care at its institutions. H+H has also designed and implemented a training on feticidal injection, which builds capacity in a necessary skill for abortion care later in pregnancy.

In 2019, H+H created the Reproductive Health Working Group—a group of Family Planning Directors from facilities across H+H—that began meeting monthly to tackle clinical issues, set system-wide standards, and ensure consistent access to high-quality care. This group has led and sparked work such as building the Reproductive Health Dashboard to track abortion care metrics systemwide and restructuring H+H's referral system to reduce barriers to abortion care and improve internal efficiency.

H+H engages in policy and advocacy work with partners including the Health Department, American Civil Liberties Unions and the New York City American Liberties Union, and the National Institute of Reproductive Health. H+H clinician-advocates, in coordination with the H+H Office of Legal Affairs, have provided declarations (sworn statements) that serve as evidence of the harms caused by restrictions to abortion access at the national level.



## New York City Leads National Coalition in Support of Medication Abortion Access

In January 2024, the [city urged](#) the U.S. Supreme Court to protect access to mifepristone, a medication that millions of people have used for medication abortion and to safely manage miscarriages, in a legal brief filed with the Court. The brief was submitted by New York City in coalition with six other municipalities in support of essential reproductive health services. In the brief, the coalition underlined the potential harm to public health and health care systems that would come from suspending the Federal Drug Administration's longstanding and more recent regulation of mifepristone, one of two medication abortion pills. In addition, it underscored how a ban on mifepristone could directly and negatively impact New York City's health care system and ability to provide essential reproductive health services.

## Women's Health Summit

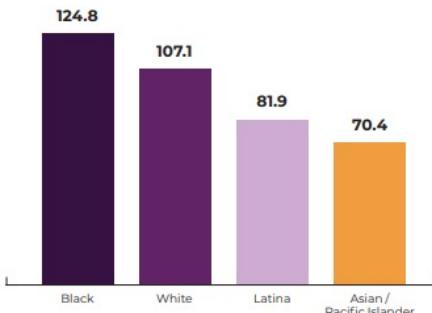
On March 20, 2023, the city held the first-ever Women's Health Summit at Hunter College, a public university in New York City and one of the constituent colleges of the City University of New York (CUNY), bringing together more than 100 experts in fields such as birth equity, mental health, reproductive health, and chronic disease to inform New York City's first Women's Health Agenda. The citywide agenda aims to dismantle decades of systemic inequity that have negatively affected women's health and to make the five boroughs a model city for women's health outcomes across all stages of life.

The summit was an opportunity to share information for a common understanding of top issues in women and girls' health, and spark conversation to drive actions across the different represented sectors. The summit was centered on data, equity, inclusion, and intersectionality, centering the voices and experiences of women and girls. The administration further collected feedback by conducting additional focus groups to include as many voices as possible, including members of the LGBTQ+ community in New York City. The summit's summary and focus groups include a set of cross-sector calls to action leaders can address in their respective fields to promote women and girls' health and steps the city will take to make New York City the national municipal model. New York City government cannot fully address the challenges impacting women and girls' health on its own. Advancing the health of New York City women and girls will require collaboration, support, and resources from partners at the federal, state, and local levels, and the public and private sectors.

In 2024, the associated "[Women's Health Summit Report](#)" was released. The summit's report and focus groups include a set of cross-sector calls to action for leaders to address in their respective fields, to promote women and girls' health, and to highlight steps the city will take to make New York City the national municipal model.

**Cancer Mortality Rate (2015-2019)**

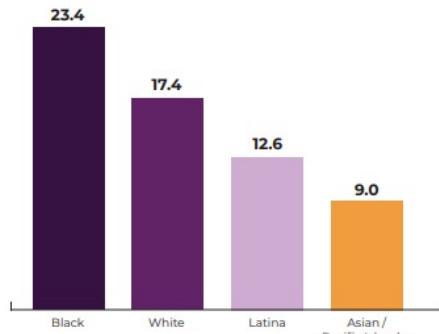
The average annual cancer mortality rate among women during 2015-19 was 101.3 per 100,000.



(NYC DOHMH Vital Stats - 2015-2019)

**Breast Cancer Mortality Rate (2015-2019)**

The average annual breast cancer mortality rate among women during 2015-19 was 16.8 per 100,000.



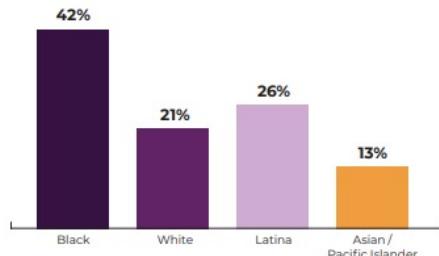
(NYC DOHMH Vital Stats - 2015-2019)

**Hypertension**

Heart disease is a leading cause of death amongst NYC women.

In 2022, among adult women in NYC, the prevalence of hypertension was **28%**.

(2022 Community Health Survey)



(NYC DOHMH Heart Follow Up Study, 2018)

**Among the top issues in women and girls' health, there were significant racial and ethnic disparities found in birth equity, mental health, reproductive health, and chronic disease, including the chronic diseases highlighted here.**

**LGBTQ+ Health Care Bill of Rights**

LGBTQ+ individuals deserve respectful, high-quality, and culturally affirming health care without fear of discrimination or bias. Knowing and understanding their rights is essential to ensuring they can access care, services, and support. To uphold these rights, the Health Department developed the [LGBTQ+ Health Care Bill of Rights](#), a critical initiative that outlines local and state protections designed to empower community members in advocating for their health and well-being. This Bill of Rights, available in multiple languages, serves as a tool for awareness and action, reinforcing that health care providers and staff are legally obligated to treat LGBTQ+ individuals with dignity and equity.

**Protecting and Preserving Gender-Affirming Care Access**

The city has made three recent gains to improve access to gender-affirming care. First, [Executive Order 32 of 2023](#) prevents city resources from being used to detain anyone for providing or receiving gender-affirming health care in New York City. The order also bans city resources



from being used to cooperate with any prosecution or investigation by another state of an individual for providing or receiving gender-affirming care.

Next, in February 2024, the city released a Sexual and Reproductive Bill of Rights to be distributed to the Health Department's network of health care providers, advocacy groups, and partner organizations across the city to share with patients. The Bill of Rights refers to the city's work to improve access to sexual health care, birth control, gender-affirming health care, and abortion services, helping to ensure all patients in New York City are protected from discrimination and harassment.

In June 2024, in collaboration with MOERJ and the Unity Project, the city announced new investments in one of seven Pride Health Centers, which provide culturally sensitive and comprehensive gender-affirming care services to LGBTQ+ patients. New investments in The Pride Health Center at H+H's Gotham Health and New York City Judson Pride Clinics (Judson) include funds for programming, renovations, and staff training.

For more information on New York City's work on improving universal access to sexual and reproductive health services, see SDG 3 (specifically target 3.7) in this VLR.

# 8 DECENT WORK AND ECONOMIC GROWTH





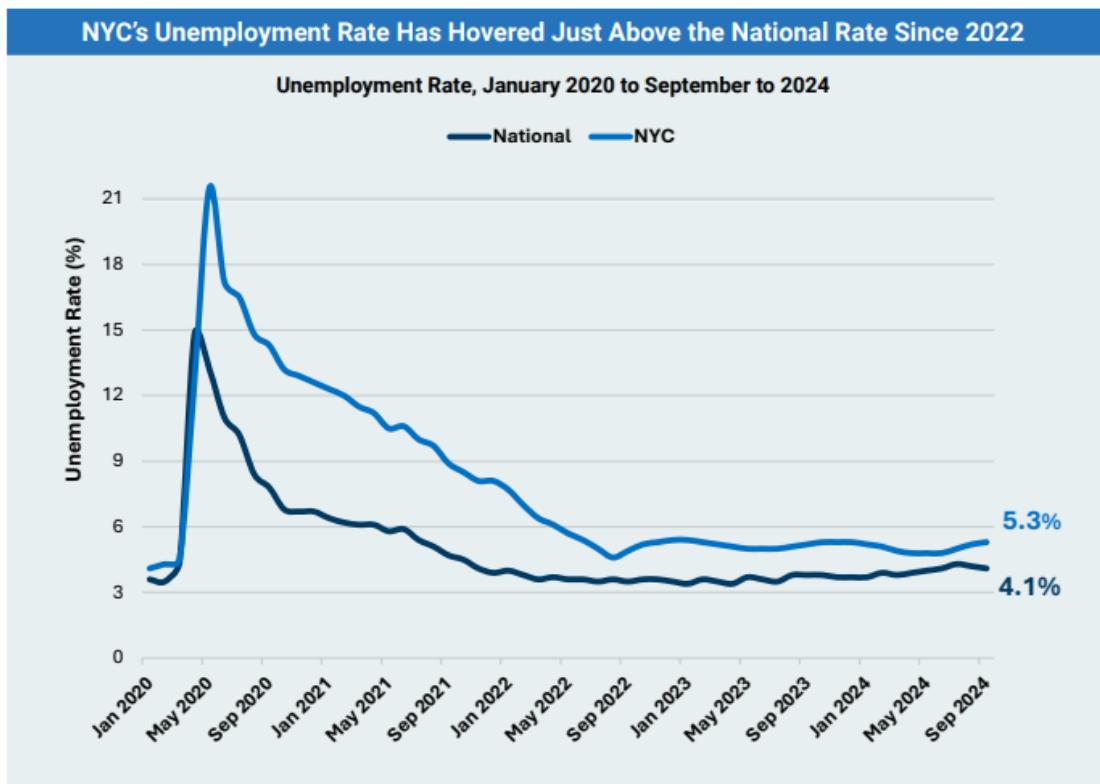
# Goal 8: Decent Work and Economic Growth

## CONTEXT

New York City's [economy](#) has withstood a plethora of challenges since the last review of SDG 8 in the 2019 VLR. The COVID-19 pandemic shocked both New York City and the country at-large, and its impact was pronounced across the city's economy. Nearly a million private sector jobs were erased, small businesses struggled, and today, everyday New Yorkers still continue to adjust to transformed working patterns.

Four years of post-pandemic efforts to mediate these impacts have brought some record highs. The city's labor market is strong and improving, with a record number of private sector jobs (4,154,400) and a record-high labor force participation rate (62.8%) as of September 2024. There are now more jobs in New York City than at any other time in the city's history and the labor force participation rate is rising. New York City's economy now is more than just the global financial hub, as the expansion of key sectors (tech, life sciences, healthcare, green economy) has brought diversification and resiliency. This expansion attracts talent and increases the city's readiness for the future of the economy, as demonstrated by the over 2,000 Artificial Intelligence (AI) startups housed in New York City. Reflecting New York City's post-pandemic recovery and stable outlook, Moody's Ratings assigned a high long-term and short-term credit rating to the city in 2024.

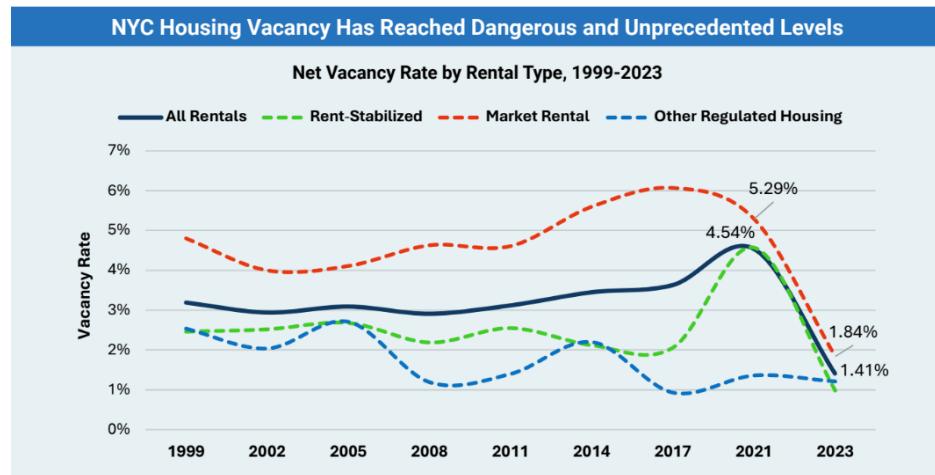
The New York City Office of Management and Budget [predicts](#) that the city economy will remain strong through 2025 and 2026, although job growth is currently skewed towards low-paying positions and needs to be monitored. At the same time, the Financial Division of the New York City Council expects economic growth to moderate, below 2%, due to the increased uncertainty with the federal policy landscape and the cooling impacts of high interest rates on economic activity.



Source: US Bureau of Labor Statistics and NYSDOL

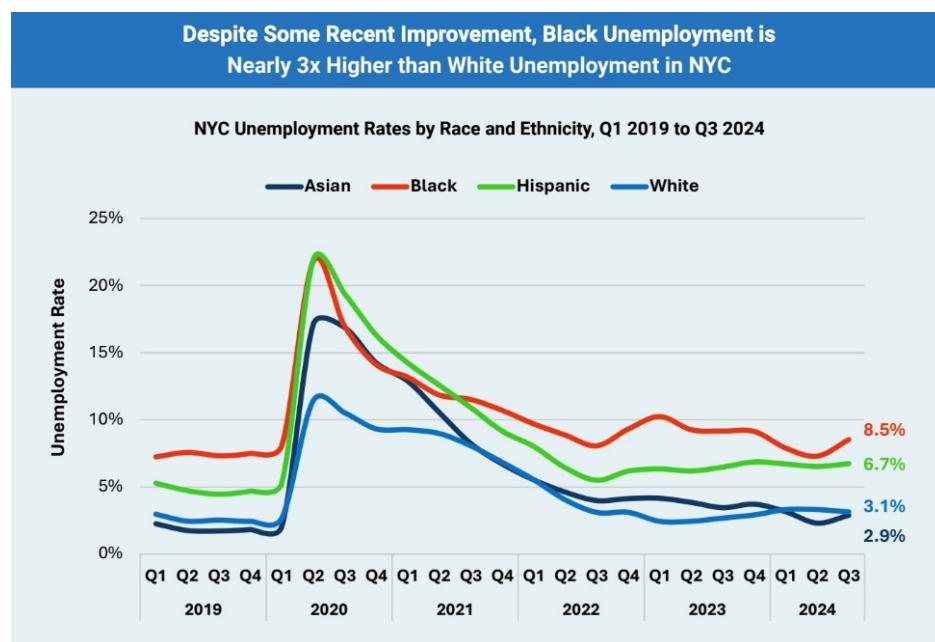
The citywide unemployment rate has nearly reached a fully recovery compared to pre-COVID-19 pandemic levels.

Despite these promising economic metrics, the city faces longstanding, resurgent economic challenges. New York City [cannot survive](#) without a strong working class, and the working New Yorkers who built this city are increasingly struggling to afford to live here. [Housing affordability](#) remains the defining challenge for the economic security of New Yorkers. Two-thirds of New York City households are renters and more than half of all households city-wide are classified as rent burdened, meaning they spend more than 30% of their income on rent, mortgage payments, or other housing-related costs. Rental vacancy rates are reaching multi-decade lows, which has significantly raised housing costs. This issue is exacerbated by the fact that job growth has far outpaced housing growth since 2010. For example, between 2010 and 2023, the city added 895,000 jobs but only 353,000 housing units. Nearly every New Yorker can speak to their personal experience navigating housing affordability. A significant step was taken to address this crisis in December 2024 when the New York City Council adopted the City of Yes for Housing Opportunity plan to update and modernize the city's zoning code. This plan will create an estimated 82,000 additional housing units and invest \$5 billion towards critical infrastructure updates and housing over the next 15 years. In every city borough, major community rezoning initiatives are underway. New York City's housing crisis has persisted for so long that many assume high rents, scarce housing, and powerful landlords are a fact of life. In reality, these outcomes are the result of policy choices, and a different path is possible.



**A leading strain on the housing market in New York City is the plummeting vacancy rate.**

Additionally, record job growth has been largely driven by low-wage service sector jobs that are not sufficient to support a family, build savings, or secure a retirement in the city. The rising cost of higher education is a significant obstacle to attaining a higher-paying profession, and many who do must work multiple jobs to cover the cost. Given this demand, over 1.6 million New Yorkers want to work more hours but cannot find the opportunities to do so. Others are in entry-level jobs with limited pathways for advancement, and many face exploitation and unfair work conditions. These factors drive income inequality, one of the most persistent economic challenges in New York City. After several years of declining poverty, the fallout from the COVID-19 pandemic caused an uptick. Of the nearly two million New Yorkers living in poverty, one in four are children. Furthermore, racial disparities in unemployment and labor force participation are improving but remain high.



**Asian, Black, and Hispanic New Yorkers faced higher levels of unemployment during the height of the COVID-19 pandemic and these disparities remain in post-pandemic recovery.**

## **SDG Target 8.1: Sustain per capita economic growth in accordance with national circumstances and, in particular, at least 7 per cent gross domestic product growth per annum in the least developed countries**

### **Gross City Product Growth**

The years of 2021 to 2023 were marked by [rapid](#) job creation, spurred by recovery from the COVID-19 pandemic, as well as elevated inflation (and accompanying higher interest rates as the U.S. Federal Reserve tried to cool price increases). In 2024, the U.S. economy appeared to be normalizing, with slower job growth, easing inflation, and lower interest rates setting a new economic tone. While the U.S. economy is still growing, job gains have slowed. Specifically, U.S. job growth has declined from 3.2% at the beginning of 2023 to 1.5% as of August 2024. Inflation-adjusted GDP growth (or what's referred to as real GDP growth) was 1.9% in 2022 and 2.5% in 2023, well below the 5.8% pace in 2021 fueled by pandemic-related job recovery and stimulus measures. New York City has similarly seen job growth slow, from 7.2% growth in 2022 to 2.6% in 2023. [New York City real gross city product](#) (GCP) increased a strong 5.5% in 2021 due to a combination of pandemic bounce-back effects as well as a strong year for the finance industry, with the stock market up 28.7% in 2021. Since then, real GCP growth has decelerated to 2.6% in 2022 and 2.8% in 2023, and OMB predicts continued slower growth in 2025 due to tariff uncertainty and trade policy turmoil.

After losing nearly a million jobs during the COVID-19 pandemic, New York City is now at [record-high](#) levels of private and total employment. The GCP reached \$1.18 trillion as of 2023. This growth is also seen in GCP per capita, which rose 8.2% in 2022 and 5.7% in 2023. While legacy sectors such as finance and insurance have continued to play a vital part in the city's economic successes, emerging sectors like tech, the green economy, and life sciences are contributing to an increasingly diversified, competitive, and resilient economy. Healthcare and social assistance, the city's largest sector in terms of employment, also have continued to boom. New York City-based companies from a wide variety of sectors continue to account for a large share of venture capital funding raised by companies nationwide—11.3% of funding in 2022 and 11.2% of funding in 2023—facilitating future investments and expansion within the city.



Output Has Grown Faster in NYC than Nationally Since 2022							
Actual and Projected US Real GDP and NYC Real GCP Growth Rates							
	2019	2020	2021	2022	2023	2024*	2025*
NYC	2.6%	-4.2%	5.5%	2.6%	2.8%	3.6%	1.9%
US	2.5%	-2.2%	5.8%	1.9%	2.5%	2.5%	1.4%

Source: NYC OMB and US Bureau of Economic Analysis. Projections for 2024 and 2025 from NYC OMB.

Employment Has Grown Faster in NYC than Nationally Since 2022							
Actual and Projected Employment Growth Rates, NYC and US							
	2019	2020	2021	2022	2023	2024*	2025*
NYC	2.1%	-10.7%	2.2%	7.2%	2.6%	1.5%	1.6%
US	1.3%	-5.8%	2.9%	4.3%	2.3%	1.4%	0.1%

Source: NYC OMB and US Bureau of Labor Statistics. Projections for 2024 and 2025 from NYC OMB.

**Economic growth in New York City has exceed the national average across multiple metrics.**

### “New” New York Action Plan

In 2022, New York State and New York City partnered to convene the [“New” New York Panel \(NNY\)](#), a coalition of prominent civic leaders and industry experts to comprehensively address today’s unique economic challenges. The COVID-19 pandemic upended how and where work happens in the city, damaged business districts, and laid bare long-ignored harmful disparities among the city’s residents. The panel recognized that New York City’s success over the centuries has been defined by its ability to adapt and convert crises into opportunities. The panel also knew that too often these responses have failed to equitably distribute the benefits of success to all New Yorkers and failed to give all the city’s residents a real chance to participate. While the initial charge was reviving business districts, the panel quickly realized that the solutions would need to address a wider range of challenges. For example, the City’s vast public transportation network is integral not only to business districts’ economic success, but also to the many New Yorkers who rely on transit to get to work. In order to improve commutes, transportation networks need to be strengthened across the city. Furthermore, confronting the city’s housing crisis and ensuring parents have safe, affordable, high-quality care for their children is critical to creating a stable and secure workforce.

With the 59 civic leaders and industry experts on the panel, the NNY panel developed a three-part formula, with 40 initiatives outlined, to make New York City the best place to work in the world. First, business districts need to be reimagined as vibrant, 24/7 destinations anchored by spectacular new public spaces, transforming them into places where more people want to be, workers, companies, residents, locals, and tourists alike. Next, it must be easier for New Yorkers to get to work, whether that means ensuring faster commutes into Manhattan business districts, developing economic hubs across the outer boroughs, or creating new remote work options for New Yorkers whose homes are not equipped to take advantage of new,



more flexible opportunities. Finally, the city must generate inclusive, future-focused growth that positions New York City to lead the emerging industries of the 21st century and to finally unlock the potential of all its residents.

The future of work is changing as workers are discovering different priorities for where and how they want to work. City-builders are realizing that the old models for isolated business districts dilute what everyone loves most about urban life. Companies are navigating a slew of new options for how and where their employees work, from hybrid to in-person, to work-from-home, that are complicating their location and leasing decisions. And what was long understood to be true has finally been voiced: commutes take too much time for too many people. The collective national reckoning with racial and social justice has also elevated long-standing inequities in work.



## SDG Target 8.2: Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high-value added and labor-intensive sectors

### Economic Diversification in New York City

[Economic diversification](#) is the idea that a region reduces its reliance on a narrow range of industries to drive economic growth and increases the number of sectors powering the economy. Through economic diversification, a city could better weather any potential shocks that may disproportionately impact one or two sectors. Economic diversification in New York City involves remaining a global financial hub while also solidifying the city's position as a hub for tech, healthcare, life sciences, the green economy, education/academia, and more.

There is some evidence that such an economic diversification process has begun within New York City, with the city now less reliant on the finance sector. In 2013, finance and insurance accounted for 29.7% of private sector payroll in New York City and information and professional, scientific and technical services (the sectors that contain much of the city's tech firms) accounted for 21.9%. In 2023, finance and insurance services share had fallen to 27.6% while the share of information and professional, scientific and technical services had risen to 25.4%. The growth of tech, life sciences, and the green economy has provided for a greater diversity of high-growth and high-wage or middle-wage jobs in the city. Compared to other innovation hubs, New York City also has a greater diversity of firms that employ people in high-growth, high-wage occupations. Only 45.4% of New York City workers in tech roles work at a tech company, compared to 75.8% in the Bay Area, California and 60.9% in Greater Boston, Massachusetts. Relatedly, only 20.6% of New York City workers in life sciences roles work at life sciences firms, compared to 53.1% in Boston. This reflects New York City's economic diversity—someone can find a comparable role across tech, finance, academia, advertising, or healthcare, and not be confined to one type of employer.

There is no single correct way to talk about economic diversity, or to quantify it. Still, it's that city investments in specific industries are making those industries into additional drivers of economic growth. One way to measure an industry's relative prevalence in a city is its location quotient (LQ). An LQ below 1 means the industry has a lower share of employment in the city than it does nationwide and an LQ above 1 means the industry is more prevalent in the city than it is nationwide. In 2003, the tech industry's LQ in New York City was 0.66, but it has risen to 1.15 in the last twenty years. This demonstrates that tech has grown into one of the city's most opportunity-filled sectors.



AI has the potential to change millions of New York City jobs over the next decade. New York City has emerged as a leader in AI both nationally and globally, as the home to over 2,000 AI startups and a thriving tech ecosystem, as well as an existing metro area talent pool of 40,000 workers with AI and AI-related skills. New York City is also home to world-class academic institutions as well as a strong venture capital ecosystem, both of which will be key in developing AI research and scaling AI-related businesses.

### Finance Sector Growth

In many ways, the finance and insurance sectors are still the largest components of New York City's economy. Between 2018 and 2023, the finance and insurance sectors added 16,600 jobs, a 5% increase, larger than the city's overall job growth of 3% during the same period. As of September 2024, finance and insurance accounted for 370,100 jobs in total, 21,500 more than the sector had pre-pandemic, the second largest gain of any major sector. Importantly, finance and insurance also play an outsized role in the city's economy due to the sector's high wages. Finance and insurance sector jobs paid an average of \$362,000 per year in 2023, far above the citywide average wage of \$117,000 at the time. Despite accounting for less than 9% of New York City's private sector jobs, finance and insurance sector jobs pays 27.6% of the city's total wages and account for 24% of New York City's GCP. The city's traditional strength in finance has also translated into success in emerging areas like financial technology.



**Despite representing less than one-tenth of the city's private sector jobs, the finance sector accounts for one-quarter of both total GCP and total wages paid.**

### Technology Sector Growth

The technology sector continues to be a major driver of New York City's economic growth, in terms of both jobs and output. New York City tech companies added nearly 54,000 jobs between 2018 and 2023, seeing sector employment rise from 167,000 to 221,000. This 32% growth significantly outpaced both New York City private sector growth (3%) and nationwide technology sector growth (17%) over the same period. While there have been some layoffs and job losses in tech since 2022, the sector's total employment remains higher than in 2018. These job losses are likely an adjustment to the reduced investment and higher interest rate



environment of the past few years, after a long period of expansion driven by record investment and low interest rates.

### **Green Economy Growth**

The green economy has emerged as a burgeoning new industry in New York City, reflecting the city's commitment to sustainability and combating climate change. Green economy jobs not only help in meeting the city's sustainability goals, but also provide stable, long-term employment opportunities for a diverse set of New Yorkers. The green economy spans eight sectors and 21 sub-sectors, some that are directly decarbonizing the city, including energy, buildings, and transportation. Others, including finance and advocacy, are working to support those that are directly decarbonizing the city. In total, the green economy encompassed about 3% of New York City's jobs in 2021 (about the size of the real estate sector in 2024) and has slightly outpaced the growth of the broader New York City economy over the last several years.

This sector is poised for high growth in the coming years. By 2040, the city's green economy is projected to employ nearly 400,000 people, representative of 7% of all jobs in New York City, and contribute \$89 billion to the city's GCP. Approximately 70% of this growth is projected to come from the transition of existing occupations like construction managers, financial consultants, and fashion designers into the green economy by incorporating sustainable practices into their everyday work, while 30% would be entirely new jobs that do not exist today.

New York City is well-positioned to advance its position as a global leader in the green economy. It is already a global center for economic activity and talent, with ambitious climate legislation and regulations. In early 2024, NYCEDC and the New York City Mayor's Office of Talent and Workforce Development (NYC Talent) released the "[Green Economy Action Plan](#)," which defined the industry and provided strategies for fostering its equitable growth in New York City. The implementation will be guided by five key goals: decarbonizing buildings and construction, developing a renewable energy system, enabling low-carbon alternatives in the transportation sector, catalyzing innovation in climate technologies, and ensuring an equitable green economy ecosystem.

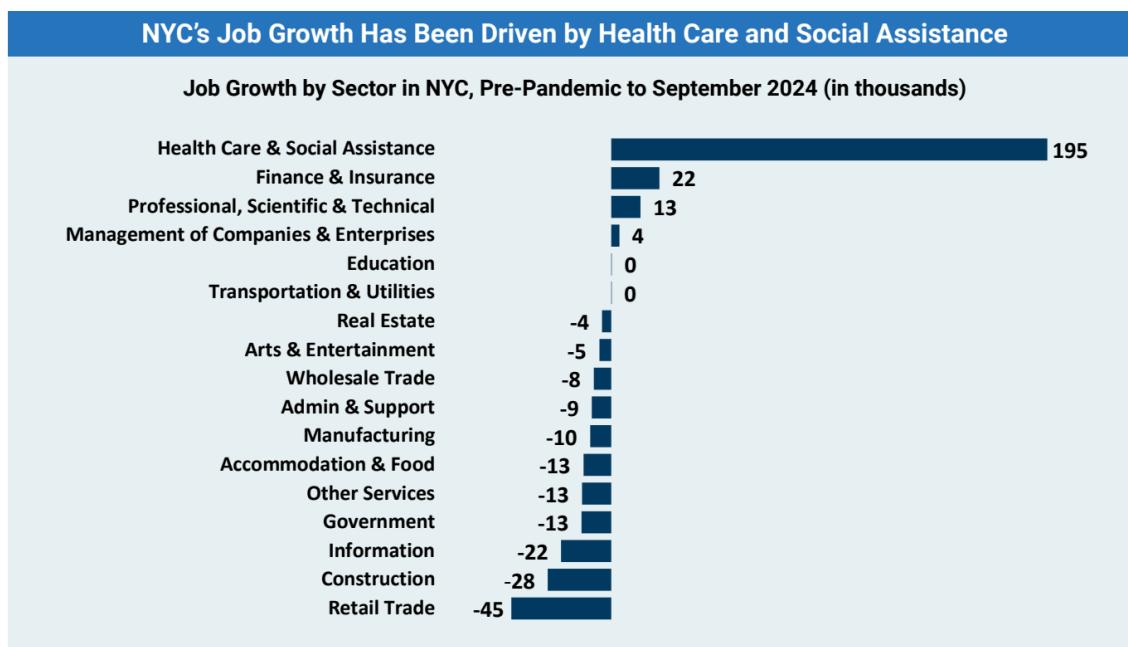
### **Life Sciences Sector Growth**

New York City has supported the life sciences industry since 2016 through the LifeSci NYC program—NYCEDC's initiative to create 40,000 new jobs and establish New York City as the global leader in life sciences—and life sciences continues to be one of the key sectors of focus for the city's investments in innovation industries. While not as large as finance or technology sectors, the life sciences sector is growing rapidly within New York City. Between 2018 and 2023, employment at life sciences companies grew 35% from 14,400 to 19,500. The number of establishments in research and development, a key subsector within life sciences, nearly doubled between 2018 and 2023. This accounts for roughly 75% of all business growth within life sciences. Research and development employment rose by close to 2,600 over the

same period. While life sciences sector activity in the New York City metro area is still mostly located in suburban areas outside of the city, particularly in New Jersey, New York City is responsible for all net employment growth in the sector within the metro area in the past two decades.

### Healthcare and Social Assistance Sector Growth

Healthcare and social assistance has historically been one of the largest sectors in New York City, and it has been the main driver of job growth in the city in recent years. The sector added 164,000 jobs between 2018 and 2023, more than any other sector during the period. Healthcare and social assistance's 22% job growth in New York City during that time outpaced the sector's 8% growth at the national level. Healthcare and social assistance accounted for 1,018,700 jobs in New York City as of September 2024, 195,200 more than pre-pandemic total.



**Growth in the health care and social assistance sector has outpaced job growth in other sectors since the COVID-19 pandemic.**

### Academia and Higher Education Sector Growth

Though not traditionally considered one of New York City's key economic sectors, higher education is fundamental to the city's economy. Over 100 institutions of higher learning are located in the city, with a combined enrollment of over 500,000 students in 2022, more than the entire population of many cities, such as Atlanta, Georgia or Miami, Florida.

New York City's higher education sector also plays an important role in economic mobility. According to National Bureau of Economic Research's 2017 "[Mobility Report Cards](#)" study, which looked at the prevalence of students moving from the bottom 20% of incomes upon enrollment to the top 20% of incomes after graduation, 13 out of the top 20 colleges in the



United States for upward mobility are located in New York City. CUNY schools make up five of the top 10 nationally ranked colleges and universities for economic mobility.

CUNY, the largest urban university system in the United States, is a foundational component of New York City and State's commitment to quality and affordable higher education. The system is comprised of 25 campuses, including 11 senior colleges, seven community colleges, and seven graduate and professional schools. It serves over 225,000 students and employs approximately 40,000 staff, including 18,000 full-time and part-time faculty. Research has shown that CUNY's schools are among the best in the country at helping low- and moderate-income families move up the socioeconomic ladder. CUNY offers New York City's families and its economy a tremendous benefit.

The CUNY system is an essential component of New York City and New York State's economy, generating growth, economic mobility, and tax revenue. It serves a more demographically and socioeconomically diverse student body than many private colleges and allows students to graduate with significantly less debt than they would elsewhere. It is one of the strongest engines of economic mobility in the country. Its graduates overwhelmingly remain in New York State, paying billions in City and State income tax. Additionally, CUNY provides over 40,000 well-paying jobs, many of which benefit from collective bargaining.

## **SDG Target 8.3: Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services**

### **Importance of Small Businesses**

Small businesses play a vital role in the city's economy. From startups on the cutting edge of innovation to neighborhood retail and restaurants, small businesses enrich neighborhoods and enhance quality of life. They strengthen the entrepreneurial ecosystem, create jobs, and drive economic growth.

The dynamism and energy of New York City, famous across the globe, is propelled by the activation of the city's streets. Small businesses and chain merchants together fill the city's storefronts with interesting and unique places to shop, eat, and enjoy. Disrupted by the COVID-19 pandemic and by the ascent of e-commerce and online shopping, many of the city's traditionally vibrant corridors in Manhattan and downtown Brooklyn face heightened vacancy levels. At the same time, emerging areas of activity are thriving.

The city is taking steps to reduce burdens on and cut red tape for the city's small businesses by announcing reforms to over 100 city regulations. The reforms stem from [Executive Order 2 of 2022](#), which requires City agencies to review existing business regulations and ensure local businesses face fewer needless fines and penalties without jeopardizing public health or safety. Additionally, the Small Business Advisory Commission (SBAC) is tasked with providing guidance and insight to city policymakers on how to best support New York City's small businesses. SBAC assesses the impact of state and local policies, laws, and regulations on small business owners, and delivers annual recommendations to make New York City a "City of Yes" for small businesses.

### **Commercial District Needs Assessments**

The Department of Small Business Services (SBS) puts together Commercial District Needs Assessments (CDNAs) that highlight the existing business landscape, consumer characteristics, physical environment, and unique character of the commercial corridors and local businesses that make up the identity of each neighborhood. Accordingly, CDNAs are put together in order to better understand the current status of needs and opportunities in a given district. Each DNA is completed in partnership with local community-based organizations, and includes analysis of the storefront and retail mix, door-to-door merchant surveys, consumer



and shopper surveys, and in-depth inventory of streetscape conditions that affect the shopping experience.

### **Leasing City-Owned Property to Facilitate Entrepreneurship, Creativity, and Innovation**

NYCEDC manages over 64 million square feet of assets in New York City. NYCEDC is unique among property managers, both for the breadth of portfolio and scope of offerings to tenants. These properties are in all five city boroughs and cut across industries, from retail, to industrial and manufacturing, to ports, and more. And as a mission-driven landlord, committed to economic growth and the creation of good jobs, NYCEDC is often able to offer tenants lower rents, long-term leases, and lower energy costs.

### **New York City Industrial Development Agency (NYCIDA)**

Authorized by New York State and overseen by NYCEDC, NYCIDA supports business growth, relocation, and expansion across the five boroughs by lowering the cost of capital investment. NYCIDA's tax incentive programs bolster the local economy, create jobs for New Yorkers, and uphold the city's position as a global business hub. This is done by providing property tax abatement, reducing a mortgage recording tax applicable to a project mortgage, and waiving the city and state tax for purchases of materials and equipment related to construction.

### **Investing in Business Improvement Districts (BIDs)**

Neighborhood BIDs are important to supporting small businesses. BIDs create vibrant, clean, and safe districts. They deliver services and improvements above and beyond those typically provided by the city. These services can include street cleaning and maintenance, public safety and hospitality, marketing and events, capital improvements, beautification, advocacy, and business development. By law, city services cannot be reduced because of the existence of a BID.

BIDs help to brand their districts and market small businesses on their corridor. They facilitate networking among merchants, host community events, and advocate for improvements to the district. BIDs also serve as a liaison between local businesses, stakeholders and the city government. In doing so, BIDs provide a collective voice for the neighborhood and help inform city policy based on their unique local knowledge.

## **SDG Target 8.4: Improve progressively, through 2030, global resource efficiency in consumption and production and endeavor to decouple economic growth from environmental degradation, in accordance with the 10-Year Framework of Programmes on Sustainable Consumption and Production, with developed countries taking the lead**

### **The New York City Department of Sanitation Zero Waste Plan**

[Local Law 87 of 2023](#) requires the New York City Department of Sanitation (DSNY) to create a zero-waste plan and to increase waste diversion from landfills and incineration through waste reduction, reuse, and recycling. It also requires DSNY to report annually on the city's progress toward these goals and submit the [annual report](#) to the Mayor, Speaker of the City Council, District Manager of each Community Board, and to each Solid Waste Advisory Board.

Waste in New York City is responsible for emitting over 1.9 million tons of greenhouse gas emissions every year, equivalent to the emissions from nearly 500,000 passenger cars annually. This poses great opportunity and equally large challenges when it comes to waste diversion. While achieving zero waste by 2030 is an ambitious goal, by focusing on individual waste streams, it is possible to create a waste management plan that is both practical and achievable. DSNY provides New Yorkers with programs to divert up to 75% of their waste. DSNY currently provides citywide curbside recycling collection of metal, glass, plastic, and paper. In the fall of 2024, DSNY started providing curbside collection of food scraps and yard waste to every household in the city. In addition to these curbside collection programs, DSNY provides free collection of electronics and textiles from apartment buildings in the city. DSNY also provides residents with opportunities to safely dispose of their harmful household products at drop-off sites and events in every borough.

In addition to programs, policy is an important tool for driving future changes in the waste stream. The city must take steps to reduce waste at the source, including by making manufacturers, not municipalities, responsible for the products they manufacture and sell. Extended Producer Responsibility (EPR) programs are an important tool in the toolkit. The state EPR program for electronic waste has funded electronics collection programs across the state and diverted millions of pounds of valuable and hazardous materials. The implementation of the state's Post Consumer Paint Collection Program has reimbursed the city one quarter of a million dollars to date and diverted almost a million gallons of paint statewide. DSNY anticipates similar outcomes regarding the Carpet Collection Program Law enacted in late 2024.



DSNY supports a number of state and local policies to help reduce waste including EPR for packaging and paper products. Packaging makes up approximately 30% of New York City's waste stream. Targeting this large portion of the waste stream for producer responsibility would have significant downstream impacts on recycling and diversion rates. EPR not only incentivizes producers to design for recyclability but also is a source of consistent funding for recycling programs, outreach, and infrastructure, ensuring recycling programs remain steady in the face of financial uncertainty.

### **Citywide Composting for All New Yorkers**

In October 2024, [curbside composting](#) service was brought to every New York City resident in all five boroughs. While curbside composting programs have existed in New York City for the last decade, none have ever served more than 40% of the city. The new citywide model for implementation is simple: every New Yorker can now simply take anything from their kitchen or their garden and set it out for collection in a bin on their recycling day. In the first full month of citywide service in October 2024, New Yorkers diverted 15 million pounds of compostable material, which is 65% more the same period over the entire previous year. Material collected through these programs is turned into either renewable energy to heat homes or into compost sold to landscapers and given away for free to New Yorkers for use in their yards and gardens. Without these programs, this compostable material would go into a landfill, emitting harmful greenhouse gasses.

New York City is now also home to approximately 400 Smart Composting Bins, 24-hour drop-off sites where New Yorkers can bring anything from their kitchen and anything from their garden to be put to beneficial reuse. New Yorkers opened Smart Composting Bins over 1 million times between July 2023 and June 2024, a 300% increase from the previous year. DSNY brought collection of compostable material to every single New York City public school last year, helping to train the next generation of composters.

DSNY also recently rolled out the citywide collection of food scraps and yard waste to all city residents. In order to encourage



**Smart composting bins are now on New York City streets.**

and reward residents for participating in the program, DSNY holds Compost Giveback Events and delivers finished compost to community groups and school gardens. Between July 2023 and June 2024, DSNY held close to 50 events and distributed 4.5 million pounds of finished compost to residents, nonprofits, and city agencies.

### Reuse Sector

Reusing a product more than once, either in its same form for the same purpose or for different purpose, has great potential to reduce waste and mitigate the environmental impacts associated with landfilling. Incentivizing reuse is a priority in DSNY's zero-waste strategy. DSNY's Reuse & Donations unit supports the reuse sector through initiatives such as *donateNYC*, a program that encourages and enables New Yorkers to donate and reuse items. As part of *donateNYC*, there are digital tools, including a directory for residents who want to donate or receive durable goods, as well as a food portal that connects organizations and businesses with excess food to groups that can use or redistribute it. The *donateNYC* platform facilitated 333 tons of donations between July 2023 and June 2024. DSNY also utilizes nonprofit partnerships, community events, and reuse research to advance the city's waste diversion goals.



DSNY staff tabling to spread awareness of the *donateNYC* program.



## **SDG Target 8.5: By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value**

### **Employment for People with Disabilities**

Despite employment impacts at the height of the COVID-19 pandemic, New York City's unemployment rates declined to 8.2% by April 2021. However, for New Yorkers with disabilities, high unemployment rates have [remained high](#) and are disrupting progress that had been made in employment rates before the pandemic.

Launched in 2017, NYC: ATWORK is an employment program administered by the New York City Mayor's Office for People with Disabilities (MOPD) that recruits, pre-screens, and connects New Yorkers with disabilities to jobs and internships with established business partners in both the public and private sectors. Participation in NYC: ATWORK is voluntary, and more importantly, self-driven. The program offers guidance and support to improve hiring chances and expand professional networks and opportunities, internships, and access to trainings. NYC: ATWORK services for job seekers include resume and cover letter review, mock interview preparation, guidance on conducting an effective job search, access to employer-led job readiness workshops, opportunities to network with prospective employers, access to the program's Job Board, information on using the 55-a program for city government jobs, and support for up to one year after securing placement. For the business community, NYC: ATWORK offers not only a centralized talent pool of candidates with disabilities to recruit from, but targeted sector-based trainings, including disability etiquette and awareness trainings, and technical assistance including guidance on providing reasonable accommodations. In 2024, MOPD's staff of three conducted 24 disability etiquette and awareness trainings for approximately 500 organizational leaders to understand how to interact and welcome people with disabilities into the workplace.

By July 2024, the city had connected more than 1,000 New Yorkers with disabilities to jobs, marking a milestone in expanding inclusive employment supports. This progress reflects the city's commitment to inclusive growth and aligns with the broader plan to deliver expanded workforce services across all five boroughs while embedding the NYC: ATWORK employment model into all of the workforce development services the city offers. As part of this effort, the city committed to hiring people with disabilities as well. New York State Civil Service Law Section 55-a authorizes the Department of Citywide Administrative Services (DCAS) to identify a maximum of 700 positions with duties that can be performed by physically or mentally disabled persons who are qualified to perform such duties. People who wish to enter city government and have expressed an interest in being considered for the 55-a Program may



apply for competitive positions otherwise filled through exams and, if qualified to perform the duties of the position, may be interviewed.

In August 2024, NYC Talent, in partnership with MOPD, expanded workforce services for New Yorkers with disabilities by launching the New York Systems Change and Inclusive Opportunities Network at 18 Workforce1 Career Centers. Workforce1 is a service provided by SBS to prepare and connect qualified candidates 18 and older to job opportunities across New York City. Supported by a \$1.5 million investment from the New York State Department of Labor, this initiative trains Workforce1 staff to better assist individuals with disabilities in preparing for careers. Additionally, the Partnership for Inclusive Internships (PII) program was expanded to place 100 additional New Yorkers with disabilities into paid internships over the next several years.

### **Supporting the Aging Community in the Workforce**

The city values the contributions that the aging community makes to the workforce. The New York City Department for the Aging (NYC Aging) manages employment programs serving older New Yorkers, in addition to other city agency workforce programs that include older workers. NYC Aging manages three older adult employment programs. The first is the Senior Community Service Employment Program, a federal grant funded program that helps New Yorkers age 55 and older who are at or below 125% of the Federal Poverty Level secure employment and develop new skills in various professional fields. Second, is the Silver Corps, funded by AmeriCorps Seniors, that provides New Yorkers age 55 and older volunteer assignments, training and credentialing to secure employment. Lastly, the Silver Stars program works with city agencies to place retirees in part-time, temporary work assignments in New York City government. Retirees help agencies meet business needs and support organizational growth by sharing their knowledge and experience with newer workers, without the demands of traditional, full-time employment.

### **Women Forward NYC**

Decades of data show persistent and longstanding gender disparities in education, health, social services, and safety. These disparities have been further exacerbated by the COVID-19 pandemic and continue to create roadblocks for women's economic advancement and overall wellbeing in New York City. Women continue to be paid 86 cents for every dollar a man makes in New York State, with Black women making 64 cents, and Hispanic women making 57 cents. Black women are four times more likely to die from a pregnancy-associated death than white women. And 75% of women have been harassed during their daily commutes. With this in mind, in 2024 the city unveiled a \$43 million investment aimed at making New York City a national leader on gender equity, including for transgender and gender expansive New Yorkers, with the ambitious goal of becoming the most women-forward city in the United States.

For more information about New York City's work to advance gender equity, see SDG 5 in this VLR.



**Women Forward NYC is advancing diversity, gender equality, and economic mobility so women can succeed in the future economy.**

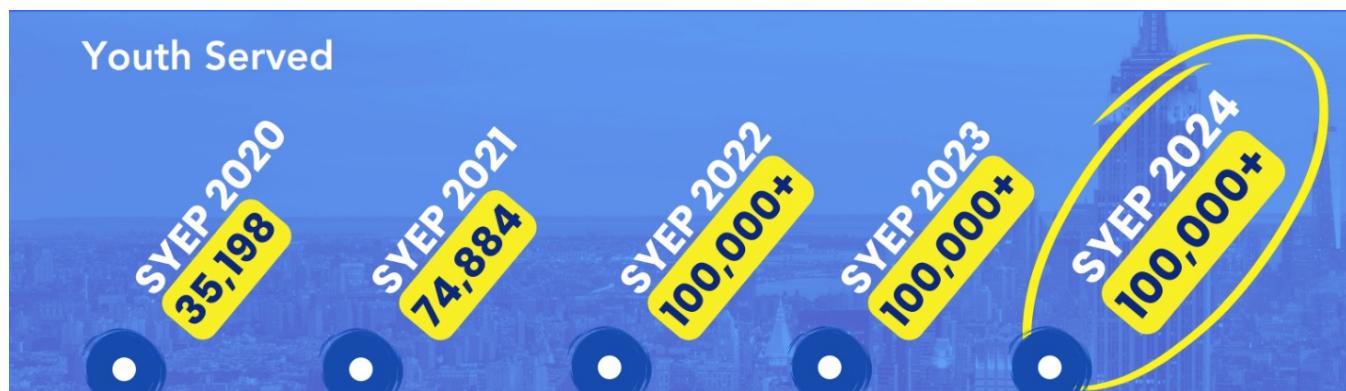
## SDG Target 8.6: By 2030, substantially reduce the proportion of youth not in employment, education or training

### Summer Youth Employment Program (SYEP)

The Department of Youth and Community Development (DYCD) oversees critical programs, many of which serve to benefit youth not in employment, education or training. These include the [Summer Youth Employment Program \(SYEP\)](#), which is the nation's largest youth employment program, connecting New York City youth between the ages of 14 and 24 with career opportunities and paid work experience each summer. Through SYEP, participants can explore different interests and career pathways, develop productive workplace habits, and engage in learning experiences that strengthen their social, civic, and leadership skills.

SYEP expanded in 2022 and has served over 100,000 young people each summer since. This historic investment helps create a pipeline of youth jobs, particularly in historically underserved communities. SYEP is keeping youth safe through engagement in work, helping them earn a paycheck, and preparing them for careers. DYCD works with nonprofit and employer partners as well as sister agencies to create jobs and help rebuild the city's economy.

Through a variety of initiatives, DYCD aims to reach young New Yorkers from all corners of the



**SYEP's continued expansion has connected more than 100,000 youth to career opportunities for three consecutive summers, making the program the largest of its kind in the country.**

city, regardless of their background. DYCD provides different program options for targeted populations to ensure that each participant enjoys a personalized, tailored experience through the summer. New York City teens ages 14 to 15 can participate in project-based activities that will help them explore different career opportunities, and young people ages 16 to 24 can apply for paid summer jobs in a variety of industries throughout the city. Select initiatives



include the following:

**SYEP Community-Based** is the largest and most accessible program option, serving 61,945 youth in 2024. All city residents ages 14 to 24 and legally allowed to work in the US are able to apply for this option. Participants apply to a provider of their choice, and selections are made randomly within each provider's pool of applicants, giving everyone a fair chance at securing a slot.

**CareerReady SYEP** was created to strengthen connections between academic learning and career exploration. Select New York City public high schools and SYEP contractors work collaboratively to implement both school year and summer program components, emphasizing work-readiness content to fit the career interests of the youth. During 2024, a total of 23,029 youth participated through CareerReady SYEP.

**MAP to \$uccess** and **CareerFirst SYEP** are designed to provide SYEP opportunities to youth who reside in New York City Housing Authority (NYCHA)—a public housing authority that provides public and affordable housing to New Yorkers—developments. Over 13,800 youth participated through these two options. Providers work collaboratively with NYCHA developments and community-based partners to recruit and enroll program participants.

**Emerging Leaders** is designed to provide SYEP opportunities to youth who face at least one of the following employment barriers: homeless or runaway youth, justice-involved youth, youth in or aging out of foster care, youth in families receiving preventive services through New York City's Administration for Children's Services (ACS). Youth receive a direct referral from their support agency (e.g., ACS, the New York City Department of Homeless Services). Last year, 4,187 youth participated in Emerging Leaders.

Thus far, the SYEP program has been [successful](#). Among youth who participated in SYEP in 2024, 94% of participants reported being satisfied or very satisfied with their experience, and 88% reported a better understanding of money management.

### **Train & Earn**

Train & Earn, also administered by DYCD, is a career pathways program that provides comprehensive job training and employment services, along with support services needed by participants to find a permanent job and access postsecondary education and training. The program serves youth ages 16 to 24 who are neither working nor attending school and who have barriers to obtaining and retaining employment or completing an educational program.

In 2024, Train & Earn served 1,635 participants. The most recently finalized outcome information showed that 67% of Train & Earn participants were placed in post-secondary education, employment, or advanced training in the second quarter after exiting the program. In addition, 71% of participants attained a recognized postsecondary credential or High School Equivalency (HSE) diploma during participation or within one year after exiting the program.



Train & Earn provides comprehensive occupational and work readiness training for entry into high-growth occupations tied to in-demand sectors such as technology, industrial & infrastructure, healthcare, media & entertainment, or government. Program services include long-term occupational training leading to the attainment of credentials, including licensure or certification, as well as industry-/occupation-specific work readiness training and, if necessary, literacy and numeracy skill building to ensure that participants can meet the demands of the jobs for which they are training. Additionally, comprehensive support services to address participants' barriers to getting and keeping a job, including housing, mental and physical health needs, and child care are provided, including placement services to ensure that participants are engaged in either postsecondary education, additional training, or unsubsidized employment

### **Advance & Earn**

Advance & Earn, managed by DYCD, is an innovative training and employment program for young adults ages 16 to 24 who are neither working nor attending school. Advance & Earn served 1,152 young people in 2024, and the most recently finalized outcomes data showed 52% of participants attained a credential or HSE diploma within one year of program enrollment.

Pre-HSE instruction serves youth who have fourth to eighth grade reading levels and have not attained high school diploma or HSE. This component includes 12 hours per week of structured instructional activities in reading, writing, math, and digital literacy, seven hours per week of career awareness training, and ongoing case management support. HSE preparation serves youth who have ninth-grade or higher reading levels and have not attained high school diploma or HSE. This component provides six hours per week of HSE instruction including career exploration, financial literacy, and job readiness, as well as case management support; and up to 250 hours of internships. Advanced training serves youth who have attained their high school diploma or HSE. This component includes advanced occupational training, support skills instruction including career exploration and job readiness, certification/credential assessment, case management support, and up to 250 hours of internships.

### **Learn & Earn**

Learn & Earn, managed by DYCD, is a career exploration and academic support program for high school juniors and seniors who meet income and other eligibility criteria. The program provides participants with academic support, college application assistance, work readiness training, service learning and leadership activities, as well as a paid six-week summer internship. In 2024, 1,587 young people participated in Learn & Earn. The most recently finalized outcome data shows 78% of participants were placed in post-secondary education, employment, or advanced training during the second quarter after exiting the program. In addition, 73% of participants attained a recognized postsecondary credential or HSE diploma during participation or within one year after exiting the program.



## **Community Resources for Employment and Development Program of New York City (CRED NYC)**

CRED NYC is a program offered by DYCD that focuses on work readiness training, occupational training, and internships for in-demand, emerging sectors for up to 24 weeks, as well as job placement within a three-month follow-up period. CRED NYC offers holistic support to participants, providing access to mental health counseling, housing, academic support, and healthcare access. CRED NYC is investing in communities most impacted by gun violence and providing the holistic support needed to help justice-impacted New Yorkers enter the workforce. The program is available for young people ages 18 to 40 who are not working and not in school who have previously been involved in the criminal justice system or who have been impacted by community violence.

## **Comprehensive Afterschool System of New York City (COMPASS)**

COMPASS is comprised of almost 900 programs serving young people enrolled in grades K-12. Through its network of providers, COMPASS offers high-quality programs that have a strong balance of academics, recreation, enrichment, and cultural activities to support and strengthen the overall development of youth. COMPASS aims to help young people build skills to support their academic achievement, raise their confidence and cultivate their leadership skills through service learning and other civic engagement opportunities. COMPASS annually serves over 110,000 young people, with 116,926 participants during the 2024 fiscal year.

Numerous studies suggest that regular participation in out-of-school activities can help build foundational skills, support overall well-being, and help young people acquire the skills they need to stay on track as they confront the challenges of adolescence and young adulthood. All youth benefit from such activities, and the impact may be especially valuable for those living in less advantaged communities, where access to resources and opportunities is more limited.

## **SDG Target 8.7: Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms**

### **Runaway & Homeless Youth (RHY)**

DYCD provides an [array of services](#) for runaway and homeless youth and young adults. This includes Borough-Based Drop-In Centers, which serve young people ages 14 through 24 at eight drop-in sites across New York City. Each city borough has one 24/7 drop-in center. Services include food, clothing, showers, laundry, counseling, and case management support. Centers can provide referrals to crisis services programs, transitional independent living programs, and other supportive services. Last year, 2,829 youth and young adults received additional case management support at these drop-in centers.

Additionally, DYCD runs the Street Outreach Program, which serves as a point of entry into the wider RHY system. By going directly to where at-risk youth are, such as subway stations and transportation hubs, the Street Outreach Program, with the assistance of street outreach workers, develops rapport with youth and provides contact by: disseminating information about RHY services; providing food, clothing and other resources; making referrals to other service providers; and transporting youth back to their homes or relatives, to Crisis Services programs, or to other safe locations. Last year the Street Outreach Program made contacts with 12,186 young people.

DYCD-funded Crisis Services Programs provide emergency shelter and crisis intervention services for youth ages 16 to 20 and for young adults ages 21 to 24. These voluntary, short-term residential programs provide emergency shelter and crisis intervention aimed at reuniting youth with their families or, if family reunification is not possible, arranging appropriate transitional and long-term placements. Last year Crisis Services Programs served 1,709 homeless youth and 179 homeless young adults.

Transitional Independent Living (TIL) facilities provide homeless youth ages 16 to 20 and young adults ages 21 to 24 with support and shelter as they work to establish independence. In addition to housing, TIL programs provide educational programs, vocational training, counseling, mental health services, and basic life skills training. Last year TIL programs served 1,188 homeless youth and 52 young adults.



DYCD's RHY portfolio serves to protect and address the needs of runaway and homeless youth and young adults, and to provide a safe and welcoming environment for all, including Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) youth and other vulnerable groups such as young pregnant women/mothers, victims of abuse, sexually and commercially exploited youth, youth involved with the criminal or juvenile justice system, and former foster care youth. All RHY providers are expected to have expertise in meeting the needs of sexually exploited youth or to have a community partnership with a specialist organization that possesses the necessary expertise and experience to advise and assist program staff and ensure they deliver effective and culturally sensitive services. Across DYCD's RHY portfolio in 2023, a total of 126 young people were referred, self-reported, or were determined to be sexually exploited or at-risk for sexual exploitation. It is important to note that the actual determination of whether some youth are at-risk for exploitation or have been exploited is significantly challenging. Many youth who are considered at-risk for exploitation may have actually been trafficked, but chose not to disclose that information, or even outright deny exploitation, despite a proliferation of indicators to the contrary. Therefore, this data comprises both exploited youth and youth determined to be at-risk for exploitation.

### **Immigrant Workers Rights**

The New York City Department of Consumer and Worker Protection (DCWP) is the city's central resource for workers. DCWP protects and promotes labor standards and policies that create fair workplaces to ensure all workers can realize their rights, regardless of immigration status. All New Yorkers deserve fairness and respect in the workplace. In New York City, it is illegal for an employer to discriminate against anyone based on citizenship status, national origin, or other protected ground under the New York City Human Rights Law. Accordingly, employers cannot:

- Pay workers lower wages or no wage because of their immigration status
- Harass or make fun of workers because of their nationality, religious beliefs or attire, accent, or immigration status
- Punish workers for speaking their own language
- Threaten workers about calling the police because of their immigration status
- Refuse to hire someone because of their nationality, religious beliefs, attire or accent

### **ACS' Office of Child Trafficking Prevention & Policy**

ACS is committed to identifying and helping labor trafficked and commercially sexually exploited children and youth achieve safety and obtain resources to help them heal and thrive. ACS established the Office of Child Trafficking Prevention & Policy (OCTPP) to provide guidance for work with this vulnerable population. OCTPP also works collaboratively with the DYCD and many other stakeholders to provide a wide range of services to prevent traffick-



ing and meet the needs of youth at-risk and victims of exploitation through funding from the New York State Office of Family and Children's Services' Safe Harbour Program.

[Local Law 41 of 2016](#) requires an annual report to the Speaker of the New York City Council, documenting the number of youth in contact with DYCD and ACS who are referred as, self-report as, or who the departments (DYCD or ACS) later determine to be sexually exploited children, disaggregated by age, gender and whether the children had contact with either DYCD, ACS or both agencies. The law also requires DYCD and ACS to provide a description of the services provided by the department and ACS to meet the needs of youth who are or have been sexually exploited. Lastly, the law requires DYCD and ACS to document their methods for collecting data regarding this population.

ACS, DYCD, and partner agencies remain committed to helping ensure youth are as safe and stable as possible as unprecedented challenges, including the COVID-19 pandemic, have continued to unfold. Over the past 10 years, through the Safe Harbour affiliation, ACS and DYCD have worked together to systemically recognize and address the needs of sexually exploited young people. The Safe Harbour Act, with state and local agency resources, have allowed DYCD and ACS to strengthen their collective work in this area by enhancing existing services and developing increased specialized services for this population, training staff, and evaluating mechanisms to improve efforts to identify and document sexually exploited youth.



## **SDG Target 8.8: Protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment**

### **DCWP Protective Worker Policies**

DCWP strives to build a culture of compliance and offers resources to employers to help them comply with the city's laws. Recent efforts by DCWP to protect the rights of consumers and workers alike includes the following:

#### **Fair Workweek Law and the “Just Cause” Law**

Under the Fair Workweek Law, which went into effect in November 2017, fast food employers in New York City must give workers regular schedules, two weeks' advance notice of work schedules covering specific dates, premium pay (between \$10-\$75) for schedule changes, the opportunity to decline to work additional time, and the opportunity to work newly available shifts before hiring new workers. Fast food employers also cannot schedule a “clopening” shift—the practice of employees working a closing shift followed directly by an opening shift with very few hours for rest in between—unless the worker consents in writing and receives a \$100 addition to their wages to work the shift. Similarly, fast food employers must obtain workers' written consent before adding any time to their work schedules with less than two weeks' notice and may not penalize them for declining to work. Under this law, retail employers must also give workers advanced notice of work schedules and may not schedule workers for on-call shifts or change workers' schedules with inadequate notice. Additionally, fast food employers must post the notice, NYC Fast Food Worker's Rights, where employees can easily see it.

On July 4, 2021 the “Just Cause” law was implemented, adding critical new job protections for fast food workers under the Fair Workweek Law. Under this clause, fast food employers cannot be fired or get reduced hours without just cause. Employers must give workers who passed their probationary period retraining and an opportunity to improve. They can only fire underperforming workers after giving them multiple disciplinary warnings in the span of one year or for egregious conduct. Additionally, they cannot lay off current workers except for economic reasons. Layoffs must be in reverse order of seniority, with the longest-serving workers laid off last. Employers must give a written explanation for a firing, a reduction of hours, or a layoff, and they must give laid-off or current workers priority to work newly available shifts. Employers must advertise open shifts on posters in the restaurant and by text or email. Lastly, employers can only hire new workers if no laid-off or current New York City workers accept the shifts by the posted deadline.



## Paid Safe and Sick Leave Law

April 2024 marked the 10-year anniversary of the city's landmark Paid Safe and Sick Leave Law. The law, which went into effect in April 2014, was historic in its scope, and now offers more than 3.8 million employees the legal right to take paid leave off work to care for themselves and their families. At the time, New York City was the seventh (and largest) jurisdiction to create the legal right to paid sick leave, and it became a model for other jurisdictions to enact similar laws. Since 2014, DCWP has received more than 3,600 complaints about potential violations of the law and closed more than 2,900 investigations, securing nearly \$22 million in restitution for nearly 68,000 workers. In recent years, DCWP has had several major settlements with companies to resolve violations of the Paid Safe and Sick Leave Law and secure restitution for workers.

The law has also been amended several times since 2014 to expand who is covered, the amount of leave, and how it can be used. In 2018, the law expanded to include safe leave, providing workers with the right to take leave to seek social services or take other safety measures for themselves or a family member if they are the victim of any act or threat of domestic violence or unwanted sexual contact, stalking, or human trafficking. In 2020, the benefit increased from 40 hours to 56 hours of leave for workers at businesses with 100 or more employees in New York City. Starting in 2024, workers can file private lawsuits for violations of the law, expanding workers' options for legal relief. On January 1, 2025, New York became the first state in the nation to offer paid time off for prenatal care or any medical care related to pregnancy.

## Grocery Worker Retention Act

Under the Grocery Worker Retention Act ([Local Law 11 of 2016](#)), new grocery store owners in New York City must retain employees of the previous owner for a 90-day transitional period following a change in control or ownership of the store.

## Freelance Isn't Free Law

Freelancers, like all workers, deserve to be fairly compensated for their work and treated with respect. As the city's workforce continues to evolve, it is crucial that it supports gig workers and freelancers and ensures they are protected from exploitation. New York City's Freelance Isn't Free Act ([Local Law 140 of 2016](#)) is the first law of its kind in the country and gives freelance workers the right to a written contract, timely payment, and freedom from retaliation. The law established a court navigation program as one avenue to assist freelancers in getting paid and accessing resources. It also authorizes the city to file cases against any person or business that shows a pattern or practice of violating the law.

## Expansion of the Workers' Bill of Rights

In 2024, DCWP released the newly expanded landmark [Workers' Bill of Rights](#), a multilingual and comprehensive guide to rights in the workplace in New York City, which was created in collaboration with the New York City Mayor's Office of Immigrant Affairs and the New York



City Commission on Human Rights (CCHR). This new version of the Workers' Bill of Rights summarizes additional city laws, and now also includes state and federal laws that protect workers and job applicants in New York City, regardless of immigration status.

### **Increase Minimum Pay Rates for App-Based Restaurant Delivery Workers**

As of April 1, 2025, the city's minimum pay rate for app-based restaurant delivery workers increased to \$19.56 per hour before tips. The \$19.56 rate reflects the 2024 phase-in rate of \$18.96 and an inflation adjustment of 3.15%—up from an average of just \$5.39 per hour before enforcement began. Since DCWP began enforcing the minimum pay rate in December 2023, restaurant delivery apps have paid the city's delivery workers \$16.3 million more per week across the workforce, an increase of 165%, totaling an additional \$847.6 million annually.

### **Mediation Programs for Domestic Workers**

A new Domestic Worker Mediation Program by DCWP launched in 2022, to help the city's approximately 18,000 domestic workers—those who work directly for a private household, like housecleaners, nannies, or other care providers—and their employers resolve workplace issues in a respectful, confidential, and free way without going to court. DCWP [found](#) that more than half of the city's domestic workers, the majority of whom are immigrants and women of color, have experienced wage theft, safe and sick leave violations, harassment, discrimination, and fear of retaliation from their employers if they report illegal behavior. Mediation, which benefits both workers and employers, is voluntary and available to resolve workplace issues related to unpaid wages and overtime, paid safe and sick leave violations, and retaliation. The program builds on the city's commitment to ensure that domestic workers are offered the support and resources they need to thrive.

### **The New York City Human Rights Law**

CCHR safeguards labor rights and promotes safe, equitable, and secure working conditions for all workers, including migrant workers, women migrants, and those in precarious or low-wage employment. All workers in New York City, regardless of immigration status, are protected from discrimination, harassment, and retaliation under the [New York City Human Rights Law](#). CCHR actively enforces these protections through investigations and legal action, including recent decisions holding employers' accountable for wage theft, unsafe conditions, and gender-based harassment. CCHR also conducts targeted outreach in partnership with community-based organizations to reach domestic workers, home care aides, and other vulnerable groups. In collaboration with groups like the National Domestic Workers Alliance and through initiatives like the Economic Justice and Human Rights project, CCHR continues to educate workers on their rights and help ensure that all New Yorkers can work in dignity and safety.

### **Cabinet for Older New Yorkers**

The Cabinet for Older New Yorkers is an interagency collaborative established to realize and institutionalize an age-inclusive New York City through structural, legislative and systemic

solutions. Through this convening, NYC Aging and CCHR partner to educate older workers returning to the labor force on the city's Human Rights Law and age discrimination. Since the fall of 2023, about 550 older workers have been trained on employment-based age discrimination and their rights in the workplace.



**NYC Aging is committed to advocating for the unique economic needs for the nearly 2 million older New Yorkers.**



## SDG Target 8.9: By 2030, devise and implement policies to promote sustainable tourism that creates jobs and promotes local culture and products

### Tourism in New York City

New York City [hosted](#) 62.2 million visitors in 2023. Over 80% of tourist visits were domestic, and over 80% of visits were for leisure. New York City is also the top destination for international tourism in the U.S., with the U.S. Department of Commerce reporting nearly nine million international visitors to the city in 2023. This is more than twice as many as the next most visited U.S. city, Miami. The total number of visitors grew again in 2024, reaching nearly 65 million, and a record 68 million visitors are expected in 2025. The tourism sector is unsurprisingly an important part of the city's economy. New York City Tourism + Conventions, formerly NYC & Company, is the official Destination Marketing Organization (DMO) and Convention and Visitor's Bureau for the five boroughs of New York City. Its mission is to invite the world and energize the city, building equitable and sustainable economic prosperity and community through tourism for the mutual benefit of residents, businesses, and visitors.

The city's tourism sector accounts for 483,000 jobs, representative of one in eight jobs in New York City, and \$28.5 billion in wages as of 2023. Tourism employment in New York City fell by 60% during the COVID-19 pandemic but had recovered to 93% of pre-COVID levels by the third quarter of 2023 (compared to 98% for the private sector overall). Furthermore, 64% of tourism-related jobs are in the restaurant sector; the next highest concentration of jobs is in arts, entertainment, and recreation, with 18%.

Learn more about New York City Tourism + Conventions on their [website](#).

## SDG Target 8.10: Strengthen the capacity of domestic financial institutions to encourage and expand access to banking, insurance and financial services for all

### Financial Empowerment Programming

DCWP prioritizes initiatives that educate, empower, and protect residents and neighborhoods with low- and moderate- incomes so that they can improve their financial health and build assets. This work, which is guided by research that identifies the most vulnerable communities, includes providing free one-on-one professional financial counseling at a network of New York City Financial Empowerment Centers operated by DCWP. In addition to financial counseling, DCWP also helps eligible New Yorkers file their taxes for free and claim valuable tax credits like the Earned Income Tax Credit through a program called NYC Free Tax Prep.

Similar financial empowerment programming is available to NYCHA residents. NYCHA's Office of Resident Economic Empowerment and Sustainability (REES) partners with entities throughout the city to work to advance financial security for residents through financial empowerment services. This includes financial counseling, financial literacy education, and assistance applying for food stamps.

### Tenant Protection Cabinet

The Tenant Protection Cabinet (TPC) was formed in 2024 to coordinate across agencies to better serve tenants by creating pathways to renter-focused programs and services, and to ensure safe and fair housing conditions. TPC includes representatives from over two dozen city agencies and is jointly chaired by the New York City Deputy Mayor for Housing, Economic Development and Workforce and the New York City Executive Director for Housing. TPC works to ensure renters (65% of New Yorkers were renters in 2024) have the resources they need to understand their rights and responsibilities so that New Yorkers may maintain stable and safe housing. Basic tenant rights include living in a safe, well-maintained building that is free from vermin, leaks, hazardous conditions, and harassment and discrimination. Tenants have responsibilities to their building owners and other tenants—including not damaging the building and responding to annual owner inquiries related to window guards and lead-based paint, and to maintain smoke and carbon monoxide detectors.

### A Plan to Support Unpaid Caregivers in New York City

Caregivers are on the frontlines of caring for the city's children, older adults, and people with disabilities, and their dedication and compassion help make New York City great. The city continues to support these New Yorkers using municipal government tools, including communication, advocacy, policy development, and interagency collaboration. Recognizing

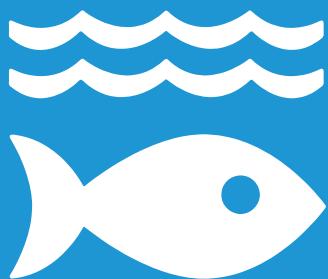


that caregivers have different needs and challenges, the city has leveraged the resources and expertise of multiple agencies in order to best serve its caregivers. At the same time, improving the lives of caregivers requires a holistic approach that takes into account all aspects of caregivers' lives—how their financial, physical, and emotional challenges intersect.

The city convened a working group composed of representatives from agencies and external partners to advance a comprehensive set of goals in support of caregivers. These goals include leveraging and expanding awareness about existing resources for caregivers; encouraging New Yorkers to identify as caregivers; educating caregivers about best practices and techniques for providing care; helping caregivers access affordable transportation; supporting legislation that benefits unpaid caregivers; continuing a working group focused on caregivers; communicating affordable housing efforts and opportunities to caregivers; and helping reduce social isolation among caregivers through virtual services.

For more information about New York City's work to support caregivers, see SDG 5 (specifically target 5.4) in this VLR.

# 14 LIFE BELOW WATER





# Goal 14: Life Below Water

## CONTEXT

With more than [520 miles](#) of shoreline and an interconnected network of islands, New York City is uniquely dependent on its waterways and marine ecosystems. The waterways around the city, including the East River, the Upper and Lower New York Bay, and the Long Island Sound, serve as vital habitats for various species of fish, marine mammals, and seabirds. These waters are part of the larger New York Harbor Estuary, which stretches out to the Atlantic Ocean. Clean waterways allow residents and visitors to engage in safe and healthy recreational activities, such as swimming at one of New York City's many public beaches, fishing, and boating. The city's coastal ecosystems provide many benefits for people and the environment by promoting biodiversity and mitigating the effects of climate change.

Whereas New York Harbor was nearly lifeless due to pollution and harvesting in the twentieth century, it is now healthier, improving, and teeming with life. This success is due to focused public policy and dedicated restoration efforts. As a result, in the next decade, New Yorkers will have access to cleaner bodies of water, expanded water safety education, and more interaction with nature. Going forward, the city has opportunities to build on its multibillion-dollar investments to improve water quality through various programs and policies. These opportunities include investing in existing critical infrastructure for the transport and treatment of sanitary sewage, updating rules for stormwater management on new and redeveloped properties, and continuing to build out the nation's largest green infrastructure program.

Habitat restorations and improvements in water quality to date have encouraged wildlife, including dolphins and whales, to return to New York City's shorelines. The city will continue to maintain and restore the waterfront's natural habitats and ecological diversity through robust planning and research, especially in the face of climate change. Collaborations among city agencies and community stewards will support the rewilding of treasured estuaries and wetland ecosystems. And, because climate change threatens wetlands, city agencies will need to continue to use the best available data to restore and protect these essential habitats.



## SDG Target 14.1: By 2025, prevent and significantly reduce marine pollution of all kinds, in particular from land-based activities, including marine debris and nutrient pollution

### Improving Waterway Health and Modernizing the Sewer System

The waters surrounding New York City are currently [cleaner and healthier](#) than they have been since the mid-19th century. Over the last several decades in particular, the city has invested more than \$45 billion in the construction and upgrade of critical infrastructure to improve the health of vital local ecosystems. These improvements can be seen across the five boroughs with seals exploring the Bronx River, whales splashing in the Upper New York Bay, and millions of New Yorkers and tourists flocking to waterways for recreation. In recent years, the city has committed an additional \$9 billion to continue the legacy of innovation and investment and usher in a new era of environmental protection for the city's Harbor.

Improving New York Harbor's water quality has been a priority for the city and the New York City Department of Environmental Protection (DEP) for decades. According to the city's most recent [Harbor Survey Report](#) from 2022-2023, a survey started by the Metropolitan Sewerage Commission in 1909, the Harbor is cleaner now than at any time in the last 100 years. Continued improvements to the city's 14 wastewater resource recovery facilities (WRRFs), and ongoing investments have resulted in an 80% reduction in combined sewer overflows since the mid-1980s.

### Revitalizing the New York City Waterfront Areas

The New York City Waterfront Revitalization Program (WRP) establishes the city's policies for waterfront planning, preservation, and development projects to ensure consistency over the long term. The goal of the program is to maximize the benefits derived from economic development, environmental conservation and public use of the waterfront, while minimizing any potential conflicts among these objectives. When a proposed local, state, or federal project or discretionary action is located within the city's designated Coastal Zone—those waters and their bordering areas in U.S. states along the coastlines of the Atlantic and Pacific Oceans and the Gulf of Mexico and the shorelines of the Great Lakes—a determination of the activity's consistency with the coastal policies contained in the WRP must be made before the action or project can move forward.

When the New York City Department of City Planning reviews a project for WRP consistency, they consider whether a project promotes each policy applicable to the project. Two of these policies in particular are relevant to this SDG target. First, protecting and improving water quality in the New York City coastal area and second, minimizing environmental degradation and negative impacts on public health from solid waste, toxic pollutants, and hazardous and industrial materials. Projects may show they promote these policies by explaining how they



manage discharge to bodies of water and manage waste materials to control pollution and prevent degradation of coastal ecosystems. Additional steps have been taken to promote sanitation throughout the city and thus prevent waste from entering the waterways as described below.

### **Plastic Bag Ban**

Since October 2020, single-use plastic carryout bags have been banned with limited exceptions in New York State. Prior to this law, New York City residents used more than 10 billion single-use carryout bags every year, costing the city more than \$12 million annually in disposal costs. New York State created a task force that analyzed the impacts of single-use plastic bags and issued a report which noted that plastic bag usage affects both local communities and the environment as they pose significant recycling and disposal issues and harm to wildlife.

### **Containerization of Trash**

In [2022](#), the city implemented a containerization program, moving 70% of the city's trash off the streets and into containers. Since March 2024, all 200,000 New York City businesses are required to place their trash in bins, keeping 20 million pounds of garbage off the streets every day. In November 2024, the New York City Department of Sanitation (DSNY) implemented the first trash bin requirement for residential waste since the early 1970s, requiring all properties with one to nine residential units to place their trash in a bin with a secure lid. In April 2025, piloted containerization for large residential properties and schools using large stationary on-street containers, like those used around the globe, starting in Manhattan Community District 9.



**Empire bins are stationary, on-street containers assigned to a specific property that are now required for use by properties with 31+ units.**



## Highway and Neighborhood Cleaning Initiatives

DSNY created the first-ever Highway Unit in 2023, responsible for 6,456 miles of highways and highway ramps citywide. The city's highways are oftentimes the first thing people see when they arrive to the city, and serve as gateways for residents, commuters, and visitors. Since its inception, DSNY has removed over 16 million pounds of debris from New York City's highways and highway ramps.

For far too long, "No Man's Land" areas, or the walkways, medians, step streets, overpasses, and other areas with murky jurisdiction, harbored dirty, litter-filled conditions. Since DSNY's Targeted Neighborhood Task Force (TNT) was launched in 2023, DSNY has put nearly 2,000 of these locations on regular cleaning routes. Each location has now been cleaned multiple times since the program's inception, totaling over 40,000 cleanings of areas that had not been cleaned in decades.

## Catch Basin Management

DSNY is responsible for inspecting and maintaining over 600 designated catch basins across the city. Each September, DEP reviews the list and updates locations if necessary, providing DSNY with any new assignments. When New York City Emergency Management (NYCEM) issues a flash flood warning, DSNY immediately inspects all assigned catch basins, clearing any debris from above the grates to ensure proper drainage. DSNY also conducts proactive inspections during periods of heavy rain, even if a formal flash flood warning has not been issued. If a catch basin is found to be clogged below the grate, DSNY documents the condition with a photograph and submits it to NYCEM and DEP for further action. A new pilot program was announced in spring 2025 for residents in Greenpoint, Brooklyn to Adopt-a-Catch Basin.



**DSNY's Highway Unit in action.**



**DSNY staff clearing debris near a catch basin grate.**



This pilot program aims to empower community members to take an active role in reducing street flooding. The program seeks volunteers to help keep catch basin grates clear of debris, ensuring that rainwater can flow freely into the city's sewer system.

## Mechanical Brooms

DSNY operates one of the largest and most complex street cleaning operations in the world. Central to this effort is its fleet of over 450 mechanical brooms, also known as street sweepers. These vehicles are critical to maintaining the cleanliness and safety of New York City's 6,500 miles of roadways, which span all five boroughs. Mechanical brooms are designed to sweep and collect litter, debris, and organic material from along the curb line. Each broom is outfitted with rotating brushes that collects swept materials into an onboard hopper. This equipment enables sweepers to access even the most challenging environments.

To facilitate this vital work, Alternate Side Parking (ASP) regulations are enforced across the city. These regulations require residents to move their vehicles on scheduled days, providing DSNY with the curbside access necessary to perform thorough cleanings. ASP remains one of the most visible and effective citywide tools for promoting street sanitation.

In a typical year, DSNY sweepers remove tens of thousands of tons of debris from city streets, everything from plastic litter and food waste to leaves and construction dust. This plays a crucial role not just in maintaining aesthetics but also in supporting public health and environmental sustainability. By regularly clearing roadways, sweepers help prevent trash from entering the city's catch basins and waterways, thereby improving stormwater management, and reducing pollution in local ecosystems.

As part of its long-term commitment to sustainability, DSNY is also investing in zero-emission broom technologies, including electric street sweepers, to reduce greenhouse gas emissions and improve air quality. Pilot programs are already underway, with several electric compact sweepers deployed in bike lanes and pedestrian-heavy corridors. Whether during peak summer foot traffic or after winter storms, DSNY's street sweeping program remains an essential service that supports cleanliness, mobility, and civic pride across the five boroughs.



**One of the city's mechanical brooms cleaning a downtown street following a parade.**



## SDG Target 14.2: By 2020, sustainably manage and protect marine and coastal ecosystems to avoid significant adverse impacts, including by strengthening their resilience, and take action for their restoration in order to achieve healthy and productive oceans

### Sewer Overflow Management

The quality and ecology of New York City's [waterways](#) are strongly shaped by the city's wastewater management infrastructure. New York City is served by two types of sewer systems—separate and combined—that are defined by how they handle wastewater and stormwater. In Municipal Separate Storm Sewer System areas, stormwater and sanitary sewer systems operate independently. Pipes carrying wastewater connect directly to the WRRF for processing, while pipes carrying stormwater connect directly to local waterways. Unfortunately, stormwater may pick up pollutants (such as oil, trash, and fertilizers) from the street and carry them into the water.

In [combined systems](#), a single pipe carries sanitary sewage and stormwater flow to the local WRRF. New York City's sewer system is approximately 60% combined. During heavy rain or snowstorms, the combined sewer system discharges a diluted mixture of stormwater and sewage into local waterways, which is a combined sewer overflow (CSO). This release is necessary to protect the wastewater infrastructure and treatment systems. CSOs become a concern, however, when they occur too frequently or in large amounts. The result is harmful to water quality. To reduce CSOs, the city has spent nearly \$2.7 billion on grey infrastructure projects since 2010 and has committed almost \$6 billion for investment toward future CSO reduction. Additionally, over the last decade, the city has actively engaged local stakeholders in developing 11 Long Term Control Plans (LTCPs), a multibillion-dollar effort to reduce the frequency and volume of CSOs. The city also oversees the nation's largest green infrastructure program, with the regulatory goal of reducing CSO discharges by 1.67 billion gallons per year by the end of 2040 and expending \$3.5 billion on green infrastructure by December 2045. The introduction of new stormwater regulations in 2022 contributed to enhanced stormwater management and improved water quality across the city's waterways. These efforts have made New York City's water quality the best it has been in more than a century.

### Upgrading Wastewater Resource Recovery Facilities (WRRFs)



Since the 1970s, the city has [invested](#) more than \$40 billion to upgrade and expand wastewater treatment services, an essential strategy to improve water quality near New York City's shoreline. More recently, the city has invested \$1.2 billion to upgrade six WRRFs to reduce nitrogen discharges. This is because when there is too much nitrogen in water, it creates an environment where algae grow too fast, overwhelming the ecosystem and making the water less healthy. Additionally, less nitrogen in the water provides more oxygen to help fish, other aquatic animals and plants survive. In 2022, work on two additional WRRFs was completed.

### **Waterfront Revitalization Program (WRP)**

In 2016, the WRP was updated through a public review process to build on the vision of the 2011 "Comprehensive Waterfront Plan" and incorporate climate resiliency strategies into waterfront planning, preservation, and development projects. Policy 6.2 of the WRP requires consideration of the latest New York City projections of climate change and sea level rise (as published in "New York City Panel on Climate Change Report" from 2015) into the planning and design of projects in the city's coastal zone. The goal of the program is to maximize the benefits derived from economic development, environmental conservation and public use of the waterfront, while minimizing any potential conflicts among these objectives. When a proposed local, state, or federal project or discretionary action is located within the city's designated coastal zone, a determination of the activity's consistency with the coastal policies contained in the WRP must be made before the action or project can move forward.

### **Flood Resiliency and Costal Protection Projects**

New York City is confronted with increasingly severe climate impacts that, without intervention, could strain the city's infrastructure, increase the frequency of power outages, cause property damage, and challenge everyday life for waterfront residents and communities. Waterfront communities across the city and city agencies are taking climate action and rising to the challenges of increasing flood risk.

The city is identifying opportunities for coastal flood protection, where feasible and practicable, in order to manage the impacts of coastal storm surge and high tide flooding. The city's planned coastal protection projects rely on a wide-ranging set of engineering and design strategies that depend on the local flood risk profile, visual impacts, waterfront public access, physical landscape, land uses and natural ecology. The city's overall coastal flood protection strategy seeks to achieve the following goals:

- Protect against storm surge with integrated flood protection systems, floodwalls, levees and floodgates.
- Raise coastal edge elevations to prevent high tide flooding through beach renourishment, revetments, bulkhead raisings, street raisings, and the installation of tide gates.
- Minimize upland wave impacts through new dunes, jetties, wetlands and living shorelines.



- Expand resilient design practices that allow waterfront buildings and infrastructure to withstand the impacts of coastal storms, increased precipitation, extreme heat and sea level rise.

Zoning for Coastal Flood Resiliency (ZCFR), a set of amendments to zoning regulations adopted by the New York City Council in May 2021, provides important new design tools that enable waterfront sites to support resilient shorelines and healthy ecosystems. ZCFR reshaped regulations to encourage waterfront property owners to design greener, more ecologically responsive shorelines by incorporating intertidal habitats (natural habitats that are submerged at high tide and exposed at low tide) and stepped pathways to bring the public closer to the water. The interweaving of marine ecology, flexible pedestrian circulation and ecologically oriented plantings all expand opportunities for physical access to the water. Provisions in ZCFR also reflect how zoning can support implementation of waterfront public spaces that are better designed to mitigate the impact of sea level rise and manage tidal habitats.

ZCFR also included modifications to rules requiring public access on developing waterfront sites to enable the design of living shorelines. It also enables the design of bi-level esplanades that provide public access both near the level of the water and at higher elevations. These provisions soften the transition from the streetscape to flood elevations at the building level and include greater flexibility for grading, planting, and locating visual sightlines throughout the site. Together, these provisions balance the need for long-term flood resilience and priorities for public access and circulation. The regulations also promote the creation of intertidal wetland areas by allowing non-bulkhead treatments such as living shorelines, which can support intertidal habitat and gentler get-downs to the water while attenuating sea level rise and storm driven flooding. The new rules encourage designers to include nature-based shoreline features that bolster healthy ecosystems and can also protect properties and neighborhoods from chronic flooding.

### **Harbor Survey Program**

At the start of New York City's industrial age, local waterways supported manufacturing and maritime industries. In the early 1800s, as the city's population grew, open trenches and early sewers sent waste directly to the nearest waterbody. Physical changes to historic marshes and creeks and widespread industrial pollution further degraded water quality and harmed local ecosystems. In 1909, the Metropolitan Sewerage Commission created the Harbor Survey Program in response to public outcry over degraded water quality affecting quality of life. The program sought to study the relationship between wastewater and harbor water quality. Now, 115 years later, the Harbor Survey Program has grown to include 84 sites throughout New York waters that are sampled on a weekly basis during the summer season (May-October) and monthly during the winter season (November-April).

Since the start of the Harbor Survey Program and the construction of the city's first wastewater treatment facility in 1886, water quality has improved steadily. Today these improvements



can be seen by the diversity of marine life that has returned to New York City, such as whales, sharks, seals, sea turtles and various fish populations.

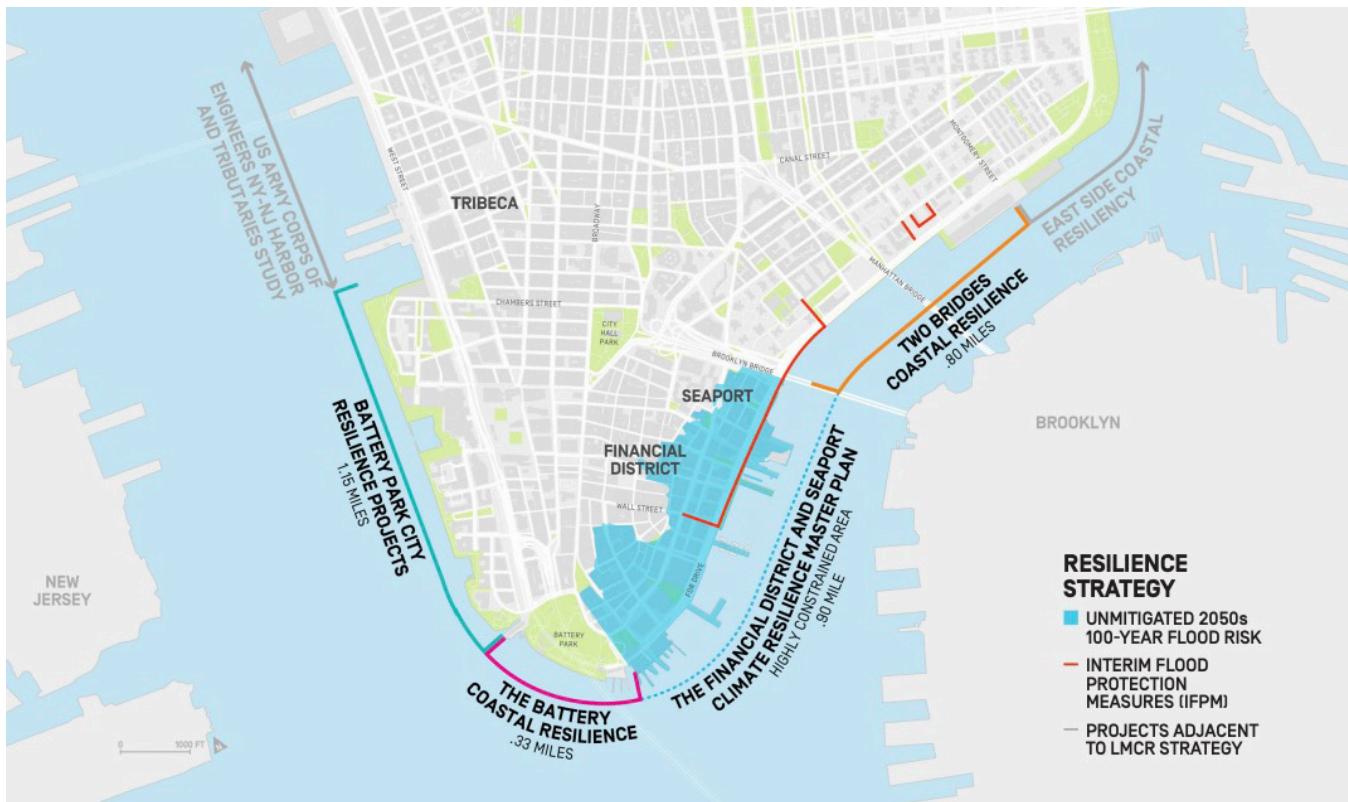
### **Resiliency plans**

Substantial new infrastructure is required to be created to meet the need of a population density in the New York City area that is higher than any state or major metropolitan area in the rest of the country. The coastline is already undergoing rapid change that is causing environmental, social, and economic problems. Strategic coastal resiliency plans are needed to meet today's needs, and also to keep pace with the impact of a projected one million new residents estimated to move to the region in the next 25 years.

A good deal of New York City's coastal property is only inches above current sea level, which puts assets, both public and private, at serious risk even from moderate sea level rise. Accordingly, when "PlaNYC: Getting Sustainability Done" was [released](#) in April 2023, one of the initiatives in the long-term strategic climate plan was to establish a dedicated bureau within DEP to lead and coordinate the planning, implementation and operation of the city's coastal resilience infrastructure. This was officially implemented in October 2023.

### **Lower Manhattan Coastal Resiliency Plan**

Climate change is the greatest threat New York City faces today. In October 2012, Hurricane Sandy hit New York City, flooding 17% of the city's land, and claiming 44 lives. In Lower Manhattan alone, the impact of Hurricane Sandy was devastating, causing two deaths, damaging thousands of homes and interrupting a critical transportation hub. Since then, the scientific community has reached consensus that, absent significant action, climate change will have devastating consequences to New York City at a faster rate than previously thought. Based on current projections, if no action is taken, sea-level rise will submerge parts of Lower Manhattan on a regular basis in this generation and put critical infrastructure and jobs serving all of New York City and the region at risk. This includes the city's subway and ferry network, sewer system, 10% of the city's jobs, and many historic, cultural and community assets. Therefore, the city is taking bold, significant action with the "[Lower Manhattan Coastal Resiliency Plan](#)". In it, the city is investing \$500 million in climate adaptation projects to protect Lower Manhattan now, as well as planning for long-term climate adaptation to meet the challenges of tomorrow.



The city has identified approximately \$500 million worth of investments and developed an overall strategy to improve Lower Manhattan's climate resiliency.

### Salt Marsh Restoration and Protection

Sea-level rise (SLR) in New York City is higher than the global average, posing a serious threat to the city's wetlands. In 2019, the New York City Panel on Climate Change predicted that sea levels could rise locally by as much as 6.75 feet by 2080 and 9.5 feet by 2100. These predictions are dire for the future of the city and its surrounding natural resources. The Natural Areas Conservancy (NAC) and the New York City Department of Parks and Recreation (NYC Parks) completed an assessment that identified Idlewild Park in the borough of Queens as the city's highest priority for restoration due to high vulnerability to SLR and the importance of the habitat provided for rare and obligate birds, such as the salt marsh sparrow. Of the 189 acres of salt marsh at Idlewild, only 11% are high marsh and 69% are low marsh and flooded daily. Historical stressors such as ditching, filling, development, burying tidal creeks, and high nutrient loads have further degraded the marsh. While marshes raise their elevation naturally through sediment deposition and decomposition of organic matter, these stressors have significantly disrupted historical sediment transport patterns to downstream wetlands, contributing to vegetation loss and subsidence. As a result, Idlewild's marshes are not keeping pace with current SLR predictions and Idlewild Preserve lost 25 acres of marsh since 1974, a trend expected to worsen under climate change unless remedial efforts are made. Further degradation to this marsh will cost hundreds of species habitats and increase neighborhood flooding.



In addition to providing important habitat, healthy and functioning ecosystems mitigate the risk of environmental stressors on communities and increase the safety and security of populations that may be affected by natural hazards. Vegetative cover intercepts and absorbs water, retaining it and slowing its movement, helping to reduce flooding and attenuate waves. Vegetation is also important for reducing temperatures on micro- and macro-scales, as it provides shade and evapotranspiration that reduce surface temperatures, mitigating the potential public health effects of extreme heat and the urban heat island effect. Salt marsh vegetation can also bind the shoreline together and reduce the potential for erosion and shoreline retreat. By acting as a barrier and mitigating the effects of extreme weather, healthy coastal ecosystems help prevent the loss of properties and infrastructure in vulnerable areas.

To ensure long-term protection of the marsh in Idlewild Preserve, buffer impacts of storms for communities and local infrastructure, and bolster local wildlife populations, NYC Parks has been piloting thin-layer placement and other strategies to restore existing at-risk wetlands and prevent further degradation. NYC Parks recently completed a thin-layer placement pilot project at Idlewild, restoring over one acre of high marsh. NAC and NYC Parks aim to pursue similar restoration actions throughout Idlewild Marsh using innovative, low-cost, nature-based techniques that reverse some of the historical damage to NYC's wetlands.

### **Dune Restoration**

In 2024, NYC Parks worked quickly to coordinate with the U.S. Army Corps of Engineers, the New York State Department of Environmental Conservation (DEC), and the National Park Service, to collect and store the seeds and native plant material of endangered dune sandspur at Greenbelt Native Plant Center. This work was essential to protect and preserve for future replanting a population of state-endangered dune sandspur (*Cenchrus tribuloides*) located in the path of a dredging project at the National Park Service Crooks Point site in Staten Island.



**NYC Parks beach dune restoration.**



## Horseshoe Crab Monitoring

Horseshoe crabs play an important role in New York City's coastal ecosystems as their eggs are a crucial food source for migrating shorebirds and their shells provide habitat for a range of marine organisms in the city's intertidal zones. NYC Parks actively manages an annual effort to monitor horseshoe crab populations returning to Calvert Vaux Park and Kaiser Park beaches in Brooklyn, New York after a habitat restoration project in 2012-2013.



**NYC Parks horseshoe crab monitoring in action.**

## Tributary Connections

NYC Parks is working with the U.S. Army Corps of Engineers to remove the Bronx Zoo Double Dam and the Stone Mill Dam on the Bronx River. Removing these barriers will increase habitat for the local and regional population of river herring. These migratory fish provide an important food source for native fish and wildlife, support recreational and commercial fisheries, and signal the restoration of the Bronx River. Design will be in progress into 2026, with construction anticipated for 2027 and 2028. When complete, this project will reconnect 12.2 kilometers of freshwater river reaches to the region's estuary and marine systems and restore 1.1 hectares of streambank habitat.



## SDG Target 14.3: Minimize and address the impacts of ocean acidification, including through enhanced scientific cooperation at all levels

### The Billion Oyster Project

New York City is committed to assisting the restoration of oyster habitats in the New York Harbor as part of a broader effort to strengthen coastal resilience. Recognized as “ecosystem engineers,” oysters play a critical role in improving water quality, stabilizing shorelines, and supporting marine biodiversity. Like coral reefs, oyster reefs provide essential three-dimensional habitat for marine life and filter pollutants such as nitrogen, which is essential as excessive nitrogen triggers algal blooms that deplete the water of oxygen and create “dead zones.”

New York Harbor was once home to an estimated 220,000 acres of oyster reefs and oysters have been a vital part of New York City’s coastal ecosystems for centuries, with early evidence of their presence found in Lenape shell mounds and colonial-era references to Ellis Island as “Little Oyster Island” and Liberty Island as “Great Oyster Island.” Historically, the massive oyster reef systems in New York Harbor were a natural defense against storm damage—softening the blow of large waves, reducing flooding, and preventing erosion. Today, the New York Governor’s Office of Storm Recovery (GOSR) is implementing coastal green infrastructure through the Living Breakwaters Project to mimic the reef systems that once existed off of southern Staten Island. As part of this effort, the [Billion Oyster Project](#), a New York City non-profit whose mission is to restore one billion oysters to New York Harbor by 2035, will install oysters on and around the infrastructure designed in Raritan Bay, off the south shore of Staten Island.

While restoring oyster reefs in New York Harbor is a key strategy for enhancing ecosystems and supporting long-term climate adaptation, it is also important to recognize that these oysters are not currently intended to be a food source. Due to persistent pollution and discharge of untreated wastewater into the New York Harbor during heavy rainfall, oysters harvested from these waters are not safe for human consumption. However, with collaborative efforts such as from the Billion Oyster Project and participating city restaurants, coastal restoration and water quality improvements may eventually make it possible for New York Harbor and other urban waterways along the East Coast to once again support safe, local shellfish harvesting for consumption.



Oyster restoration at Turtle Cove in the Bronx.



**SDG Target 14.4: By 2020, effectively regulate harvesting and end overfishing, illegal, unreported and unregulated fishing and destructive fishing practices and implement science-based management plans, in order to restore fish stocks in the shortest time feasible, at least to levels that can produce maximum sustainable yield as determined by their biological characteristics**

#### **Restocking the Bronx River with Alewife**

NYC Parks collaborates annually with the Bronx River Alliance, Bronx Zoo/Wildlife Conservation Society, Connecticut Department of Energy and the Environment, and the DEC to stock the Bronx River with alewife, a type of river herring. Paired with other efforts to improve the ecological health of the Bronx River, re-establishing alewife populations is leading to higher fish diversity. This effort is in alignment with the agency's efforts with the U.S. Army Corps of Engineers to improve fish passage and reconnect the Bronx River to the Western Long Island Sound and expand access to freshwater spawning habitat for river herring throughout the length of the river.



**Alewife in the Bronx River.**



## **Collaboration with Billion Oyster Project**

While once declared nearly lifeless due to pollution and overharvesting, the New York Harbor has made tremendous progress in recent decades due to massive policy undertakings and restoration projects. NYC Parks collaborates with the Billion Oyster Project in their efforts to restore oysters and habitat structure to the New York Harbor. Oysters are a critical part of New York City's history, but they were lost to overharvesting, poor water quality, and dredging. While the population has greatly diminished, oysters are still seen throughout much of the city's shoreline. Through restoring reef habitat and oyster populations, the city can help improve water quality, support wetland habitat, and add habitat for oysters, fish, and other wildlife to the harbor.

NYC Parks is proud to collaborate with the Billion Oyster Project. For more details on their programming see target 14.3.



## SDG Target 14.5: By 2020, conserve at least 10 percent of coastal and marine areas, consistent with national and international law and based on the best available scientific information

### **Preservation, Restoration, and Management of all Wetlands, Streams and Natural Areas**

Nearly 12% of New York City's land area, more than 20,000 acres in total, comprises natural areas, such as forests, wetlands, and grassland. These areas absorb stormwater, clean the city's air and water, and support the physical and mental wellbeing of New Yorkers. They also sustain the biodiversity and overall ecological health of the city by providing vital food sources and habitat for wildlife. New York City is home to 212 species of mammals, birds, reptiles, amphibians, fish, and insects that are endangered, threatened, or of special concern, and depend on the forests, freshwater wetlands, salt marshes, streams, and grasslands.

Unfortunately, many of these areas have been destroyed or harmed by historical or contemporary development. Since Europeans arrived in the 17th century, New York City has lost 85% of its salt marsh area and stream miles and 99% of its freshwater wetland habitat. Forests were cleared to make way for development, wetlands were buried under landfills, and streams were treated as sewers or buried underground. Even with modern conservation, protection, and restoration practices, these natural environments face ongoing risks from development and climate change.

The increased frequency and intensity of storm events can harm forests and streams as high winds knock down trees and increased runoff causes erosion that weakens the soil foundation below tree roots, damages stream beds, and brings pollutants into streams. By the 2050s, New York City will experience sea-level rise by as much as 2.5 feet. Many plants in wetlands, including plants that filter city air and water, are not adapted to being submerged full-time and will effectively drown as rising water limits their access to oxygen. In natural settings, salt marshes can respond to sea-level rise by migrating inland. But in urban areas, this is often not possible because of buildings, roads, or other built infrastructure. Sea-level rise projections suggest that the city is losing six acres of salt marsh per year, and a third of marshes in New York City parks (around 275 acres) are at risk of drowning.

NYC Parks is committed to creating a resilient and sustainable park system, with thriving ecosystems that support New Yorkers of all kinds, human and wildlife. NYC Parks takes a variety of actions in all five boroughs to preserve, restore, and enhance natural areas.

This includes dedicated conservation efforts on the city's shoreline. Where coastal wetlands have been damaged by development and erosion, NYC Parks is working to restore these



areas and make them more resilient to the effects of wave action and sea level rise. With their partner, the Natural Areas Conservancy, NYC Parks has created a 30-year roadmap for the preservation, restoration, and management of all wetlands and streams in New York City. This plan includes a variety of actions and projects to restore and enhance thousands of acres of wetlands in the city. For example, the city created living shorelines that use concrete blocks to absorb the energy of incoming waves and protect the marsh area from further erosion. These blocks have the added benefit of providing surface area for bivalves like mussels and oysters to attach and grow, which helps to filter and remove pollutants from the water.



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## **SDG Target 14.6: By 2020, prohibit certain forms of fisheries subsidies which contribute to overcapacity and overfishing, eliminate subsidies that contribute to illegal, unreported and unregulated fishing and refrain from introducing new such subsidies, recognizing that appropriate and effective special and differential treatment for developing and least developed countries should be an integral part of the World Trade Organization fisheries subsidies negotiation**

### **New York City Harbor Policy Protection**

New York City has a long history of responding to overfishing. Industrialization and explosion in population growth in the 19th and 20th centuries overwhelmed the city's waterways. In 1849, pollutants of many types were dumped in the New York Harbor in vast quantities, so the city started systematically building sewers that connect to New York Harbor through a CSO. This system, which is still in place today, regularly dumps raw, untreated sewage into the harbor. By 1906, New York Harbor was nearly lifeless due to pollution and overharvesting. As a result, it became associated with filth and disease.

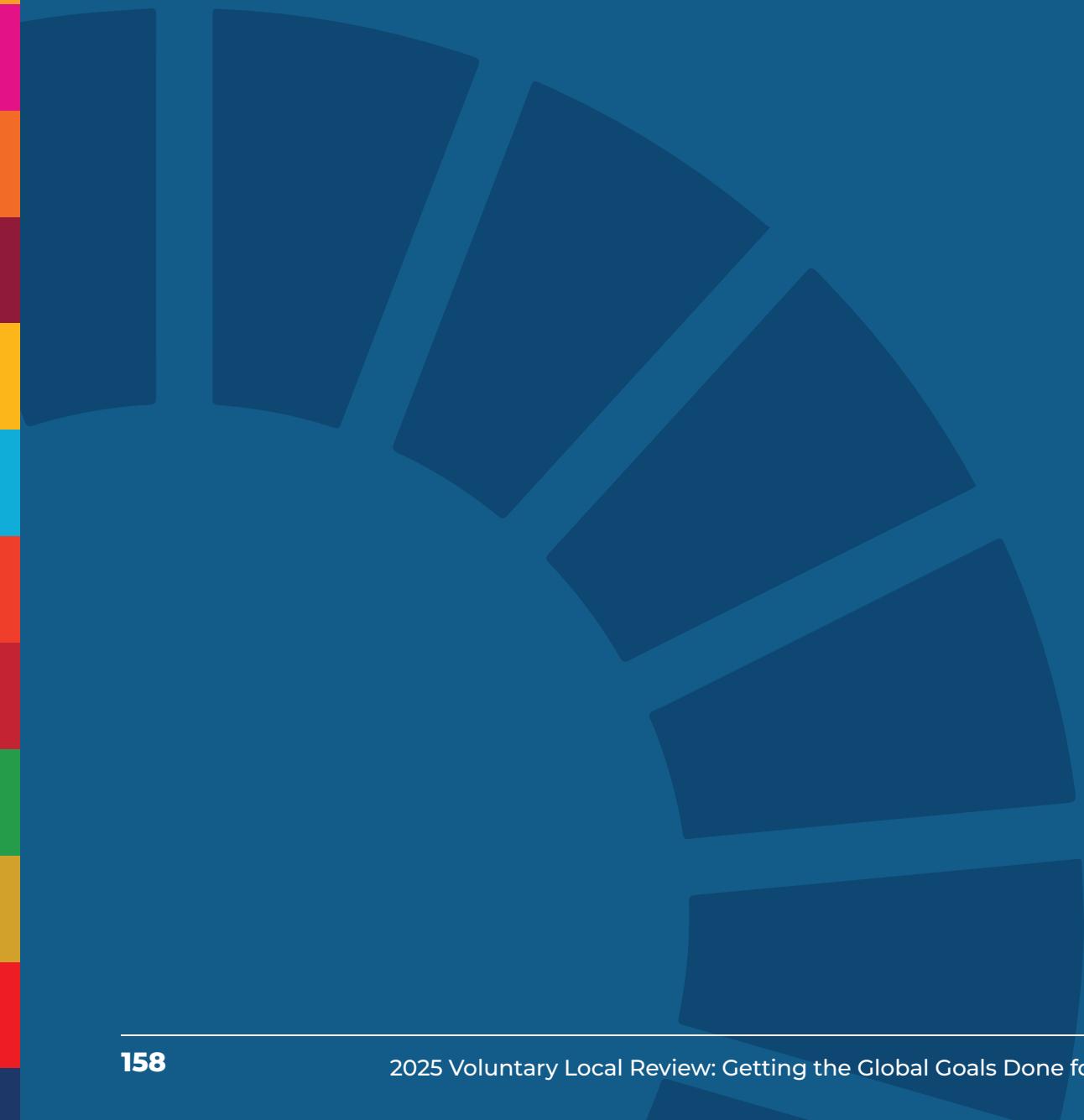
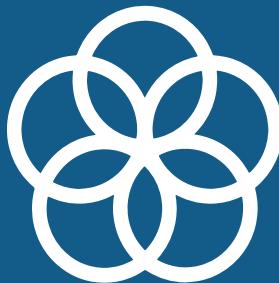
Since then, landmark legislation such as the 1972 Clean Water Act has played a pivotal role in advancing concerted policy efforts to restore and protect New York Harbor and its surrounding waterways. As a result, water conditions continue to improve, wildlife is returning, and the city's relationship to the marine ecosystem is becoming more sustainable.

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## **SDG Target 14.7: By 2030, increase the economic benefits to Small Island developing States and least developed countries from the sustainable use of marine resources, including through sustainable management of fisheries, aquaculture and tourism**

Not applicable.

# 17 PARTNERSHIPS FOR THE GOALS





# Goal 17: Partnerships for the Goals

## CONTEXT

New York City stands as a beacon of international cooperation, hosting the United Nations (UN), the largest diplomatic community in the world, and serving as a global hub for diplomacy, culture, and innovation. Yet its true strength lies in translating global partnerships into meaningful outcomes for its residents. The city's leadership on SDG 17 Partnerships for the Goals is not theoretical but lived out daily through city-to-city agreements, youth and community engagement, technical exchanges, diplomacy, interagency collaborations, and participation in national and global networks.

Through the New York City Mayor's Office for International Affairs (IA), the city has built an ambitious and operational model of subnational diplomacy. This model connects the global to the local, ensures international engagements are shaped by neighborhood priorities, and sees cities not as passive recipients of international frameworks but as powerful architects of a more just and sustainable future.

It is important to note that SDG 17 targets and indicators do not easily translate into the work and responsibilities of New York City. Instead, below includes highlights on ways the city is working in partnership with the foreign governments, including the diplomatic community and other local and regional governments, private sector and communities to achieve the Global Goals while emphasizing their impact on New Yorkers. This is global leadership rooted in local commitment.

### **Connecting Local to Global (CL2G): Diplomacy Grounded in Community Relations**

The Connecting Local to Global (CL2G) program is New York City's cornerstone for linking its diplomatic and consular community with local agencies and neighborhoods. By facilitating site visits, strategic roundtables, and community events, IA ensures that diplomats and other foreign governments engage directly with the city's agencies and communities. These engagements highlight the daily operations that define municipal governance, from emergency management and violence interruption to education, infrastructure, and public health delivery. This program also enables partnerships with external stakeholders to celebrate the contributions of New York City's immigrant and foreign-born communities.

**Flag Raising Events:** New York City is a city of immigrants. Diaspora communities are critical to the economy and the five boroughs. IA, in collaboration with the New York City Mayor's Office of Immigrant Affairs (MOIA) and the New York City Mayor's Community Affairs Unit (CAU), organize flag-raising ceremonies at Bowling Green to honor the city's diaspora communities. The flag-raising events are also organized in collaboration with diplomatic and consular representatives of the specific country, the Bowling Green Association, and commu-



nity organizations. These events, attended by New York City senior administration leaders, elected officials, diplomats, and community leaders and members, celebrate cultural diversity and strengthen diplomatic ties.

**Trainings:** IA, in collaboration with city agencies, offers thematic training to staff at consulates year-round. These trainings are geared toward community-facing staff to ensure they understand the city's laws, policies, resources, and services. For example, IA partnered with MOIA and the Commission on Human Rights to organize consulate-specific and regional training sessions. IA also worked with NYC Emergency Management and the New York Police Department to provide training on NYC's emergency response strategies and ways consular staff can prepare themselves.

**Community Outreach:** CL2G facilitates community walkthroughs and outreach with consulates, delivering resources on key areas such as public health, small business support, immigration, and human rights.

**Culture and Arts Engagements:** IA offers diplomats cultural experiences, such as tours of significant cultural institutions, fostering goodwill and cultural exchange.



# Celebrating Diversity: The Impact of Flag Raising Events in New York City

The flag raising ceremonies at Bowling Green in Manhattan, organized through a vibrant collaboration between IA, MOIA, and CAU, in partnership with the Bowling Green Association, diplomatic offices, and community organizations, serve as powerful symbols of New York City's commitment to inclusivity and cultural diversity.

These events, attended by high-level city officials, including the mayor, deputy mayors, commissioners, and deputy commissioners, celebrate the rich tapestry of global communities that call New York home. From 2022 to 2024, the city hosted more than 70 flag raising ceremonies, each a unique moment of unity, pride, and recognition for communities from Ukraine to Jamaica, and from Nigeria to Ecuador.

This section explores the profound impact of these events, weaving together stories that highlight their significance under three key themes: fostering community pride, strengthening diplomatic ties, and promoting cultural unity.



**Flag raising ceremonies serve as powerful symbols of New York City's commitment to inclusivity and cultural diversity.**



**Flag raising ceremonies draw a large audience of high-ranking city officials, including Mayor Eric Adams.**



**Flag raising ceremonies are organized to foster community pride, strengthen diplomatic ties, and promote cultural unity.**



**From 2022 to 2024, the city hosted more than 70 flag raising ceremonies, each a unique moment of unity, pride, and recognition for communities from Ukraine to Jamaica, and from Nigeria to Ecuador.**



# Fostering Community Pride

Flag raising ceremonies are more than symbolic gestures; they are deeply personal affirmations of identity for New York's diverse communities. Each event provides a platform for immigrant and diaspora groups to celebrate their heritage in the heart of the city.

The Ukrainian flag raising events stood out as a testament to this impact. Amid ongoing challenges in Ukraine, the event drew members from the Ukrainian diaspora, who gathered to see their flag hoisted high above Bowling Green. The ceremony included performances of traditional Ukrainian music, fostering a sense of belonging for attendees and reinforcing their contributions to the city's cultural fabric.

From 2022 to 2024, events for countries like the Dominican Republic, Jamaica, Nigeria, and the Philippines similarly empowered communities.



**The Ukrainian flag raising event fostered a sense of belonging for attendees.**



# Strengthening DiplomaticTies

These ceremonies also serve as a bridge between New York City and the global community, reinforcing diplomatic relationships through cultural recognition. The collaboration with consulates and missions underscores this impact. The African Union flag raising events, attended by multiple African diplomats, including the Deputy Secretary General of the United Nations, H.E. Amina Mohammed, further exemplified how these events elevate New York's role as a global hub, fostering dialogue and cooperation. These ceremonies have become vital to the city's international engagement, promoting mutual respect and collaboration.



**Diplomatic ceremonies are a cornerstone of the city's international engagement, promoting mutual respect and collaboration**



# Connecting Local to Global: Cultural Diplomacy Through Brooklyn's Treasures

New York City's commitment to fostering global connections is exemplified through innovative initiatives that bridge local cultural assets with international communities. A hallmark of this effort is the collaborative event hosted by IA, in partnership with the Brooklyn Museum and Brooklyn Botanic Garden, on April 21, 2025.

These tours and reception welcomed ambassadors, consuls general, heads of delegations, mission/consular staff, United Nations (UN) staff, and their spouses. By showcasing Brooklyn's rich cultural and natural heritage, this event strengthened ties between New York City's local institutions and the global diplomatic community, fostering cultural exchange and mutual understanding.

This section explores the impact of this initiative under three key themes: celebrating local culture, building diplomatic bridges, and creating lasting community connections.



**IA showcased Brooklyn's rich cultural and natural heritage to an audience of ambassadors, consuls general, heads of delegations, mission/consular staff, and UN staff.**



# Celebrating Local Culture

The tours of the Brooklyn Museum and Brooklyn Botanic Garden highlighted New York City's unparalleled cultural and natural offerings, presenting them as shared treasures for both local and global audiences. At the Brooklyn Museum, guests explored world-class collections, including contemporary works by local artists, which reflect the borough's diverse artistic legacy. The tour continued at the Brooklyn Botanic Garden, where diplomats strolled through blooming cherry blossoms, experiencing Brooklyn's natural beauty. The event, attended by more than 100 diplomatic representatives, showcased how local institutions embody New York's role as a global cultural hub, inviting international guests to engage with the city's vibrant identity.



**More than 100 diplomatic representatives toured the Brooklyn Botanic Garden.**



# Building Diplomatic Bridges

This initiative served as a powerful platform for cultural diplomacy, strengthening relationships between New York City and the international community. The presence of high-level city officials alongside diplomatic leaders underscored the event's significance. Organized in collaboration with the Brooklyn Museum and Brooklyn Botanic Garden, the event provided a relaxed yet meaningful setting for dialogue. The event's structure, with guided tours followed by a reception, facilitated informal exchanges that deepened ties. By bringing together a diverse mix of stakeholders, the event reinforced New York's position as a global city where diplomacy thrives through shared experiences.



### **NYC Junior Ambassadors (NYCJA): Creating Global Diplomats Locally**

NYC Junior Ambassadors, created in 2015, provides a holistic experience of the UN and international affairs for 7th, 8th, and 9th graders and their educators. Through curated tours of the UN, visits to classrooms by senior UN diplomats, and focused in-class learning about global issues through the lens of the SDGs, students grow to understand the real connections between themselves, the UN, and their communities.

Students and educators also participate in community action and advocacy and use a stipend (\$500 per classroom) provided by the program to bolster their efforts. The participants also attend a culminating celebration designed to highlight their year-end projects and give diplomats and leaders in local government an opportunity to recognize the achievements of the classrooms and build connections.

Throughout the program, students are engaged in thinking critically about the UN and its efforts to address global challenges. Through NYCJA, global diplomats are created locally. More than 5,900 students and educators have taken part in this one-of-a-kind initiative since its inception.

The program is possible through the fiscal sponsorship of the MSC Foundation. Program partners include the NYC Public Schools (NYCPS), the Department of Youth and Community Development, the UN, and the UN Foundation.



# 2024-2025 NYC Junior Ambassadors

NYCJA is proudly celebrating its 10th anniversary in 2025, marking a full decade of empowering New York City youth and educators to engage with the UN and the SDGs. This year's program exemplified SDG 17: Partnerships for the Goals through a collaboration between IA, NYCPS, the UN, UNICEF, Take Action Global, permanent missions to the United Nations, and New York City agencies.



## Classroom Participation

In 2025, 18 classrooms from across the five boroughs of New York City participated in NYCJA. These classrooms represented a wide range of New York City schools and showcased the city's diversity.

### PARTICIPATING CLASSROOMS:

- Community High School (Brooklyn)
- I.S. 171 The Magnet School of Leadership & Innovation (Brooklyn)
- Marsh Avenue Expeditionary Learning School (Staten Island)
- Ditmas Intermediate School 062 (Brooklyn)
- Renaissance School of the Arts (Manhattan)
- Long Island City High School (Queens)
- Harlem Village Academy (Manhattan) Al-Ihsan Academy (Queens)
- Progress High School (Brooklyn)
- PS/IS 78Q (Queens)
- Oliver Wendell Holmes Intermediate School (Queens)
- Queens Collegiate (Queens)
- Bronx Lab/Aerospace High School (Bronx)
- Brooklyn Science and Engineering Academy (Brooklyn)
- East New York Middle School of Excellence (Brooklyn)
- PS/MS095 Sheila Mencher (Bronx)- 2 classes
- Icahn Charter School 4 (Bronx)

## United Nations Tours

All participating classrooms were invited to tour the headquarters of the UN in Manhattan. Students explored key areas of the UN Headquarters, including the General Assembly Hall and Security Council Chamber, and engaged in guided discussions about the UN's role in global cooperation. They were also offered briefings with UN experts on the SDGs.

For many students, this experience was their first exposure to international diplomacy, and the tours helped make the SDGs tangible and relevant to their lives and communities. The tour left a lasting impression as students expressed awe and curiosity as they walked through the same halls as world leaders, and many shared that seeing the UN in person made global issues feel more real and urgent. The visit sparked thoughtful questions and a deeper understanding of how their actions are connected to the world.



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**“Getting to tour the UN was one of the most exciting parts. Walking through the building where world leaders make decisions that affect not only countries, but the entire world, was something that many of us will never forget.”**

— Coleman Flowers, a 7th grade student at P.S./I.S. 78Q

## Diplomatic Classroom Visits

Diplomats from permanent missions and consulates across the globe visited classrooms to share insights about their countries and careers, connecting students to the global community and education about careers in diplomacy. Each visit included a presentation and Q&A with students, reinforcing the real-world importance of diplomacy, mutual understanding, and partnership.



## COUNTRIES REPRESENTED INCLUDED:

- **Luxembourg:** Permanent Representative Olivier Maes visited I.S. 171 The Magnet School of Leadership and Innovation
- **Switzerland:** Permanent Representative Pascale Baeriswyl visited PS/MS 95 The Sheila Mencher School
- **The Netherlands:** Permanent Representative Lise Gregoire-van Haaren visited Bronx Lab/Aerospace High School
- **Ethiopia:** Permanent Representative Tesfaye Yilma Sabo visited PS/IS 78Q
- **Fiji:** Deputy Permanent Representative Vueti Kosoniu May visited Renaissance School of the Arts
- **Barbados:** Deputy Consul General Lisa Jaggernauth visited Icahn Charter School 4
- **The Philippines:** Deputy Permanent Representative Leila C. Lora-Santos visited Al-Ihsan Academy
- **Cuba:** Deputy Permanent Representative Yuri Gala Lopez visited the Oliver Wendell Holmes Intermediate School
- **Austria:** Deputy Permanent Representative Stefa Pretterhoffer (students visited Mission of Austria)
- **Angola:** Deputy Permanent Representative Mateus Luemba visited Community High School
- **Malta:** Permanent Representative Vanessa Frazier visited Queens Collegiate
- **Qatar:** Permanent Representative Alya Ahmed Saif Al-Thani visited Harlem Village Academy
- **Ireland:** Permanent Representative Fergal Mythen visited Ditmas Intermediate School 062
- **Tuvalu:** Permanent Representative Dr. Tapugao Falefou visited Brooklyn Science and Engineering Academy



**The Permanent Representative of Malta to the United Nations, Vanessa Frazier visited Queens Collegiate**

### **Classroom Projects**

Throughout the school year, students explored global challenges such as climate change, inequality, public health, and access to education. They connected these themes to the SDGs and created final projects to take action on these goals both locally and globally.

Examples include:

- **Icahn Charter School 4 (SDG 14: Life Below Water):** Through a deep dive into sustainability, students explored the urgent threats facing marine ecosystems, from plastic pollution to overconsumption, and responded with powerful, hands-on solutions. In a bold act of advocacy and creativity, students designed a collection of sustainable fashion pieces using entirely upcycled and recycled materials. These wearable statements were crafted from reused yarn, collected plastic bottles, bottle caps, and other discarded items, transforming trash into tools for awareness. In addition to creating these impactful pieces, NYC Junior Ambassadors made it their mission to educate and inspire the wider school community. Through presentations, displays, and peer-to-peer engagement, they are raising awareness about sustainability, personal responsibility, and the urgent need to protect life below water.
- **I.S. 171 The Magnet School of Leadership and Innovation (SDGs 6, 13, 14):** In partnership with The Billion Oyster Project, students were able to learn about the positive environmental impacts that oysters have on the city's waterways, which includes their natural filtration system. After learning about the positive impacts



oysters have on the environment, students created their own oyster tanks to house, grow, and maintain oysters right in the classroom. Students were in charge of feeding the oysters every other day and ensuring they were actively cleaning the algae from the tank.

- **Community High School (SDG 4: Quality Education):** The SNACKS Toolkit, or Strategies for Nurturing Achievement, Confidence, Knowledge, and Skills, is a student-led initiative rooted in SDG 4 Quality Education. Designed by young changemakers, the SNACKS Toolkit addresses real challenges that students face in accessing equitable and engaging learning. From academic burnout to lack of motivation and limited personalized support, this toolkit offers practical, youth-driven strategies to make education more inclusive, empowering, and relevant.
- **Marsh Avenue Expeditionary Learning School (SDG 5: Gender Equality):** MAELS NYC Junior Ambassadors conducted a deep research study on the current achievements of the goals set in SDG 5 of multiple member countries. They researched countries such as Kenya, Lebanon, Jamaica, and Ireland. After completing their research, students realized that raising awareness was key to changing the conversation about gender inequality around the world. Their first idea was to create a children's book to educate the youth on the reality of gender issues around the world. However, they also found it important that adults and older students had access to the information as well. They decided to create both a website and a children's book raising awareness of gender inequality and the reality of the targets. They have worked diligently under a tight schedule to finish both projects and has shared the projects with multiple campuses in the Staten Island area.
- **Bronx Aerospace High School (SDG 3: Good Health and Well-Being):** Recognizing that many of their peers struggle with stress, anxiety, and limited access to quality care, the NYC Junior Ambassadors launched a project titled "Healing Starts Here: Youth Voices for Community Wellness." Through this initiative, they surveyed classmates, interviewed local advocates, and hosted a wellness day at their school featuring peer-led workshops on mindfulness, nutrition, and navigating mental health stigma. Their project highlighted the systemic barriers to care that disproportionately affect communities of color and offered actionable solutions for schools and youth organizations to better support holistic well-being. The NYC Junior Ambassadors hope to expand their work through social media advocacy and a proposed youth wellness council in their school community.
- **PS/MS 95 The Sheila Mencher School (SDG 2: Zero Hunger):** To improve food access, the NYC Junior Ambassadors organized canned food drives, hosted food pantries, and launched a community garden to provide healthy food options for the school community. A pamphlet was also created with information about SDG 2: Zero Hunger. It includes data, resources, and suggestions



on what and where to eat, the best times to eat, why healthy eating is important, and how to prepare nutritious meals. Using a hydroponic tower garden, they planted and harvested a variety of vegetables and herbs. The garden has successfully sprouted green vegetables. Additionally, a windowsill garden was started that has produced small crops of fruits and vegetables. These will be transplanted into raised bed planters an outdoor patio.

- **Brooklyn Science and Engineering Academy (SDG 6: Clean Water and Sanitation):** NYC Junior Ambassadors took a solutions-based approach to SDG 6 by creating a water filtration system to demonstrate how waste and contamination can be removed from water systems in order to provide clean water to households and communities. They have also designed and created a 3D water filtration model to show how innovation and technology can help develop reliable and sustainable solutions for clean water. Additionally, BSEA NYC Junior Ambassadors documented their design processes, research, and advocacy through social media-style videos to help educate, motivate, and inspire others to understand the issues surrounding SDG 6.

### **Student and Educator Voices**

At the culminating NYCJA event at the Queens Museum, students and educators shared powerful reflections.

**“As we celebrate all of our work here today, I realized that this is the end of the program for us. However, it’s not the end of our commitment to making the environment – and the world – a better place. Now more than ever, we need people who do just that, and after today, I’m confident we’re becoming them.”**

**— Coleman Flowers, a 7th grade student at P.S./I.S. 78Q**

**“Our students began to see themselves as global citizens... They began connecting local concerns to global goals. They realized that their voices could stretch far beyond the classroom. NYC Junior Ambassadors give students more than information. It gives them purpose. It gives them access. And most of all, it shows them that they belong in every space where change is happening.”**

**— Keisha Allsop, Educator**



**“This year, I began working on Zuri’s Journal, a children’s book based on the Sustainable Development Goals. I wanted to create something that could introduce these ideas earlier, something that helps younger students see that they are not too small to care and not too young to lead. Thank you for the vision, the trust, and the commitment to empowering young people with tools that last far beyond the classroom. Because small hands can really change the world.”**

— Shaheed Abdul-Hakim, Educator

### **Global Vision | Urban Action (GVUA): Translating Global Goals Into Local Action**

Global Vision | Urban Action (GVUA) brings SDGs to life in New York City. By showcasing New York City’s programs and people, GVUA connects global frameworks to local realities, making sustainable development accessible and relevant.

**Site Visits:** IA brings experts into the city’s communities. IA has organized site visits for diplomats and UN staff to learn more about critical issues addressed in the SDGs such as wastewater management, food security, and recycling. By boarding a sludge vessel, visiting a recycling facility, or touring a wastewater treatment plant and speaking with city staff responsible for implementing New York City’s sustainable development strategy.

**UN Events:** As host to the United Nations headquarters, New York City is uniquely positioned to bring the voice of local experts to issues of global importance. IA has worked with UN partners and member states to organize events on topics of critical importance, including mental health, economic inequality, and creating the conditions for decent work for all.

**Panel Discussions:** In addition to site visits throughout New York City and events inside the UN, IA organizes expert panels focused on thematic issues addressed by the SDGs. Since 2015, the program has organized events exploring equity in and through tech and identifying the links between climate change and urban infrastructure.

### ***GVUA’s publications, including A City with Global Goals (2015–2016) and Leading Locally:***

**Locally:** The Origins and Impact of the Voluntary Local Review (2021), document New York’s leadership on the SDGs. The 2018 and 2019 Voluntary Local Reviews (VLRs) also report on the city’s progress to achieve the Global Goals using the framework of OneNYC and OneNYC 2050, inspiring other cities worldwide to report SDG progress.

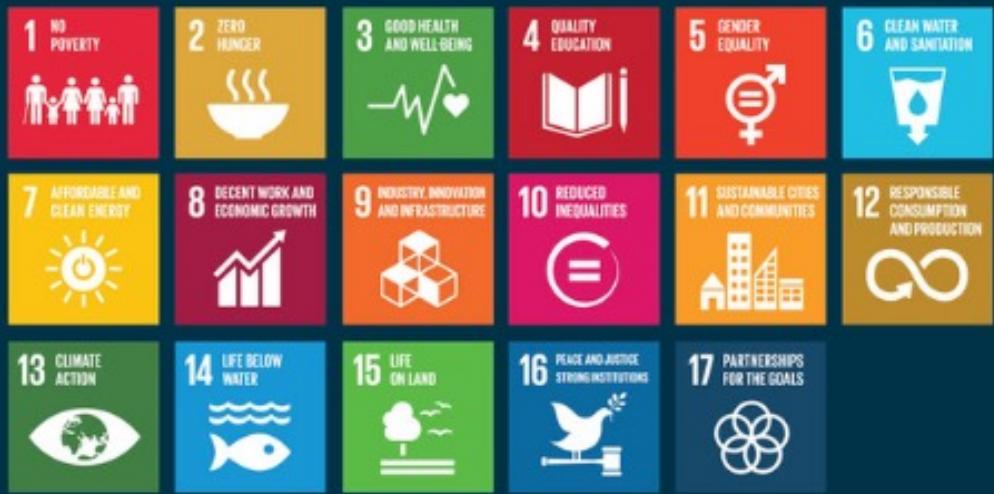


## GLOBAL VISION | URBAN ACTION

### A City with Global Goals

#### Part I





## GLOBAL VISION | URBAN ACTION

### A City with Global Goals

### Part II



GVUA connects the global framework of the SDGs to local realities in New York City



# Leading Locally

THE ORIGINS AND IMPACT OF  
THE VOLUNTARY LOCAL REVIEW



**NYC** Mayor's Office for  
International Affairs

**UN HABITAT**  
FOR A BETTER URBAN FUTURE

New York City launched the VLR Declaration in 2019, a groundbreaking initiative that commits subnational governments to reporting their progress toward the 2030 Agenda for Sustainable Development



# Voluntary Local Review Declaration: A Global Movement Born in New York City

In September 2019, during the UN General Assembly, New York City launched the VLR Declaration, a groundbreaking initiative that invited local and regional governments around the world to formally commit to reporting their progress toward the 2030 Agenda for Sustainable Development. This effort emerged from New York City's pioneering role as the first city to submit a VLR to the United Nations, and it formalized a collective pathway for local and regional governments to demonstrate transparency, leadership, and measurable action on the SDGs.



The VLR Declaration outlines three simple, nonbinding commitments that cities and regions can adopt using existing strategies, data, and local governance structures:

- Identify how existing strategies, programs, and data align with the SDGs;
- Convene at least one forum where stakeholders can share experiences and lessons learned using the SDG framework;
- Submit a VLR to the United Nations during the High-Level Political Forum.

Rooted in cooperation and designed to be accessible, the declaration lowers the barriers to entry for cities of all sizes and geographies, encouraging them to use the SDGs as a common language to define priorities, build partnerships, and track progress.

Since its launch, the VLR Declaration has grown into a global movement, with more than 330 cities and regions across six continents signing on. From major metropolises like São Paulo, Tokyo, Helsinki, and Los Angeles, to smaller municipalities like Betio (Kiribati), Bauang (Philippines), and Tandil (Argentina), the signatories reflect the diversity and energy of a truly worldwide coalition committed to localizing global goals.

Cities from Africa, Asia, Latin America, North America, Europe, and Oceania have affirmed their role as frontline implementers of the SDGs, with the shared understanding that sustainable development cannot be achieved without the active leadership of local governments. Cities like Brussels-Capital Region, Rabat, Geneva, Kuala Lumpur, Fukuoka, Accra, Stockholm, Melbourne, and New Taipei City have used the VLR platform to showcase how global ambitions can be translated into local realities.

#### **The VLR Declaration text clearly states this ambition:**

*"We pledge to use the framework of the SDGs to do our part to help end extreme poverty, fight inequality and injustice, and work to prevent the harmful effects of climate change by 2030... We appreciate the 2030 Agenda's recognition of the critical role of local authorities... and we look forward to local and regional governments joining the City of New York in submitting directly to the United Nations a Voluntary Local Review."*

Validated and supported by leading institutions including UN-Habitat, C40 Cities, the UN Foundation, Global Citizen, Project Everyone, the Hilton Foundation, and the Brookings Institution, the Voluntary Local Review Declaration is a cornerstone of global urban leadership.

Through this movement, New York City has redefined what it means to lead on the SDGs, not only by example, but by building a global coalition of peers who share a commitment to transparency, equity, and impact. The VLR Declaration is more than a call to action; it is a blueprint for how cities can shape the future of sustainable development from the ground up.



# Leading the way on Artificial Intelligence (AI) Policy at the Local Level

New York City is emerging as the applied AI capital of the world, driven by its unmatched mix of industry diversity, tech talent, and proactive governance. From finance to fashion, the city offers a dynamic environment where AI can be tested and deployed in real-world settings across nearly every sector.

New York City's groundbreaking AI Action Plan, created by the New York City Office of Technology and Innovation and the first of its kind by a municipal government, sets a national standard with its focus on transparency, bias mitigation, and responsible use of AI in public services. The city is also expanding access and opportunity through strategic partnerships that ensure AI innovation benefits all New Yorkers.

With leading companies expanding their AI presence and startups flourishing, New York is not only shaping the future of AI but also applying its usage in ways that are inclusive, impactful, and built for the complexities of modern urban life.



In July 2024 and April 2025, IA convened global leaders, diplomats, researchers, innovators, policymakers, and civil society for two groundbreaking events focused on advancing AI policy at the local level and the share of best practices globally: the 2024 Global Vision | Urban Action: Transforming Local and Regional Governments: Artificial Intelligence as a Tool for Good and the 2025 AI Global Leadership Summit at the New York Stock Exchange (NYSE).

These events, framed by the urgency to ensure AI is deployed responsibly and inclusively, explored how AI can serve public good by showcasing NYC's commitment to building ethical, equitable, and forward-thinking governance systems. Through high-level opening remarks and insightful panels, the events highlighted how cities are not just sites of AI experimentation, but essential actors in shaping its global trajectory and the sharing of best practices.

### **2024 Global Vision | Urban Action: Transforming Local and Regional Governments: Artificial Intelligence as a Tool for Good**

At this event, local successes and challenges were shared, emphasizing the need for cities to have a seat at the table as AI policy takes shape. Experts from the private sector and peer cities like Helsinki added depth to the dialogue, covering issues from public-private partnerships to citizen engagement and digital equity. The event made clear that now is the time for cities to lead and for cross-sector collaboration to define how AI can support inclusive urban futures.

### **2025 AI Global Leadership Summit**

At the Summit, New York City officials and global partners addressed the transformative potential and challenges of AI. Framed by the city's AI Action Plan and its growing role in responsible urban tech governance, the summit underscored the importance of local leadership in shaping global AI policy. The agenda featured four key panels exploring the integration of AI in public services, business innovation, legal frameworks, and ecosystem development. These discussions examined how AI can drive efficiency, economic growth, and civic engagement while addressing risks such as bias, workforce disruption, and lack of transparency. Throughout the day, speakers highlighted the importance of international coordination and inclusive policymaking, with insights from city officials, private sector pioneers, and legal experts. The summit concluded with a keynote address by Yann LeCun, Meta's Chief AI Scientist and a global leader in the field, who offered his perspective on the future of AI innovation and the role of cities in ensuring its ethical and equitable development.



## Delegation Visits: New York as a Global Learning Hub

IA coordinates high-level delegation visits with New York City agencies from cities, governments, and multilateral agencies, covering topics like sustainable transportation, disaster preparedness, public safety, gender equity, and digital inclusion. Delegations engage with New York City agencies, touring sites, and meet frontline staff. These visits spark collaborations, such as shared emergency management models, and provide New York City agencies with global exposure. The reciprocal nature of these exchanges ensures mutual learning which benefits New Yorkers through innovative practices. They allow for real time exploration of the SDGs and their impact on the work of our city and global counterparts.

## Sister Cities: Partnerships That Cross Oceans and Build Bridges

New York City's sister cities agreements foster cultural, economic, and social exchange, supporting. As of 2025, the City's sister cities are:



\* = new sister cities created under the Eric Adams Administration



## **Memoranda of Understanding (MOUs) and Agreements: Institutionalizing Shared Ambition**

MOUs and other agreements formalize New York City's commitment to global collaboration, ensuring sustained partnerships. Three key agreements were recently signed:

**Israel (May 2025):** New York City is home to the largest Jewish Community outside of Israel. Signed by Mayor Eric Adams and Israeli Minister of Economy and Industry of Nir Barkat, the Declaration of Intent established the NYC-Israel Economic Council, further strengthening the relationship between New York City and Israel. This non-binding agreement promotes collaboration in economic development, emergency management, education, and technology, focusing on AI, life sciences, and environmental innovation. It supports Israeli startups in New York City and strengthens ties with the Jewish community.

**Tokyo, Japan (January 2025):** This MOU builds on the 1960 sister city relationship, focusing on sustainable infrastructure and operations. It establishes working groups for:

- Construction Delivery: Sharing prefabrication and modular construction methods.
- Resilient Technology: Promoting sustainable materials like recycled construction materials.
- Infrastructure Maintenance: Using asset management technologies for underground systems.
- Urban Transportation: Advancing multimodal solutions, including e-bike infrastructure.
- Water Management: Sharing stormwater and wastewater treatment strategies.

Stemming from the Urban 20 Mayors Summit bilateral meeting between New York City and Tokyo, this MOU facilitates expert exchanges. As part of the work related to the MOU, engineers from Tokyo visited New York City's East Side Coastal Resiliency project. City personnel also learned about Tokyo's flood protection systems.

**New York City & UN Women (January 2025):** The 2025 MOU between UN Women and the City of New York exemplifies the city's global leadership in advancing gender equality (see SDG 5 in this VLR) through strategic, high-impact partnerships. Building on the City's Women Forward NYC commitments, this MOU establishes a powerful framework for cooperation focused on eliminating gender-based violence, promoting women's empowerment, and supporting intersectional equity across public spaces and policy. It formalizes the City's participation in UN Women's Safe Cities and Safe Public Spaces Global Initiative and strengthens its role in the Generation Equality campaign, the Beijing +30 commemoration, and the annual 16 Days of Activism Against Gender-Based Violence.

This partnership ensures the exchange of best practices, alignment with global standards, and the promotion of inclusive and sustainable policies that reflect the lived realities of New



Yorkers. Through this MOU, the city also commits to contributing to UN Women's efforts to advance the SDGs, particularly by applying an intersectional lens that centers racial justice, gender equity, and the UN principle to [Leave No One Behind](#). By encouraging other cities to join this global initiative and engaging in global advocacy forums, New York City reinforces its position as a global leader in subnational diplomacy and a champion for gender equity on the world stage.

### **Networks & Other Platforms: Scaling Local Impact**

New York City participates in national and international city networks, amplifying its priorities through shared best practices and advocacy. Below is a sample of national and international networks and platforms that New York City engages with:

**Brookings Institution's SDG Leadership Cities:** This network showcases and supports cities around the world that are pioneering innovative, data-driven approaches to implementing the Sustainable Development Goals at the local level.

**C40 Cities (C40):** This global community of nearly 100 mayors of major cities is committed to science-based, inclusive climate action, working collaboratively to halve emissions by 2030, limit warming to 1.5 °C, build resilient and equitable communities, and drive advocacy, innovation, and finance for sustainable urban transformation.

**Cities for Action:** This U.S.-based coalition of nearly 200 mayors and county executives advocate for pro-immigrant federal policies and implementing inclusive, locally driven programs to strengthen civic inclusion, public safety, and support for immigrant communities at the local level.

### **German Marshall Fund (GMF) Cities – City Directors of International Affairs (CDIA Network):**

Hosted by the German Marshall Fund through its GMF Cities platform, the CDIA Network is a peer-to-peer network uniting government professionals responsible for international engagement in midsize and large cities across Europe and North America. Its mission is to empower cities to navigate global challenges, like climate change, migration, and democratic resilience, by amplifying local perspectives in international dialogues and expanding cross-border collaboration.

**Cities for Digital Rights/Cities Coalition for Digital Rights:** Launched in November 2018 by New York City, Amsterdam, and Barcelona, this coalition brings together over 50 global cities in partnership with UN-Habitat, UCLG, Eurocities, and other organizations to develop policies and frameworks that protect residents' digital rights, such as privacy, access, inclusion, transparency, and non-discrimination, in urban digital systems.

**Global City Network for Sustainability (G-NETS):** G-NETS is a forum launched in 2022 by the Tokyo Metropolitan Government where mayors, senior officials, and city staff from leading cities worldwide collaborate to share technologies, data, and best practices for tackling shared urban challenges, focusing on inclusive societies, resilient infrastructure, and environmental sustainability.



**Strong Cities Network:** An independent, apolitical global coalition of more than 270 cities, the Strong Cities Network was launched at the UN General Assembly in 2015 by the Institute for Strategic Dialogue, the U.S. State Department, and the United Nations. The network united in a human-rights-based approach to prevent and respond to hate, extremism, and polarization through local, whole-of-society interventions.

**U.S. Conference of Mayors:** This is the official non-partisan national organization of mayors from cities with populations of 30,000 or more, serving as a unified platform to develop federal urban policy, strengthen city–federal relationships, share best practices, and advocate for city interests on issues ranging from infrastructure and climate action to social equity.

**United Nations Foundation’s American Leadership on the SDGs:** This group highlights and supports U.S.-based leaders, communities, and institutions that are advancing progress on the Sustainable Development Goals through innovative local action and global engagement.

**Urban 20 (U20):** U20 is a city diplomacy initiative that brings together mayors from major G20 cities, and a rotating group of affiliate and observer cities, to compile data-driven policy recommendations on urban, climate, and sustainable development issues and deliver them to G20 leaders to ensure cities’ perspectives shape global economic and political agendas.

### **Cross-Agency Partnerships: A Whole-City Commitment**

New York City’s commitment to SDG 17 is reflected not only in its international engagements but also in the powerful collaborations across agencies. The New York City government operates as a unified ecosystem, with agencies and mayoral units working hand-in-hand to advance equity, access, and resilience in ways that are globally aligned and locally impactful. From supporting persons with disabilities and older adults to addressing homelessness through cross-sector partnerships, New York City demonstrates how multisectoral collaboration can generate lasting solutions and scalable innovations. The examples below offer a snapshot of the City’s dynamic, whole-of-government approach to advancing sustainable development through strategic partnerships.

### **Mayor’s Office for People with Disabilities (MOPD) Convention on the Rights of Persons with Disabilities**

MOPD contributes to global knowledge-sharing through its active participation in the United Nations Conference of States Parties to the Convention on the Rights of Persons with Disabilities. In recent years, MOPD has hosted international delegations and shared strategies on digital and physical accessibility, inclusive employment, and disaster preparedness. These exchanges strengthen global cooperation on disability inclusion and affirm New York City’s role as a leader in implementing the CRPD and SDGs.



## **Office of Strategic Partnerships (OSP) at the Department of Social Services**

In 2024, OSP continued to drive impactful collaborations, securing funding, fostering community engagement, and enhancing support services for New Yorkers in need. Through innovative initiatives, strategic funding partnerships, and corporate and nonprofit collaborations, OSP expanded access to housing, education, and essential resources for individuals and families experiencing homelessness.

OSP's work is committed to increasing affordable housing opportunities, improving shelter conditions, and strengthening pathways to stability and success. With the support of philanthropic partners, corporate donors, and nonprofit organizations, OSP has leveraged funding, in-kind contributions, and capacity-building programs to make a lasting impact.

### **NYC Aging Public-Private Partnerships**

NYC Aging leads several collaboratives to advance an age-inclusive society, including the following initiatives.

**Age-friendly NYC Commission:** This is a public-private partnership formed in 2010, during the same year when the World Health Organization named New York City as the first Age-friendly City under its new certification process. The mission of the Age-friendly NYC Commission is to provide dynamic and innovative guidance to leverage public-private partnerships within multiple sectors, building on existing strengths, to advance an age-inclusive New York City that serves and engages New Yorkers of every age, while centering on older adults in every neighborhood and community, regardless of income.

**Cabinet for Older New Yorkers:** The Cabinet was launched in September 2022 as an inter-agency collaborative established to realize and institutionalize an age-inclusive New York City through structural, legislative and systemic solutions. The Cabinet is comprised of 30 City agencies covering health, housing, social services, public safety, transportation, and more. Through the Cabinet, member agencies collaborate to eliminate age-related barriers and inequities in services and develop cross-agency solutions to address challenges facing older New Yorkers.

**National Age-Inclusive Working Group:** The Working Group was established by NYC Aging in 2024 following the adoption of a resolution by the United States Conference of Mayors in 2023 to support and serve a nation of all ages. The Working Group is comprised of 21 cities across the United States with an older adult population of approximately 20 percent or more. The Age-Inclusive American Cities Guidebook was compiled by NYC Aging and issued by the Working Group. The guidebook provides proven strategies, best practices and actionable steps to help cities create inclusive, accessible communities where older adults can thrive, and the Working Group continues to convene to discuss ways to advance an age-inclusive nation.



## **Looking Ahead: The Future of Partnership is Local**

New York City is not only a global capital, but also a global leader. The city's commitment to SDG 17 is unwavering because of an understanding that the world's most urgent challenges cannot be solved by national governments alone. They must be solved in partnership with cities, mayors, agencies, communities, and local leaders working together, across borders and sectors, to drive real change.

From forging bold new sister city agreements and high-impact MOUs, to leading networks like the Urban 20 and C40, New York City has helped redefine what local-global leadership looks like. Through initiatives such as GUVA and NYC Junior Ambassadors, New York City has embedded diplomacy in the daily work of governance. This shows that inclusive, community-rooted partnerships are not just complementary to global policy, they are essential to achieving it.

As the 2030 Agenda enters its decisive years, New York City will continue to lead from the front and will deepen relationships with cities and partners around the world, scale what works, and elevate the voices of our communities on the global stage. And the city will do so with urgency, clarity, and hope because of a belief that the future of global development is bright when it is built from the ground up.

This is the power of New York City: where neighborhoods shape policy, where partnerships cross oceans, and where local action drives global transformation.



# Appendix: Sample Indicators





## GOAL 3: Good Health and Well-Being

### Sample Indicators

**Indicator Name:** **Pregnancy-associated mortality rate (per 100,000 live births)**  
**Pregnancy-associated mortality rate for Black women and birthing people (per 100,000 live births)**

**Definition:** The number of pregnancy-associated deaths citywide per 100,000 live births. There is a data lag time of 143 weeks due to Health Department protocol and CDC guidance on the case identification and review process timeline to accurately evaluate each death. Black mortality rates are calculated among Black women and birthing people per 100,000 live births.

**Indicator Name:** **Eligible women receiving a mammogram screening (%)**

**Definition:** The percentage of eligible women age 40 to 70, who have made a primary care or women's health visit at an HHC facility during the last two years, receiving a mammography screening.

**Indicator Name:** **Eligible patients receiving prenatal depression screenings (%)**

**Definition:** The percent of pregnant people who receive prenatal care at an H+H facility who are screened for depression in their first prenatal visit.

**Indicator Name:** **Eligible patients receiving postpartum depression screenings (%)**

**Definition:** The percent of pregnant people who have given birth at an H+H facility who are screened for depression at their postpartum visit (within 3 months of giving birth).

**Indicator Name:** **Infant mortality rate (per 1,000 live births)**

**Definition:** The number of deaths of infants under one year of age per 1,000 live births in New York City.

<b>Indicator Name:</b>	<b>Childhood blood lead levels – number of children younger than age 6 with blood lead levels of 5 micrograms per deciliter or greater Childhood blood lead levels – number of children younger than age 18 with blood lead levels of 5 micrograms per deciliter or greater</b>
<b>Definition:</b>	The number of children younger than age 6 or younger than age 18 tested in a calendar year with blood lead level of 5 mcg/dL or greater. The number includes children with confirmed (venous test) and non-confirmed (fingerstick/unknown) blood lead levels. The total reflects the number of unique children who were tested and found to have elevated blood lead levels during the year. Each child is counted only once per year, but the same child may be counted multiple times over time if he or she has been tested in multiple calendar years with a blood lead test at or above the reference level.
<b>Indicator Name:</b>	<b>Congenital syphilis cases</b>
<b>Definition:</b>	The number of congenital syphilis cases (disease acquired before or at birth) reported to the New York City Department of Health and Mental Hygiene.
<b>Indicator Name:</b>	<b>Infectious syphilis cases</b>
<b>Definition:</b>	The number of primary and secondary syphilis cases reported to the New York City Department of Health and Mental Hygiene.
<b>Indicator Name:</b>	<b>New HIV diagnoses</b>
<b>Definition:</b>	The number of new HIV diagnoses cases reported and confirmed by the New York City Department of Health and Mental Hygiene
<b>Indicator Name:</b>	<b>HIV patients retained in care (%)</b>
<b>Definition:</b>	The proportion of HIV positive patients that have a bi-annual HIV clinical visit during a 12-month review period.
<b>Indicator Name:</b>	<b>New tuberculosis cases</b>
<b>Definition:</b>	The number of new tuberculosis cases reported and confirmed by the New York City Department of Health and Mental Hygiene.
<b>Indicator Name:</b>	<b>COVID-19 hospitalizations rate (per 100,000 admissions)</b>
<b>Definition:</b>	The number of admissions per 100,000 to a New York City hospital from 14 days before to 3 days after COVID-19 diagnosis.

<b>Indicator Name:</b>	<b>Safer-sex product distribution (000)</b>
<b>Definition:</b>	The sum total of all safer-sex products (male condoms, internal condoms, lubricant) distributed by the New York City Department of Health and Mental Hygiene as tracked by the NYC Condom Availability Program's safer-sex ordering portal.
<b>Indicator Name:</b>	<b>HPV vaccine series completion (%)</b>
<b>Definition:</b>	The number of 13-year-olds who completed the HPV vaccination series by the 13th birthday divided by the total number of 13-year-old adolescents according to the 2022 Vintage population estimates. The HPV vaccine series can be completed with 2 or 3 doses depending on the age at initiation and the amount of time elapsed between the 1st and 2nd dose.
<b>Indicator Name:</b>	<b>Children in public schools who are in compliance with required immunizations (%)</b>
<b>Definition:</b>	The number of children in public schools who are in compliance with all immunizations required by State public health law, divided by the number of children in grades K-12 enrolled in New York City public schools.
<b>Indicator Name:</b>	<b>Children ages 19-35 months with up-to-date immunizations (%)</b>
<b>Definition:</b>	The number of children ages 19-35 months reported as receiving 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR, 3 or more doses of Hib, 3 or more doses of HepB, 1 or more doses of varicella vaccine, and 4 or more doses of pneumococcal vaccine divided by the total number of children ages 19-35 months according to the 2022 Vintage population estimates.
<b>Indicator Name:</b>	<b>Adults with obesity (%)</b>
<b>Definition:</b>	The percentage of adult New Yorkers who have a Body Mass Index (BMI) of 30 or greater and is calculated based on respondents' self-reported weight and height, as noted in the New York City Community Health Survey.

<b>Indicator Name:</b>	<b>Adults who consume one or more servings of sugar-sweetened beverages per day (%)</b>
<b>Definition:</b>	The percentage of adults who consume an average of one or more servings of sugar-sweetened beverages per day, as noted in the New York City Community Health Survey. "Sugar-sweetened beverages" are defined as sugar-sweetened sodas and other sugar-sweetened drinks, like iced tea.
<b>Indicator Name:</b>	<b>Adults, ages 45-75, screened for colorectal cancer (%)</b>
<b>Definition:</b>	The percentage of adults, ages 45-75, screened for colorectal cancer (colonoscopy in the past ten years or stool-based test in the last year).
<b>Indicator Name:</b>	<b>Seniors, age 65+, who reported receiving a flu shot in the last 12 months (%)</b>
<b>Definition:</b>	The percentage of seniors, age 65+, who reported being immunized against influenza in the last 12 months as noted in the New York City Community Health Survey. The 12-month period surveyed depends on the time period that the CHS is being conducted. Data usually reflect 2, and sometimes 3, influenza seasons.
<b>Indicator Name:</b>	<b>Asthma-related emergency department visits among children ages 5-17 (per 10,000 children) (CY) (preliminary)</b>
<b>Definition:</b>	The number of asthma-related emergency department visits among children ages 5-17 (per 10,000 children).
<b>Indicator Name:</b>	<b>Diabetes management among adult New Yorkers (%)</b>
<b>Definition:</b>	The proportion of New York City adults with likely diabetes (history of two or more A1C test values of 6.5% or greater as of 2020) who had a test result reported to the New York City A1C Registry in the year of interest whose latest test result is <8.0%. The denominator for this analysis is persons with likely diabetes (as described above) with a test result reported to the Registry (~620,000).
<b>Indicator Name:</b>	<b>Patients diagnosed with diabetes who have appropriately controlled blood sugar (%)</b>
<b>Definition:</b>	The percent of adult primary care patients aged 18-75 with diabetes whose most recent A1c during the past 12 months was below 8%. This is calculated by dividing the total number of patients aged 18-75 with diabetes by the total number of patients whose most recent A1c in the past 12 months was < 8%.

**Indicator Name:** **Adult heart failure hospitalizations rate (per 100,000 population) (CY)**

**Definition:** Hospitalizations with a principal diagnosis of heart failure per 100,000 population, ages 18 years and older.

**Numerator:** Discharges from an New York City hospital for patients ages 18 years and older with a principal ICD-10-CM diagnosis code for heart failure; excludes hospitalizations with cardiac procedure, obstetric hospitalizations, and transfers from other institutions.

**Denominator:** Population ages 18 years and older residing in New York City. Discharges in the numerator are assigned to the denominator based on the area of patient residence, not the location of the hospital where the discharge occurred.

**Indicator Name:** **Individuals in the assisted outpatient mental health treatment program**

**Definition:** The number of individuals in the Assisted Outpatient Treatment Program, a State-mandated program that provides appropriate support to individuals with mental illnesses who are a threat to themselves and others.

**Indicator Name:** **Health-led crisis response and community-based de-escalations**

**Definition:** The number of community-based de-escalations by Mobile Crisis Team, a team of professionals and paraprofessionals that provide crisis de-escalation, engagement, assessment, and referrals to appropriate services, as needed.

**Indicator Name:** **Mental health referral requests**

**Definition:** The number of people who have requested a referral to mental health services at the Department of Veteran Services (DVS).

**Indicator Name:** **Clients who received Geriatric Mental Health clinical services**

**Definition:** Unduplicated number of individuals who have received Geriatric Mental Health clinical services at Older Adult Centers.

**Indicator Name:** **Families living in shelter who received biopsychosocial screenings from mental health clinicians (%)**

**Definition:** Percentage of families, with over 30 days in shelter on the 1st of the month, screened for behavioral health (mental health and/or substance use) needs.

<b>Indicator Name:</b>	<b>Individuals in custody with a serious mental health diagnosis (% ADP)</b>
<b>Definition:</b>	The percent of the average daily population in DOC custody during the reporting period comprised of individuals in custody with a serious mental illness diagnosis.
<b>Indicator Name:</b>	<b>Units of supportive housing available to people with or at risk for developing serious mental health and substance use disorders (000)</b>
<b>Definition:</b>	The number of supportive housing beds, in thousands, in contracts overseen by the Bureau of Mental Health at New York City Department of Health and Mental Hygiene. Supportive housing units provide services that help people with mental illness or substance use or at risk of mental illness or substance use live in community-based settings as independently as possible.
<b>Indicator Name:</b>	<b>Deaths from unintentional drug overdose</b>
<b>Definition:</b>	The number of deaths from unintentional drug overdose. Deaths due to use of, or accidental poisoning by, psychoactive substances include deaths with an underlying or multiple cause code for the following listed on death certificates: X40, X41, X42, X43, F111, F141, F191, or F199. Homicides, suicides, and undetermined deaths were excluded.
<b>Indicator Name:</b>	<b>Buprenorphine patients</b>
<b>Definition:</b>	The total number of individuals who had a buprenorphine prescription, a medication used to treat opioid use disorder, filled at some point during the year.
<b>Indicator Name:</b>	<b>Average response time to life-threatening medical emergencies by ambulances (FDNY dispatch and travel time only) (minutes:seconds)</b>
<b>Definition:</b>	The average dispatch and travel time until the first ambulance unit arrives on the scene of a life-threatening medical emergency (incidents of cardiac arrest, choking, unconsciousness, difficulty breathing, and major burns and trauma) counting from the time FDNY's dispatcher receives the call or notification of request for assistance.

<b>Indicator Name:</b>	<b>Life-threatening medical emergency incidents</b>
<b>Definition:</b>	The number of highest-priority medical incidents (segment 1-3), such as incidents of cardiac arrest, choking, unconsciousness, difficulty breathing, and major burns and trauma receiving an FDNY response.
<b>Indicator Name:</b>	<b>Average ambulance in-service hours per day</b>
<b>Definition:</b>	Cumulative hours a unit is in-service over the period, divided by the number of days in the period. A unit is considered in-service when it is on assignment of available. This includes both voluntary and municipal ambulances and both Advanced Life Support (ALS) and Basic Life Support (BLS) ambulances.
<b>Indicator Name:</b>	<b>Adult New Yorkers without health insurance (%)</b>
<b>Definition:</b>	The age-adjusted percentage of adults that reported not having health insurance.
<b>Indicator Name:</b>	<b>Medicaid — Application timeliness rate (%)</b>
<b>Definition:</b>	Percent of Community and Hospital new applications processed by the Agency within required timeframes.
<b>Indicator Name:</b>	<b>Medicaid — Medicaid-only enrollees administered by HRA (000)</b>
<b>Definition:</b>	As of the end of the reporting period, the number of persons who are not recipients of cash assistance or SSI who receive Medicaid services administered by HRA. As of January 2014, most Medicaid-only eligible clients (Medicaid clients without cash assistance) began to be enrolled in the New York State administered Medicaid program through State Health Care Exchange. People can apply for Medicaid administered by HRA if he or she is over 65 years of age or older, need Medicaid because of a disability or blindness, get Medicare and are not a parent or caretaker of minor children or are a former foster care young adult under 26 years of age.

**Indicator Name:** **Medicaid — Enrollees administered by HRA (000)**

**Definition:** As of the end of the reporting period, the total number of persons enrolled in Medicaid administered by HRA who also receive cash assistance or SSI, and Medicaid without cash assistance (Medicaid-only) administered by HRA. A person can apply for Medicaid administered by HRA if he or she is over 65 years of age or older, need Medicaid because of a disability or blindness, get Medicare and are not a parent or caretaker of minor children or are a former foster case young adult under 26 years of age.

**Indicator Name:** **Uninsured patients served**

**Definition:** The percent of full self-paying patients who have a financial assistance case multiplied by the percent of patients with a financial assistance case who are enrolled in insurance or financial assistance. The metric is generated by dividing the number of full self-paying patients with a financial assistance case by the number of full self-paying patients and then multiplying that quotient by the number of patients with a completed financial assistance case enrolled in health insurance or financial assistance divided by the number of patients with a financial assistance case.

**Indicator Name:** **NYC Care enrollment**

**Definition:** The number of recipients enrolled in NYC Care. NYC Care is a health care access program that offers low-cost or no-cost health services to New Yorkers who are not eligible or cannot afford insurance.

**Indicator Name:** **MetroPlus membership**

**Definition:** The average number of recipients enrolled in any of HHC's MetroPlus health plans over the measurement period. MetroPlus aims to offer every New Yorker equitable access to quality health care.

<b>Indicator Name:</b>	<b>Uninsured patients enrolled in insurance or financial assistance (%)</b>
<b>Definition:</b>	The percent of full self-paying patients who have a financial assistance case multiplied by the percent of patients with a financial assistance case who are enrolled in insurance or financial assistance. The metric is generated by dividing the number of full self-paying patients with a financial assistance case by the number of full self-paying patients and then multiplying that quotient by the number of patients with a completed financial assistance case enrolled in health insurance or financial assistance divided by the number of patients with a financial assistance case.
<b>Indicator Name:</b>	<b>Total traffic fatalities</b>
<b>Definition:</b>	The total number of pedestrian, traditional bicyclist, electric bicyclist, and motor vehicle occupant deaths resulting from traffic crashes.
<b>Indicator Name:</b>	<b>Pedestrian fatalities</b>
<b>Definition:</b>	The number of pedestrian traffic fatalities that occurred as a result of traffic crashes during the reporting period.
<b>Indicator Name:</b>	<b>Traditional bicyclist fatalities</b>
<b>Definition:</b>	The number of traditional bicyclist operators killed as a result of traffic crashes during the reporting period.
<b>Indicator Name:</b>	<b>Motorized two-wheel vehicle fatalities</b>
<b>Definition:</b>	The number of operators of motorized two-wheel vehicles, also known as micromobility vehicles, killed as a result of traffic crashes in the reporting period. Vehicles include electric bicycles, stand-up scooters, mopeds, motorcycles, off-road vehicles, and other.
<b>Indicator Name:</b>	<b>Motor vehicle occupant fatalities</b>
<b>Definition:</b>	The number of occupants of cars killed as a result of traffic fatalities in the reporting period. Sub-category of 'motor vehicle occupants'.
<b>Indicator Name:</b>	<b>Total Vision Zero-related moving summonses issued</b>
<b>Definition:</b>	The number of Vision Zero-related moving summonses issued during the reporting period by TLC and NYPD.

**Indicator Name:** **Speed boards deployed**

**Definition:** The number of speed boards deployed during the reporting period. Speed boards display to drivers how fast they are driving.

**Indicator Name:** **Speed reducers installed**

**Definition:** The number of new speed reducers installed. Speed reducers (which include speed humps and speed cushions) are traffic calming devices designed to slow vehicle speeds to either 15 or 20 mph. Speed humps are located mostly on residential streets.

**Indicator Name:** **Leading pedestrian intervals installed**

**Definition:** The number of Leading Pedestrian Intervals (LPIs) installed. LPIs allow pedestrians a “head start” of several seconds on the walk signal before parallel vehicular traffic receives a green light, which enhances pedestrian visibility to turning drivers.



## GOAL 5: Gender Equality

### Sample Indicators

**Indicator Name:** **Female labor force participation (%)**

**Definition:** The percentage of the female civilian noninstitutional population 16 years and older that is working or actively looking for work, taken as a simple average of monthly data that has not been seasonally adjusted for the twelve months of the fiscal year.

**Indicator Name:** **Trainings completed by City employees/participants in managerial and professional development**

**Definition:** The total number of City employee/participant completions of the various trainings in the managerial and professional development portfolio during the reporting period, excluding compliance training.

**Indicator Name:** **New hires — Female (%)**

**New hires — Gender: Prefer not to say or unknown (%)**

**New hires — Other gender (%)**

**New hires — Male (%)**

**Definition:** The number of newly hired people broken down by those who identified themselves as female, who preferred not to share their gender or who did not respond to this item, who identified themselves as other gender (e.g., non-binary, other gender), and who identified themselves as male, divided by the sum of all new hires in the mayoral agencies during the reporting period, represented as a percentage. The mayoral agencies included are the Offices of the Mayor, ACS, BIC, BSA, CCHR, CCRB, COIB, DCP, DCAS, DCLA, DCWP, DDC, DEP, DFTA, DOB, DOC, DOF, DOHMH, DOI, DOP, DORIS, DOT, DPR, DSNY, DVS, DYCD, FDNY, FISA, HPD, HRA, LAW, LPC, MOCS, NYCEM, NYCOA, NYCTC, NYPD, OATA, OATH, OLR, OMB, OPA, OTI, SBS, and TLC. Does not include DOE or public authorities and corporations.

<b>Indicator Name:</b>	<b>Workforce1 systemwide hires and promotions</b>
<b>Definition:</b>	The number of jobseekers registered through the Workforce1 System who found employment or obtained promotions during the time period.
<b>Indicator Name:</b>	<b>M/WBEs awarded City contracts</b>
<b>Definition:</b>	A count of unique certified M/WBEs that have been awarded City contracts.
<b>Indicator Name:</b>	<b>Newly certified and recertified businesses in M/WBE Program</b>
<b>Definition:</b>	Number of businesses that have been newly certified or recertified by SBS to participate in the New York City Minority and Women-owned Business Enterprise (M/WBE) Program.
<b>Indicator Name:</b>	<b>M/WBEs certified</b>
<b>Definition:</b>	Total number of businesses certified with Minority and Women-owned Business Enterprise Program at the end of the given period.
<b>Indicator Name:</b>	<b>Safer-sex product distribution (000)</b>
<b>Definition:</b>	The sum total of all safer-sex products (male condoms, internal condoms, lubricant) distributed by the New York City Department of Health and Mental Hygiene as tracked by the NYC Condom Availability Program's safer-sex ordering portal.
<b>Indicator Name:</b>	<b>HIV/AIDS Services Administration (HASA) — Individuals receiving services</b>
<b>Definition:</b>	As of the end of the reporting period, the number of individual clients (individuals who are either HIV Symptomatic or with AIDS) served during the reporting month.
<b>Indicator Name:</b>	<b>Older Adult Center average daily participants</b>
<b>Definition:</b>	Average number of older New Yorkers who participate in services at Older Adult Centers and affiliate sites.
<b>Indicator Name:</b>	<b>Average number of children accessing child care through use of a child welfare voucher</b>
<b>Definition:</b>	Average number of children accessing child care through use of a child welfare voucher.



## GOAL 8: Decent Work and Economic Growth

### Sample Indicators

**Indicator Name:** **Labor force participation rate (%)**  
**BIPOC labor force participation (%)**  
**Black labor force participation (%)**  
**Latinx labor force participation (%)**  
**Female labor force participation (%)**  
**Male labor force participation (%)**

**Definition:** The percentage of the civilian noninstitutional population 16 years and older that is working or actively looking for work, taken as a simple average of monthly data that has not been seasonally adjusted for the twelve months of the fiscal year. Race/ethnicity and gender breakouts are calculated based on the corresponding demographic groups within the civilian noninstitutional population.

**Indicator Name:** **Unemployment rate (%)**  
**Black unemployment rate (%)**

**Definition:** The number of unemployed people as a percentage of the labor force, taken as a simple average of monthly data that has not been seasonally adjusted for the twelve months of the fiscal year. Black unemployment rate is calculated based the corresponding demographic group.

**Indicator Name:** **Total private sector employment**

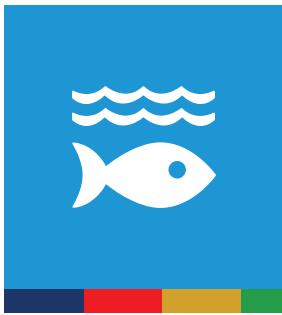
**Definition:** Total jobs employed by the private sector in New York City.

<b>Indicator Name:</b>	<b>Foot-traffic in business districts (% of Pre-COVID level)</b>
<b>Definition:</b>	The proportion of pre-pandemic foot traffic in key business districts: core employment hubs (Midtown, Midtown South, Lower Manhattan, Downtown Brooklyn, LIC Core Hunters Point), other downtowns (Flushing, Bronx Hub, 125 Street, Jamaica), and emerging employment hubs (Forest Hills, DUMBO, Fordham Plaza, Broadway Junction, St George Stapleton). Value is average of foot traffic levels at each.
<b>Indicator Name:</b>	<b>Manhattan office vacancy (%)</b>
<b>Definition:</b>	The percent of Manhattan Office space available for leasing.
<b>Indicator Name:</b>	<b>Retail vacancy rate (%)</b>
<b>Definition:</b>	The percentage of retail storefronts within New York City that are currently vacant (unoccupied and available for rent).
<b>Indicator Name:</b>	<b>Businesses served by industry-focused programmatic initiatives</b>
<b>Definition:</b>	The number of businesses actively enrolled in NYCEDC's programmatic initiatives, including NYCEDC's incubator network and centers for excellence, technology competitions, partnership funds and programmatic ventures throughout the five boroughs.
<b>Indicator Name:</b>	<b>Private sector jobs in innovation industries (%)</b>
<b>Definition:</b>	The share of jobs within sectors designated as "advanced," "innovative" and "creative" by the Brookings Institution, HR&A Advisors and NYCEDC as a percent of all private sector jobs.
<b>Indicator Name:</b>	<b>Workforce1 systemwide hires and promotions</b>
<b>Definition:</b>	The number of jobseekers registered through the Workforce1 System who found employment or obtained promotions during the time period.
<b>Indicator Name:</b>	<b>Jobseekers registered through the Workforce1 Career Center system for the first time</b>
<b>Definition:</b>	The number of unique first-time jobseekers registered in the Workforce1 Career Center system.
<b>Indicator Name:</b>	<b>Walk-in traffic at Workforce1 Centers</b>
<b>Definition:</b>	The number of new jobseekers visiting Workforce1 Career Centers, Sector Centers, Expansion Center or Employment Works during the reporting period.

<b>Indicator Name:</b>	<b>Customers enrolled in (workforce1 center) training</b>
<b>Definition:</b>	The number of customers registered with the Workforce1 System who enrolled in an associated training program, such as Customized Training, On-The-Job Training (OJT), Individual Training Grants (ITGs) and occupational training cohorts.
<b>Indicator Name:</b>	<b>Customers served (workforce1)</b>
<b>Definition:</b>	The number of unduplicated customers who received value-added services through the Workforce1 System — not including activities such as registration or brief orientations — that contribute to clients attaining positive employment or educational outcomes.
<b>Indicator Name:</b>	<b>Participants in Summer Youth Employment Program</b>
<b>Definition:</b>	Number of participants enrolled in summer youth employment programs during the current or latest summer's SYEP.
<b>Indicator Name:</b>	<b>Complaints entering mediation (DCWP)</b>
<b>Definition:</b>	The number of complaints referred to mediation. Before a complaint can enter mediation, the complainant must request the complaint be mediated and submit documentation substantiating their claim, and DCWP must determine that it has oversight authority over the nature of the complaint.
<b>Indicator Name:</b>	<b>Mediations completed within 28 days (%)</b>
<b>Definition:</b>	The percent of mediations closed within 28 days of being referred to mediation. This is calculated by dividing the total number of mediations completed during the reporting period within 28 days of starting mediation by the total number of mediations completed during the reporting period.
<b>Indicator Name:</b>	<b>Businesses engagement and outreach events</b>
<b>Definition:</b>	The number of business education days and virtual and in-person outreach events held.
<b>Indicator Name:</b>	<b>Businesses participating in engagement and outreach events</b>
<b>Definition:</b>	The number of businesses attending business education days and participating in and outreach events

<b>Indicator Name:</b>	<b>Businesses education inspections</b>
<b>Definition:</b>	The number of businesses receiving a Business Education inspection during the reporting period. Under the Visiting Inspector Program (VIP), brick-and-mortar businesses applying a DCWP license are offered the opportunity to schedule a free, and violation-free, educational inspection so they can better understand the laws and regulations that apply to their business, where they are not in compliance, and how to make corrections so they can avoid violations and fines during future inspections.
<b>Indicator Name:</b>	<b>Clients served</b>
<b>Definition:</b>	The number of clients receiving financial counseling through the Office of Financial Empowerment financial counseling programs. The FYTD value will be the number of unique client ID's for the Fiscal Year, not the sum of each individual month.
<b>Indicator Name:</b>	<b>Complaints received – worker protection law</b>
<b>Definition:</b>	The number of complaints filed with DCWP alleging violations of worker protection laws. Typical complaints are about failure to honor an employee's schedule or pay required pay-differentials, and refusing to allow use of paid family and sick leave to qualified employees as required under the laws.
<b>Indicator Name:</b>	<b>Investigations opened – working protection law</b>
<b>Definition:</b>	The number of investigations into compliance with New York City worker protection laws opened by DCWP's Office of Labor Policy and Standards (OLPS).
<b>Indicator Name:</b>	<b>Workers entitled to restitution</b>
<b>Definition:</b>	The number of workers entitled to restitution because of a settlement agreement or a trial resulting from a DCWP investigation into compliance with New York City worker protection laws.
<b>Indicator Name:</b>	<b>Civil penalties collected (\$)</b>
<b>Definition:</b>	The total amount of civil penalties collected for violations of New York City's worker protection laws.
<b>Indicator Name:</b>	<b>Staten Island Ferry ridership (000)</b>
<b>Definition:</b>	The number of passengers traveling on the Staten Island Ferry.

<b>Indicator Name:</b>	<b>Private Ferry Ridership</b>
<b>Definition:</b>	The total ridership of commuters traveling on private ferries as reported to DOT by the individual companies: Hornblower (operator of NYC Ferry), Billybey, New York Waterway, New York Water Taxi, Seastreak and Liberty Landing.
<b>Indicator Name:</b>	<b>Total NYC Ferry Ridership</b>
<b>Definition:</b>	The cumulative ridership of passengers traveling on the NYC Ferry as reported to NYCEDC by Hornblower, Inc.
<b>Indicator Name:</b>	<b>Average monthly bus ridership (000,000)</b>
<b>Definition:</b>	Average monthly subway ridership.
<b>Indicator Name:</b>	<b>Average monthly subway ridership (000,000)</b>
<b>Definition:</b>	Average monthly subway ridership.
<b>Indicator Name:</b>	<b>Total affordable housing starts (units)</b>
<b>Definition:</b>	The total number of housing units (starts) created or preserved and counted by HPD. Units are created or preserved through financed new construction or rehabilitation, regulatory agreements creating or extending affordability, and homebuyer and homeownership assistance. HPD counts units produced by Housing Preservation and Development, Housing Development Corporation, New York City Economic Development Corporation, New York City Housing Authority, Department of Homeless Services, City Planning and New York State Homes and Community Renewal.
<b>Indicator Name:</b>	<b>Total affordable housing completions (units)</b>
<b>Definition:</b>	The total number of new construction and preservation HPD housing units where construction was completed. In the case of programs with no construction or permanent financing only, start and completion are reported simultaneously. Completions are counted following receipt of a Certificate of Occupancy; Temporary Certificate of Occupancy; Program Status Report; Certificate of Substantial Completion; Letter of Completion; Directive 14; or, in tax exemption only cases, on the date the exemption is issued.



## GOAL 14: Life Below Water

### Sample Indicators

**Indicator Name:** **Water resource recovery facility (WRRF) effluent meeting State Pollutant Discharge Elimination Standards (%)**

**Definition:** There are certain types of equipment at wastewater treatment plants, such as main sewage pumps, that are critical to the treatment of sewage. For each of these equipment types, each of the City's 14 wastewater treatment plants establishes the minimum number which must be in service in order to treat the industry standard of two times dry weather flow. This indicator reports the total number of units by type that were below the required number at any time during the month as a percent of total critical equipment units (the aggregate of number and type).

**Indicator Name:** **Sewer backup resolution time**

**Definition:** The average amount of time that DEP takes to resolve a sewer backup from the time the complaint is received. Resolution of a complaint can occur by clearing of a blockage or an inspection that reveals no backup or that the problem is on private infrastructure.

**Indicator Name:** **Street segments with recurring confirmed sewer backups in the last 12 months**

**Definition:** The number of street segments in the city that had at least one confirmed sewer backup complaint during the last 12 months as a percent of the overall number of street segments in the city. A segment is the distance from one intersecting street to the next.

**Indicator Name:** **Catch basin complaints received**

**Definition:** The total number of clogged catch basin complaints received during the reporting period.

**Indicator Name:** **Catch basins cleaned**

**Definition:** The total number of catch basins cleaned; includes both programmed and complaint cleaning.

# Acknowledgements



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Department of Environmental Protection  
Department of Health and Mental Hygiene  
Department of Parks and Recreations  
Department of Sanitation  
Department of Youth & Community Development  
Economic Development Corporation  
Emergency Management Services  
Fire Department of New York City  
Health + Hospitals  
Human Resources Administration  
Mayor's Office of Climate and Environmental Justice  
Mayor's Office to End Domestic and Gender-Based Violence  
Mayor's Office of Equity and Racial Justice  
Mayor's Office for International Affairs  
Mayor's Office of Immigrant Affairs  
Mayor's Office of Operations  
Mayor's Office for People with Disabilities  
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"New" New York  
Small Business Services  
Vision Zero

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# NEW YORK CITY

## 2025 VOLUNTARY LOCAL REVIEW

GETTING THE GLOBAL GOALS DONE FOR NEW YORKERS

