

## UHF Mayoral Candidate Health Policy Survey, April–May 2021

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In one sentence, what is the biggest health care issue, aside from the COVID-19 pandemic, facing New York City in 2022 and beyond? (200 characters including spaces)

The major issue is a misidentification of success in healthcare, which is today focused on reactive responses to sickness instead of proactive focus on wellness.

What are your top 3 broad health priorities? (choose from list below)

Access to Care	Aging	Children/Adolescents
Chronic Disease	Cost of Care	COVID
Health Insurance Coverage	Health Related Social Needs / Social Determinants	Homeless Health
Hospital Sustainability	Immigrant/Refugee Health	LGBTQ Health
Mental Health	NYC Health+Hospitals	Prescription Drugs
Primary Care	Quality of Care	Racial/Ethnic Disparities
Specialty Care	Substance Use Disorder	

Children/Adolescents, Health Related Social Needs / Social Determinants, Racial/Ethnic Disparities

Long-standing disparities in health and health outcomes among different communities in NYC have been well documented. What do you think is the single biggest cause

of disparities in health, and how would your administration address that root cause of health inequities? (1000 characters)

Poverty is the single biggest cause of health disparities, leading to poor outcomes stemming from stress, violence, unhealthy living conditions, pollution, poor nutrition, homelessness, mental illness and more. Poverty traps people in a cycle of sickness, ensuring that people are more vulnerable when crises emerge, like the COVID pandemic. From my experience, I know that only holistic approaches will create longer-term outcomes. My administration will address the root cause with the following measures: Eradicate housing and food insecurity Create safety on the streets and in families' homes Deliver equity with a focus on education Provide opportunities for personal growth and employment My signature proposal is to deliver Universal Child Care in Centers of Community Care, coordinated with DOH programs that improve infant and maternal health and build partnerships to provide free or low-cost baby and women's hygiene products.

How would you approach directing resources to address health inequities to the neighborhoods and subpopulations that are most historically underserved? (1500 characters)

From my experience seeing the positive outcomes of intensive, coordinated delivery of services in child welfare, healthcare and education, I know that intensive, coordinated services delivered disproportionately to the most underserved communities are the only way to make sustainable progress. As Mayor, I will ensure that programs to deliver the root cause solutions addressed in the prior question are robustly funded, staffed with great people, coordinated at the Mayoral level and down the ranks. But City Hall can't do it alone. Communities and community-based organizations must be partners. As Mayor, I will engage with communities and CBOs on the ground to align around needs assessment and prioritization. In doing so, we must also address inequities related to disability, gender, language/culture, and immigration. Trust is a major missing factor. Developing trust

will not happen overnight; it will have to be earned. Without it, all the best-intentioned plans will be difficult if not impossible to execute.

More than 31,000 NYC residents have died of COVID-19 to date. On a scale of 1-10, with 10 being the highest, how would you rate the whole of government response to the pandemic (federal, state and local)?

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While hindsight is always 20/20, if you were mayor in 2020/2021 what single thing would you have done differently to try and reduce the number of New York City residents who perished? (500 characters)

Communications would have been first. As soon as we knew this would become a global event, I would have started addressing the city to prepare us for the inevitable shut down. As Mayor, given my experience with supply chain and distribution, I would anticipate the food and housing crises, the hospital capacity constraints and then the later vaccine distribution. Given my experience with education, I would work with school teachers and administrators to plan for closing, and then reopening.

As COVID-19 recovery continues, how would your administration approach learning from the response to the pandemic and what specifically will it do to prepare for the next event that could alter the health of the City? (1500 characters)

Substantially augment the city's communications capabilities to reach every resident in the channel and language that serve their needs and to enable residents to have a customer service relationship with the city Restore and fund pandemic preparation and other resiliency programs, especially early identification and response planning, include the stockpiling of essential items likes masks and gloves Keep people in their homes Work with financial services sector to inject flexibility into mortgages for the next crisis Create flexibility in rental

leases for the next crisis. Create a rainy day fund for owners of stabilized and low-income housing. Strengthen the food network to create flexibility and greater self-sufficiency. Ensure a working needs-based financial relief mechanism that includes large populations left out in this pandemic. Ensure every adult and every student has access to Universal Broadband with a connected device. Put in place a system that starts with community health centers within a half mile of every resident, CBOs, and hospitals. Organize the City government into rapid response teams. Work relentlessly to strength the health and well-being of everyone in the city. Better integration between private healthcare and the city system. Better collaboration and coordination with State and Federal governments.

How will you address the potential long-term health impacts for children that have lost loved ones, faced other socio-economic traumas, and have lost learning as a result of COVID-19? (1000 characters)

While the next Mayor won't take office till halfway through the next school year, it's impossible to ignore the massive impact the last year's crisis has had on our public school system, its teachers, and its students. In collaboration with the UFT and other relevant unions, the City's first priority should be to safely re-open the school system after teachers and administrators have been vaccinated. This includes CUNY. We must have Universal Broadband and wi-fi equipped devices for every student. We must restart extra-curricular activities, including sports, with built-in safety measures like frequent COVID testing and having students pledge to not interact with other kids outside of their "pod". We must protect and expand the Summer Youth Employment Program. We must fund a substantial increase in mental health and guidance counselors in all schools, especially for students who have lost loved ones to COVID-19. Then, we must destigmatize mental illness through the same lens as physical illness. Too often, especially for BIPOC students, the response to mental illness is punitive, rather than looking at the whole student holistically with compassion, understanding, and treatment.

Most major decisions affecting the health of New Yorkers are made in Washington or Albany. What activities under local control could have the biggest impact on NYC resident's health? What are the key city agencies your administration would use to execute those activities and how? (1000 characters)

I would institute Deputy Mayor for Public Health and Wellness, who'd be responsible for DHH and DOH and would interface with the Deputy Mayor of Public Safety, Deputy Mayor for Housing & Homelessness, and Deputy Mayor for Education. This Deputy Mayor would: Bring health services closer to people Reduce housing and food insecurity Get students back in school, while drastically increasing the number of nurses and guidance counselors in each school Implement Universal Childcare Additionally, under local control, we can double down on the environment of the city and how that contributes to health. I have a plan to improve NYCHA and sub-standard housing to get mold and toxins out of people's homes, as well as to increase bike lanes & safe streets to reduce the number of cars -- limiting emissions & pollution, and encouraging New Yorkers to safely use bikes, scooters, and other physically active modes of transportation.

Have you ever received care at a NYC Health+Hospitals inpatient or outpatient facility?

YES

NYC Health+Hospitals faces dire financial straits on a regular basis. Can this problem be addressed by better management and efficiency or is City budget support the answer? (500 characters)

I'll manage the city budget to eliminate overhead, streamlines processes & eliminates duplication. I'll use technology to create a responsive "customer service" relationship with New Yorkers that delivers services faster, with lower friction, to more people, building on the knowledge and experience of frontline healthcare workers. I'm committed to prioritizing equity, health,

and justice in all decisions with a team of diverse people who represent the diversity of the City.

Briefly, what criteria will you use to select the Commissioner of the Department of Health and Mental Hygiene? (300 characters)

Success defined as community well-being and resilience Hands-on work at the intersections leading to poor health: environmental, food, housing, education, mental health, policing Experience with NYC's communities Proven "servant leadership", preferably with experience in NYC or NYS government

Historically the Department of Health and Mental Hygiene publishes an annual strategy laying out its priorities. Beyond COVID-19, what would your 5 bullet point level priorities be for 2022-2023? (1000 characters)

- \* Mental Health 10,000 new beds for homeless mentally ill, in partnership with CBOs and non-profits Unarmed Rapid Response Teams to address mental health crises More mental health and guidance counselors in schools, ideally no fewer than 1 per 250 students

- \* Community-based health Quality public health centers within a half mile Eradicate food insecurity Reduce environmental causes of poor health Parks access targeting 1 active recreation park within 15 minute walk

- \* Pre-natal through early childhood Support pregnant women from conception through childbirth Deliver Universal Childcare, where centers are also part of healthcare system

- \* Health equity Specialized mental health and sexual health, especially for trans youth Expanded gerontology care Community responsive healthcare delivery to meet specific religious, language, cultural needs, including undocumented immigrants

\*Technology reboot for portable health records and data-driven decision-making within the NYC system

Have you ever been uninsured (lacked health insurance coverage for more 30 days) or been insured through Medicaid or Child Health Plus? (choose all that apply)

Uninsured	<input checked="" type="checkbox"/>
Medicaid or CHP	<input type="checkbox"/>
Always Insured	<input type="checkbox"/>

More than 50,000 New York City residents have signed up for the NYC Care direct access program. Would you continue the program?

YES

Regardless of your answer to the previous question, what is your approach to providing both access to care and health insurance coverage to uninsured New York City residents? (1500 characters)

My approach to healthcare is focused on achieving wellness to reduce the demands on our healthcare system and the applicable costs. I would sustain and increase NYC Care. Then, starting with Universal Childcare, my administration will level the playing field for every child and mother in New York City; bringing equitable access to early childhood development, maternal, and infant health. This will allow kids from all backgrounds access to resources and support and it will allow mothers full freedom in the workforce. We plan to do this by leveraging technology, data, and community partnerships in the neighborhoods that have been historically underserved, with high populations of uninsured residents. We will prioritize community input at all levels, using data, and making sure we can communicate across all languages, ages, and backgrounds. Residents will be insured because of outreach programs that listen to all communities and use performance based, data-driven metrics.

What specific populations would your administration target for improving access to coverage and care? How would you go about targeting initiatives to those populations? (1500 characters)

We would like to expand access to quality care to all populations in NYC, specifically those who have been underserved historically. First step in that process should be delivering universal broadband access and childcare to have an infrastructure in place to target care. With innovations in healthcare-tech and tele-health we can reach all populations including our LGBTQ, immigrant, and Black & Brown communities. I plan on pressuring Albany and banding together with state senators and assembly members in the NYC area to lobby for funding and protections for health coverage coverage. As Mayor I commit to targeting services like childcare and mental health to the communities that need it most, in our outer boroughs, East New York, Brownsville, The West Bronx, Washington heights and more. We plan on meeting people where they are, in their language, with representation from their communities.

What would you do as mayor to improve the quality and affordability of health insurance coverage for city employees and their families? (750 characters)

I would re-bid the City employee health insurance program and include a substantial element of preventative care, including nutrition, weight loss, healthier lifestyles, exercise, etc. In my administration, mental health, dental care and eye care would be essential to employee health planning. I would seek to introduce holistic healthcare practices, including acupuncture and massage into the employee health plan.

Access to primary care is essential to improving health outcomes. How would your administration strengthen the primary care infrastructure in NYC? (750 Characters)

In addition to everything outlined above, there should be a healthcare center within half a mile of every person. I will also



consider a mobile healthcare system, as it's already proven successful with mobile COVID testing. We can build on this mobile model to create healthcare delivery to homebound people. Lastly, as Mayor I will ensure there's at least one nurse in every school.

COVID-19 has exacerbated the need for mental health services and supports. Would you eliminate or continue the existing ThriveNYC initiative, and how would you approach addressing the different needs of the seriously mentally ill (SMI) and the much larger group of New York City residents with mental health needs that don't rise to the level of SMI? (1500 characters)

I would eliminate ThriveNYC and integrate its intent/reallocate its funding to mental health resources in underserved communities and the school system. The pandemic has forced healthcare providers to shift much of their psychiatric care to telehealth platforms to ensure their work with homeless and formerly homeless New Yorkers undergoing psychiatric care could continue to be safely cared for. This allowed them to reach more people, in more places, in a more flexible way. Virtual visits helped them maintain better continuity of care for patients. We should embrace this trend and strive to use it to help as many struggling New Yorkers as possible. We have the resources to get them care and get them housed, we need it is only a matter of managing, delegating, and making it happen. New York City's mentally ill need better care and greater supervision. I plan to provide that by strengthening outpatient commitment through the highly successful Kendra's Law program and rebuilding New York's inpatient capacity at general hospitals and state-run psychiatric centers. Inpatient psychiatric beds, which were already in short supply pre-Covid have been cut down, that needs to change. With limited training, we ask our police to do the work of psychologists, social workers, and psychiatrists. They are asked to clean up for society's lack of investment in mental health, education, and economic opportunity. This needs to change. Continuing to ask them to handle overdoses, mental health crises, or homelessness

is unreasonable and unfeasible. That is why I am in favor of re-allocation at least \$1.3 billion away from the NYPD budget towards community-based Mental Health crisis response and restorative justice.

For each of the issues below, please rate on a scale of 1-5 (5 being highest/most) the level of public health and health care engagement you believe should be dedicated to the issue?

Adult Education	5
Child Care	5
Climate Change	5
Early Childhood Education	5
Economic Development	5
Environmental Justice	5
Food Insecurity	5
Gun Violence	5
Land Use / Zoning	5
Systemic Racism	5
Workforce Development	5

Briefly, if you could convince New York State government to do one thing to improve the health of New York City residents, what would it be? (500 characters)

I would push them to fully fund universal childcare. To level the playing field for early childhood development and provide a safety blanket for young children and young mothers. I want to live in a city that supports young families and allows women to work, thrive, and continue to be leaders for our next generation. Fully funded Universal Childcare will do that and we should start in the communities that need it the most, those who have been historically marginalized and underfunded by the city

Briefly, if you could convince the federal government to do one thing to improve the health of New York city residents, what would it be? (500 characters)

Medicare for All.

By the end of your administration what one measurable goal would you look at to determine if you have improved the health of New York City residents? (250 characters)

My administration is focused on transparent data. It's hard to measure this in just one goal, but overall life expectancy rising would be the ultimate testament to my success in improving the healthcare system in NYC. Also, I'd be compelled to implement a Happiness Index based on Bhutan's model.

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