

# Inside the Bloomberg public health toolbox

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As Mayor Michael Bloomberg's term comes to a close, the latest research conducted by Columbia University's Mailman School of Public Health indicates that he leaves a legacy of ambitious public health policies from pioneering restrictions on trans fats and smoking to investments in green spaces and bicycle lanes that have improved the health and increased the life expectancy of New Yorkers. The paper takes a behind-the-scenes look at the Bloomberg Administration to evaluate the evidence and build public support for improving health in the city—which also can serve as a blueprint for health policy in cities across the country.

The researchers interviewed 27 current and former civil servants, elected officials, advocates, and staff of think tanks, and interest groups familiar with Bloomberg-era policies with a focus on the prevention of chronic disease, including trans-fat use in restaurants, transportation policies and [tobacco control policies](#), as well as opponents of the Mayor's policies. The resulting article in the peer-reviewed journal *Frontiers in Public Health Services and Systems Research* reports on the themes that emerged.

"The notable aspect of the Bloomberg approach is not just the high-profile public [health](#) policies but also the way they went about developing, evaluating, and advocating for the policies," says Miriam J. Laugesen, PhD, the article's lead author and assistant professor of Health Policy and Management. "In addition to learning from the policies themselves, urban leaders should look at how those policy decisions were made, particularly how scientific evidence can help make good policy. "

Mayor Michael R. Bloomberg has a personal interest in public health, and interviewees described him as a "linch pin" for policy and "willing to take risks." However, the Mayor's support was contingent on data. "He was not a cheerleader for all proposals: staff learned that he would scrutinize their data before embarking on new policies, and in some cases he would ask questions that required fundamental revisions," the researchers write.

## **Five Key Tools, a Model for Other Cities**

Dr. Laugessen and co-author Kimberly R. Isett, PhD, associate professor in the School of Public Policy at Georgia Tech, identified five strategies used by New York City policymakers:

1. Rigorous appraisal of published studies. Health officials didn't limit themselves to top-line findings from studies but looked "under the hood" at the methodology and granular data.
2. Collection of health survey data. Survey data at the local level provided an evidence-based foundation for developing interventions and served as a benchmark for evaluating their effectiveness.
3. Shoe-leather research. The New York City Department of Health and Mental Hygiene conducted smaller-scale research to tailor findings to local contexts and to make health issues more concrete to the public.
4. Inter-agency collaboration. Collaborations helped broaden available data and policy options. Example: The Departments of Police, Health, Parks and Recreation, and Transportation collaborated to research bicycle fatalities and guide the creation of bicycle lanes.
5. Research dissemination. Between 2004 and 2008, city health officials published more than 300 articles in peer-reviewed public health and medical journals. They also used opinion pieces

and commentaries to reframe the issue.

"Especially with innovative policies, it is necessary to develop an information base and make policies that are evidence-based," adds Dr. Laugesen.

While some policies were challenged in the courts with some questioning the depth of evidence behind policies like the ban on trans fats or the link between soda consumption and obesity, interviewees did not question the quality of health data collected by the City.

Strengthening [public health](#) policymaking on the local level is particularly important since it is there that innovative health policies like bans on smoking and [trans fats](#) are most likely to succeed, observed Dr. Laugesen. "I would surmise that there's going to be more support for policies at the local level with local leadership where it is not seen as imposed from outside," she says. "Cities are uniquely able to bring people together to change the environment and shape our choices in support of health."

Provided by Columbia University's Mailman School of Public Health

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