



**Department  
of Health**

# **New York State Public Health Corps Fellowship Program**

**Introduction to the 2025 New York State Prevention Agenda**

**MAY 13, 2026 | ZOOM**

# AGENDA

- Welcome!
- Educational Series Session Learning Objectives
- Speaker Introduction
- Introduction to the 2025 New York State Prevention Agenda
- Questions & Answers
- Closing Remarks



# LEARNING OBJECTIVES

This training aims to:

- Describe what the Prevention Agenda is and why it is important
- Explain how addressing the social determinants of health and root causes of health issues impact health outcomes
- Use the 2025-2030 Prevention Agenda to identify priority objectives
- Understand the use of the Prevention Agenda Dashboard as a tool to determine state and local priorities
- Develop a justification for why a local health department and/or hospital would prioritize certain health issues using information from the Prevention Agenda and Data Dashboard.

# WELCOME, BELLA MAZZETTI



Department  
of Health



Department  
of Health

# INTRODUCTION TO THE NEW YORK STATE PREVENTION AGENDA

**Bella Mazzetti, MPH, CHES®**

**Health Program Education Coordinator I**

**Office of Local Health Services | Division of Public Health Infrastructure**

**MAY 2026**

# AGENDA

- Background
- Planning and Development
- 2025-2030 Framework
- Implementation and Monitoring
- Overlapping Activities
- Resources

# THE PREVENTION AGENDA

## What?

- NYS's State Health Improvement Plan (SHIP).

## Why?

- The Prevention Agenda serves as a roadmap for both state and local action to improve the health and well-being of all New Yorkers and to reduce health disparities. State health departments pursuing and/or maintaining Public Health Accreditation Board (PHAB) accreditation must publish a SHIP.

## Who?

- Created by New York State Department of Health (NYSDOH) with partners
- Implemented by local health departments (LHDs), hospitals, and other organizations

## When?

- A new Prevention Agenda is published every 6 years



# Shifting Focus: Downstream → Upstream



Department  
of Health



Department of Health

PEI Chief Public Health Office. (2023). *When We Think & Act Upstream: We Create a Healthier, Safe World*. <https://www.livewellpei.ca/sites/www.livewellpei.ca/files/2024-02/Upstream%20Downstream-%20Expanded.jpg>

## Slide 9

---

**K(1** There is a Native American parable of saving babies in the river that is likely the foundation for this concept of upstream vs downstream. That makes me feel like this concept of upstream and downstream has to do with equity and social determinants of health. Can we tie that in here or somewhere in the presentation (perhaps already there and I just haven't gotten to that slide yet)

Kasaoka, Bridget H (HEALTH), 2026-04-29T15:00:39.377

**K(1 0** i see ,y comment is addressed in the next slide!

Kasaoka, Bridget H (HEALTH), 2026-04-29T15:05:27.017

# PREVIOUS VS NEW PREVENTION AGENDA



2019-2024 Prevention Agenda



2025-2030 Prevention Agenda

Social Determinants of Health



Social Determinants of Health Healthy People 2030

# 2025-2030 PREVENTION AGENDA FRAMEWORK

Overarching Vision and 4 Foundations

**Vision**

Every individual in New York State has the opportunity, regardless of background or circumstances, to attain their highest level of health across the lifespan.

**Foundations**

Health Equity

Prevention Across the Lifespan

Health Across All Policies

Local Collaboration-Building

**Domain**

**Priorities**

**Economic Stability**

Economic Wellbeing  
Poverty  
Unemployment

Nutrition Security  
Housing Stability & Affordability

**Social & Community Context**

Mental Wellbeing & Substance Use  
Anxiety & Stress  
Suicide  
Depression  
Primary Prevention, Substance Misuse, & Overdose Prevention

Tobacco/E-cigarette Use  
Alcohol Use  
Adverse Childhood Experiences  
Healthy Eating

**Neighborhood & Built Environment**

Safe & Healthy Communities  
Opportunities for Active Transportation & Physical Activity  
Access to Community Services & Support  
Injuries & Violence

**Health Care Access & Quality**

Health Insurance Coverage & Access to Care  
Access to & Use of Prenatal Care  
Prevention of Infant & Maternal Mortality  
Preventive Services for Chronic Disease Prevention & Control  
Oral Health Care

Healthy Children  
Preventive Services  
• Immunizations  
• Hearing Screening & Follow-up  
• Lead Screening  
Early Intervention  
Childhood Behavioral Health

**Education Access & Quality**

Pre-K-12 Student Success & Educational Attainment  
Health & Wellness Promoting Schools  
Opportunities for Continued Education

5 Domains representative of key Social Determinants of Health (SDOH)

24 Priorities inclusive of SDOH and specific health and health care system issues



# HOW WAS THE 2025-2030 PREVENTION AGENDA DEVELOPED?



# 2025-2030 Prevention Agenda



**Five Domains** focused on Social Determinants of Health (SDOH) in alignment with Healthy People 2030



**24 Statewide Priorities** with an overarching goal to reduce disparities and inequities over the next six years.



**84 Measurable Objectives**

**42 SMART Objectives**

**42 SMARTIE Objectives**



**84 Indicators** to track progress



A list of **Evidence-Informed Interventions**



Department  
of Health

Action Plan Overview

# 2025-2030 Prevention Agenda



Department  
of Health

# DOMAIN 1: ECONOMIC STABILITY



## Domain Goal

All people in New York have the financial security and support needed to thrive



## Priorities

Poverty  
Unemployment  
Nutrition Security  
Housing Stability & Affordability



## Action Plan

Priority Narrative  
One Priority Goal  
2 Objectives  
1 Indicator  
22 Interventions



Department of Health

# POVERTY: GOAL AND IMPORTANCE

**Goal:** Identify, promote, and implement programs that address poverty.

## What is Poverty and Why is it Important?

Socioeconomic disparity is directly linked to adverse health outcomes, negatively affecting physical and socioemotional health as well as educational development. New York State's poverty rate remains around 14%, slightly above the national average (11.1%) (USCB, 2025). Similarly, alternative poverty metrics, such as ALICE (Asset Limited, Income Constrained, Employed), reveal a significant portion of New York State households struggle to cover basic necessities like housing, childcare, food, and healthcare even though they are employed. These metrics indicate a substantial gap between income and the cost of living, highlighting the challenges faced by many in achieving financial security. Children and individuals over the age of 65 are particularly vulnerable to the negative health impacts of poverty. Poverty rates among older adults in New York State are significantly higher than those of the general population, highlighting the unique challenges faced by seniors in maintaining financial sustainability. These findings highlight a persistent issue within the state, prompting ongoing efforts to address the root causes and provide support to those living in poverty, and lift them out of these conditions.

New York State maintains a commitment to mitigating socioeconomic disparities among those living in the state. Reducing poverty does not necessarily entail reinventing the wheel; a multitude of programs already exist embedded in communities. This state health improvement plan focuses on leveraging existing public health infrastructure and improving networking among and optimizing public awareness of these programs. Additionally, the focus on novel measures of poverty seek to broaden the perspective of local health departments, hospitals, and community-based organizations as they shape their policies and programs meant to reach/address families and individuals living in poverty.

## Each Priority is introduced with:

- A priority goal
- A narrative that describes the priority issue and its importance



Department  
of Health

# POVERTY: OBJECTIVES & INDICATORS

**SMART(IE) Objectives:**

**1.0 Reduce the percentage of people living in poverty from 13.6% to 12.5%.**  
**1.1 Reduce the percentage of people aged 65+ living in poverty from 12.2% to 11%.**

Desired Outcome	Indicator	Data Source	Population	Baseline	Target
Reduce the number of people living in poverty in NYS	Percentage of people living in poverty	ACS (American Community Survey)	Individuals and families living below the federal poverty threshold	13.6% (2024)	12.5% (2030)
			Subpopulation of Focus	Baseline	Target
			Adults aged 65+	12.2% (2024)	11% (2030)

General statement about desired result

Specific numbers that quantify desired outcome

The selected metric to track progress

Source of data

Priority Populations

Most recent data

## Slide 17

---

**GD1** For this slide and the next, the white text on a yellow background is not very easy to read. Consider increasing the contrast - either darker background or darker text.

Gueye, Debra (HEALTH), 2026-05-04T16:14:26.366




# POVERTY: INTERVENTIONS

Intervention were selected using rigorous criteria, including strength of evidence base, alignment with state and national health initiatives, and feasibility.

## Featured Interventions:

- **Evidence rating:** Highly rated by an evidence registry, indicating credible evidence of effectiveness.
- **Direct outcomes:** The intervention produces outcomes that can be directly observed and evaluated using the tracking indicator for that priority area.

Legend	
Icon	Social Drivers/Domains
\$	Economic Stability
👥	Social & Community Context
🏠	Neighborhood & Built Environment
🩺	Health Care Access & Quality
📖	Education Access & Quality
Icon	Organizational Level
LHD	Local Health Department
H	Hospitals
O	Other (e.g., Community-based Organizations, State Agencies, Educational Institutions)

Interventions	Population of Focus	Age Range	Intermediate Measures
 <p><b>Featured Intervention:</b> Implement a comprehensive measure of poverty for county health needs assessments following the guidance of metrics similar to ALICE (Asset Limited Income Constrained Employed).<sup>1</sup></p> <p>LHD H O</p>	Population living under the burden of socioeconomic disparities.	All ages	Participation among community organizations in health assessments, track progress on data collection and collection methods
 <p><b>Featured Intervention:</b> Partner with organizations that provide services for older adults in rural areas (ex. Office for Aging, faith-based organizations, centers serving older adults, libraries, and CBOs) to reduce food insecurity for those living in poverty.</p> <p>LHD O</p>	Older adults	Ages 65+	Number of people receiving services.
 <p>Incorporate educational programs that enhance recruitment for needed positions while mitigating disparities in recruitment efforts in the community.<sup>3</sup></p> <p>LHD H O</p>	Adults enrolled in public benefits, high school age youth	Ages 16+	Employment rate by age group and industry.



Department of Health

# POVERTY: PARTNERS & RESOURCES

## Leading Partners

### State Government Agencies:

NYS Office of Children and Family Services  
NYS Office for Temporary and Disability Assistance  
NYS Office for People with Developmental Disabilities  
Empire State Development  
NYS Department of Labor and Career One Stops  
Local Departments of Social Services

### Other Partners:

NYC Human Resources Administration, Local Departments of Social Services  
Child Poverty Reduction Advisory Council  
Medicaid Managed Care Health plans  
High schools, hospitals, universities, occupational and technical education programs, workforce training programs  
Legal agencies, law schools  
Employers and businesses  
United Way - ALICE and Family Resource Centers  
Community Development Organizations  
Federal Reserve  
Local HeadStart programs  
Soup kitchens, food pantries, regional food banks

## Implementation Resources

[Promise Neighborhoods](#)

[United Way](#)

[NYS OSC Poverty Trends data](#)



Department  
of Health

Implementation

# How is the 2025 -2030 Prevention Agenda Implemented?



Department  
of Health

# IMPLEMENTATION PARTNERS

The Prevention Agenda Objectives, Interventions and supporting activities provide flexible options for all communities to improve outcomes for individuals of all ages living in New York.

## State and Local Partners:

Many partners at the state and local level contribute to achieving the vision of the Prevention Agenda, including:

- Local health departments
- Hospitals
- State agencies
- Statewide organizations
- Health care providers
- Community behavioral health providers
- Medicaid managed care plans
- Health insurance plans
- Housing organizations
- Philanthropic organizations
- Educational institutions
- Local agencies and community-based organizations
- Other

Public and private partners must work together to achieve Prevention Agenda goals

# COMMUNITY HEALTH IMPROVEMENT PLANNING



**Local Health Departments** must develop a Community Health Improvement Plan (CHIP) based on the findings of a Community Health Assessment (CHA).

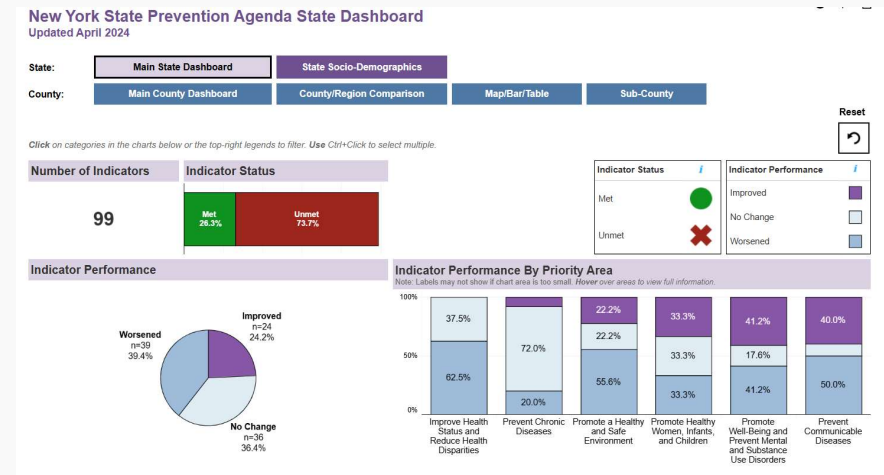


**Hospitals** must develop a Community Service Plan (CSP) based on the findings of a Community Health Assessment (CHA)

# MONITORING AND EVALUATION – STATE LEVEL

## The Prevention Agenda Dashboard provides:

- Overview of the most recent data and the 2030 targets for tracking indicators.
- Indicators grouped by Domain area with historical trends.
- Visualizations of indicators by socio-demographic characteristics (e.g., age, race, sex, geography, insurance, education).
- County Dashboard provides current data at county/sub-county levels, with maps, graphs, and comparisons, where available.



# MONITORING AND EVALUATION – LOCAL LEVEL

## Community Health Improvement Plans

- Review and evaluation of Community Health Assessments, Community Health Improvement Plans, Community Service Plans (CHAs/CHIPs/CSPs)
- Annual reporting requirements, including updates on intervention implementation and progress toward objectives
- Encouragement for extended monitoring and evaluation beyond required reporting

# PROJECTS ASSOCIATED WITH THE PREVENTION AGENDA

1

## Certificate of Need (CON) Applications

- Designed to control costs, improve quality, and ensure access to care.
- Request information from non-profit hospitals on how proposed projects address Prevention Agenda priorities and objectives.

2

## Hospitals' Community Benefit Spending

- Non-profit hospitals receive tax exemptions in exchange for reinvesting those funds into community benefits (e.g., financial assistance for patients, subsidized care for underinsured populations, public health programs addressing social determinants of health).



Department  
of Health

# ACTIVITY!



Department  
of Health

# **STEPS:**

- 1. Open the Prevention Agenda Dashboard Page.**
- 2. Choose any county Data Dashboard and select a numbered indicator to focus on based on data.**
- 3. Be prepared to share what indicator you think your county should focus on and why.**

**We will have about 5 minutes for research and 5 minutes for sharing.**

# WEBSITE FOR 2025-2030 CYCLE

## Prevention Agenda 2025-2030: New York State's Health Improvement Plan

The screenshot shows the top portion of the New York State Department of Health website. At the top left is the New York State logo with the text "NEW YORK STATE" and "An official website of New York State. Here's how you know." Below this is a dark blue navigation bar with the following links: "Department of Health", "Individuals/Families", "Providers/Professionals", "Health Facilities", "Health Data", "About Us", and "Search". Below the navigation bar is a breadcrumb trail: "You are Here: Home Page > NYS Health Initiatives > Prevention Agenda 2025-2030: New York State's Health Improvement Plan". The main heading is "Prevention Agenda 2025-2030: New York State's Health Improvement Plan". Below the heading is a row of five buttons: "Prevention Agenda", "State Health Assessment", "Community Health Planning Resources", "Partnerships and Collaboration", and "Contact Us". The "Prevention Agenda" button is highlighted. Below the buttons is the section "What Is the Prevention Agenda?". The text describes the Prevention Agenda as New York's State Health Improvement Plan (SHIP), a six-year initiative aimed at improving health status and reducing disparities. It outlines key health priorities and how they will be addressed. Below this is the "Prevention Agenda Dashboard" section, which describes the dashboard as an interactive tool for tracking progress on the State's Health Improvement Plan. A button labeled "Prevention Agenda 2019-2024 Dashboard" is visible. The text notes that the dashboard will be updated to align with the 2025-2030 priorities and indicators once all data has been made available. Finally, the "What Is New About the 2025-2030 Prevention Agenda?" section begins, stating that the 2025-2030 Prevention Agenda adopts a broad perspective, emphasizing factors that influence health beyond traditional health outcomes, prevention strategies, medical care, and public health systems. It outlines 24 key priorities to address health conditions, behaviors, and systemic issues such as poverty, education, housing, and access to quality healthcare.

# Questions?

**Please contact us at  
[prevention@health.ny.gov](mailto:prevention@health.ny.gov)**



**Department  
of Health**

# CLOSING REMARKS



Department  
of Health

# NYSPHC ANNOUNCEMENTS:

Please join our upcoming NYSPHC Educational Series

- **Date:** Wednesday, June 10<sup>th</sup>, from 1:00pm-2:30pm
- **Featured speaker:** Sujani Sivanantharajah
- **Training session:** Public Health Career Roadmapping Workshop: Building your Future Ready Public Health Career.

# OFFBOARDING CHECKLIST FOR FELLOWS

## NYSPHC Training and Resources Website



# NYSPHC LINKEDIN GROUP

- Stay connected with NYSPHC on LinkedIn
  - Stay updated on public health events
  - Engage with polls and share your insights
  - Keep the conversation going from today's session



# REMINDER: EMPLOYEE ASSISTANCE PROGRAM



Department  
of Health



## Help for what matters most

### Your employee assistance program

Our Employee Assistance Program offers services to help promote well-being and enhance the quality of life for you and your family.

Support and guidance is available for assistance with family and personal issues online at [worklife.uprisehealth.com](http://worklife.uprisehealth.com) and by phone at 1-800-386-7055.

Help with health	Help with family	Help with legal and financial
<ul style="list-style-type: none"> <li>• Healthy living</li> <li>• Stress management</li> <li>• Mental health</li> <li>• Diet and fitness</li> <li>• Overall wellness</li> </ul>	<ul style="list-style-type: none"> <li>• Parenting support</li> <li>• Child and elder care</li> <li>• Learning programs</li> <li>• Special needs help</li> </ul>	<ul style="list-style-type: none"> <li>• Legal issues</li> <li>• Will preparation</li> <li>• Taxes and debt</li> <li>• ID theft services</li> <li>• Financial tools and assistance</li> <li>• Medical bill negotiation tools</li> </ul>

### Connect to a counselor for complimentary support services:

**Email:** [eapcounselor@uprisehealth.com](mailto:eapcounselor@uprisehealth.com)

**Phone:** 1-800-386-7055  
Available 24 hours a day, 7 days a week\*

**Web:** [worklife.uprisehealth.com](http://worklife.uprisehealth.com)  
(Access code: [worklife](http://worklife))

**When calling for assistance please use the following information**

**Employer - Staffing Solutions Organization**

**Group Number - G-540112**

\*Office hours Monday-Friday 8am-5pm EST. Live answer exchange available after hours. The Employee Assistance Program services are provided by Guardian Health, and its contractors. Guardian does not provide any part of the Employee Assistance Program. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide for actual benefits, services, limitations and exclusions. Guardian and Uprise Health reserve the right to discontinue the Employee Assistance Program program at any time without notice. Legal services provided through the Employee Assistance Program will not be provided in connection with or preparation for any action against Guardian, its affiliates or any employee. The Employee Assistance Program is not an insurance benefit and may not be available in all states. If you wish communications may be in English only. The Guardian Insurance Company of America, New York, NY. Uprise Health, Laguna Hills, CA. Guardian is a registered trademark of The Guardian Insurance Company of America and used with express written permission. © Copyright 2022 The Guardian Insurance Company of America.

**THANK YOU!**



Department  
of Health



**Department  
of Health**