New York State Prevention Agenda 2013-2017: Priorities, Focus Areas, Goals and Objectives, 1/25/2013

A select group of 58 Prevention Agenda objectives were chosen to be tracked annually for New York State. Data will be available by county for 43 of these objectives, by healthcare plan for four objectives and by hospital for two objectives. Baseline and updated data will be published on the DOH Website.

Each priority specific committee was charged with developing objectives for the general population, as well as objectives for reducing disparities for specific populations that are disproportionally impacted. The final set of measurable objectives was developed by reviewing indicators used in the National Prevention Strategy, County Health Rankings, America's Health Rankings, Healthy People 2020, and by the CDC and the New York State Department of Health. Committees selected indicators that were relevant to the priority specific focus areas and goals; that represented process, short term and long term outcome indicators; and that have data that can be measured.

Whenever possible, indicators with data available by county, race ethnicity, disability and socio economic status were chosen. In many instances, disparity is measured by the ratio or the difference between the population of interest (Black non-Hispanic, Hispanic, Medicaid) and the reference population (e.g. White non-Hispanic, non-Medicaid).

Objective targets were determined by reviewing historical data for each indicator. When the trend has been moving in a desirable direction, the committee projected an improvement of 5-10%, based on intervention strategies and resources. If, however, the trend has been moving in the wrong direction, the committee projected a smaller percent improvement (0-5%). When the indicator was a HP2020 objective, or other objective, committees tried to select the same target if, based on the committee's expertise, the target would be achievable within the five year time frame.

Generally, an improvement of 10% was targeted for the majority of the five year objectives. This is more ambitious than the HP2020 target setting method of 10% improvement over ten years.

Each Priority Committee Action Plan includes an extensive list of objectives. A subset of these objectives, shown below, was selected to track overall progress toward plan goals.

Priority	Focus Area	Goal	Objective - By December 31, 2017
Improve Health Status and Reduce Health Disparities		Improve the health status of all New Yorkers	Reduce the percentage of premature deaths (before age 65 years) by 10% to 21.8% (Baseline: 24.2%; Year 2010; Source: NYS Vital Statistics, Data Availability: state, county) Reduce disparity* by 10% Ratio of Black Non-Hispanic to White non-Hispanic percentage of premature death (before age 65 years) (Target: 1.87; Baseline: 2.08; Year 2010; Source: NYS Vital
			• Ratio of Hispanic to White non-Hispanic percentage of premature death (before age 65 years) (Target: 1.86; Baseline: 2.07; Year 2010; Source: NYS Vital Statistics, Data Availability: state, county)
Improve			Reduce the age-adjusted rate of preventable hospitalizations among adults by 10% to 133.3 per 10,000 adults (Baseline: 148.1; Year 2010; Source: NYS Statewide Planning and Research Cooperative System (SPARCS); Data Availability: state, county)
			Reduce disparity* by 10% • Ratio of Black Non-Hispanic to White non-Hispanic age-adjusted rate of preventable hospitalizations (Target: 1.85; Baseline: 2.06; Year 2010; Source: NYS Statewide Planning and Research Cooperative System (SPARCS); Data Availability: state, county)
			 Ratio of Hispanic to White non-Hispanic age-adjusted rate of preventable hospitalizations (Target: 1.38; Baseline: 1.53; Year 2010; Source: NYS Statewide Planning and Research Cooperative System (SPARCS); Data Availability: state, county)
			Increase the percentage of adults (ages 18-64) with health insurance to the HP 2020 target at 100% (Baseline: 83.1%; Year 2010; Source: U.S. Census Bureau, Small Area Health Insurance Estimates; Data Availability: state, county), HP 2020 (AHS-1.1) target: 100%
			Increase the age-adjusted percentage of adults who have a regular health care provider by 10% to 90.8% (Baseline: 82.5%; Year 2011; Source: Behavior Risk Factor Surveillance System; Data Availability: state, county), HP 2020 (AHS-3) target: 83.9%

Priority	Focus Area	Goal	Objective - By December 31, 2017
Promote a Healthy and Safe Environment	Injuries, Violence and Occupational Health	Reduce fall risks among the most vulnerable populations	Stop the annual increase of the rate of hospitalizations due to falls among residents ages 65 and over by maintaining the rate at 204.6 per 10,000 residents (2008-2010) (Data Source: NYS DOH, Statewide Planning and Research Cooperative System) (Data Availability: State, County)
			Reduce ED visits due to home falls among children ages 1 to 4 by 10% from 476.8 (2008-2010) to 429.1 per 10,000 residents (Data Source: NYS DOH, Statewide Planning and Research Cooperative System) (Data Availability: State, County)
		violence prevention programs particularly to	Reduce the rate of assault-related hospitalizations by 10% from 4.8 (2008-2010) to 4.3 per 10,000 (Data Source: NYS DOH, Statewide Planning and Research Cooperative System) (Data availability: State, County)
			Reduce disparity* by 10%: • Ratio of Black Non-Hispanic rate of assault-related hospitalizations to White non-Hispanic rate of assault-related hospitalizations (Target: 6.69; Baseline: 7.43; Year: 2008-2010; Source: NYS SPARCS Data; Data Availability: state, county)
			 Ratio of Hispanic rate of assault-related hospitalizations to White non-Hispanic rate of assault-related hospitalizations (Target: 2.75; Baseline: 3.06; Year: 2008-2010; Source: NYS SPARCS Data; Data Availability: state, county)
			 Ratio of assault-related hospitalization rate in low income ZIP codes to assault-related hospitalization rate in non-low income ZIP codes (Target: 2.92; Baseline: 3.25; Year: 2008-2010; Source: NYS SPARCS Data; Data Availability: state, county)
		Reduce occupational injury and illness focusing on adolescents	Reduce the rate of emergency room visits for occupational injuries among adolescents 15-19 years of age by 10% from 36.7 to 33.0 per 10,000. (2008-2010) (Data Source: NYS DOH, Statewide Planning and Research Cooperative System) (Data Availability: State, County)
	Outdoor Air Quality	Reduce exposure to outdoor air pollutants, with a focus on burdened communities	Reduce the annual number of days with unhealthy ozone as measured by the Air Quality Index (AQI)>100 to 0. (Baseline: New York City: 5 days for ozone (2005-2009); Rest of State: 5 for ozone (2005-2009)) (Data Source: NYS DEC Ambient Air Monitoring Network) (Data Availability: State)

Priority	Focus Area	Goal	Objective - By December 31, 2017
			Reduce the annual number of days with unhealthy particulate matter as measured by the Air Quality Index (AQI)>100 to 0. (Baseline: New York City: 6 for PM (2005-2009); Rest of State: 3 for PM (2005-2009)) (Data Source: NYS DEC Ambient Air Monitoring Network) (State)
	Built Environment	of the built environment to promote healthy lifestyles, sustainability and adaptation to	Increase the percentage of population that lives in a jurisdiction that adopted the Climate Smart Communities pledge by 20% from 26.7% to 32.0% (Year: 2012; Data Source: NYS DEC Program Tracking, available at: http://www.dec.ny.gov/energy/56876.html) (State, County)
			Increase the percentage of commuters who use alternate modes of transportation (i.e. public transportation, carpool, bike/walk, telecommute) by 10% from 44.7% to 49.2% (2008-2010 3-yr. estimate) (Data Source: US Census, American Community Survey) (Data Availability: State, County)
			Improve access to affordable fruits and vegetables among low-income NYS residents by decreasing the percentage who live greater than 1 mile from a supermarket or grocery store in urban areas, or greater than 10 miles from a supermarket or grocery store in rural areas, by 10% from 2.49% to 2.24% (Year: 2010; Data Source: US Department of Agriculture Food Environment Atlas) (Data Availability: State, County)
		·	Increase the percentage of homes in vulnerable neighborhoods that have fewer asthma triggers during Healthy Neighborhood Program home revisits by 55% from 12.9% to 20% (Data Source: NYS DOH, Healthy Neighborhoods Program Tracking) (Years: 2008-2011; Data Availability: Select counties)
	Water Quality	, ,	Increase the percentage of NYS residents served by community water systems that receive optimally fluoridated water by 10% from 71.4% (2012) to 78.5% (Data Source: CDC Water Fluoridation Reporting System) (Data Availability: State, County), HP 2020 (OH-13) target: 79.6%
		 Reduce potential public health risks associated with drinking water and recreational water 	TBD

Priority	Focus Area	Goal	Objective - By December 31, 2017
0,		promote and support healthy food and beverage choices and physical activity	Reduce the percentage of adults who are obese by 5% so that the age-adjusted percentage of adults ages 18 years and older who are obese is reduced from 24.2% (2011) to 23.0%; (state; county), HP 2020 (NWS-9) target: 30.5% Reduce disparity: • The age-adjusted percentage of adults ages 18 years and older with an annual household income less than \$25,000 who are obese is reduced 5% from 26.7% (2011) to 25.4%; (state;) • The age-adjusted percentage of adults with disabilities ages 18 years and older who are obese is reduced 10% from 32.5% (2011) to 29.3% (Data Source: NYS BRFSS; Data Availability: state)
		early child care and schools	Reduce the percentage of children and adolescents who are obese by 5% so that the percentage of public school children in New York State (outside NYC) who are obese is reduced from 17.6% (2010-12) to 16.7% (Data Source: Student Weight Status Category Reporting) and the percentage of public school children in New York City is reduced from 20.7% (2010-11) to 19.7% (Data Source: NYC Fitnessgram; Data Availability: upstate (outside NYC), NYC, borough/county)
		health service providers and insurers in obesity prevention	Increase the percentage of children and adolescents ages 3 through 17 years with an outpatient visit with a primary care provider or obstetrics/gynecology practitioner during the measurement year, who received appropriate assessment for weight status during the measurement year by: • 29% from 58% (2011) to 75% among residents enrolled in commercial managed care health insurance • 5% from 72% (2011) to 75% among residents enrolled in NYS Government sponsored managed care health insurance (Data Source: NYS QARR; Data year 2011; Data Availability: statewide and by plan)
		Expand the role of public and private employers in obesity prevention	See the "Prevent Chronic Diseases Action Plan", Page 8

Priority	Focus Area	Goal	Objective - By December 31, 2017
	Reduce illness, disability and death related to tobacco use and secondhand smoke exposure	New York youth and young adults,	Decrease the prevalence of any tobacco use (cigarettes, cigars, smokeless tobacco) by high school age students by 30% from 21.2% in 2010 to 15.0%. (Data source: NY Youth Tobacco Survey) (Data Availability: state)
		especially among low SES populations and	Decrease the prevalence of cigarette smoking by adults by 18% from 18.4% in 2011 to 15.0%. (Data source: NYS BRFSS; Data Availability: state; county), HP 2020 (TU-1.1) target: 12%
			Reduce disparity: • Decrease the prevalence of cigarette smoking among adults with income less than \$25,000 by 30% from 28.5% (2011) to 20%. (Data Source: NYS BRFSS Data Availability: state)
			Increase the utilization of smoking cessation benefits among smokers who are enrolled in Medicaid Managed Care by 141% from 17% (2011) to 41%. (Data source: Medicaid) (Data Availability: state)
		 Eliminate exposure to secondhand smoke. 	See the "Prevent Chronic Diseases Action Plan", Page 18
	Increase access to high quality chronic disease preventive care and management in both clinical and community settings	breast/cervical/colorectal cancer, especially among disparate populations	Increase the percentage of adults (50-75 years) who receive a colorectal cancer screening based on the most recent guidelines (blood stool test in the past year or a sigmoidoscopy in the past 5 years and a blood stool test in the past 3 years or a colonoscopy in the past 10 years) by 5% from 68.0% (2010) to 71.4%. (Data Source: NYS BRFSS) (Data Availability: state, county), HP 2020 (C-16) target: 70.5% (all adults)
			Reduce disparity: • Increase the percentage of adults (50-75 years) with an income of less than \$25,000 who receive a colorectal cancer screening based on the most recent guidelines by 10% from 59.4% (2010) to 65.4%. (Data Source: NYS BRFSS) (Data Availability: state)

Priority	Focus Area	Goal	Objective - By December 31, 2017
		Promote use of evidence-based care to manage chronic diseases	Reduce the asthma emergency department visit rate by 10% from 83.4 per 10,000 residents (2007-09) to 75.1 per 10,000 residents all ages (Data Source: SPARCS) (Data Availability: state, county, zip code)
			Reduce disparity: • Reduce the asthma emergency department visit rate by 28% from 218.3 per 10,000 (2007-2009) to 196.5 per 10,000 for residents ages 0-4 years (Data Source: SPARCS) (Data Availability: state, county, zip code)
			Increase the percentage of health plan members, ages 18 to 85 years, with hypertension who have controlled their blood pressure (below 140/90) by 10% from 63% (2011) to 69.3% for residents enrolled in commercial managed care health insurance, and by 7% from 67% (2011) to 72% for residents enrolled in Medicaid Managed Care (Data Source: NYS QARR; Data Availability: state and by plan)
			Reduce disparity: • Increase the percentage of health plan members, ages 18 to 85 years, with hypertension who have controlled their blood pressure (below 140/90) by 15% among black adults enrolled in Medicaid Managed Care from 58% (2011) to 66.7%. (Data Source: NYS QARR) (Data Availability: state)
			Increase the percentage of adult health plan members with diabetes whose blood glucose is in good control (hemoglobin A1C less than 8%) by 7% from 58% (2011) to 62% for residents enrolled in Medicaid Managed Care; and by 10% from 55% (2011) to 60.5% for residents enrolled in commercial managed care insurance (Data Source: NYS QARR; Data Availability: state and by plan)

Priority	Focus Area	Goal	Objective - By December 31, 2017
			Reduce disparity: • Increase the percentage of adult health plan members with diabetes whose blood glucose is in good control (hemoglobin A1C less than 8%) by 10% from 56% (2011) to 62% for black adults enrolled in Medicaid Managed Care (Data Source: NYS QARR) (Data Availability: state)
			Reduce the rate of hospitalizations for short-term complications of diabetes by 10% from 3.40 per 10,000 (2007-09) to 3.06 per 10,000 for residents ages 6-17 years and from 5.40 per 10,000 (2007-09) to 4.86 per 10,000 for residents ages 18+ years (Data Source: SPARCS; Data availability, state, county)
			Reduce the age-adjusted hospitalization rate for heart attack by 10% from 15.5 per 10,000 residents (2010) to 14.0 per 10,000 residents all ages (Data Source: SPARCS; Data Availability: state, county)
		Promote culturally relevant chronic disease self-management education	See the "Prevent Chronic Diseases Action Plan", Page 26

Priority	Focus Area	Goal	Objective - By December 31, 2017
Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare-Associated Infections		Immunization RatesEducate all Parents about Importance of Immunizations	Increase the rates of 19-35 month olds with the 4:3:1:3:3:1:4 series (4 DTaP, 3 polio, 1 MMR, 3 hep B, 3 Hib, 1 varicella, 4 PCV13) by 23% to 80% or higher (Baseline: 65.1%, Year: 2011, Source: NIS) (Data Availability: state excluding NYC, county (NYSIIS)), HP 2020 (IID-8) target: 80% Increase the 3-dose HPV immunization rate among adolescent females, ages 13-17 years, by 45% to 50% (Baseline: 34.2%, Year: 2011, Source: NIS) (Data Availability: state excluding NYC, county (NYSIIS)
		Disease	See above Increase flu immunization rates of adults aged 65 years and older by 10% to 66.2% (Baseline: 60.2%; Year 2011; Data Source: BRFSS and Expanded BRFSS; Data Availability: state, county), HP 2020 (IID-12.7) target: 90%
reventa		 Decrease the Burden of Disease Caused by Human Papillomavirus 	See above
Prevent HIV/STDs, Vaccine P	Human Immunodeficiency Virus (HIV)	Ş	Reduce the newly diagnosed HIV case rate by 25% to no more than 14.7 new diagnoses per 100,000. (Baseline: 19.6/100,000; Year 2010; Data Source: HIV Surveillance System; Data Availability: state, county), HP 2020 (HIV-1) target: 13/100,000
			Reduce Disparity: ● Decrease the gap in rates of new HIV diagnoses (per 100,000 population) by 25% between whites and blacks to 45.7 and between whites and Hispanics to 22.3. (baseline: 60.9 for black/white and 29.8 for Hispanic/white; Year: 2006-2010; Data Source: HIV Surveillance System; Data Availability: state, county)
		retention in HIV care	Increase the percentage of HIV-infected persons with a known diagnosis who are in care by 9% to 72% (Baseline: 66%; Year: 2010; Data Source: HIV Surveillance System; Data Availability: state)

Priority	Focus Area	Goal	Objective - By December 31, 2017
	Sexually Transmitted Diseases (STDs)	Decrease STD morbidity	Reduce the gonorrhea case rate among persons aged 15-44 years by 10% to no more than 183.1 cases per 100,000 women and 199.5 per 100,000 men. (Baseline: 203.4/100,000 women and 222/100,000 men; Year 2010; Data Source: STD surveillance system; Data Availability: state, county), HP 2020 (STD-6.1 and 6.2) targets: 198/100,000 women and 257/100,000 men
			Reduce the Chlamydia case rate among females aged 15-44 years by 10% to no more than 1,458 cases per 100,000. (Baseline 1,620/100,000; Year 2010; Data Source: STD surveillance system; Data Availability: state, county)
			Reduce the case rate of primary and secondary syphilis by 10% to no more than 10.1 cases per 100,000 men and 0.4 cases per 100,000 women. (Baseline 11.2/100,000 men and 0.5/100,000 for women; Year 2010; Data Source: STD surveillance system; Data Availability: state, county), HP 2020 (STD-7.1 and 7.2) targets: 6.8/100,000 men and 1.4/100,000 women
	Hepatitis C Virus (HCV)	Increase and Coordinate HCV Prevention and Treatment Capacity	TBD
	Healthcare Associated Infections	Reduce Clostridium difficile (C. difficile) infections	Reduce hospital-onset CDIs by 30% to 5.94 new cases/10,000 patient days (Baseline: 8.48 new cases/10,000 patient days; Year: 2011; (Data Source: National Healthcare Safety Network (NHSN)(Data availability: state, hospital) Reduce community-onset healthcare facility-associated CDIs by 15% to 2.05 new cases/10,000 patient days (Baseline: 2.41 new cases/10,000 patient days; Year: 2011; Source: NHSN)
		Reduce Infections caused by multidrug resistant organisms	TBD
		Reduce device-associated Infections	TBD

Priority	Focus Area	Goal	Objective - By December 31, 2017
<u> </u>	Maternal and Infant Health	York State	Reduce the percentage of preterm births (less than 37 weeks gestation) by 12% to 10.2% (Baseline: 11.6%; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county), HP 2020 (MICH-9) target: 11.4% Reduce disparity* by 10%: Ratio of Black Non-Hispanic preterm birth rate to White non-Hispanic preterm birth rate (Target: 1.42; Baseline: 1.58; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county) Ratio of Hispanic preterm birth rate to White non-Hispanic preterm birth rate (Target: 1.12; Baseline: 1.24; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county) Ratio of Medicaid preterm birth rate to non-Medicaid preterm birth rate (Target: 1.00; Baseline: 1.10; Year: 2010; Source: NYS Vital Statistics Data; Data Availability:
		Increase the proportion of NYS babies who are breastfed	Increase the percentage of infants exclusively breastfed in the hospital by 10% to 48.1% (Baseline: 43.7%; Year: 2010; Source: NYSDOH Vital Records; Data Availability: state, county) Reduce disparity* by 10%: Ratio of Black Non-Hispanic to White non-Hispanic percentage of infants exclusively breastfed in the hospital (Target: 0.57; Baseline: 0.52; Year: 2010; Source: NYS Vital Records; Data Availability: state, county) Ratio of Hispanic to White non-Hispanic percentage of infants exclusively breastfed in the hospital (Target: 0.64; Baseline: 0.58; Year: 2010; Source: NYS Vital Records; Data Availability: state, county) Ratio of Medicaid to non-Medicaid percentage of infants exclusively breastfed in the hospital (Target: 0.66; Baseline: 0.60; Year: 2010; Source: NYS Vital Records; Data Availability: state, county)

Priority	Focus Area	Goal	Objective - By December 31, 2017
		Reduce the rate of maternal deaths in New York State	Reduce the rate of maternal mortality in NYS by at least 10% to 21.0 per 100,000 live births (Baseline: 23.3; Year: 2008-2010; Source: NYS Vital Records; Data Availability: state, county), HP 2020 (MICH-5) target: 11.4/100,000
			Reduce disparity* by 10%: • Ratio of Black non-Hispanic to White non-Hispanic maternal mortality rate. (Target: 4.76; Baseline: 5.29; Year: 2008-2010; Source: NYS Records; Data Availability: state)
	Child Health	Increase the proportion of NYS children who receive comprehensive well child care in accordance with AAP guidelines	Increase the percentage of children ages 0-15 months, 3-6 years and 12-21 years who have had the recommended number of well child visits among NYS Government sponsored [#] managed care health insurance programs by 10% to 76.9% (Baseline: 69.9%; Year: 2011; Source: NYSDOH Office of Patient Quality and Safety; Data Availability: state, county)
			 Increase the percentage of children ages 0-15 months who have had the recommended number of well child visits among NYS Government sponsored managed care health insurance programs by 10% from 82.8% to 91.3%. Increase the percentage of children ages 3-6 years who have had the recommended number of well child visits among NYS Government sponsored managed care health insurance programs by 10% from 82.8% to 91.3%. Increase the percentage of children ages 12-21 years who have had the recommended number of well child visits among NYS Government sponsored managed care health insurance programs by 10% from 61.0% to 67.1%
			Increase the percentage of children ages less than 19 years with any kind of health insurance to 100% (Baseline: 94.9%, Year: 2010, Source: U.S. Census Bureau, Small Area Health Insurance Estimates; Data Availability: state, county)

Priority	Focus Area	Goal	Objective - By December 31, 2017
		caries among NYS children	Reduce the percentage of third-grade children with evidence of untreated tooth decay by 10% to 21.6% (Baseline: 24%; Year: 2009-2011; Source: NYSDOH Oral Health Survey of Third Grade Children; Data Availability: state excluding NYC, county), HP 2020 (OH-2.2) target: 25.9% Reduce disparity (ratio) by 10%: Ratio of percentage of untreated tooth decay among low-income children to percentage among high-income children (Target: 2.21; Baseline: 2.46; Year: 2009-2011; Source: NYSDOH Oral Health Survey of Third Grade Children; Data Availability: state excluding NYC, county)

Priority	Focus Area	Goal	Objective - By December 31, 2017
	Preconception and Reproductive Health	Reduce the rate of adolescent and unplanned pregnancies in NYS	Reduce the adolescent pregnancy rate by 10% to 25.6 per 1,000 females (15-17 years) (Baseline: 28.5; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county), HP 2020 (FP-8.1) target: 36.2/1,000 Reduce disparity* by 10%: Ratio of rates of pregnancies among females age 15-17 for Black non-Hispanics to White non-Hispanics. (Target: 4.90; Baseline: 5.47; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county) Ratio of rates of pregnancies among females age 15-17 for Hispanics to White non-Hispanics. (Target: 4.10; Baseline: 4.58; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county) Reduce the percentage of live births resulting from a pregnancy that was unintended by 10% to 23.8% (Baseline: 26.4%; Year: 2011; Source: NYS Vital Statistics Data; Data Availability: state, county) Reduce disparity* by 10%: Ratio of unintended pregnancy rates among live births for Black non-Hispanics to White non-Hispanics (Target: 1.90, Baseline: 2.11; Year: 2011; Source: NYS Vital Statistics Data; Data Availability: state, county) Ratio of unintended pregnancy rates among live births for Hispanics to White non-Hispanics (Target: 1.43; Baseline: 1.59; Year: 2011; Source: NYS Vital Statistics Data; Data Availability: state, county) Ratio of unintended pregnancy rates among live births for Medicaid to non-Medicaid (Target: 1.54, Baseline: 1.71; Year: 2011; Source: NYS Vital Statistics Data; Data Availability: state, county)

Priority	Focus Area	Goal	Objective - By December 31, 2017
		health services among women of reproductive age to improve wellness, pregnancy outcomes and reduce recurrence of adverse birth outcomes	Increase the percentage of women age 18-64 who report they have any kind of health coverage to 100% (Baseline: 86.1, Year: 2010, Source: U.S. Census Bureau, Small Area Health Insurance Estimates; Data Availability: state, county) Reduce the percentage of all live births that occur within 24 months of a previous pregnancy by 10% to 17.0% (Baseline: 18.9%; Year: 2010; Source: NYS Vital Statistics Data; Data Availability: state, county)
Substance	Promote Mental, Emotional and Behavioral Health (MEB)	 Promote mental, emotional and behavioral well-being in communities 	TBD
	Prevent Substance Abuse and Other MEB Disorders	medical use of prescription drugs by youth, and excessive use of alcohol consumption	Reduce the percentage of adolescents (youth in grades 9 - 12) reporting use of alcohol on at least one day for the past 30 days by 10% from 38.4% to no more than 34.6% (Baseline: 38.4%, Year: 2011; Data Source: Youth Risk Behavior Survey; Data Availability: state)
			Reduce the percentage of adolescents (youth ages 12 to 17 years) reporting the use of non-medical use of painkillers by 10% to no more than 4.73% (Baseline: 5.26%; Year: 2009-2010; Data Source: National Survey on Drug Use and Health (NSDUH), Data Availability: state)
			Reduce the age-adjusted percentage of adult binge drinking (5 or more drinks for men on one occasion, and 4 or more drinks for women on one occasion) during the past month by 10% to no more than 18.4%. (Baseline: 20.4%; Year: 2011; Data Source: Behavioral Risk Factor Surveillance System (BRFSS) and Expanded BRFSS; Data Availability: state, county), HP 2020 (SA-14.3) target: 24.4%
		mental emotional and behavioral disorders among youth and adults	Reduce the age-adjusted percentage of adults with poor mental health (14 or more days) in the last month by 10% to no more than 10.1%. (Baseline: 11.2%; Year: 2011; Data Source: Behavioral Risk Factor Surveillance System (BRFSS) and Expanded BRFSS; Data Availability: state, county)

Priority	Focus Area	Goal	Objective - By December 31, 2017
			Reduce the percentage of adolescents (youth grades 9 to 12) who felt sad or hopeless (almost every day for 2 or more weeks in a row so that they stopped doing some usual activities during the past 12 months) by 10% to no more than 22.4%. (Baseline: 24.9 %; Year: 2011; Data Source: Youth Risk Behavior Survey; Data Availability: state)
		Prevent suicides among youth and adults	Reduce the percentage of adolescents (youth grades 9 - 12) who attempted suicide one or more times in the past year by 10% to no more than 6.4% (Baseline: 7.1%; Year: 2011; Data Source: Youth Risk Behavior Survey; Data Availability: state), HP 2020 (MHMD-2) target: 1.7%
			Reduce the age-adjusted suicide rate by 10% to 5.9 per 100,000 (Baseline: 6.6 per 100,000,Year: 2007-2009; Data Source: Bureau of Biometrics; Data Availability: state, county), HP 2020 (MHMD-1) target: 10.2/100,000
		Reduce tobacco use among adults who report poor mental health	Reduce the age-adjusted percentage of cigarette smoking among adults who report poor mental health by 15% from 31.2% in 2011 to 26.5%. (Data source: NY Adult Tobacco Survey; Data Availability: state)
	Strengthen Infrastructure Across Systems	 Support collaboration among professionals working in fields of mental, emotional, behavioral health promotion and chronic disease prevention, treatment and recovery 	TBD
		Strengthen infrastructure for mental emotional behavioral health promotion, and mental emotional behavioral disorder prevention	TBD

^{*:} Ratio=1 means no disparity

^{#:} Medicaid Managed Care or Child Health Plus programs