

Arogya World Case Study: City Leaders

The Critical Role of Leadership in Tackling NCDs: The New York City Formula



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NCDs, non-communicable diseases, that include heart disease, diabetes, cancer and chronic lung diseases, have been recognized as one of the greatest health and development challenges of the century. This was acknowledged in the Political Declaration unanimously adopted by all member states at the UN High Level Meeting on NCDs held in September 2011. According to the World Health Organization (WHO), NCDs are the leading cause of death worldwide, accounting for about 63% of all deaths each year (WHO, September 2011). More than 36 million people die annually from NCDs, with about 80% of deaths occurring in low- and middle-income countries (WHO, September 2011). The burden imposed by NCDs is real, and staggering: NCDs, plus mental health, are estimated to have a cumulative global economic output loss of US \$47 trillion dollars by 2030 (World Economic Forum). Such a burden not only impacts the lives of millions, but also economies and countries' abilities to develop.

The next big step change in improving the world's health will come not from the field of medicine, but from public health and behavior change. Efforts to get people to avoid tobacco, eat more healthy foods and reduce unhealthy foods, and increase physical activity will we believe provide a great return on investment.–Thomas Farley, Commissioner of the New York City Department of Health and Mental Hygiene

Fortunately, non-communicable diseases are preventable and interventions are often inexpensive, cost-effective, and simple. The leadership of government leaders at local, national, and global levels is critically important, as is the development of effective and efficient policies to combat NCDs. We at Arogya World have chosen to highlight the example of New York City, and the extraordinary work that its leaders have done to combat and prevent NCDs, as an example for other city leaders to follow. Through concerted and deliberate action the city has made remarkable strides to address the main risk factors of NCDs, such as smoking, poor diet, and lack of physical activity.

This is Arogya World's fourth Case Study on NCD Prevention, Treatment, and Care Approaches that work. At the core of this, as in our other case studies, is great science, inspirational personal determination on the part of a small group of individuals, true collaboration between multiple parties, and a progressive government. Creating a powerful combination that can surmount all obstacles to addressing NCDs. See this and our other case studies at www.arogyaworld.org.

NCD Prevention Initiatives in New York City

Through the work of the Mayor's Office and Mayor Michael Bloomberg, the New York City Department of Health and Mental Hygiene (DOHMH) and its current Commissioner Dr. Thomas Farley and the previous Commissioner Dr. Thomas Frieden, The Department of Transportation, and other city leaders, much has been done to prevent the incidence of NCDs among New York City residents since 2002. In September 2011, the Mayor's Office and DOHMH released their groundbreaking report on NCD prevention at the UN High Level Meeting on NCDs, "Preventing Non-Communicable Diseases and Injuries".

In 2004, New York City (DOHMH) launched a pioneering and comprehensive health policy agenda called Take Care New York. The policy agenda focuses on helping New Yorkers lead healthier and longer lives, largely through a framework of prevention, policies, and health promotion. Most of the initiatives under this policy umbrella are to do with NCDs, though some programs go beyond NCDs. Several successful initiatives under Take Care NY include smoking bans in work places, bars, restaurants and parks, and eliminating trans fats from restaurant foods. Other initiatives work toward increasing residents' access to healthy and nutritious foods, reducing salt content in packaged and restaurant foods, reducing consumption of sugary beverages, and creating safe spaces for physical activity. In addition, many of these efforts have been both low-cost and cost-effective. The approach taken by New York City serves as an example and roadmap for other local leaders on how to make their communities healthier and more resistant to NCDs.

Reducing Smoking

Smoking is the leading cause of preventable death in the United States and New York City, and starting in 2002 New York City began initiatives to decrease the rate of smoking, help smokers quit, and protect against second-hand smoke. The city did so through its widely successful Tobacco Control Program, which focuses on five main points including taxation, legislation, cessation, education, and evaluation.

On the taxation side, the city increased cigarette taxes between 2002 and 2011 making a pack of cigarettes in New York City the most expensive in the nation, with about 63% of the cost made up of taxes. During this time the price of a pack of cigarettes rose from US\$7 per pack to US\$11.20 per pack.

New York introduced bold legislation with the Smoke-Free Air Act that was passed in 2002 and implemented in 2003. This law mandates that workplaces within city limits, including restaurants and bars, must be smoke-free, and in 2011 it was expanded to include parks and other outdoor public spaces.

The cessation component includes the distribution of nicotine replacement therapy to the public, via nicotine patches and gum. New Yorkers can call the city's non-emergency information line (311) and obtain a free supply of these therapies. Between 2003 and 2010 over 400,000 courses of nicotine replacement therapy were distributed to the public, to help people quit smoking.



A collection of smoking ads developed by the New York Department of Health and Mental Hygiene that were posted throughout New York City to decrease smoking among citizens

To better educate New Yorkers about the health risks of smoking and tobacco, an aggressive citywide media campaign began in 2006. Advertisements appeared in bus stops, subway stations, on TV, and throughout public spaces, featuring graphic depictions of the health consequences of smoking as well as first-hand accounts from sick or dying smokers. Many of the ads were award winning and with bold and graphic messages, were designed to shake people up. The ads are available free to health departments around the world and have been used by 19 different local governments in the U.S. and in 20 countries worldwide. Additionally, comprehensive communications campaigns were held 3-4 times a year to increase awareness.

The fifth and final point of the Tobacco Control Program focuses on evaluation, an essential component to the success of any initiative. The critical outcomes of the Tobacco Control Program, like decreases in adult and youth smoking, and other important indicators, are measured through an annual Community Health Survey and biannual Youth Risk Behavior Survey. The surveys allow DOHMH to track the progress and success of their initiatives and continue to reach the public in effective ways.

New York City has shown remarkable results. Since the program began, adult smoking decreased 35% between 2002 and 2010 to a record low level of 14%. Smoking among high school students declined by more than half between 2001 and 2010 from 18% to 7%. In addition, the Tobacco Control Program has been both highly effective and cost-efficient. The 2011 budget for the program was US\$10 million, most of which went to public education media campaigns and nicotine replacement therapy.

The success of the program and the five-point plan has led the city to apply it to other health initiatives such as combating obesity and other health issues. The city readily shares its programs with other cities throughout the US and internationally, and many states and countries have adopted smoking bans and other aspects of the Tobacco Control Program.

Healthier Eating: Reducing Trans Fats and Sugary Beverages

To improve New Yorkers' health, a focus was placed on improving diet. Trans fats raise bad cholesterol (LDL) and increase the risk of heart disease, and for this reason the Department of Health explored ways to reduce trans fat in foods. In 2006, the New York City Health Code was amended to ban trans fats in restaurants and other food establishments, requiring that foods should not contain trans fats in amounts higher than 0.5 grams per serving.



Another ad from the NY DOHMH that appeared throughout New York City to inform citizens about the health risks of sugary beverages and encourage better eating habits

Also in 2006, New York required chain restaurants and food establishments to post calorie information about their products on menus and menu boards, helping customers to know more about what they were eating so they could possibly make healthier choices.

In addition to the trans fat ban, much work has been done to decrease the consumption of sugary beverages, especially among younger populations. This has

largely been done through media campaigns to educate the public about the detrimental health effects of sugary beverages, such as obesity and diabetes. A tax on sugary beverages has also been proposed, but did not pass, however it is still being considered by the City.

The trans fat ban has seen a great success, with more than 93% of food establishments in New York City achieving compliance in 2009. Sixteen other cities have passed similar initiatives throughout the US. Results show that the practice of putting calorie amounts on chain restaurant menus led customers to purchase approximately 100 fewer calories, and the federal government is now requiring chain restaurants with 20 or more outlets across the country to post calorie information on menu boards. Additionally, efforts to reduce sweetened beverage consumption were effective, and between 2007 and 2009 adult consumption decreased from 36% to 32%, and teenagers decreased consumption from 28% in 2005 to 22% in 2009 (DOHMH).

Active Design for Physical Activity

A great deal of remarkable inter-agency collaboration has occurred between the New York City Department of Transportation, Department of Design and Construction, Department of City Planning, and DOHMH to promote active design, physical activity, and wellness. To increase residents' levels of physical activity, the city is promoting walking, riding a bike, or taking public transportation, which leads to additional walking. And the city is working hard to make it safe and convenient. For example, pedestrian friendly areas have been created throughout the city including Times Square to encourage walking. The departments also collaborated to reposition bike lanes, placing them in a space between the curb and parked cars, so that cyclists are more protected from traffic and parents can feel better about letting their child ride their bike, ultimately promoting increased physical activity.

Additionally, New York City has incorporated active design into its urban planning, creating spaces that are pedestrian and bike friendly, increasing the presence of bike storage rooms in buildings, making access to open stairways easier, and locating workplaces and residences near parks and public transportation. All of which increases the ability for residents to engage in active transport and increase their daily physical activity, whether it means taking the stairs more often or using their bike instead of a car to get to work.

Critical Success Factors

The leadership of New York City and the Department of Health and Mental Hygiene has been the most important factor in the success of New York City's health policies. The willingness of the leaders to confront tough challenges head on, including the food and tobacco industries, is noteworthy. Equally impressive is the fact that the Department of Health and Mental Hygiene has focused a great deal on information sharing. They have

openly shared information on all of their programs and initiatives, allowing any health organization in the US and internationally to use their findings, even their survey tools and ads. The department has also taken advantage of learning from others, like the UK salt initiative that serves as a model for the National Salt Reduction Initiative championed by New York's DOHMH. It is refreshing and encouraging to see the health department of a major city be so ready to share and learn, as communication of best practices is paramount to the success of many initiatives, especially in public health.

As testament to its success, New York City's formula has been copied by others. To date, twenty-five states and the District of Columbia have enacted legislation similar to the Smoke-Free Air Act, and 37 countries have done so as well. Several international health departments have also adapted the bold ad campaigns to stop smoking. The trans fat ban has been adapted in 16 jurisdictions throughout the United States, and Baltimore has used the New York City "Take Care New York" model to develop their "Healthy Baltimore 2015" initiative.

Human behavior is one of the hardest things to change and is often one of the biggest obstacles, if not the biggest, in achieving lasting and sustainable success in better health and preventing NCDs. New York City's relentless and comprehensive focus on prevention, policy, and promotion, and the tenacity of its leaders, has been the foundation of the city's continued efforts to better the lives of its residents. New York City has created a great model, and many cities can learn from its projects and successes. By adapting the initiatives carried out by DOHMH, local leaders can take action and have a lasting impact on the health and well being of their citizens, all through inexpensive and cost-effective means. As Dr. Thomas Farley has said, "The next big step change in improving the world's health will come not from the field of medicine, but from public health and behavior change. Efforts to get people to avoid tobacco, eat more healthy foods and reduce unhealthy foods, and increase physical activity will we believe provide a great return on investment."

The initiatives to change poor habits and improve citizens' health may not be popular at first, but like the saying goes, "an ounce of prevention is worth a pound of cure". The key ingredients in the New York City formula, are courage and leadership and political will, and these are not expensive at all!

For additional information, please see the excellent report released at the UN High-Level Meeting, and put out by the New York Department of Health and Mental Hygiene and the Mayor's Office: [Preventing Non-Communicable Diseases and Injuries](#). For New York City's Active Design Guidelines see

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