Interventions for Healthy Eating and Active Urban Living: A Guide for Improving Community Health

Elisa Fisher, MPH, MSW | Kerry Griffin, MPA
Dear Partner,

I am excited to share with you the attached guide for improving community health, which outlines concrete approaches to promoting healthy eating and active living in New York City neighborhoods. This publication is a key contribution of DASH-NYC, a workgroup convened under the New York City Population Health Improvement Program (PHIP) and co-chaired by the New York City Department of Health and Mental Hygiene and The New York Academy of Medicine.

The New York City PHIP works to develop multi-stakeholder plans and recommendations that will support community-level health interventions and the transformation of our region’s health system. PHIP’s goals align with the Health Department’s efforts to make injustice visible and eliminate health disparities by creating healthier community environments.

At its core, the New York City PHIP is a democratic and collaborative approach to improving population health. Local residents and leaders have played critical roles in each of the PHIP’s major initiatives. Take Care New York 2020, our blueprint to create a healthier city, was a starting point for engaging residents across the five boroughs. In our effort to promote higher-performing primary care, we convened the health care community to help ensure that every primary care office has the right tools to keep patients healthy. Finally, this guide, developed with input from stakeholders in a variety of sectors, shares an array of promising and evidence-based strategies to support healthy living. The strategies in this guide can be employed by hospitals, community-based organizations and other groups.

Health equity cannot be achieved by a single individual, organization, or institution: we do our best work together. As you browse through this guide, please consider not only which interventions you and your organization can take on, but also potential partners with whom you could collaborate.

As always, thank you for your partnership as we work toward a healthier New York City.

Sincerely,

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INTRODUCTION

This guide includes proven and promising community level interventions to prevent disease and improve the health of the population by:

• increasing access to healthy, affordable food,
• decreasing access to unhealthy foods and beverages, and
• improving opportunities for physical activity and exercise.

This guide is meant for community organizations and hospitals looking to implement, increase or improve their investments in population health, particularly for low-income and historically disadvantaged urban communities. It is informed by a review of the literature and the input of more than 20 community organizations and non-profit institutions operating in New York City (NYC) and participating in the Designing a Strong and Healthy New York City (DASH-NYC) Workgroup. This guide is not intended to be a comprehensive list of the many promising programs in NYC, but rather is a curated sample of innovative activities that are working towards creating a healthier city.

Forthcoming products in this series include a practical “how-to” implementation manual, case studies highlighting successful programs and cross-sector partnerships that have advanced healthy eating and active living in NYC, and briefs focused on schools or other settings.
BACKGROUND

THE POPULATION HEALTH IMPROVEMENT PROGRAM (PHIP)
The New York City Department of Health and Mental Hygiene (DOHMH), in partnership with the Fund for Public Health in New York, The United Hospital Fund, and The New York Academy of Medicine (the Academy), launched the New York City Population Health Improvement Program (PHIP) in January, 2015. The NYC PHIP is one of 11 such programs around the state, with funding from the New York State Department of Health, to support population health activities at the regional and local level, particularly those related to New York State’s Prevention Agenda and NYC’s Take Care New York initiative.

DESIGNING A STRONG AND HEALTHY NYC (DASH–NYC) WORKGROUP
As part of the PHIP, DOHMH and the Academy launched the Designing a Strong and Healthy New York City (DASH–NYC) Workgroup to improve health and promote health equity for all New Yorkers by identifying and disseminating best practices in community-wide interventions for chronic disease prevention through a multi-sectoral approach. This Workgroup, comprised of experts in such sectors as urban planning, economic development, environment, transportation and community services, focuses on important drivers of health such as healthy eating and active living, and shares its findings publicly, such as through this shareable guide.

DASH–NYC is modeled after a successful, statewide effort of the same name, Designing a Strong and Healthy New York (DASH–NY) Coalition, a multi-sectoral group founded and co-chaired by the Academy with support from the New York State Department of Health. The DASH–NY multi-sectoral approach gathered actors from public health, private industry, including food retail and agriculture, and other public agencies, such as transportation, to design and implement policies and programs conducive to active living and healthy eating in New York State. The success of that group built the foundations for the Academy to replicate it at the city level, again with support from the state via the Population Health Improvement Program (PHIP) grant process. DASH–NYC focuses on the broader determinants of health through policy, programs and education that aim to have a wide-spread impact on health in NYC.1

1Multi-sectoral refers to the various fields whose work collectively has the ability to impact the broader determinants of health, including for example transportation, education, health care, community development, non-medical community services, and other sectors.
Why Focus On Chronic Disease?
In NYC, more than half of all premature deaths (before age 75) are due to heart disease, cancer, and diabetes, conditions which may be avoidable. Approximately one in nine (10.8%) or 676,000 adult New Yorkers report having diabetes, and approximately one in four (23.4%) is obese, and another third (32.7%) are overweight. NYC is not alone in this. Chronic diseases and their related health and financial costs present a serious burden at the local, state, and national level. Direct medical costs from obesity alone, one of the most important risk factors for chronic diseases, are estimated to be $150 billion annually in the U.S., excluding costs associated with lost productivity and reduced quality of life, and New York ranks second among states for medical expenditures attributable to obesity.

Absent concerted efforts at the policy, systems and environmental scale, these problems will likely continue or grow worse in the future. According to the latest Youth Risk Behavior Survey, more than one in four (28.4%) public high school students in NYC is overweight or obese. Children who are overweight or obese are more likely to become obese adults, and are at increased risk for multiple chronic diseases such as diabetes and hypertension.

Within New York City, wide disparities exist by race/ethnicity, ability status, and neighborhood in disease prevalence and health outcomes. For example, in 2014, non-Hispanic black New Yorkers and Hispanic New Yorkers were approximately twice as likely to have been diagnosed with diabetes as non-Hispanic white New Yorkers. Similarly, non-Hispanic black New Yorkers were nearly 50 percent more likely and Hispanic New Yorkers were nearly 40 percent more likely to report having received a diagnosis of high blood pressure. People living with disabilities are also disproportionately affected by chronic disease; they are 3 to 4 times more likely to be diagnosed with cardiovascular disease, and those who are cognitively impaired are up to 5 times more likely to be diagnosed with diabetes. Similarly, large variations in chronic disease prevalence also exist between neighborhoods; just 3 percent of residents of Stuyvesant Town/Turtle Bay and Greenwich Village/SoHo have diabetes, while 15 percent of residents in Brownsville and in Bedford-Stuyvesant have diabetes.

It is well understood that these and other health disparities are largely a consequence of the inequities that have long faced low-income communities and communities of color within New York City. Individuals have differential access to the drivers of health,
such as economic stability, education, clean environments, safe neighborhoods, and healthy foods depending on the communities in which they live, work, play and age, resulting in poorer overall health and increased rates of chronic disease.\textsuperscript{xii} In fact, experts suggest that at least 60 percent of health is determined by social, environmental and behavioral factors; the remaining is due to genetics (20%) and the health care system (20%).\textsuperscript{xiii} Thus, addressing the broader determinants of health while also encouraging individual behavior change is essential to combating chronic disease in NYC.

\textbf{Why Focus on Healthy Eating and Active Living?}

Healthy eating and active living are critical components of chronic disease prevention. Studies have consistently demonstrated that maintaining healthy eating and physical activity habits reduces risk for cardiovascular disease and related outcomes.\textsuperscript{xiv} For example, one longitudinal study of over 120,000 women found that those with very poor diets were twice as likely to experience coronary events as those who maintained a healthy diet. Similarly, the study reported that individuals who exercised less than one hour per week were 50 percent more likely than individuals who exercised more than 5 hours per week to experience a coronary event.\textsuperscript{xy} The World Health Organization estimates that unhealthy diet, physical inactivity, and tobacco use are responsible for 80 percent of all heart disease, stroke and type-2 diabetes and more than 40 percent of cancer cases.\textsuperscript{xvi}

There is significant room for improvement in the eating and physical activity habits of New Yorkers.\textsuperscript{\textsuperscript{xvii}} More than one in four adults in NYC report participating in no physical activity or exercise outside of their regular job in the past 30 days.\textsuperscript{xviii} And, while the United States Department of Agriculture (USDA) recommends that adults consume two and one-half cups of vegetables and two cups of fruit every day,\textsuperscript{xxix} more than one in ten New Yorkers report eating no fruits or vegetables in the past day.\textsuperscript{\textsuperscript{\textsuperscript{xx}}} These disturbing patterns are also evident among teens. Nearly one in fifteen (7.5\%) NYC public high schools students reported eating no fruits or vegetables in the past week, and nearly eight out of ten (79.2\%) reported eating fewer than the recommended amount.\textsuperscript{\textsuperscript{\textsuperscript{\textsuperscript{xxi}}} Also, approximately eight out of ten students reported not being physically active for at least 60 minutes per day for the past seven days.\textsuperscript{\textsuperscript{\textsuperscript{\textsuperscript{xxii}}} Only about four out of ten high school students reported attending a physical education (PE) class daily during an average week of school.\textsuperscript{\textsuperscript{\textsuperscript{\textsuperscript{xxiii}}} Adolescent New Yorkers are also spending too much sedentary time in front of a computer or TV. About one in three students reported watching an excessive amount (3 or more hours per day) of TV on an average school day.\textsuperscript{\textsuperscript{\textsuperscript{\textsuperscript{xxiv}}}}}
Approximately four out of ten (41.7%) students reported playing video or computer games or using a computer for non–schoolwork for three or more hours per day on an average school day.xxv

Moreover, unequal access to healthy, affordable fresh foods and opportunities for physical activity contributes to the health disparities that persist in NYC. An estimated 3 million New Yorkers live in neighborhoods where few, if any, stores sell fresh produce,xxvi the vast majority of which are low income communities and communities of color.xxvii Similarly, access to recreational facilities is more than nine times greater in Manhattan, which has a poverty rate of 15.9 percent than in the Bronx, which has a poverty rate of 27.1 percent.xxviii In a recent series of focus groups and surveys of New Yorkers living in low–income neighborhoods, residents cited concerns regarding the safety, cleanliness and cost of recreational sites and programs as barriers to participating in physical activity.xxix Unsurprisingly, the communities that face these environmental barriers to healthy eating and active living tend to be the communities that have the highest rates of chronic disease.xxx

Although the challenges related to diet and exercise are numerous, robust evidence suggests that community–based prevention programs (i.e. those targeting diet, exercise and tobacco) can lead to significant increases in healthy food consumption and physical activity and decreases in health care costs related to chronic disease.xxxi Not only do these programs improve health outcomes, they provide a positive return on investment – an estimated return of more than $70 for every $10 spent per person within five years in New York State.xxxii

NYC has often been at the forefront of public health innovation; it is uniquely poised to leverage existing interventions and bring to scale proven and promising approaches for chronic disease prevention, to potentially turn the tide on the costly and critical burdens of chronic disease. In fact, many efforts are currently underway in the city to do just this, and some early success is already apparent. For example, consumption of sugary drinks, which is linked to increased risk of diabetes and obesity.xxxiii has declined among adolescents and adults who live in NYC. According to the latest Youth Risk Behavior Survey, the rate of public high school students who report drinking a can, bottle or glass of soda one or more times per day in the past seven days has decreased from 28.3 percent in 2005 to 15.7 percent in 2013.xxxiv This is most likely the result of vigorous, city–wide policies and efforts designed to discourage consumption of unhealthy beverages, including new rules for beverages available in schools and in city agencies.xxxv
POLICY LANDSCAPE IN NYC TO SUPPORT HEALTHY EATING AND ACTIVE LIVING

In addition to federal and state policies designed to increase access to healthy foods and open spaces, NYC has benefited from the progressive approach taken by current and former mayors and health commissioners, including a series of policies designed to improve the nutritional content of foods and beverages and access to public open spaces and active transportation. While this guide is intended for those taking action at a community level, we outline several important policies in place that provide the backdrop for the healthy eating, active living landscape in NYC. (See Appendix B.) Indeed, many of the current DASH–NYC workgroup members worked hard to shape and support the implementation of these policies.

These citywide efforts include Take Care New York 2020, the city’s prevention agenda, and OneNYC—the mayor’s vision, released in 2015, for a multisectoral approach to improve health and equity in the city—and efforts to improve pedestrian safety and support active transportation, such as Vision Zero, adopted in 2014, which aims to eliminate pedestrian fatalities in NYC, and other initiatives related to safe street redesign, bike lanes, pedestrian plazas, and Safe Routes to School. The city also aimed to increase opportunities for active transport through the establishment of CitiBike, a bike share program implemented in 2013, for which expansion efforts are ongoing.

In 2008, NYC was one of the first cities in the nation to require calorie information to be posted on menu boards and menus, and was the first to restrict use of trans fats in all food service establishments. In 2006, city policies requiring child care settings to adhere to nutrition standards, offer time for physical activity, and limit screen time for children under two were enacted. In 2015, Mayor DeBlasio signed legislation requiring the NYC Department of Education to begin reporting information related to the frequency and availability of physical education in schools.

In 2008, NYC established nutrition standards for all foods purchased and served by city agencies, including schools, and in 2013, the city enacted a law requiring residences to offer drinking water in common spaces. Regulations to promote shared use of school buildings for community activities after school hours were passed in 2010, and zoning resolutions established in 2015 promote mixed land use in specific NYC communities. Most recently, in 2015, the city’s board of health voted to require chain restaurants to display a sodium warning symbol next to menu items that contain more sodium.
than the recommended daily limit. Going forward, the NYC Department of Health and Mental Hygiene will continue its campaigns to limit consumption of harmful foods, such as sugar sweetened beverages. For more information on the policies above, see Appendix B.

In addition to these citywide policies, the mayor also launched a multi-agency obesity prevention taskforce in 2012 and a Center for Active Design in 2013. These bodies and several city agencies continue to offer and implement programs and activities to improve access to healthy food and beverages and physical activity, including the Department of Education, the Department of Parks and Recreation and the Department of Health and Mental Hygiene. Several of these programs and initiatives are described in this guide.

**METHODOLOGY**

This guide is the result of a multistep and iterative process that aimed to highlight both evidence-based and promising community level approaches to chronic disease prevention with the potential to be scaled or further disseminated in NYC. To complete the guide, researchers at the Academy conducted a thorough literature review, examining both peer reviewed literature and grey literature. Researchers then identified six reviews of evidence around community interventions on healthy eating and active living, published by leaders in the field of population health and chronic disease prevention, as principal resources that would inform this guide (Table 1). Using these resources, researchers compiled a list of community-level interventions and policies recommended by experts in the field. The purpose of the guide is to enable organizations and hospitals to have an impact at the community level; future products of the DASH-NYC Workgroup may focus on other settings, such as schools, early childhood care, or workplaces.

After compiling a list of recommended programmatic interventions, Academy researchers conducted a web-based search to identify examples of programs that are currently or have recently been implemented within NYC. If no examples within NYC were found, researchers considered programs implemented in other U.S. cities for inclusion based on their relevance to the NYC urban environment. The search was exploratory; a comprehensive review of all programming occurring throughout NYC was not feasible.
### TABLE 1. PRINCIPAL SOURCES OF RECOMMENDED INTERVENTIONS FROM PEER REVIEWED AND GREY LITERATURE

<table>
<thead>
<tr>
<th>AUTHOR</th>
<th>SOURCE</th>
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<tbody>
<tr>
<td>Robert Wood Johnson Foundation</td>
<td>County Health Rankings Policies and Programs</td>
</tr>
<tr>
<td>Centers for Disease Control and Prevention</td>
<td>Community Health Improvement Navigator</td>
</tr>
<tr>
<td>New York State Department of Health</td>
<td>Prevention Agenda</td>
</tr>
<tr>
<td>Designing a Strong and Healthy New York (DASH NY)</td>
<td>Obesity Policies Database</td>
</tr>
<tr>
<td>The New York Academy of Medicine and Trust for America’s Health</td>
<td>Compendium of Proven Community-Based Prevention Programs</td>
</tr>
<tr>
<td>YMCA of the USA</td>
<td>Making the Case to Stakeholders: Linking Policy and Environmental Strategies to Health Outcomes</td>
</tr>
</tbody>
</table>

The final list of programs included in this guide incorporates feedback from DASH–NYC members as well as the NYC PHIP Steering Committee. After the final list was developed, Academy researchers evaluated the available literature for each program. Because the strength of the evidence supporting each intervention varied, an evidence rating system, adapted from the University of Wisconsin’s Population Health Institute County Health Rankings Evidence Rating System, is employed to group interventions into three categories: Supportive Evidence, Emerging Evidence and Promising Approach. Table 2 provides more detail on the evidence requirements for each category.

**TABLE 2. EVIDENCE RATING SYSTEM**

<table>
<thead>
<tr>
<th>RATING</th>
<th>EVIDENCE CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S</strong> SUPPORTIVE EVIDENCE</td>
<td>- At least one systematic review article, or:</td>
</tr>
<tr>
<td></td>
<td>- At least two experimental studies, two quasi-experimental studies with matched concurrent comparisons, or three studies with unmatched comparisons or pre-post measures</td>
</tr>
<tr>
<td></td>
<td>Evidence in this category demonstrates the statistically significant positive impact of an intervention on healthy eating, active living and/or change in BMI.</td>
</tr>
<tr>
<td><strong>E</strong> EMERGING EVIDENCE</td>
<td>- Generally no more than one experimental or quasi-experimental study with a matched concurrent comparison, or</td>
</tr>
<tr>
<td></td>
<td>- Two or fewer studies with unmatched comparisons or pre-post measures</td>
</tr>
<tr>
<td></td>
<td>Evidence in this category demonstrates the statistically significant positive impact of an intervention on healthy eating, active living and/or change in BMI.</td>
</tr>
<tr>
<td><strong>P</strong> PROMISING APPROACH</td>
<td>- Approach recommended by experts in the field of population health and/or chronic disease prevention</td>
</tr>
<tr>
<td></td>
<td>- Limited or no evaluation studies published in peer reviewed literature</td>
</tr>
</tbody>
</table>
To assist readers in identifying types of interventions, Academy researchers labeled strategies according to their potential to impact various aspects of healthy living, such as improved access to nutritious foods or opportunities for physical activity. Labels were also applied to indicate other key elements that encourage healthy living, such as building multisector partnerships or improving affordability of opportunities for healthy living. These labels and icons are defined in Table 3.

**TABLE 3. HEALTHY LIVING STRATEGY LABELS**

<table>
<thead>
<tr>
<th>HEALTHY EATING</th>
</tr>
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<tbody>
<tr>
<td>![Apple] Increases access to and/or consumption of healthier snacks, beverages, and meals</td>
</tr>
<tr>
<td>![No Drinking] Limits access to and/or consumption of unhealthy foods and beverages</td>
</tr>
<tr>
<td>![Seed] Fosters production and/or consumption of locally-grown produce</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PHYSICAL ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Parks] Improves access to and/or quality of parks and open spaces</td>
</tr>
<tr>
<td>![Running] Increases and/or improves opportunities for exercise</td>
</tr>
<tr>
<td>![Bike] Increases and/or improves opportunities for active living, including active transportation and altering the built environment</td>
</tr>
<tr>
<td>![Alert] Increases public safety to encourage increased exercise and active living</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDITIONAL COMPONENTS THAT FOSTER HEALTHY LIVING</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Book] Provides information and/or education to support healthy living</td>
</tr>
<tr>
<td>![Dollar] Increases affordability of healthy living opportunities</td>
</tr>
<tr>
<td>![Handshake] Encourages or requires multisector partnerships</td>
</tr>
<tr>
<td>![Social Support] Builds social support for healthy living and/or community social cohesion</td>
</tr>
</tbody>
</table>
SELECT INTERVENTIONS

OVERARCHING APPROACHES

Interventions that target the general public, rather than a particular community, are considered overarching approaches to improving health. These approaches not only target a wider audience, but also can be adapted to impact a wide range of health conditions or behaviors, including but not limited to healthy eating and active living. They often are implemented by health departments or policy makers, but can be adapted to inform the work of organizations operating at the community level.

Implement Public Media Campaigns

Some evidence suggests that mass media campaigns can be an effective tool for increasing awareness of and promoting lifestyle behaviors that contribute to health and reduce risk for chronic disease, such as healthy eating and physical activity.xxxvi

Local example: Portions Have Grown ad campaign
New York City Department of Health and Mental Hygiene | Link to website

In 2012, the New York City Department of Health and Mental Hygiene launched an ad campaign that aimed to increase awareness of food and beverage portion sizes and how they have increased over time. Posters focused on how portions of unhealthy foods and sugar-sweetened beverages have increased over time were posted in public places in NYC, such as subways and buses. The campaign referenced calorie increases based on the growth of portion sizes and used the motto “Cut your portions. Cut your risk” in hopes of providing New Yorkers with a strategy for preventing obesity and its consequences.

Utilize Health Impact Assessments

Health impact assessment (HIA), can be described as “[a] multidisciplinary process within which a range of evidence about the health effects of a proposal is considered in a structured framework ... based on a broad model of health which proposes that economic, political, social, psychological, and environmental factors determine population health.”xxxvii HIA has become an important tool for governments, lawmakers, and organizations that hope to increase collaboration across sectors to address the social and environmental determinants of health in order to achieve health equity. Evidence suggests that HIAs are an effective method of influencing policy and programmatic decisions across sectors, facilitating multi-sectoral collaboration, and raising awareness of health issues among decision makers.xxxviii
Interventions for Healthy Eating and Active Urban Living: A Guide for Improving Community Health

Key:
- Supporting Evidence
- Promising Approach
- Emerging Evidence

Adopt Health in All Policies Approach To Policy-Making And Program Development

The “Health in All Policies” (HiAP) approach to working in communities is a promising method of improving wellbeing and health for all community members. HiAP recognizes that numerous factors outside of the health and public health systems interact to create and influence health in communities. Thus, the goal of HiAP is to improve the health of all people by encouraging policymakers across sectors to consider health when making policy decisions.xxxix

Local example: Brownsville Residents and Health Impact Assessment

Made In Brownsville | Link to website

Made in Brownsville, an organization that “seeks to increase access to creative and innovative fields for at-risk youth in Brownsville, Brooklyn, through employment and mentorship around design projects that challenge the local narrative of violence and chronic disease,” performed a Health Impact Assessment to assess the potential health impacts of new programs being considered for implementation by the organization, and to engage stakeholders in building a healthier community. Through research and interviews with local residents and community leaders, the organization developed a set of programming, policy and regulatory recommendations for implementation within the Brownsville community.

Local example: Designing a Strong and Healthy New York (DASH-NY)

The New York Academy of Medicine | Link to website

DASH-NY is an example of a HiAP approach to policy making. As was noted above, DASH-NY is a multisectoral group composed of actors from public health, private industry, including food retail and agriculture, and other public agencies, such as transportation. The group is charged with designing, implementing and advocating for policies and programs conducive to active living and healthy eating in New York State.

Local example: #Not62 – The Campaign for a Healthier Bronx

Bronx Health REACH, The Bronx Borough President’s Office, the NYC Department of Health and Mental Hygiene, the Bronx District Public Health Office, Montefiore Medical Center and the CUNY Institute for Health Equity at Lehman College | Link to website

#Not62, The Campaign for a Healthier Bronx, is a collaborative effort led by Bronx Health REACH, The Bronx Borough President’s Office, the NYC Department of Health and Mental Hygiene, the Bronx District Public Health Office,
Develop Open-Source Databases of Healthy Living Resources

Increasing awareness of existing resources for healthy living—especially those that are free or low cost—may enable more people to take advantage of them. Interactive maps that detail parks, trails, community gardens, and other resources for healthy living can provide community residents with easy access to information that can support and encourage healthy eating and active living.

Local example: Queens on the Move

Make the Road NY  |  [Link to website](#)

As part of their work as the lead organization for a Partnership for a Healthier Queens, Make the Road NY developed a directory of resources, facilities and programs that support healthy eating and active living in Queens. The guide contains information on 350 locations for physical activity and healthy living, as well as whether the program requires a fee. The interactive map contains information on the locations of parks, trails, pools, gardens, fitness centers, playgrounds and more.

Local example: Health Information Tool for Empowerment (HITE)

Greater New York Hospital Foundation  |  [Link to website](#)

HITE is a searchable, online database that contains information on community resources for health and wellness. The tool was designed for social workers, discharge planners, and other providers with the goal of linking clients, patients and other consumers to a wide range of social services and health-oriented programs and resources. Resources range from exercise and fitness facilities to food assistance programs, such as food pantries, and public benefit programs.
MULTIFACETED INTERVENTIONS

Interventions that utilize a variety of methods to address the many risk factors for chronic disease have strong scientific support. In addition to the “local” examples below, several of the interventions described in the physical activity and nutrition sections that follow include components that address both.

Implement Multilevel Interventions

Interventions that encourage a shift towards healthier lifestyles by creating change at both the individual and community level have been proven effective in reducing weight gain in several studies, especially among children. Successful interventions encourage healthy eating and active living in a variety of settings and target both individual behavior change and barriers to healthy living, such as unsafe roads and unhealthy restaurants.

Local Example: Communities for Healthy Food NYC
Local Initiatives Support Corporation  |  Link to website
Communities for Healthy Food NYC, a Local Initiatives Support Corporation of NYC initiative, aims to expand access to affordable, healthy food in four economically challenged NYC communities by integrating healthy food access programming and interventions into various aspects of ongoing community development projects. Programming includes developing new and improving existing retail outlets for healthy food, outreach to community members, nutrition education and cooking classes, and establishing new food sector jobs.

Local Example: Via Verde
Center for Active Design, Co–developers Phipps Houses and Jonathan Rose Companies, in partnership with Dattner Architects and Grimshaw  
Link to website
Via Verde is a mixed–use, affordable housing development in the South Bronx that incorporates a variety of design and programming principles that support healthy living. Using active design principles, the development encourages physical activity and healthy eating by integrating open air courtyards into a series of stepped rooftop gardens that connect low–rise townhomes, a mid–rise building, and a high–rise tower. The project also improves access to health–oriented services by incorporating a health education and wellness center, a fitness center, and bicycle storage into the housing complex.
Implement Healthy Lifestyle Programs

Evidence suggests that integrated prevention programs that incorporate both healthy eating and active living components, especially those that include culturally-tailored components, lead to increased consumption of fruits and vegetables and weight loss among children, adolescents and adults. Several DASH-NYC member organizations offer healthy lifestyle programming, including the YMCA of Greater New York and the Children’s Aid Society. This strategy may also integrate other successful components discussed in the Community-Based Physical Activity Interventions and the Community-Based Nutrition Interventions section, and as such, several interventions in other sections may fit into this category. For example, "Fine, Fit and Fabulous," a program operated by Bronx Health REACH, is an educational intervention focused on healthy eating and active living that includes a support network component [see Community-Based Physical Activity Interventions].

Local example: Diabetes Prevention Program

YMCA of Greater New York  |  [Link to website]

The Diabetes Prevention Program, which is offered at YMCAs across the country including in NYC, is an evidence-based program that has demonstrated success in preventing the development of diabetes in high risk individuals. The program provides individuals who are pre-diabetic with education about healthy eating, active living, and maintaining a healthy weight, and studies report that participating leads to weight loss and positive changes in eating and exercise habits in a majority of participants. Additionally, after the initial 16 education sessions, monthly meetings provide support for participants in maintaining their healthy habits.
Integrate Healthy Eating And Active Living Into Other Health Programming

Some organizations have begun incorporating information on healthy eating and active living into other types of new and existing programming, ranging from primary care to community development. Integrating discussions of healthy eating and active living into a wider range of programs has the potential to reach new audience members while also recognizing value in working across sectors and disciplines to prevent chronic disease.

Local example: Health Outreach to Teens (HOTT)
Callen-Lorde Community Health Center | Link to website
Callen-Lorde Community Health Center operates Health Outreach to Teens (HOTT), a program designed to meet the medical and mental health needs of lesbian, gay, bisexual, transgender, and questioning adolescents and young adults, as well as homeless youth, runaways, sex workers, squatters, and other street-oriented youth. Nutritional counseling is one of the many services incorporated into this comprehensive program that ensures that marginalized young adults have access to physical and mental health services ranging from general physicals to cross-gender hormone therapy to mental health counseling.

Local Example: Fit for Life
Urban Health Plan | Link to website
Urban Health Plan’s (UHP) Fit for Life program works with the families of young children with a pediatric medical provider at UHP to ensure that children reach and maintain a healthy weight by working with families to prevent risk factors for obesity and diabetes. Through Fit for Life, an interdisciplinary team, consisting of providers, medical assistants, nutritionists, behavioral specialists, nutrition health educators and a telephone support specialist, supports families in making healthy food choices for their children.
COMMUNITY-BASED PHYSICAL ACTIVITY INTERVENTIONS

Improve Built Environment to Support Physical Activity

New Opportunities for Walking and Biking

Altering the built environment to increase opportunities for walking and biking is an evidence-based method of increasing physical activity among residents. Several policies and ongoing programs in New York City and State support and encourage the development of improved opportunities for walking and biking. As of September 2015, over 1,000 miles of bike lanes have been created on the streets of NYC due to a bike lane expansion initiative at the New York City Department of Transportation. Additionally, the re-design and renovation of Governor’s Island included a 2.2 mile promenade offering car-free opportunities for walking and biking.

Local Example: The Haven Project

The New York Restoration Project and Montefiore Medical Center are working together to implement the Haven Project, a master plan to design, build and fund a network of open spaces along the waterfront in the South Bronx. The plan, which was developed with community input, aims to improve health and social outcomes of community residents by increasing physical activity opportunities and improving the neighborhood’s environmental conditions. Plans include establishing waterfront parks and paths, increasing connectivity and safety for pedestrians and cyclists, and linking community residents to Randall’s Island, which offers more than 250 acres of park space.
Access to Parks and Green Spaces

Proximity to parks and green space is associated with increased physical activity and lower rates of obesity. Furthermore, some evidence suggests that increasing access to parks and green space may lead to higher rates of participation in physical activity and improved physical fitness among community members. The New York City Department of Parks and Recreation is currently completing the Community Parks Initiative, a multi-faceted equity initiative that will invest $130 million in revitalizing small, public parks that are located in neighborhoods with higher-than-average concentrations of poverty.

Local Example: Active Design Workgroup
Staten Island Partnership for Community Wellness
[Link to website]

The Staten Island Partnership for Community Wellness has developed an active design workgroup, open to all interested in participating, that aims to improve opportunities for active living among residents in Staten Island. Past projects have included sponsoring a Play Street and improving cycling conditions for Staten Island Ferry users.

Local Example: Brooklyn Active Transportation Community Planning Initiative
Center for Active Design, New York City Department of Transportation, New York City Department of Health and Mental Hygiene, Brooklyn District Public Health Office, and Brownsville Partnership
[Link to website]

In Brownsville and East New York, Brooklyn, local advocacy efforts led to changes in the built environment that support active living, as well as the establishment of an ongoing advocacy group, the Brooklyn Active Transportation Community Planning Initiative, which aims to improve opportunities for physical activity in the communities. Since its creation in 2010, the group’s efforts have also led to the installation of public plazas, the preservation of historic buildings, and the greening of vacant lots.

Local Example: People Make Parks
Hester Street Collaborative, Partnerships for Parks
[Link to website]

People Make Parks (PMP), a project led by Hester Street Collaborative (HSC) and Partnerships for Parks (PFP), aims to support communities seeking to increase or improve access to quality green space and recreation sites by engaging community members in the design of new parks and redesign of existing parks. The project assists community members interested in improving neighborhood parks in systematically gathering input around park redesign from neighborhood residents and then working directly with the NYC Department of Parks and Recreation to incorporate resident feedback. Successful park advocacy projects that utilize tools available through PMP have been carried out in all five boroughs.
**Mixed Land Use Design For Community Development**

Incorporating a range of land uses into a development or community, also known as mixed use development, can facilitate active living among community residents. Evidence suggests that physical activity rates are significantly higher in neighborhoods with a better land use mix than in single-use developments. Increased prevalence of shops, transit stops, low-cost recreational facilities, sidewalks, and bicycle paths is positively associated with residents’ engagement in physical activity. New York City Zoning Resolutions encourage mixed use development, and several NYC communities have incorporated mixed use principles into their neighborhood renovation plans.

**Local Example: Special Downtown Jamaica District**

New York City Department of City Planning  | [Link to website](#)

Downtown Jamaica has recently undergone a redevelopment project, creating the Special Downtown Jamaica District. Building upon Jamaica’s existing strengths as a transportation hub, the Special Downtown Jamaica District expands housing and economic opportunities for residents. Zoning regulations support mixed use development of the area, which encourages both commercial and residential development in dense areas with access to public transportation.

**Opportunities For Active Commuting**

Programs and policies that encourage walking or biking to work or school have been found to increase the number of children and adults who actively commute. Studies indicate that active commuting increases physical activity and reduces cardiovascular risk.

**Local example: Bicycle Friendly America in NYC**

The League of American Bicycles  | [Link to website](#)

The League of American Bicycles’ Bicycle Friendly Business program recognizes employers that have made strides towards encouraging employees, customers, and the community to commute and travel using bicycles through a rating system that is publicly available. The organization also provides assistance and support to businesses looking to create an atmosphere that is welcoming to cyclists.

**Local Advocacy Example: Safe Routes to School**

New York City Department of Transportation, Transportation Alternatives (T.A.)  | [Link to website](#)  | [Link to website](#)

Originally developed and implemented in the Bronx, Safe Routes to School (SRTS) has been implemented across the nation in an effort to encourage children to walk
or bike to school. The program engages members of the school community, including parents, students, teachers and principals, in designing a SRTS plan to increase safety and promote active commuting among children. Plans may include working with traffic engineers to create physical improvements to local infrastructure; partnering with local law enforcement to ensure traffic laws are obeyed; providing education to children and parents around transportation options and safety skills; and encouraging active commuting through events and activities that engage school and community members. NYC Department of Transportation has begun implementing the model in areas near schools across NYC, prioritizing those with the highest accident rates while also improving crosswalks at all of NYC’s 1,471 elementary and middle schools. Studies of SRTS indicate that children in participating communities are significantly more likely to use active transportation for commuting to school than those in nonparticipating communities. Furthermore, a recent evaluation of SRTS in NYC indicates that injuries among school-aged children decrease by 44 percent during school commute hours, and that injuries among adults (over age 19) decrease by 14 percent.

**Local Example: Bike to School Program**

**New York City Department of Transportation (DOT) | [Link to website](#)**

The NYC Department of Transportation’s Bike to School program encourages students, families and educators to bike to school by providing education and in-class discussions of the benefits of cycling, providing helmet fittings and giveaways, installing bike racks, and offering other community and recreational events. The program is supported by community partners from each neighborhood, and programming may include bike fairs, bike repair workshops, afterschool cycling clubs, Learn to Ride workshops, and bike safety assemblies.

**Access to Public Transportation**

Evidence suggests that improving access to public transportation, both by increasing the number of transit stops and by lowering the cost of existing public transportation, increases physical activity by encouraging individuals to walk to and from transit stops for commuting purposes. Some studies have found that those who commute to work using public transportation have a lower risk of becoming obese. OneNYC, Mayor DeBlasio’s economic and sustainable development plan, includes initiatives to expand subway access to high density areas in Brooklyn and to improve and expand bus and ferry transit options throughout the city, with a focus on areas currently underserved by public transportation.
Local Example: Tax Free Transit Benefits

**Riders Alliance** | [Link to website](#)

Beginning in January 2016, companies with greater than 20 employees will be required to offer pre-tax transit benefits to all staff members, which will save the average New Yorker approximately $443 per year. The bill, passed in October 2014, was the result of the advocacy efforts of Riders Alliance, a grassroots nonprofit organization focused on improving access to public transportation. Other recent advocacy victories have focused on improving select bus service throughout NYC and securing funding for the implementation of bus countdown clocks in all five boroughs.

**Open Streets**

Open streets initiatives aim to promote physical activity and community social cohesion by closing streets to motorized traffic and opening them for exercise, play, and community gathering. Emerging evidence suggests that opening streets may be an effective method of increasing physical activity. Current open streets initiatives in New York City include “Pedestrian Plazas,” designed by the New York City Department of Transportation, “Play Streets,” which can be sponsored by a school or community group through an application to the City’s Play Streets Coordinator, and Summer Streets, an initiative that closes city streets to motorized vehicles during some summer weekends to promote physical activity and active transportation.

**Local Example: Summer Streets**

**New York City Department of Transportation** | [Link to website](#)

Summer Streets, sponsored by the New York City Department of Transportation, is an annual initiative that closes nearly seven miles of NYC streets to motorized traffic three Saturdays in August, thereby opening them for people to gather and encouraging people to walk, run, bike, and play. Free activities, designed for individuals of all ages and abilities, are offered to the public. Examples of activities include soccer, a waterslide, and fitness classes (e.g., yoga, aerobics, and jazz).

**Local Example: 78th Street Play Street**

**Jackson Heights Green Alliance** | [Link to website](#)

The Jackson Heights Green Alliance is a volunteer-run community organization that advocates for increased green space in the Jackson Heights Neighborhood. In partnership with the Jackson Heights Beautification Group, the Jackson Heights Green Alliance sponsors a car-free play street that aims to create an open public space while encouraging community residents to socialize, attend classes and events.
Increase Access to and Affordability of Opportunities for Exercise

**Fitness Programs in Community Settings**
Research indicates that increasing access to fitness classes, such as yoga, Tai Chi and Zumba, in community settings is positively associated with increased rates of physical activity. Similarly, offering extracurricular recreation programs to children and adolescents is associated with increased physical activity. Making such programs publically accessible is associated with lower risk for overweight and obesity, especially among children and adolescents in low income communities.\textsuperscript{lviii}

**Local Example: Mobile Recreation Vans**
**New York City Department of Parks & Recreation**  |  [Link to website]

The Mobile Recreation Program, offered through the NYC Department of Parks and Recreation, provides recreation activities at a variety of locations. The program sends teams of trained staff throughout the city to lead free activities, both structured and unstructured, that encourage physical fitness. Activities are geared towards New Yorkers ranging in age and are offered between the months of May and October.

**Local Example: SilverSneakers® at the YMCA**
**SilverSneakers Fitness®**  |  [Link to website]

The SilverSneakers Fitness® program is a national initiative to engage older adults in exercise activities. SilverSneakers Fitness® programming is offered through partnerships with health plans, community organizations, and local fitness centers, enabling seniors to access free physical fitness classes and support throughout the country. The YMCA of Greater New York is a local organization that offers cardio, strength and yoga classes to seniors who are SilverSneakers® members.
Access to and Quality of Affordable Recreational Facilities in Community Settings

Studies indicate that increasing the availability, affordability and quality of recreational facilities within communities positively impacts participation in physical activity, and some evidence suggests that accessibility is associated with lower rates of obesity.\textsuperscript{ix}

**Local example: YMCA of Greater New York Financial Assistance Scholarships**

**YMCA of Greater New York | Link to website**

The YMCA of Greater New York provides financial assistance through scholarships for individuals and families who want and need Y programs but cannot afford them. An application is available online and can be picked up at local YMCA branches.

**Local example: NYC Recreation Center Membership**

**New York City Parks Department | Link to website**

The NYC Parks and Recreation Department operates recreation centers in all five boroughs. Subsidized memberships are available for seniors and young adults, and memberships are free for youth.

**Joint Use and Shared Space Agreements**

Joint use agreements, which are “formal agreement[s] between two separate government entities—often a school and a city or county—setting forth the terms and conditions for shared use of public property or facilities” provide increased access to places for physical activity and lead to increased participation in physical activity, especially in low income communities.\textsuperscript{x}

New York City has three mechanisms through which communities can gain access to spaces on school grounds. The first, Schoolyard to Playgrounds, is a city–managed program that assumes responsibility for the extended use of the schoolyard beyond regular school hours.\textsuperscript{xi} This initiative is supporting the renovation of hundreds of schoolyards around the city and opening them to the public during non–school hours. A second mechanism, Extended Use Permits, enable organizations to apply for access to school facilities outside of regular school hours, with preference given to “community, youth, and adult group activities.”\textsuperscript{xii} A third, more limited opportunity is available through the “Take the Field” program, which enables community organizations to utilize available athletic fields free of charge.

**Local Example: Shape Up NYC**

**NYC Department of Parks and Recreation | Link to website**

Shape Up NYC provides free physical activity classes at locations in all five boroughs. The program, led by the NYC Department of Parks and Recreation, offers New Yorkers a variety of options including aerobics, yoga, Pilates and Zumba, all taught by expert fitness
Increasing Access and Affordability of Bicycle and Bicycle Share Programs

Not only is cycling a fun way to exercise, it is can also be a mode of transportation. Thus, increasing access to bicycles has the potential to improve physical fitness and reduce commuting costs for individuals with limited financial resources. Increased access to bikes can be accomplished both through programs that provide bikes at free or reduced costs and by improving access to bike share programs through subsidized memberships and an increased number of bike docking stations in low-income communities. Some evidence suggests that, when combined with financial assistance as well as outreach and community engagement efforts, expansion of bike share programs into low-income communities may support residents in regularly engaging in physical activity.\textsuperscript{lxiii}

Innovative Solution – Boston, MA: Subsidized Hubway Membership

**New Balance Hubway | [Link to website](#)**

The New Balance Hubway, a bike-sharing program in Boston, offers subsidized memberships to qualifying residents to ensure that the benefits of the bike-share program are accessible to all. In a joint effort with the Boston Public Health Commission, Boston residents who are low income, receive certain types of public assistance, or who live in low-income housing qualify for a $5 annual membership and free helmet. Early data analyses found that approximately 83 percent of subsidized memberships were purchased by individuals earning less than $35,000 per year, and that prior to the subsidy, 25 percent of low-income respondents reported exercising less than once per week. That number dropped to 14 percent after the subsidy.

Local Example: CitiBike

**CitiBike | [Link to website](#)**

CitiBike, NYC’s bike share program, offers New York City Housing Authority (NYCHA) residents as well as members of select New York City Community Development Credit Unions (CDCUs) memberships to CitiBike at a reduced rate.
Local Example: Earn–A–Bike
Recycle–A–Bicycle | Link to website
Recycle–A–Bicycle (RAB) offers students the opportunity to earn a bicycle through their school–based programs. Students learn basic bicycle mechanics through RAB’s bike curriculum and then can volunteer after school and earn hours in exchange for the parts necessary to build a bicycle, which they can then build for themselves, friends or family.

Improve Safety Around Opportunities for Physical Activity

Traffic Calming Measures to Improve Safety on Roadways
Research indicates that implementing traffic calming measures, such as speed bumps, traffic circles and crosswalks, and mandating lower speed limits significantly improves safety near roadways for pedestrians, cyclists and motorists, and increases participation in physical activity.\textsuperscript{14} The City of New York is currently implementing the Vision Zero Action Plan, a detailed roadmap that combines enforcement, roadway engineering, improved emergency response, and campaigns that discourage dangerous behavior on roadways in an effort to eliminate traffic–related fatalities. Several policies and programs that aim to increase pedestrian and cyclist safety in New York City have been implemented:

- The NYS Complete Street Act: Requires transportation projects to incorporate design and safety principles that aim to serve the needs of all users, such as sidewalks, bicycle lanes, curb cuts, and other traffic calming measures;\textsuperscript{15}
- The NYS Traffic Calming Law: Established maximum speed limits below 25 miles per hour in New York City for the purposes of calming traffic;\textsuperscript{16} and
- NYC DOT Neighborhood Slow Zones: An initiative that reduces the speed limit on residential streets from 30 mph to 20 mph while also installing traffic calming mechanisms, such as speed bumps and signage to make neighborhoods safer for biking and walking. Neighborhoods can submit applications to the DOT to become a “Neighborhood Slow Zone.”\textsuperscript{17}

Local Advocacy Example: Zero on Queens Boulevard
Transportation Alternatives, New York City Department of Transportation
Link to website
In 2008, Transportation Alternatives launched a campaign to increase safety and reduce traffic–related injuries and fatalities on Queens Boulevard, a critical but dangerous throughway for many pedestrians and bikers. The campaign successfully advocated for
aggressive traffic calming measures, such as safer crosswalks, expanded medians, reconfigured intersections, and a physically protected bicycle lane, resulting in the approval of a $100 million redesign of the corridor that began early in 2015.

Local Advocacy Example: 111th Street Park Access
Make the Road NY | Link to website
Make the Road NY has led a coalition of community groups and advocates to redesign 111th St. to improve access to Flushing Meadows–Corona Park, the largest park in Queens, for community residents. Through a partnership with Immigrant Movement International and Transportation Alternatives, Make the Road NY gathered community feedback on redesigning the street. Recommendations will be implemented by the NYC Department of Transportation in Spring of 2016.

Safety and Perception of Violence In Parks, Recreation Facilities and Other Active Spaces
Perception of unsafe neighborhoods or facilities is associated with reduced rates of participation in physical activity, and evidence suggests that improving safety and perception of safety in and around places for physical activity can significantly impact participation rates.\textsuperscript{lviii}

Innovative Solution – Los Angeles, CA: Summer Night Lights
The City of Los Angeles Mayor’s Office of Gang Reduction & Youth Development, The Gang Reduction & Youth Development Foundation | Link to website
The City of Los Angeles Mayor’s Office of Gang Reduction & Youth Development partnered with the Gang Reduction and Youth Development Foundation to implement Summer Night Lights (SNL), a violence reduction program that keeps recreation centers and parks open and offers expanded programming during evening and late night hours (7:00–11:00pm) throughout the summer months. The program was developed in response to evidence that gang violence increases during the summer months and is being implemented in communities that historically have been disproportionately impacted by violence.

Local Example: Cure Violence; S.O.S.
New York City Department of Health and Mental Hygiene, New York City Center for Economic Opportunity, NYC Health + Hospitals, Center for Court Innovation | Link to website
Cure Violence is an evidence-based violence prevention program focused on reducing
gun violence in communities most impacted. Originally implemented in Chicago, the strategy adopts a public health approach to community violence, employing young men with knowledge of the neighborhood and street credibility who have made positive changes in their own lives to act as credible messengers and mentors for individuals who are involved with or have been impacted by gun violence. Evaluations of the implementation of Cure Violence in several U.S. cities have found statistically significant reductions in community violence in participating communities, and the model is now being replicated in the 14 NYC communities that account for 51 percent of the shootings that occur in NYC, one of which is Crown Heights, Brooklyn. An evaluation of the Crown Heights iteration of Cure Violence, named Save Our Streets (S.O.S.), found that, in the 21 months after program implementation, gun violence in Crown Heights was reduced by 6 percent, compared to the 18–28 percent increases that were seen in similar communities that were not participating in the program. Thus, evaluators report that there was a statistically significant relative reduction in gun violence of 20 percent that may be attributed to S.O.S.\textsuperscript{lxix}

**Implement Programs to Motivate Individuals to Participate in Physical Activity**

**Support Networks for Physical Activity**

Evidence suggests that building social support around exercise within communities leads to increased physical activity and physical fitness among adults. Examples of programs include organizing walking groups, bike clubs, buddy systems or community weight loss challenges.\textsuperscript{lxx}

**Local Example: Bronx Health Fine, Fit, Fabulous**

**Bronx Health REACH | Link to website**

Bronx Health REACH partnered with faith-based organizations to implement Fine, Fit and Fabulous, a program that aims to prevent diabetes though a 12-week nutrition and fitness program. Building off of the spiritual context in which the program takes place, participants engage in group discussions and exercise sessions. They are also assigned a buddy or group that can provide additional nutritional and exercise support.

**Point-Of-Decision Prompts to Promote Physical Activity**

Posting point-of-decision prompts and designing spaces to encourage stair use has been found to significantly increase usage of stairs and physical activity levels, especially among individuals who are obese.\textsuperscript{lxoi}
Prescriptions for Physical Activity

Studies have found that prescriptions for physical activity, in which health care providers prescribe a physical activity routine or exercise plan for patients that is based on patient health status and physical activity guidelines published by the US Department of Health and Human Services, can be effective at increasing physical activity and supporting patients in meeting recommended daily exercise guidelines.\textsuperscript{lxii}

National Example: Park Prescriptions

The Golden Gate Parks Conservancy, Institute at the Golden Gate

Park Prescriptions, an initiative from the Golden Gate Parks Conservancy, is a multi-sector initiative that supports health care providers in directing patients to parks in order to improve their physical and mental health. The program provides clinicians with the tools to prescribe park utilization and physical activity to patients, while also promoting park stewardship and increasing funding sources for park maintenance.

COMMUNITY-BASED NUTRITION INTERVENTIONS

Improve Access to Places that Sell Fresh Fruits and Vegetables

Community Gardens

Studies indicate that community gardens have the potential to increase access to and consumption of fresh fruits and vegetables while reducing barriers to healthy eating, such as cost and transportation. Some evidence also suggests that community gardening often leads to increased physical activity among participating residents.\textsuperscript{lxiii}
Local Example: Open Space Greening
GrowNYC | Link to website
Open Space Greening, a GrowNYC initiative, has constructed or restored more than 70 community gardens throughout New York City. The program also partners with various types of organizations like community groups, public housing associations, and schools to convert vacant land into lively civic centers that promote intercommunity interaction.

Local Example: Target East Harlem Community Garden
New York Restoration Project | Link to website
The New York Restoration Project restores, re-designs and maintains 52 community gardens throughout NYC, including the Target East Harlem Community Garden, sponsored by Target. The Target East Harlem Community Garden not only offers community members a space for growing fresh fruits and vegetables, it also offers a performance space and serves as a gathering place for the community.

Retail Availability of Healthy Foods in Small, Local, Community-Based Stores
Research suggests that increasing the availability and promotion of healthy foods in local convenience and corner stores may increase sales of healthy food items. Successful interventions encouraged owners to stock healthier items and post promotional signs to encourage their consumption. Some studies also indicate that engaging store owners and/or customers in nutrition training and education sessions can lead to increased intent to prepare and consume healthy food among customers.\textsuperscript{lviv}

Local Example: Healthy Supermarkets and Corner Stores
City Harvest | Link to website
As part of the Healthy Supermarkets and Corner Stores program, City Harvest collaborates with retailers in Bedford Stuyvesant in Brooklyn, the North Shore of Staten Island, Northwest Queens, South Bronx and Washington Heights/Inwood in Manhattan in an effort to engage neighborhood residents where they buy food. City Harvest helps food retailers enhance the quality, quantity and variety of produce they sell. To further encourage affordable and nutritious eating habits, City Harvest also hosts budget shopping workshops and healthy cooking demonstrations in places where residents shop for food.

Local Example: Healthy Food Retail Networking Group
New York City Food Policy Center | Link to website
The Healthy Food Retail Networking Group, a coalition of 40 organizations across the
Healthy Vending Machines

Evidence suggests that stocking vending machines with healthy snack items and lowering their cost increases the sale of healthy items without reducing vending machine profit. Additionally, using promotional signage to encourage consumers to choose the healthier items may further increase healthy vending machine purchases. New York City currently requires that products sold in beverage vending machines in public schools, city agencies, and city-funded institutions meet specific nutritional guidelines, outlined in the NYC Agency Food Standards.

Local Example: YMCA of Greater New York Vending Machines
YMCA of Greater New York | Link to website
In support of their healthy lifestyles programming, the YMCA of Greater New York adopted the NYC Agency Food Standards. These nutritional regulations outline healthy practices related to stocking both snack and beverage vending machines in community organizations and workplaces. Snack food guidelines limit the calorie, sodium, trans and saturated fat, sugar, and fiber content of snacks. Beverage vending machine standards and limit the number of slots that can be used for high-calorie beverages (greater than 25 calories per 8 oz. serving), and suggest that low-calorie beverages, including water and seltzer, be placed in prominent, eye-level locations. While adherence to these standards is required for city agencies, the YMCA of Greater New York voluntarily implemented them in their 22 branches across the five boroughs of NYC.

Local Example: Montefiore Healthy Hospital Food Initiative
Montefiore Medical Center | Link to website
In recognition of the fact that many of their patients are living with chronic disease brought on by poor nutrition, Montefiore adopted the NYC Agency Food Standards as part of the NYC Department of Health and Mental Hygiene’s Healthy Hospital Food Initiative (HHFI). The goal of the initiative is to ensure that all those who interact with the medical center— including staff, patients, patients’ family and friends, and other community members—have access to healthy snack, beverage and meal options during their visit. New York City agency food standards outline evidence-based nutrition standards for food and beverage vending machines, cafeterias, and patients’ meals.
Supermarkets in Communities with Limited Access to Healthy Foods

Improving access to supermarkets may lead to increased consumption of fruits and vegetables, and evidence suggests that greater neighborhood availability of supermarkets is associated with lower prevalence of obesity. Access can be improved by encouraging the development of supermarkets in underserved areas and by increasing public transportation to supermarkets. New York City’s Food Retail Expansion to Support Health (FRESH) program aims to increase supermarket access by offering zoning and tax incentives to companies that establish and operate supermarkets in underserved communities.

Local Example: Fine Fare Supermarket in the South Bronx

Fine Fare  |  [Link to website]

Fine Fare, a supermarket chain, is establishing a new supermarket in the Williamsbridge area of the Bronx, a neighborhood that previously lacked easy access to fresh produce, meat and seafood. The new store will increase grocery options for individuals without easy access to transportation, who previously relied on small corner stores and bodegas for their food needs.

Farmers’ Markets and Farm Shares

Farmers markets and farm shares, also known as Community Supported Agriculture shares (CSAs), primarily sell fruits and vegetables. Some evidence suggests that increased access to these programs can increase purchasing and consumption of fruits and vegetables, especially in areas with limited or no regular access to fresh produce. Farm shares that offer week-to-week purchasing and flexible pick-up times may be particularly effective in low-income communities where lump sum payments at the beginning of the growing season may be difficult to afford.

Local Example: Fresh Food, Fresh Air, Fresh Start

Center for the Independence of the Disabled (CIDNY), GrowNYC  |  [Link to website]

CIDNY and GrowNYC are working together to increase access to 136 farmer’s markets for people with paralysis by reducing physical barriers in the built environment that prevent shopping at outdoor markets. The organizations are currently working to identify and mark accessible pathways into green markets and to incorporate this information into their market maps. CIDNY is also developing maps that indicate accessible subway and bus stops at each green market. CIDNY is also working with Access-A-Ride (AAR), NYC’s shared-ride, door-to-door, transportation system for people with disabilities who cannot utilize subway and bus service, to provide information on safe drop off addresses for people with disabilities, which will allow AAR to bring riders directly to markets.
Mobile Fruit and Vegetable Vendors

Mobile markets and fresh food carts offer a low cost, promising method of increasing access to healthy foods in communities with limited access supermarkets and grocery stores. Evidence suggests that the establishment of mobile fruit and vegetable markets or carts is associated with increased purchasing and consumption of fresh produce and reduced food insecurity, especially when these vendors can accept payment using government nutrition assistance programs (i.e., SNAP, WIC).\textsuperscript{\textit{xx}} Green Carts, an initiative that was introduced in 2008 by the Mayor’s Office of Food Policy and the New York City Department of Health and Mental Hygiene (DOHMH) in partnership with the Laurie M. Tisch Illumination Fund, provides permits to entrepreneurs to sell fresh fruits and vegetables via mobile street carts in high need communities throughout New York City. Green Cart vendors are also provided with EBT card machines, which enable the vendors to accept SNAP benefits.\textsuperscript{\textit{xxi}}

Local Example: Youthmarket Farm Stands
GrowNYC | Link to website
Youthmarket, a GrowNYC initiative, connects neighborhood youth with local farmers who supply fresh produce for them to sell at farm stands in NYC. The program is designed to bring fresh produce to communities throughout the city while enabling young people to earn money and develop skills related to operating a small business. The program also offers farmers greater revenue by selling their produce in new markets that are currently underserved.

Local Example: Fresh Food Box
GrowNYC | Link to website
GrowNYC’s Fresh Food Box Program aims to increase access to fresh, locally grown fruits and vegetables in underserved communities. Building off of the CSA model, Fresh Food Box enables customers to take advantage of the financial benefits of group purchasing and farm shares, while still offering them the opportunity of week-to-week purchasing, unlike traditional CSAs that require payment for the whole season.

Local Example: City Harvest’s Mobile Markets
City Harvest | Link to website
City Harvest distributes approximately 150,000 pounds of fruits and vegetables each month through their free, farmer’s market-style distribution mobile markets. These mobile markets not only provide low-income New Yorkers with access to fresh produce, they
also offer on-site cooking demonstrations, lessons on cooking the produce, recipes, and wellness programs.

Make Healthy Foods More Affordable

Reduce the Price of Healthy Foods

Reducing the price of healthy foods, especially in comparison to the price of unhealthy options, has been found to increase consumption of fruits, vegetables, water, and other healthy items among adolescents and adults. This type of competitive pricing can be achieved through discounts on healthy items or through subsidies and incentives.\textsuperscript{lxxxii} Health Bucks, a program implemented by the Department of Health and Mental Hygiene, subsidizes the cost of fruits and vegetables for low-income individuals who receive SNAP (Supplemental Nutrition Assistance Program) benefits: when they spend $5 in SNAP benefits at participating markets, they receive $2 in free Health Bucks that can be used to make additional purchases at the markets.\textsuperscript{lxxxiii}

Local Example: Urban Health Plan and Shop Healthy NYC

Urban Health Plan and the NYC Department of Health and Mental Hygiene

Link to website

Urban Health Plan has adopted several local bodegas and supermarkets that serve the surrounding community through Shop Healthy NYC, a NYC Department of Health and Mental Hygiene initiative. Through their advocacy and support, Urban Health Plan encouraged local bodegas and supermarkets to offer and promote a "Healthy Meal Combo," usually consisting of a sandwich on whole wheat bread, a piece of fruit and a bottle of water, at an attractive price to encourage healthy choices.

Increase Participation in Government-Sponsored Nutrition Programs

Some evidence suggests that expanding participation in government-sponsored nutrition programs, including Women, Infant and Children (WIC), and the Summer Food Service Program, increases access to healthy food among low-income individuals and families. Reducing barriers to participation, such as simplifying the application and recertification process, increasing outreach and education, and increasing the number of locations where such benefits can be used, has proven to be an effective method of increasing participation in programs.\textsuperscript{lxxxiv} Several DASH-NYC members provide support for individuals who may qualify for government-sponsored nutrition programs, including Little Sisters of the Assumption Family Health Service and the Center for Independence of the Disabled NY.

Local Example: NYC Coalition Against Hunger Program to Increase Access to Food & Benefits

Link to website

The Benefits Access Team at the NYC Coalition Against Hunger supports individuals in
Increase Options for Using Government-Sponsored Nutrition Programs to Purchase Healthy Foods from Nontraditional Vendors

Emerging evidence indicates that enabling participants of government-sponsored nutritional assistance programs to use their benefits at farmers’ markets increases access to and may increase consumption of fruits and vegetables. Currently, SNAP recipients in NYC can use SNAP benefits at some farmers’ markets, CSAs and Green Carts (fruit and vegetable street cart vendors).

Local Example: Farm Fresh Food Access
NYC Coalition Against Hunger | [Link to website]

The New York City Coalition Against Hunger’s Farm Fresh Community Supported Agriculture (CSA) program offers low-income individuals and families the opportunity to purchase subsidized shares of a farmer’s crop of high-quality, sustainably grown produce. In addition to offering subsidized farm shares, the program accepts SNAP benefits as a form of payment and offers evening pick-up hours for the produce, thereby catering to the needs of working adults with inflexible schedules.

Offer Healthy Foods in Food Pantries that are Appealing to Consumers

Food pantries provide free food to individuals and families who cannot afford to purchase it. They often rely on donated food and nonperishable food. As a result, food pantries have traditionally offered consumers foods that are highly processed and often unhealthy. However, recent efforts to increase access to healthy food has increasingly led to food pantries offering healthier options, including fresh fruits and vegetables. Several workgroup members have been involved in providing healthy food to low-income New Yorkers through food pantry distribution, including Little Sisters of the Assumption Family Health Service, United Way of NYC, and WHEDco. Furthermore, both the NYC Department of Health and Mental Hygiene and United Way of NYC, with the support of the New York State Department of Health, provide technical assistance related to sourcing healthy foods for emergency food programs.

Local Example: Advocacy with Food Pantry
Little Sisters of the Assumption Family Health Service | [Link to website]

Little Sisters of the Assumption Family Health Services offers clients access to a food...
pantry that enables clients to meet their immediate need for food in conjunction with advocacy related to accessing public benefits and government-sponsored food programs, such as SNAP.

Local Example: Hunger Prevention and Nutrition Assistance Program

United Way of NYC, NYS Department of Health | Link to website

With funding and support from the New York State Department of Health, the United Way of NYC administers the Hunger Prevention and Nutrition Assistance Program (HPNAP). Through this program, the United Way of NYC provides funding, training and technical assistance to hundreds of food pantries and soup kitchens in order to ensure that foods offered to clients are healthy and nutritious. For example, United Way of NYC provides support in implementing the Client Choice model, which empowers clients to choose culturally appropriate and nutritious foods for themselves and their families. Local Produce Link is another innovative program that links pantries to local farmers, enabling them to offer clients fresh and sustainable produce.

Prioritize Investment in Local Agriculture and Procurement of Local Food Products

Infrastructure that Strengthens Local Farms and Distribution of their Products

Experts suggest that investing in regional food systems and local agriculture may increase access to and affordability of healthy foods, especially fruits and vegetables, while encouraging economic development and supporting local farmers. With this in mind, New York State recently invested $3.6 million into food distribution hubs in New York State with the goal of increasing access to healthy local products for New York consumers. Additionally, Five Borough Farm, a project of the Design Trust for Public Space, offers a roadmap to farmers and gardeners, City officials, and other stakeholders to understand and weigh the benefits of urban agriculture, while detailing policy recommendations that would support the movement.

Local Example: Urban Farms

United Way of NYC | Link to website

United Way of NYC launched its Urban Farms initiative in an effort increase access to fresh fruits and vegetables in underserved communities. The program provides seed grants and support to local communities interested in launching urban farms, enabling local residents to grow and purchase fresh produce. An average urban farm provides approximately 1,200 pounds of fresh fruits and vegetables for the community each growing season.
Farm-To-Institution Food Procurement Models

Farm-to-Institution (FTI) programs and policies aim to facilitate access to fresh produce and other products from regional farms to institutions, such as schools, hospitals, prisons, parks, and faith-based organizations. Experts suggest that FTI programs not only link institutional settings serving large populations to local farms, supporting the sustainability of regional food systems, but also stimulate consumption of healthy foods, including fruits and vegetables.\textsuperscript{xc}

**Local Example: Lenox Hill Neighborhood House Meal Program and Training Kitchen**

Lenox Hill Neighborhood House | [Link to website]

In 2012, Lenox Hill Neighborhood House (Lenox Hill) made a concerted effort to increase the amount of fresh and locally produced fruits and vegetables incorporated into the 360,000 meals it serves annually to seniors, children and others who utilize their social service programs. Without significantly increasing cost per meal, Lenox Hill was able to integrate local food into at least 50 percent their meals. Additionally, with the opening of its new test kitchen, Lenox Hill is now working to spread the model to other institutional meal providers in NYC.

Promote Healthy Foods and Beverages

**Healthy Choice Promotion at Restaurants and Food Retail Outlets**

Strong evidence suggests that using point-of-decision prompts to encourage the selection of healthy foods at restaurants and food retail outlets may contribute to increased consumption of fruits and vegetables among consumers.\textsuperscript{xc} Emerging evidence also suggests that combining promotion with increased availability of healthy food options at restaurants may lead consumers to purchase healthier menu items. Although additional research is needed, some studies suggest that demand for healthy menu items increases as more healthy options are available and that customers may be more satisfied with healthy menu items than with regular menu items.\textsuperscript{xci}

**Local Example: Bronx Healthy Hearts Restaurant Initiative**

Bronx Health REACH | [Link to website]

Bronx Health REACH partnered with 23 restaurants in NYC to implement the Healthy Hearts Restaurant Initiative, which increased healthy food options on restaurant menus and encouraged consumers to make healthier choices. In addition, the program hosted five Bronx Food Festivals, which provided community members with information about health and nutrition while also highlighting restaurant partners’ commitments to the community and its wellbeing.
**Increase Access to and Promote Consumption of Water**

Some studies suggest that increasing regular access to water promotes water consumption, and evidence indicates that higher levels of water consumption are associated with healthier food and beverage choices and lower rates of overweight and obesity. Interventions that combine education on the benefits of water consumption with increased water availability have demonstrated success.xciii

*Local Example: NYC Water On the Go*

**New York City Environmental Protection** | [Link to website](#)

To increase access to NYC drinking water and reduce reliance on bottled water or portable sugary beverages, the NYC Department of Environmental Protection implemented Water-On-the-Go, a program that places water fountains throughout the city in high-traffic, outdoor public spaces. At each station, 6 faucets connect to fire hydrants, which can be used a drinking fountains or to fill reusable water bottles.

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**Prescriptions for Nutritious Foods**

Nutrition prescriptions, which enable health care providers to offer patients dietary advice in the form of a prescription that can then be used to purchase fresh fruits and vegetables, may be an effective method of improving nutrition and increasing consumption of healthy foods among patients. Research has demonstrated that health care providers have the ability to influence consumption choices of their patients, and experts believe that nutrition prescriptions have the potential to increase consumption of fruits and vegetables among patients.xciv

*Local Example: Wholesome Wave Fruit and Vegetable Prescription Program*

**Wholesome Wave, NYC Health + Hospitals, Laurie M. Tisch Illumination Fund**  
[Link to website](#)

The Wholesome Wave Fruit and Vegetable Prescription Program, implemented in select NYC Health + Hospitals providers, promotes health and improves access to healthy foods by enabling providers at participating locations to write prescriptions for fruits and vegetables for children who are overweight or obese. Families can then bring prescriptions to local farmers’ markets and redeem them for fresh produce. Evaluations of the program suggest that it contributed to a weight reduction in 40 percent of the children enrolled in the program, while also increasing the amount of food families had available in their home.

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**Increase Consumer Education around Eating, Preparing and Purchasing Healthy Foods**

**Taste Testing Fruits and Vegetables**

Evidence indicates that encouraging people to try new healthy and nutritious foods may
increase the likeability of such foods and lead to increased consumption among children and adults. Taste testing may be particularly effective as part of a multi-component nutrition intervention.\textsuperscript{xcv}

**Local Example: Let’s Get Cooking**

**YMCA of Greater NY | [Link to website](#)**

The Grosvenor Neighborhood House YMCA offers children the opportunity to create and then taste healthy snacks, desserts and light meals. They also create a cookbook so that the healthy recipes can be shared with family members and recreated at home.

**Local Example: Come See What’s Cooking Kids**

**New York City Department of Health and Mental Hygiene | [Link to website](#)**

“Come See What’s Cookin’ KIDS! is a program offered through the NYC Department of Health and Mental Hygiene that offers free healthy, bilingual food programming for children at local farmers’ markets. The programs encourage children to eat more fruits and vegetables by engaging them in interactive activities, offering the opportunity to taste new recipes, and giving participants a $2 Health Bucks coupon that can be used to purchase produce from the market.

**Activities that Improve Skills in Purchasing and Preparing Foods**

Offering activities that improve skills in purchasing and preparing foods may support individuals in eating healthier meals, though additional research on impact is needed. Examples of such activities include cooking demonstrations and workshops in grocery stores, supermarkets, or farmers’ markets that provide education on healthy food shopping on a budget. Experts recommend that programs incorporate community and cultural food preferences into workshops and demonstrations.\textsuperscript{xcvi}

**Local Example: Accessible Green Market Visits**

**The Center for the Independence of the Disabled, New York | [Link to website](#)**

The Center for the Independence of the Disabled, New York offers tours of farmer’s markets throughout NYC that include food tastings, nutrition education and budgeting information, conversations with food vendors, and information on using SNAP benefits at the market. These tours aim to increase socialization, build confidence in consumers’ ability to navigate the market, encourage consumers to engage with their peers and community at their local market, and provide them with skills to engage in healthy behaviors.

**Local Example: Share Our Strengths Cooking Matters®**

**City Harvest | [Link to website](#)**
Through cooking workshops at local stores, City Harvest provides store customers with practical tools to help them purchase healthier and more nutritious foods while adhering to their budget in their local supermarket.

**Local Example: Go!Healthy Parents**

**The Children’s Aid Society | Link to website**

The Children’s Aid Society offers parents a holistic six-week wellness program focused on movement, stress reduction and nutritious cooking. The goal of the program, titled Go!Healthy Parents, is to introduce parents to skills that enable them to create and maintain healthy home environments for themselves and their families. The program includes cooking lessons and practical tips for healthy food preparation on a budget, including a hands-on trip to the supermarket to help parents learn to navigate the food environment and make healthy decisions for their families.

### Reduce Exposure to Unhealthy Foods, Beverages and Eating Practices

**Reduced Advertisement of Unhealthy Foods**

Studies suggest that increased exposure to advertisements for unhealthy foods and beverages is associated with higher rates of obesity, and limiting exposure may lead to reduced consumption and improved dietary habits, especially among children. Although New York does not currently limit such advertising, other municipalities have passed laws prohibiting the marketing of unhealthy products in or around schools. Some leading advocacy organizations suggest that community organizations might contribute to the movement by declining support from sugar-sweetened beverage or junk food companies. Others advocate for setting nutritional standards for restaurant meals offering toy giveaways that are targeted to children.

**Local Example: Shop Healthy NYC**

**NYC Department of Health and Mental Hygiene | Link to website**

Shop Healthy NYC, a program developed by the NYC Department of Health and Mental Hygiene, aims to encourage residents, community organizations, food retailers and food suppliers to unite in an effort to increase access to healthy foods in their communities. A major piece of the program is working with community residents and store owners to improve the food environment in small, corner stores, often known as bodegas, as well as supermarkets located in areas with high rates of chronic disease. This includes eliminating advertisements on front entrances to the stores, which tend to be ads for sugary beverages, candy and tobacco, and posting advertisements inside the store for healthy options, such as water, whole-grain products, and healthy snacks, such as nuts or baked chips.
Reduced Availability and Consumption of Sugar-Sweetened Beverages and Junk Food

Reducing the availability of unhealthy food has been found to decrease consumption of unhealthy foods and increase consumption of healthier products, especially in schools. Currently, all NYC agencies, schools, and government-funded institutions (e.g. homeless shelters, senior centers, correctional facilities, and hospitals) must adhere to the NYC Agency Food Standards, and some community-based organizations are independently adopting these or other nutritional standards for the meals and snacks they serve. Furthermore, the NYC Department of Education’s Local School Wellness plan limits sugary beverages offered in schools.

Local Example: Nutritional Snack Guidelines in YMCA of Greater New York Afterschool Programs

YMCA of Greater New York | Link to website

In 2010, the NYC Department of Education (DOE) developed the Competitive Snack and Beverage Standards, which outline nutritional requirements for snacks sold in schools across the city. As part of their focus on healthy living, the YMCA of Greater New York adopted these standards across their programs, ensuring that all snacks and meals served to participants in their programs met the nutritional requirements set forth by the DOE. These guidelines, available online, regulate the calorie, sodium, sugar, trans fat and fiber content of snacks. For consistency and quality assurance, the YMCA of Greater New York also began using the same vendor as the schools to supply meals and snacks for their youth programs.

Serve Appropriately Sized Portions

Studies have shown that larger portion sizes encourage individuals to consume more of a given food or beverage, while smaller portion sizes encourage individuals to consume less. Thus, reducing portion sizes may lead to reduced caloric intake and healthier eating practices.

Local Example: Healthy Cooking for your Congregation

Bronx Health REACH | Link to website

Bronx Health REACH operates “Healthy Cooking for your Congregation,” a six-week program that supports church kitchens in preparing and serving healthy versions of the church community’s favorite meals. The program focuses on reducing fat and salt in prepared meals, reducing or eliminating sugar-sweetened beverages served to the congregation, and serving smaller portions, while also making fruits, vegetables and foods rich in fiber and whole grains more available to congregants.
APPENDIX A. SELECT STATE AND NYC POLICIES THAT IMPACT HEALTHY EATING AND ACTIVE LIVING IN NYC

Although the U.S. spends more health care dollars per person than most countries in the world, it suffers from poorer health outcomes than most developed nations. Policy makers, health care practitioners, and individuals have come to recognize that, in order to improve the health of Americans, we must look beyond the walls of the traditional health care system to impact health. To that end, several policies have been enacted and proposed at the local, state and federal level to explicitly increase access to healthy, fresh foods, particularly for low-income, urban neighborhoods, to decrease the pervasiveness unhealthy foods, and to increase access to physical activity through improvements to the built environment.

There are several important federal policies such as the Healthy, Hunger Free Kids Act, the Farm Bill, and the Patient Protection and Affordable Care Act, which have direct implications for the state and local healthy eating and active living landscape. We do not focus on these federal-level policies in this appendix, but rather the State and NYC specific policies impacting the healthy eating and active living landscape in NYC.

SELECT NEW YORK STATE (NYS) POLICIES

Community Gardens Law | Link to website
 Supports the growth of community gardens throughout the state by encouraging state agencies, municipalities and private parties to establish and promote community gardens.

Complete Streets Act | Link to website
 Amends highway law to encourage implementation of complete street design principles, in order to enable all users to safely access public roads.

Farm to School Law | Link to website
 Establishes a farm-to-school program to facilitate and promote the purchase of New York farm products by schools, universities and other educational institutions.

Funding for Parks via New York State Grant Programs | Link to website
 During each state fiscal year, the Office of Parks, Recreation and Historic Preservation administers grants for recreational and cultural activities.

NYS Farm Grown Products for Underserved, Urban Areas (S00614) | Link to website
 Provides financing for transporting and distributing New York state farm products to markets and food service establishments with a focus on distribution to underserved communities.
NYS Food Metrics Bill [S.4061/A.5102] | Link to website
Establishes requirement for state agencies to create and adhere to a food purchasing, tracking and reporting system, which lays the groundwork for encouraging state institutions to buy and serve more locally grown food.

NYS Safe Routes to School Law | Link to website
Enables Transportation Department to administer a Safe Routes to School Program with the goal of reducing barriers to walking or biking to school for children and states that the NYS Transportation Department will approve funding for “constructing, reconstructing, enhancing, improving, replacing, reconditioning, restoring, rehabilitating or preserving crosswalks, sidewalks, bicycle lanes and traffic calming measures located within two miles of a primary school and three miles from a secondary school.”

NYS Traffic Calming Law | Link to website
Establishes maximum speed limits for motor vehicles below 25 miles per hour within NYC for the purpose of traffic calming.

Physical Education Requirements [NYS Education Law 803] | Link to website
Establishes requirements for physical education instruction in grades K-12.

Taxing Sugary Drinks and Candy [NY TAX LAW § 1115] | Link to website
Taxes retail sales of candy, sugary beverages (with less than 70% natural fruit juice), and alcohol.

Wholesale Regional Farmers Markets and Food Hubs (S00627) | Link to website
Provides financing for the construction, expansion and improvement of food hubs and wholesale regional farmers’ markets that specifically promote farm products grown in New York State.

SELECT NEW YORK CITY (NYC) POLICIES

Artificial Trans Fat Restriction, New York City Health Code, Section 81.08 | Link to website
Prohibits the use of artificial trans fat in all food service establishments required to hold a permit from the NYC Health Department.

Bicycle Parking Zoning Text Amendment | Link to website
Requires food service establishments to make calorie information publically available at the point of purchase for menu items that have standardized portion sizes, formulations, and ingredients.
Calorie Labeling, New York City Health Code Amendment [Health Code §81.50]
[Link to website]
Requires food service establishments to make calorie information publically available at the point of purchase for menu items that have standardized portion sizes, formulations, and ingredients.

Drinking Water [Local Law 110 of 2013, Int. No. 1094-A] | [Link to website]
Amends the plumbing code and the administrative code of the City of New York and requires that residential buildings provide access to drinking water from the public water main in common areas.

Extended Use of School Buildings [New York State Education Law § 414] | [Link to website]
Enables after hours usage of school facilities by organizations outside of the Department of Education (DOE) and establishes a preference for facility usage afterhours by programs or activities that benefit the community.

Food Metrics Reporting [Local Law 52 of 2011] | [Link to website]
Established reporting requirements for a variety of city agency initiatives related to food production, processing, distribution and consumption, led to the annual Food Metrics report.

Food Retail Expansion to Support Health [FRESH] Program, Zoning and Financial Incentives
[Link to website]
Establishes a program that provides zoning incentives and financial benefits to food retail stores in underserved communities in order to encourage “the development and retention of convenient, accessible stores that provide fresh meat, fruit and vegetables, and other perishable goods in addition to a full range of grocery products.”

Green Carts, Administrative Code Amendment [NYC Local Law No. 9] Incentives
[Link to website]
Authorizes the Green Cart program, which provides permits for up to 1,000 mobile fruit and vegetable carts (“Green Carts”) to be established in underserved NYC communities.

Incorporating Active Design Principles in City Construction, Mayoral Executive Order 359
[Link to website]
Requires city agencies to review all new city construction and renovation projects for the opportunity to incorporate active design strategies, as outlined in the city’s Active Design Guidelines. Also encourages agencies to evaluate opportunities to promote stair use in city buildings and requires the Department of Design and Construction, with the support of the Department of Health and Mental Hygiene, to provide active design trainings for city agency staff.
Increase Stair Visibility by Allowing Hold-Open Devices (NYC Local Law No. 17 of 2014)  
[Link to website]
Increases stair visibility and promotes stair use by allowing for stair doors to be held open by magnetic devices, which close automatically in case of an emergency.

Mixed Land Use, Zoning Resolution, Article VIII  |  [Link to website]
Establishes Special Purpose Districts and the regulations by which developers must abide that aim to achieve specific urban design objectives and promote mixed land use.

NYC Agency Food Standards, Mayoral Executive Order 122  |  [Link to website]
Establishes food standards for all meals or foods purchased, prepared or served in city agencies and related programs, including schools, senior centers, homeless shelters, child care centers, after school programs, correctional facilities, and public hospitals.

NYC Department of Education School Wellness Policies on Physical Activity and Nutrition  
[Link to website]
Revised in 2010, the NYC Department of Education’s (DOE) Wellness Policy outlines the DOE’s efforts to promote and protect students’ health, wellbeing and ability to learn. The plan focuses on encouraging physical activity and healthy eating practices in schools.

Nutrition and Physical Activity Requirements in Child Care Settings, New York City Health Code Article 47  |  [Link to website]
Regulations in the NYC Health Code set requirements for children ages 12 months or older attending child care programs to participate in specified amounts of and types of physical activity that is dependent on the child’s age and the length of time s/he spends per day in the program. Regulations also prohibit children under age two from exposure to television, video and other visual recordings in child care settings, and limit viewing allowances for children aged two and older. Additional health code regulations enable the Department of Health and Mental Hygiene to establish, distribute, and approve nutritional standards and guidelines for foods and beverages served in child care programs.

Nutrition Standards for Children’s Camps, New York City Health Code Article 48  
[Link to website]
Amends the New York City Health Code to decrease the amount of energy–dense items that children attending New York City camps consume by establishing nutritional standards for foods and snacks provided at children’s camps. The amendment also requires camps to provide potable water and to prohibit camper access to vending machines both on and off camp premises.
OneNYC | Link to website
Outlines the Mayor’s 10-year environmental and economic sustainability goals in NYC. Goals include a “Healthy Neighborhoods, Active Living” component, which establishes a plan to enabling New Yorkers of all ages to live, work, learn, and play in neighborhoods that promote an active and healthy lifestyle.

Sodium Warning in Chain Restaurants (Article 81 of the NYC Health Code) | Link to website
Requires restaurants with more than 15 locations across the US to post a sodium warning icon next to the items that contain more than 2,300 mg of sodium per serving at the point-of-purchase. Additionally, the following warning must be posted at the point of purchase: “Warning: indicates that the sodium (salt) content of this item is higher than the total daily recommended limit (2300 mg). High sodium intake can increase blood pressure and risk of heart disease and stroke.”

Street Tree Planting Zoning Text Amendment | Link to website
Establishes street tree planting requirements in all zoning districts requires a planting strip between the sidewalk and the curb in some low-density residential areas.

Take Care New York 2020 | Link to website
Outlines the city’s plan for improving health outcomes and health equity for New York City residents. Broad goals include 1) promoting healthy childhoods, 2) creating healthier communities, 3) supporting healthy living, and 4) increasing access to quality care.

Vision Zero in NYC | Link to website
A plan enacted through a collaboration between multiple city agencies to improve street safety and eliminate traffic fatalities in NYC through better traffic law enforcement, improved street design, increased penalties for dangerous driving, reduced speed limits, and increased public outreach.
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