A Commitment to Advancing Health Equity

Aletha Maybank, MD, MPH
Associate Commissioner
NYC Department of Health and Mental Hygiene
Director, Center for Health Equity

Mission of NYC Health Department:
Protect and promote the health of ALL New Yorkers

Health Outcomes Neighborhood Differences Exist

Diabetes Deaths (per 100,000)
AIDS Deaths (per 100,000)
Asthma Hospitalizations (per 100,000 Population)
Hospitalizations for Drug Use (per 100,000 Population)
Infant Deaths (per 1,000 Live Births)

Life Expectancy Neighborhood Differences Exist

Violence Neighborhood Differences Exist

Poverty and Race Neighborhood Differences Exist

Sources: Neighborhood poverty based on zip code defined as percent of residents with incomes below 100% of the Federal Poverty Level, per American Community Survey 2007-2011. Population (based on zip code) defined as percent of non-Hispanic black and Hispanic residents, per 2010 Census.
Root Causes of Inequities

- Policies that created all types of systems of unbalanced power and privilege
- Caused by historical practice of exclusion & discrimination across the life course
- Led to geographic concentration of poverty

Field of Health Equity

WEB DuBois

- The Philadelphia Negro (1899)
- The Health and Physique of the Negro American (1906)
  — Differences in the quality of health between blacks and whites in the early 1900’s

Field of Health Equity Continues to Evolve...

- 1985 Report of the Federal DHHS Secretary’s Task Force Black and Minority Health (Heckler-Malone)
  “Report identified that, nationally, 60,000 people die needlessly due to lack of access and quality health care.”

- 1986 Creation of the Federal Office of Minority Health

- 1998 US DHHS launches Healthy People 2010
  Identified as two overarching goals for the first decade of the 21st century: 1) increasing the quality and years of healthy life; and 2) Eliminating health disparities

- 2002 Institute of Medicine published report Unequal Treatment: Confronting Racial and Ethnic Disparities in Health
  Highlighted the health disparities between Blacks and Whites and the impact of racial attitudes on health disparities

Center for Health Equity

Est. NYC 2014

Mission: To strengthen and expand the DOHMH’s efforts to ensure all NYC residents have equitable access to reach optimal health
1) Capacity to become an anti-racist organization
2) Improving neighborhood health
3) Advancing our partnerships

DOHMH Structure

Inside – Outside Strategy

Inside – Define (adopt) Health Equity

- “Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.” – Centers for Disease Control and Prevention

- These disparities...“adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; or other characteristics historically linked to discrimination or exclusion.” – Nancy Krieger, PhD Harvard

**Inside – Outside Strategy**

**Inside-Naming Racism as a Cause**
- Change the narrative on causes of inequities & what determines good health
- Build internal capacity to your health department;
  - understanding of equity, including all-isms, other forms of oppression

**Outside-Want Change? Build Power**
- Inequity exists because groups who benefit from it hold power. *Power ↔ Power With*

Solution => Outside strategy
- Elevating voices in planning – Neighborhood and place-based focus and Interagency work
- Advancing our partnerships – Finding allies

**Improving Neighborhood Health**

**District Public Health Offices**
- Locations
  - South Bronx
  - East and Central Harlem
  - Central Brooklyn

- Target and work closely with NYC’s communities most in need
- Collaborate with local institutions

### Inside – Outside Strategy

**Outside-Finding and Elevating Demand**
- Work with Orgs - *Base-building* and run by community organizers
- Experience bringing and mobilizing people around a common goal
- Typically work to address the social determinants of health
- Pioneers – Minnesota, Boston, Alameda, BARHII

### Neighborhood Health Center

**Movement Revival**

*A Demonstration of the methods and value of coordination of all health and kindred activities in a defined local area under the leadership of the Department of Health*
Meaningful Community Engagement
Collective Impact

Backbone Support:
The frame
Continuous Communication: All parts knowing what
is being done at all times
Shared Measurement: Gears and crank
Mutually Reinforcing Activities: Pedaling

Common Agenda: Getting there together on not at all

Inter-agency Partnerships
Health in All Planning

Young Men’s Initiative
The Young Men’s Initiative was created to support increased opportunity, health and success for young men of color throughout New York City.

Reproductive Health
• Sex Education
• Teen Friendly Practices and Practitioners
• Teens in NYC DOHMH
• Increased Access to Family Planning Benefit Program

Fatherhood
• NYC Dads
• CUNY Fatherhood Academy

Anti-Violence
• NYC Cure Violence

Harlem Health Advocacy Partners—Community Health Workers

Strategy
• Implement a place-based Community Health Worker Model to improve the health of East Harlem public housing residents
  • 14 CHW’s trained and on the ground
    – Engaged with 555 community members
    – Conducted wellness activities with 105 NYCHA residents
    – Completed 75 intakes for Health Coaching

Bronx Teens Connection
Issue: High rate of unintended teen pregnancy and sexually transmitted infections among South Bronx teens

• Work with community partners to connect youth with evidence-based education + contraception

• Community-wide, multi-component
  1. Evidence-Based Programs
  2. Access to Quality Clinical Services
  3. Community Engagement & Mobilization
  4. Stakeholder Education

• Saturation model in Bronx→ Citywide

Bronx Teens Connection
Commitment to LGBTQ Youth

Bronx Teens Connection
NYC Dept. of Ed
ETR Associates (publisher)

LGBTQ Guide

ETR Associates (publisher)

Supporting LGBTQ Youth
Reducing the Risk
Lessening the Harm
Increasing the Hope
Reducing the Risk
Lessening the Harm
Increasing the Hope

Supporting LGBTQ Youth
Reducing the Risk
Lessening the Harm
Increasing the Hope
Reducing the Risk
Lessening the Harm
Increasing the Hope

Supporting LGBTQ Youth
Reducing the Risk
Lessening the Harm
Increasing the Hope
Reducing the Risk
Lessening the Harm
Increasing the Hope

Supporting LGBTQ Youth
Reducing the Risk
Lessening the Harm
Increasing the Hope
Reducing the Risk
Lessening the Harm
Increasing the Hope

Supporting LGBTQ Youth
Reducing the Risk
Lessening the Harm
Increasing the Hope
The Larger Context
Advancing Health Equity and Policy

• #BlackLivesMatter– A Challenge to the Medical and Public Health Communities – NYC Health Commissioner Dr. Mary Bassett, NEJM

• Changing perceptions, norms, and systems
  – Community members, especially those who have been historically marginalized, MUST have a seat at the decision making table – Value expertise at all levels

“Cities have the capability of providing something for everybody, only because, and only when, they are created by everybody.”

Jane Jacobs