NEW YORK

WE’VE GOT

YOUR NUMBER!

Fund for Public Health in New York
AND THOSE NUMBERS...
0 trans fat. Calorie counts posted in restaurants. 350,000 fewer smokers. 2,500 doctors using electronic health records. The life expectancy of New Yorkers is longer than the U.S. as a whole.

The Fund for Public Health in New York, Inc. is dedicated to the advancement of the health and well-being of all New York City residents. Towards this aim the Fund works in close partnership with the New York City Department of Health and Mental Hygiene to develop and implement policies and programs that address pressing public health issues and educate New Yorkers about the role they can play in protecting their own health and the health of their families and communities.

We are looking out for you, all 8.5 million of you, and that means each and every New Yorker. The bold and innovative work of the NYC Health Department and the Fund has made New York City the healthiest it’s ever been. And that means YOUR numbers are looking better than ever!

SPEAK FOR THEMSELVES!
The New York City Department of Health and Mental Hygiene is one of the most trusted names in public health. It has earned this accolade throughout its 206-year history – a rich legacy of protecting the health of all who live, work and visit New York City. With 8.5 million people living in densely populated neighborhoods and 45.3 million visitors to the most linguistically diverse city in the world, the challenges facing the Health Department are complex. Because of this complexity, the Department’s public health innovations and successes are highly regarded the world over.

Historically, public health has focused on the prevention of new and re-emerging infectious and communicable diseases. Yet in recent years, chronic diseases such as diabetes, cardiovascular disease and cancer have surpassed infectious disease as the leading killer of Americans. Together, these three diseases account for three-quarters of deaths in the United States, in addition to the suffering, disability and decreased quality of life for those who do not die. These chronic diseases contribute to two-thirds of all health care costs.

“\nThe NYC Health Department is one of the world’s great public health agencies. It has been a center of innovation and excellence since the days of typhoid and cholera and it continues to develop innovative new policies and practices that become national and international models."

Mayor Michael R. Bloomberg

The NYC Health Department is at the forefront of imagining how to prevent chronic diseases and address the spiraling cost of health care in the United States. The Department tests groundbreaking strategies, addresses persistent health inequities and disparities, and shares best practices widely. The impact on policies and systems are far ranging from how schools deliver health services to the safety of the food supply to the quality of the air we breathe.
New Yorkers are now living longer than ever before. Over the past eight years, Mayor Michael Bloomberg and the NYC Health Department have taken bold, innovative actions to protect and promote the health of the city’s residents.

Public health leaders across the country and around the world look to New York City for leadership in finding the program and policy approaches with the most promise for improving health.

- When NYC passed its Smoke Free Air Act in 2002, no other cities and only one state had enacted a comprehensive smoke-free air law. Today, similar laws exist in nearly 30 states and more than a dozen countries.

- In 2006 NYC became the first city to restrict the use of trans fat in restaurants and bakeries. Two years later, 12 local governments and one state passed similar restrictions and now more than 50 restaurant chains and dozens of major food companies are pledging to stop using artificial trans fats.

- Posting calories at chain restaurants — a global first — became law in NYC in 2006 and was adopted into federal law with the passage of the Affordable Care Act.

- In 2008, NYC founded the National Salt Reduction Initiative to reduce sodium levels in processed and restaurant food. Now more than 70 cities, states, and national health organizations are participating and 28 major food companies have signed on to sodium reduction targets.

Our work is far from finished. New York City still faces significant public health problems — twin epidemics of obesity and diabetes, high rates of underage drinking and binge drinking, addiction to street and prescription drugs, and undiagnosed and untreated mental illness. These problems have been compounded by the recession of 2008, which has significantly set back the resources available to find the most innovative solutions to pressing problems. Our challenges call for more innovation.
The Fund for Public Health in New York (The Fund) was established in 2002 under Mayor Michael R. Bloomberg to partner with the NYC Health Department to advance the health and well-being of New Yorkers. The Fund turns innovative thinking at the Health Department into action. By forming partnerships with foundations, philanthropists, and businesses, the Fund cultivates investors who understand the role of public health in shaping our communities, our environment, and our future.

In eight years of operations, over $250 million has been raised – $30 million of it from the private sector – to pilot, promote and expand NYC Health Department priority projects. Currently the Fund manages over $100 million for Health Department priority projects with core staff providing expertise in contract and grant administration, financial management, business development, fundraising and human resources management.

Investment in this public-private partnership powers the achievement of transformational results that are scalable here in New York City and across the country. National and global public health leaders look to New York City for big ideas. The support the Fund provides to the Health Department helps to find and implement some of the biggest public health ideas of this century and has provided the Health Department with an ever-greater capacity to innovate.

“The NYC Health Department is a vital resource for innovation and energy in promoting population health. Our Foundation has been pleased to invest in the Department’s vision through projects implemented in partnership with the Fund, to improve the health of New Yorkers. We have supported a wide range of initiatives, from expanding the Nurse-Family Partnership to groundbreaking sodium reduction work. These investments represent public-private partnerships that result in meaningful, measurable, and sustainable improvements in the health of New Yorkers.”

James R. Knickman, President and CEO, New York State Health Foundation
“Public-private partnerships are at the heart of our efforts to improve public health and safety.”

Mayor Michael R. Bloomberg
During my two years leading the New York City Department of Health and Mental Hygiene, I have seen the great value that the Fund for Public Health in New York brings to the NYC Health Department, a partnership that began under the leadership of Mayor Michael R. Bloomberg.

The team at the Fund is first-rate at taking the most promising ideas developed by innovative Health Department thinkers and transforming these ideas into opportunities for private sector collaboration. The staff at the Fund is a vital part of my team. We share the common goal of improving the health of New Yorkers and working together we find private sector partners to help develop and invest in innovative models of public health that work in NYC and beyond.

The Fund has demonstrated expertise in successfully competing for private and public sector grants, raising individual donations and corporate contributions, managing grant-funded projects closely and spending grant dollars efficiently. Though the Fund works quietly behind the scenes, its impact is felt everywhere across our city’s public health programs.

We have a rich history in New York City of winning public health battles, as we did with typhoid and cholera a century ago. Today, we face many more and different battles that require our careful attention. Just as poor sanitation was pegged as the cause of cholera, leading to a redesign of urban infrastructure, battling the epidemics of today means reshaping our physical and social environment – our everyday world. Government cannot do this alone.

This report celebrates the innovative ideas that have been hatched at the NYC Health Department and implemented in collaboration with the Fund. We believe our shared successes over the past two years can pave the way to imagining a future where more of our bold and promising ideas are turned into action.

Thomas A. Farley, MD, MPH
Commissioner, NYC Department of Health and Mental Hygiene
Board Chair, Fund for Public Health in New York
The past two years at the Fund have been remarkable. We have secured over $100 million for public health, added over 200 jobs to our public health workforce, and witnessed the public health data moving in the right direction on a wide range of issues from tobacco use to colon cancer screening to emergency preparedness.

Thanks to the support of a wide range of philanthropic partners, the Fund’s early years have allowed donors to invest in and build upon a history of innovation that sets New York City apart. As our donors know, the significance of working with the Fund for Public Health in New York goes much farther than the value of each dollar invested. Donors work with Health Department experts to identify the most promising public health innovations and partner to lead long-lasting and far-reaching efforts at improving health. This partnership frequently results in the production of public health policies and program models that are replicated nationally and globally.

Since our inception, the Fund has been emerging as an optimal partner to the NYC Health Department – a partner to help raise and manage more resources allowing them to do more projects. Today, we have met and exceeded their expectations. In the fall of 2009, we were well positioned to apply for and receive over $50 million in federal stimulus funds on behalf of the Department. We are a strong, efficient, and proud partner to the Health Department – we promote their work, find funding for new and promising ideas, and we manage those funds responsibly.

This report highlights some of the many pioneering ideas that the Health Department has turned into ground-breaking programs and policies to protect all New Yorkers from tobacco smoke, improve our food environment, promote physical activity, and increase access to essential services. We are excited to continue building upon our record of success and innovation. Momentum is on our side. I know you are too, and with your support, I’m excited about what the future holds.

Sara W. Gardner, MPH
Executive Director, Fund for Public Health in New York
There is a direct relationship between high consumption of sodium or salt and increases in blood pressure. High blood pressure, or hypertension, is a major risk factor for heart disease and stroke, two of the leading causes of death in New York City, New York State and the U.S. But with 80% of the sodium that we eat coming from packaged and restaurant foods, many Americans find it challenging to lower their sodium intake to healthy levels.

That’s why in 2008, the Health Department launched the National Salt Reduction Initiative (NSRI), an innovative approach to reducing population sodium intake through voluntary corporate commitments. While the food industry’s participation is critical to this initiative’s success, private donations to the Fund were what transformed it from a strategy into a reality. Funding for the purchase of comprehensive sales and nutrition data made it possible for the Health Department to build two sophisticated databases – the first of their kind – to analyze sodium in packaged and restaurant foods by individual product, brand, and company. The Health Department was then able to work with food industry leaders to develop substantial and feasible sodium reduction targets.

Since its launch, the NSRI has grown to become a partnership of more than 70 cities, states, and national health organizations, with the goal of reducing population sodium intake nationwide by 20% over five years. The NSRI developed 2012 and 2014 sodium reduction targets for 62 packaged food categories and 25 restaurant categories based on sodium information from its unique database and feedback from food companies, trade organizations, and restaurant chains. To date, 28 major food companies have committed to NSRI targets.

To measure industry progress toward the NSRI targets, the NSRI will recreate its databases in 2012 and 2014. While the databases were created for the NSRI, the Health Department collected additional nutrient data so that the investment in collecting and analyzing the database may be leveraged for future nutrition projects.

“We applaud New York City for bringing greater focus to the need for sodium reduction in American diets.”

Rhonda Jordan, President of Health and Wellness, Kraft Foods
In 2010, New York City also completed a baseline evaluation of the NSRI by conducting a 24-hour urine collection and analysis study, the gold standard evaluation for sodium intake. The study confirmed that the current sodium intake for adult New Yorkers is alarmingly high, nearly twice the recommended limit for most adults. The evaluation, which was made possible through private foundation and federal grant funding, will be repeated in 2014 to assess changes in population sodium intake. Together, the databases and this evaluation allow the Health Department to provide a comprehensive assessment of how their innovative public health efforts to reduce salt intake affected millions of New Yorkers.

“The NYC Health Department has helped companies commit to sodium reduction and measure their progress along the way. We are happy to share their goals and have worked hard to reduce sodium across all menu items. The impact of the sodium reduction in our foods will be felt globally.”

Lanette Kovachi, Corporate Dietician, Subway

The Role of the Fund

The Fund has supported the NYC Health Department at every turn as it has pressed the levers of industry and government for the past three years. Working with the food industry and building this kind of national momentum required speed and agility. The Fund secured seed funding from individual donors to purchase data, build and refine the database, and perform an in-depth analysis critical to the success of this national initiative. New York City’s leadership and influence in nutrition policy has spread nationwide, a change that will impact the health of generations.

With such a solid history of forming public-private partnerships, the NYC Health Department is well positioned to deliver meaningful change.
THE DAYS OF HIGH SODIUM ARE NUMBERED!
EXCHANGING

KNOWLEDGE

AND

RESOURCES
The Big Cities Health Coalition started out as a simple idea of the NYC Health Department – let’s get on the phone routinely with our peers around the country and share what’s working and what’s not. Nearly a decade later, the NYC Health Department has provided the opportunity for a national coalition of public health leaders from 18 of America’s largest urban areas to share knowledge and resources, and leverage their collective voice. These 18 jurisdictions serve 42 million people – 13% of our nation’s population.

By joining forces, public health departments are sharing promising practices and effective policies, learning from one another, and leaders across the country are able to address health issues of America’s big cities more economically and effectively. This is vitally important, as chronic diseases represent two-thirds of all health care expenditures, yet historically city and county health departments have dedicated less than two percent of their budgets to these issues.

“The Big Cities Health Coalition provides a valuable partnership for sharing experiences about the common health needs of urban populations and developing a collective advocacy voice for policies and programs that improve our residents’ health.”

Jonathan E. Fielding, MD, MPH, MBA, Health Officer and Director, LA County Department of Public Health

Member cities work together to set the year’s agenda; topics range from infectious disease response planning such as H1N1 influenza to chronic disease prevention and control efforts to the marketing and promotion of public health messages. In 2009, working groups were added to encourage greater in-depth collaboration on issues of alcohol policy, health reform, and tobacco control. In 2010, with the addition of a dedicated Coordinator, the Big Cities Health Coalition
broadened and deepened participation, attracted interest from new cities, and expanded its role as an advocate for the issues most important to our nation’s biggest cities. In addition, Big Cities has joined forces with national organizations to intensify its impact.

“...The de Beaumont Foundation is proud to have helped launch the Big Cities Health Coalition. We see our investment at work every day in the increased capacity and efficiency of health departments across the country, improving the health of urban populations nationwide."

James Sprague, MD, Chair, Board of Directors
Elizabeth Miller, Executive Director
de Beaumont Foundation

The Role of the Fund

The Fund worked with the Health Department from the earliest stages to conceptualize and plan the growth of the Big Cities Health Coalition from calls to a face-to-face meeting to the development of a virtual work space. The Fund’s ability to incubate an idea and allow it to grow quickly by adding the required staff and technical assistance needed to get the project off the ground was critical. This is an important, creative project that has spurred improvements in the health of millions of Americans and that might not have advanced but for the Fund and private foundation support.

Allowing NYC to pioneer more of these innovative ideas not only benefits the health of many, it also allows NYC to build on its reputation for incubating the most cutting edge projects. These opportunities attract creativity and talent. With the Fund ready to support the rapid growth of a promising concept, the Health Department has an excellent partner in finding the next big idea.
Obesity and tobacco use are the underlying risk factors of the leading causes of premature death in the United States. In New York City, nearly one in four adults and more than one in five children are obese. Nearly 1 million adults and 18,000 high school students in NYC smoke.

The price we pay for high rates of obesity and tobacco use is extreme.

Unhealthy eating and lack of physical activity increase the risk of obesity and its associated problems, including heart disease, stroke, diabetes, arthritis, and cancer, which not only shorten life but also affect the quality of life. Obesity has increased significantly between 2002 and 2004 -- New Yorkers collectively gained 10 million pounds and this trend continued through 2007. Obesity-related health problems account for almost 20% of Medicaid and Medicare expenditures and some estimate the annual economic cost of obesity in the U.S. to be $450 billion.

In addition to the 5,000 New Yorkers diagnosed with smoking-related cancers annually, 350,000 New Yorkers are living with other smoking-related illnesses, including coronary heart disease, heart attack, stroke or emphysema. For New Yorkers who smoke today, one in three is expected to die prematurely from a smoking-related illness. Overall, about one in seven deaths in NYC is attributed to smoking.

NYC has been a pioneer in fighting obesity and tobacco use over the last decade by monitoring data, implementing innovative programs and creating healthier environments through policy changes. Calorie labeling on menus, trans fat restriction, and City Agency food standards are examples of policy changes that NYC has advanced to make healthy eating easier for New Yorkers. Public education campaigns discouraging sugary drink consumption have complemented this work and in 2009 NYC announced that the proportion of adult New Yorkers reporting daily consumption of sugary beverages each day fell from 36% in 2007 to 32% in 2009, a decline of 12%.

NYC was one of the first cities to pass a comprehensive smoke-free air law including bars and restaurants, and through a series of city and state tax increases now has the most expensive cigarette pack price in the nation. These strategies combined with hard-hitting public education campaigns and an annual nicotine patch and gum giveaway program have yielded impressive results. Since NYC launched its aggressive anti-smoking program in 2002, smoking rates have decreased by 27% for adults to 15.8%, the lowest rate on record, and by 52% among youth.
Funding from the U.S. Centers for Disease Control and Prevention (CDC) is supporting activities in NYC to implement and integrate new policies, systems and environmental changes in community and school settings to increase physical activity, improve nutrition, and decrease smoking and exposure to secondhand smoke.

“...In the wealthiest nation on earth all children should have the basic nutrition they need to learn and grow and pursue their dreams."

First Lady Michelle Obama

The efforts listed below help make NYC a healthier environment:

- Buildings are being designed in ways that make it easy to be physically active.
- Farmers’ markets and Green Carts are accepting SNAP (Supplemental Nutrition Assistance Program) or food stamps.
- Bodegas are offering healthier foods.
- Schools are promoting healthier food and beverage choices – offering salad bars and water.
- Hospitals are promoting breastfeeding, which is associated with lower rates of obesity.
- Educational campaigns are reaching millions of New Yorkers to raise awareness of excessive portion sizes and their associated risks.
- NYC smokers who want to quit and stay quit from relapse have additional resources including greater assistance from health care providers, social service providers and online cessation resources.
The Role of the Fund

The CDC announcement of Communities Putting Prevention to Work (CPPW) grant funding, supported by the American Recovery and Reinvestment Act of 2009, challenged public health departments across the country to think creatively, test the most promising prevention strategies based on the best evidence, and challenge policies that have been standing in the way of better health outcomes.

NYC was well positioned to embrace this opportunity because of its partnership with the Fund. The Fund administers over $35 million in CPPW funding for the NYC Health Department to continue its cutting-edge prevention work. The Department and the Fund were one of only seven grantees nationwide to receive funding to address both obesity and tobacco. The Fund mobilized grant start-up activities quickly, adding 68 staff and issuing 150 contracts in the first 6 months of the program.

Good ideas are important, but good ideas must be sustained by systems that can be scaled to support implementation. The Department delivered the bold ideas that brought these funds to NYC and the Fund is helping the Department turn those bold ideas into rapid and effective action.

### 2011

- **Vending machine standards in City buildings**
- **New York City Council passed legislation banning the sale of flavored non-cigarette tobacco products including cigars, blunts, cigarillos, chewing tobacco and new spit-less products such as Snus**
- **Smoke-Free Air Act includes outdoor areas of hospitals**
- **Smoke-Free Air Act expanded to include parks and beaches**
Mentoring for Impact

The Centers for Disease Control and Prevention (CDC) has taken the concept of sharing best practices to a new level with the establishment of cross-jurisdiction mentoring. Following the awarding of Communities Putting Prevention to Work (CPPW) grant funds, CDC announced the availability of funds for jurisdictions succeeding in implementing tobacco and obesity programs to mentor other communities where success was more limited. NYC was awarded funding to have its Health Department mentor 36 other communities across the country. Through national meetings, web-based and printed resource materials, one-on-one consultative support, webinars and on-site trainings, NYC Health Department leaders are helping public health professionals across the country develop, adapt and implement programs and policies that reduce tobacco use and create an environment that promotes healthy eating and physical activity.

From the Field

Preparing thousands or millions of meals for school children each week is no easy task. Many school districts struggle to provide cost-effective foods that are healthy, tasty, and possible to prepare in large quantities. In New York City, collaboration between the Departments of Health and Education has resulted in several recent improvements in school food, including the replacement of full fat milk with non or low fat milk in over 860,000 meals daily, installation of water jets and salad bars in hundreds of cafeterias, and implementation of the NYC Agency Food Standards.

860,000

Now NYC is working with communities across the country to help them make similar improvements. These changes are being pursued in many ways, for example, through conferences that bring health and school food professionals together to discuss making changes to school food procurement practices. In a recent mentoring conference on this topic, Health Department staff and their school food director counterparts from nine CPPW communities came together to discuss the importance of providing healthy, local and responsibly-produced food to children. Attendees heard from their school food peers about practical steps they could take towards improving food purchased, from working with their vendors to reduce the sodium and sugar in prepared products to sourcing more local produce and meats from producers in or near their communities. They were also able to interact with USDA representatives to understand how to leverage their buying power to better serve students and met food vendors who provide more wholesome products that meet new nutrition guidelines for school food. By sharing local successes and continuing to learn from other communities, New York City is well-positioned to both share and learn so that it remains a national and international leader in public health.
When the NYC Health Department conceived of the Primary Care Information Project (PCIP) in 2005, the priority was to help NYC doctors use electronic health records (EHRs) to improve the delivery of clinical preventive services, specifically in small neighborhood family practices or community health centers where many of the economically disadvantaged New Yorkers would access health care. To date, PCIP has helped over 2,500 doctors adopt EHRs, reaching nearly 2 million patients - a quarter of the total population in NYC.

Leveraging its vast virtual health network comprised of 471 small physician practices, 34 community health centers, and 4 outpatient hospitals, PCIP is uniquely positioned to test innovative ideas and quickly implement what is proven to work. What started as an EHR expansion project has evolved into a model that is revolutionizing the way health information systems can be used to improve population health. In the past, providers could only react to patient issues as they were presented at the visit. With electronic health records, doctors can track their patients over time as well as receive instant information that can be acted upon. Working with PCIP, doctors use the health information system to focus on priority health issues during a patient visit, as well as to reach out to patients with chronic conditions who have gaps in care.

Converting to an electronic system means providers can quickly identify patients who are chronically ill and haven’t returned for a visit, improve coordination visits with specialists, and serve as a ‘health home’ by interpreting for patients the test results or information from specialists so that patients can get better or stay healthy. With private sector support, PCIP has been piloting several interventions leveraging the EHR to sustain doctors’ efforts in reducing deaths and complications from cardiovascular disease, the number one cause of mortality in NYC. In one project, doctors receive custom reports on
The innovative model of a prevention-oriented electronic health record that was pioneered in New York City in 2005 helped providers in a diverse set of practices improve the quality of care delivered to their patients.

Farzad Mostashari, MD, ScM, National Coordinator of Health Information Technology
TRANSFORMING HEALTH RECORDS TO SAVE LIVES
Every year almost 22,000 teens become pregnant in New York City. The vast majority - 87% - of these pregnancies are unintended. Annually, thousands of teens, mostly from disadvantaged backgrounds, face difficult decisions related to their sexual and reproductive health, including whether to have sex, how or whether to use birth control and condoms, how to access clinical services, and whether to become a parent. Teen pregnancy rates are 2.5 times higher for those living in NYC’s poorest neighborhoods. Teens who become mothers tend to come from economically disadvantaged environments that severely limit their education and job prospects. As teens transition to adulthood, having the skills to avoid unintended pregnancy is fundamental to helping them stay healthy. These skills are transferable and will serve them in other areas of their lives, equipping them with what they need to avoid sexually transmitted infections (STIs) and to make other decisions to assure a healthy future.

"When these kids trust you with their reproductive health needs, it impacts your relationship with them in other areas of their lives."

Dr. Tosan Oruwanye, Medical Director, Morris Heights Health Center

Reaching teens where they spend their time – in school – is a key place the NYC Health Department has focused its efforts to improve the quality of and access to reproductive health education and services. A major success story from this work is the School-Based Health Center Reproductive Health Project. The Health Department designed a pioneering program at 39 School-Based Health Centers in NYC public high schools to improve access to quality health care. The centers reach 64,000 public high school students and are operated primarily by the city’s public hospitals and community-based health centers.

The result: delivery of reproductive health services has been transformed. From updated operational systems and improved physical infrastructure of health centers to health care provider education and training, the centers are now providing state-of-the-art services that include screening for HIV and STIs, pregnancy testing, and contraceptive dispensing onsite for sexually active teens. This initiative has also raised awareness of and increased access to Long-Acting Reversible Contraceptives (IUDs and Implanon) as safe and effective contraceptive options for most teens.
SCHOOL

BASED HEALTH

CENTERS
Before this program was launched, organizations running School-Based Health Centers were usually working in isolation with their own policies, protocols and procedures and data collection practices. This effort has created a citywide community of providers that view sexual and reproductive health as priority services to be provided by SBHCs and who now exchange best practices, problem solve and innovate together, and provide each other with support and encouragement. New data systems and improved evaluation techniques have enabled the NYC Health Department to transform an optimal setting for health education and services – schools – into an efficient and high quality service delivery portal.

From the Field

For a community health center serving the poorest borough in New York City – with the highest teen pregnancy rate in the country – the stakes could not be higher. The Morris Heights Health Center (MHHC) serves over 60,000 residents from the Central and South Bronx. Its commitment to provide health care services to young people started in the 1980s with its first demonstration projects to support School-Based Health Centers. Today it operates nine SBHCs aiming to improve student health, well-being and school-performance.

It is here that providers see first-hand the reality of how sexually active teens are and how infrequently they are practicing safe sex. MHHC embraced the opportunity to broaden services and improve access by working hand-in-hand with the NYC Health Department to improve patient flow and better integrate SBHCs into its larger system of health care delivery.

The results: More teens are being seen, referring their friends, receiving birth control, having STIs treated, and fewer are getting pregnant. SBHC staff received training and technical assistance and routinely share best practices with others among their 400-member staff.

The Role of the Fund

The Fund was side-by-side with Health Department experts in the reproductive health field as they set out to think of new ways to address the persistent problem of teen pregnancy. With a coalition of partners from universities, hospitals, city agencies and non-profit organizations, big ideas that focused on solving problems could be built. The Fund assisted these thought leaders at every stage of the project, from project design to fundraising to full-scale implementation. The blend of advocacy and support from the public sector and the resources and pace of the private sector aligned perfectly in this successful public-private partnership.
$500,000 and above
Pfizer Pharmaceuticals
Robert Wood Johnson Foundation
Robin Hood Foundation

$250,000 and above
Anonymous
de Beaumont Foundation
New York Community Trust
W.K. Kellogg Foundation

$100,000 and above
Altman Foundation
Elton John AIDS Foundation
The Kresge Foundation
M.A.C. AIDS Fund
New York State Health Foundation
New York University
Nurse-Family Partnership
OraSure Technologies
Samberg Family Foundation, Inc.
Starr Foundation
The Staten Island Foundation
Verizon Foundation
Vertex Pharmaceuticals

$50,000 and above
J. Ira & Nicki Harris Foundation

$25,000 and above
Aetna Foundation
Chris Stern Hyman
New York Roadrunners
United Hospital Fund

$5,000 and above
City of Greenville
Colon Cancer Challenge Foundation
Falconhead Charitable Foundation, Inc.
John M.B. O’Connor
Marion E. Kenworthy-Sarah H. Swift Foundation, Inc.
Milbank Memorial Fund

$1,000 and above
American Public Health Association (APHA)
Pamela S. Brier, MPH
Cellestis Inc.
Columbia University

CVS Caremark
Drug Policy Alliance
Harvard University
Johns Hopkins School of Public Health
James Kagen
McGraw-Hill Companies
Medical Society of the State of New York
New York Medical Alliance Research Foundation
Novartis
Professional and Scientific Associates, Inc.
Debbie and Jonathan Rosen
St. Vincent’s Catholic Medical Center
Staten Island University Hospital
Three Rivers Pharmaceuticals
Wolfson Communications (dba Sensei Health)

$100 and above
The Academy of Breastfeeding Medicine
Manik Ahuja
Anonymous (17)
Michael Aragon
Jessica Arrighi, MPH
Charles Auerbach
Bank of America
Amy Barnett
Payal Berning
Geeta Bhanot
Andrew Biaglow
Jess E. Bolkcom
Julia Bowen
Bronx-Lebanon Hospital Center
Leslie Cordona
Misty Chiu
Jeanne Clancy
Thomas Clavin
Merritt Coluzzi
Community Health Center, Inc.
David Cuff
Colleen M. Currie-Dillon
Dana Czuczka
Mary M. Delois
Ana R. Fernandez-Javier
First 5 LA
Joshua Forman
David Fruchey
Gannett Education
$100 and above, cont.
Sara W. Gardner, MPH
Theresa A. Girsky
Susan Gold
Ruth Gold
Brian Golden
Ruth Gottschall
Nathan Graber
Martine Hackett
Barbara Hartstein
Jessica Harris
Lisa Heine
Mary Herrick
Arlene Herring
William Higgins
Ketrina Hoskin
Hunter College
Jacqueline Jaeger
Christopher Jett
Katty Jones
Evelyn Landry
Hali Lee
Jonathan Levin
Joslyn Levy
Patrick Lin
Ariatenn R. Lovelace
Macmillan Publishers
Carol Marsh
Elizabeth Miller
Susan Miller
Montefiore Medical Center
Judith Nathanson
Pamela Nathenson, MPH
New England Journal of Medicine
Obesity Society
Pacific Institute for Research and Evaluation
Sandra Page-Cook
Mayur Parmar
Rachel Pine, JD
Poe Travel
Liz Procter
Julie Rathwell, MPH
Pat Rathwell
Andrew Rein
Dorothy Rick
Bill Ritter
Rockefeller University
Deborah and David Rothchild
Merry Rowland
Maureen Sanchez
Olivia Severs
PA. Shah
Angelie Singla, MSW
Madhu Singla
Glenda Smith-Hasty
Josette Sohmer
Valerie Staubitz
Brian Thomas
Trustees of the Spence School
United Way of New York
Elaine Vernetti
Michael Vinogradsky
Sharon Walters
John Warren
Esther Waring Tatum
Amanda Anne Wentworth
Denise Whalen
Steven C. White
Ronald E. Wolfe
Brian Wong
Linda Wexler
Wyckoff Heights Medical Center

Contracts and Government Grants
Association of Public Health Laboratories
Borough of Manhattan Community College
Center for Health Care Strategies
DHHS/Centers for Disease Control and Prevention
DHHS/Health Resources and Services Administration
DHHS/Office of Adolescent Health
DHHS/Office of the Assistant Secretary for Preparedness and Response
DHHS/Office of the National Coordinator for Health Information Technology
DHHS/Substance Abuse and Mental Health Services Administration
Health Research, Inc.
ICF Macro
Mayor’s Fund to Advance New York City
New York City Department of Health and Mental Hygiene
New York State Department of Health
New York University
SciMetrika
### Federal Grants and Contracts

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<td><strong>Total Revenue</strong></td>
<td><strong>28,140,235</strong></td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>$25,453,402</td>
<td>$20,600,444</td>
</tr>
<tr>
<td>Support Services</td>
<td>1,975,337</td>
<td>1,532,662</td>
</tr>
<tr>
<td>General Administration</td>
<td>598,254</td>
<td>498,354</td>
</tr>
<tr>
<td>Program Management</td>
<td>299,840</td>
<td>165,539</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>28,326,833</strong></td>
<td><strong>22,777,009</strong></td>
</tr>
</tbody>
</table>

### Surplus/(Deficit)

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Surplus/(Deficit)</strong></td>
<td>(186,598)</td>
<td>160,335</td>
</tr>
</tbody>
</table>

### Increase/(Decrease) in Temporarily Restricted *

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Increase/(Decrease) in Temporarily Restricted</strong></td>
<td>(3,213,696)</td>
<td>(2,550,626)</td>
</tr>
</tbody>
</table>

### Change in Net Assets

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Change in Net Assets</strong></td>
<td>(3,400,294)</td>
<td>(2,390,291)</td>
</tr>
</tbody>
</table>

### Net Assets

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporarily Restricted</td>
<td>7,933,541</td>
<td>11,147,237</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>715,067</td>
<td>901,665</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>8,648,608</strong></td>
<td><strong>12,048,902</strong></td>
</tr>
</tbody>
</table>

* Note: The decrease in Temporarily Restricted Revenue in Fiscal Year 2010 and 2009 reflects Temporarily Restricted Revenue received and recognized in Fiscal Year 2008 and then released as program activity that occurred in Fiscal Years 2010 and 2009.

### Expenses Pie Chart

- Program Services and Management: 92%
- General and Administration: 7%
- Development: 1%
As a non-profit organization closely affiliated with the NYC Department of Health, the Fund for Public Health in New York identifies the resources and opportunities that can turn innovative thinking at the Health Department into action. The Fund identifies the capital and works in close partnership with Health Department staff to plan, launch, and sustain new ideas, providing management and oversight of invested dollars throughout the course of each initiative. The Fund prioritizes projects that are innovative, require public-private partnership for success, and benefit from the leadership of the NYC Department of Health.

The Fund for Public Health in New York forges connections between the private sector and the NYC Health Department. In so doing, the Fund connects the philanthropic goals of individuals, foundations, and corporations with the large scale opportunities for impact that come from working with the Health Department. The public-private partnerships that are formed result in long-lasting and far reaching improvements in health and produce policy and program models that can be replicated nationally and globally. Making a measurable impact on the future health of generations of New Yorkers is an investment in the future of New York City, the nation and the world.

Our work is far from finished. NYC still faces significant public health problems ranging from obesity and diabetes to drug abuse, mental illness and violence. Experts at the Health Department are ready to imagine and create new solutions to the health problems of today. We invite you to contact us to learn more about how you can support New York City’s Health Department and the Fund for Public Health in finding the next big idea in improving public health.
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Sara W. Gardner, MPH
Executive Director

Fund for Public Health in New York, Inc.
22 Cortlandt Street, 11th Floor
Suite 1103
New York, NY 10007
Phone: (646) 710-4840
Email: sgardner@fphny.org

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