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Leaders:

May 28, 2021

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Pursuant to Chapter 282 of the Laws of 2020 of New York State, the Division of Veterans' Services (DVS) in consultation with the Office of Parks, Recreation and Historic Preservation, the Department of Environmental Conservation, the Department of Health, and the Office of Mental Health, was charged with, among other things, drafting and disseminating a Report on the barriers that exist to providing Veterans with increased access to State lands and opportunities for medical treatment and nature-based therapy and programming. At DVS's invitation, the Office of Addiction Services and Supports joined the committee and contributed to the report.

Today, we are pleased to share our Outdoor Rx Committee Report. The report details the findings of the Committee, and recommends, among other things, that DVS continue to engage with partner agencies and community-based organizations in a continued effort to identify and mitigate barriers to access, and to foster increased communication to avoid duplication of efforts.

Sincerely,

Joel Evans
Executive Deputy Director

OUTDOOR RX REPORT 1

Outdoor Rx Committee Report

This report has been prepared pursuant to Chapter 282 of the Laws of 2020 of New York State, which stipulates that the Director of the Division of Veterans' Services (DVS) shall, in consultation with the Office of Parks, Recreation and Historic Preservation (OPRHP), the Department of Environmental Conservation (DEC), the Department of Health (DOH), and the Office of Mental Health (OMH), review:

- a. Barriers that exist to provide Veterans with increased access to State lands and opportunities for medical treatment and nature-based therapy and programming, including barriers to transportation, handicap accessibility, cultural barriers, mental health stigmas, public awareness of State outdoor resources, lack of experience in the outdoors, and funding for public and private programs.
- b. Current State policies regarding free and discounted access to State parks, lands, and recreational facilities by Veterans, service-connected disabled Veterans, gold star families, and other military-connected individuals.
- c. Opportunities to formalize coordination between the Division of Veterans' Services, other State agencies, and partner organizations regarding the use of public lands or other outdoor spaces to facilitate access, medical treatment, and nature-based therapy for Veterans.
- d. State lands, based on Veterans' demographics including, but not limited to, service connected disabled Veterans, that should be prioritized for access.
- e. Recommendations, following consultation with appropriate Veterans' outdoor recreation groups, to reduce barriers and better facilitate the use of State owned and managed lands for access, preventative care, medical treatment, and nature-based therapy.

f. Estimated costs of implementing such recommendations and expanding access/benefits, as well as potential funding sources, including State funding and public-private partnership opportunities.

Reporting Requirements

In accordance with Chapter 282 of the Laws of 2020 of New York State, the Division of Veterans' Services shall submit findings to the Governor, the Temporary President of the Senate, the Speaker of the Assembly, the Minority Leader of the Senate, the Minority Leader of the Assembly, the Chair of the Assembly Committee on Veterans' Affairs, and the Chair of the Senate Committee on Veterans, Homeland Security, and Military Affairs. Information shall also be posted in a timely manner on the Division of Veterans' Services' website and a link to such document shall also be available on the websites of the Office of Parks, Recreation and Historic Preservation and the Department of Environmental Conservation.

Definitions

For this report, the Committee has applied the following definitions when making recommendations.

- a. **Veteran.** In the context of Outdoor Rx, the term "Veteran" means a person who served on active duty service in the Armed Forces of the United States, or who served in the Army National Guard, Air National Guard, who was a commissioned officer in the Public Health Service or was a commissioned officer of the National Oceanic Atmospheric Administration or Environmental Sciences Services Administration, or who was a cadet at a United States Armed Forces Service Academy or provisions under 38 USCS §106, and who has been released from such service under conditions other than dishonorable as defined by Title 38 of the United States Code.

b. **Active Service Member.** In the context of Outdoor Rx, an Active Service Member is anyone currently serving in the armed forces of the United States or as a member of the reserves, National Guard, New York State Guard, New York State Naval Militia, as a commissioned officer in the Public Health Service, commissioned officer of the National Oceanic Atmospheric Administration or Environmental Sciences Services Administration, or as a cadet at a United States armed forces service academy. Active duty service is not required.

c. **Families of Active Service Members and Veterans.** A family member of an Active Service Member or a family member of a Veteran is the spouse, partner, or any children below the age of 18, to include those under legal guardianship.

d. **Gold Star Family.** Reserved for families of members of the military who have died in the line of duty. Gold-Star families have been awarded the Gold Star lapel pin. e. **Outdoor**

Therapeutic Settings and Activities (OTSA). Outdoor settings such as parks, forests or other public lands that can be or are conducive for single- and multi-day programs with trained outdoor and recreation therapy leaders or educators; OTSA opportunities currently available in New York include passive interaction with outdoor settings as well as outdoor activities and/or education on State recreation lands such as fishing, hunting, camping, hiking, boating and paddling, conservation, citizen science. . f. **Wilderness Therapy.** The prescriptive use of wilderness experiences by licensed mental health professionals to meet the therapeutic needs of clients.

g. **Program Providers.** Any program offered by a public or private organization, to include non-profit organizations, that offers Outdoor Therapeutic Settings and Activities or

wilderness therapy to members of the military, Veterans, their families, or Gold Star Families.

- h. **Rx.** Rx is an accepted abbreviation for the medical use of the term “prescription”, derived from the Latin word for recipe, *recipere*. In the context of Outdoor Rx, it connotes the legitimate potential of Outdoor Therapeutic Settings and Activities to be prescribed by physicians and other health and well-being professionals.

Findings and Recommendations

1. The Outdoor Rx Committee has not reviewed State lands based on Veterans’ demographics including, but not limited to, service-connected disabled Veterans, that should be prioritized for access. To complete a comprehensive review of State lands would have required hiring additional resources given the wide geographic area that New York’s State-owned lands cover. The Committee recommends that an examination of State lands become an element of a broader examination of barriers to access as described in 4.
2. The Outdoor Rx Committee has not reviewed estimated costs of implementing such recommendations and expanding access/benefits, as well as potential funding sources, including State funding and public-private partnership opportunities. The Committee recommends a general commitment from State agencies to engage with partners on the Outdoor Rx access to explore opportunities for expanding access/benefits.
3. The Outdoor Rx Committee recommends that the Division of Veterans’ Services continue to engage with partner agencies at the State, county, and local levels, as well as relevant community-based organizations and other non-governmental groups, to further examine barriers to Veterans’ access to State lands. DVS and its partner agencies and

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organizations should continue working to identify opportunities for collaboration and

coordination to increase Veterans' access to State lands and the potential for related medical treatment and nature-based therapy and programming.

4. In particular, the Outdoor Rx Committee recommends that DVS continue to engage with partner agencies and community-based organizations on the following matters: a.

Continued examination of barriers to access. **Appendix A** contains the list of barriers identified by the Committee, recommendations on how to mitigate some barriers, and all responses from Committee members regarding barriers to access. b. Continued engagement in support of existing programs identified in **Appendix B**. c. Conferring with and collaborating on existing studies on barriers to access, e.g., the Open Spaces for All study/report being conducted by the Open Space Institute.

d. Communicating with existing New York-based groups to avoid duplication of efforts, e.g., the New York Outdoor Recreation Coalition.

e. Reviewing and consolidating existing maps showing public transportation connections to State parks and other public lands to include trails and waterways. f. Reviewing and developing recommendations for revised fee structures to include reducing the requirements for the Lifetime Liberty Pass from a disability rating of 40% to any service-connected disability.

5. The Outdoor Rx Committee recommends that information about Outdoor Rx programs and opportunities be posted on relevant agency websites and that agencies explore the feasibility of creating a coordinated page that can serve as an information portal and enhance marketing/promotion of existing programs listed in **Appendix B**, providing

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members of the military, Veterans, their families, Gold Star Families, State agencies, county Veteran offices, and partners clear access to all Outdoor Rx opportunities. 6. The Outdoor Rx Committee recommends that DVS work with partners to provide

recommendations for sustainability and success of Outdoor Rx initiatives for Veterans, Active Service Members, and their family members.

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Appendix A

The Outdoor Rx Committee has reviewed barriers that exist to provide Veterans with increased access to State lands and opportunities for medical treatment and nature-based therapy and programming, including barriers to transportation, handicap accessibility, cultural barriers, mental health stigmas, lack of public awareness of State outdoor resources, lack of experience in the outdoors, and lack of funding for public and private programs.

The Outdoor Rx Committee has reviewed recommendations, following consultation with appropriate Veterans' outdoor recreation groups, to reduce barriers and better facilitate the use of State owned and managed lands for access, preventative care, medical treatment, and nature based therapy.

Findings

All Barriers

1. The Open Space Institute is working with a consultant on an Open Spaces for All study/report. It is focused on diversity, equity, and inclusion but will be looking at barriers to accessing the outdoors and State lands. Upon completion, this report should be reviewed for information that may assist State and local government agencies and community organizations in addressing barriers to State parks, public lands, and Outdoor Rx opportunities, and opportunities for further formal study should be examined.
2. The Committee has determined that all barriers listed in Appendix A may be partially mitigated through increased coordination and consolidation of program information and that some of the existing programs identified in Appendix B partially mitigate barriers.
3. The Committee recommends that information about existing Outdoor Rx programs and

other opportunities be posted on relevant agency websites.

APPENDIX A 2

Barriers due to race, racism, ethnicity, age, ageism, gender identity, or sexual orientation 1.

Barriers resulting from race, racism, ethnicity, age, gender, and sexual orientation are pervasive. To enable inclusive and equitable parks, public lands, and programs to exist for active service members, Veterans, and their families, inclusion and equity must be centered within any programs, partnerships, or other solutions aimed at increasing Outdoor Rx opportunities.

2. See “emotional ability” answer, much of which is relevant here. Messaging around opportunities and programs need to center equity and inclusiveness. People need to be able to see people who look like them engaging in these outdoor activities, encouraging them that they too can take part in these activities and benefit from the experience. Additionally, feedback regarding this issue needs to come from individuals — and particularly Veterans — representative of these diverse communities about how to best engage them in outdoor recreational therapy opportunities. There are Veterans organizations for diverse populations regarding race (e.g., Black Veterans for Social Justice, National Association of Black Military Women, Hispanic Heritage Council, etc.), sexual orientation and/or gender identity (e.g., SAGEVets, American Veterans for Equal Rights, Transgender Veterans Association, OutServe, etc.), and much more. Engaging with these groups and hearing their feedback on this issue — rather than a process where individuals who are not part of these populations try to guess how to address these barriers — will be important to our ability to help overcome these barriers.

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Societal and Cultural

1. The Committee recommends that existing diversity, equity, and inclusion policies,

programs, and staff training be included in Outdoor Rx programs and that the relevant information be translated into multiple languages and provided in accessible formats.

2. The Committee recommends increasing awareness of opportunities for disabled Veterans on relevant agency websites.
3. The Committee recommends that DVS and other agencies and partners engage with the DEC Accessibility Advisory Committee.
4. Societal and cultural barriers require further study.

Transportation

1. Transportation barriers include the ability to physically travel to and from a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car may be unable to access a State park if they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans are unable to access services such as VA healthcare.

Transportation barriers are leading factors preventing regular access to State parks, other public lands, and programs for marginalized communities. Transportation barriers include cost, awareness, accessibility, and availability.
2. The Committee recommends that DVS work with partner agencies and organizations to explore the feasibility of creating a shared resource capability, e.g., a public ride-share.
3. In addition to the recommendations under all barriers the Committee recommends the development of a comprehensive map that shows public transportation connections to State parks and other public lands to include trails and waterways.

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4. The Committee recommends that the DEC Outdoors Day event locations are chosen based on their proximity to population centers and ease of access where feasible and that partnerships are formed with relevant government agencies and community-based organizations

to further determine ways to mitigate transportation barriers. *Physical Ability*

1. In addition to the recommendations under all barriers the Committee recommends that the DEC Accessibility Program, in coordination with the Accessibility Advisory Committee and program staff, conduct a review of a selection of DEC programs focused on identifying priority projects that would substantively improve program accessibility (see recommendations under financial).
2. The Committee recommends that relevant agencies and organizations collaborate with Veteran adaptive sports programs and other similar groups that have experience helping Veterans overcome physical ability barriers in active outdoor settings. Those working on Outdoor Rx issues should use the lessons that these groups have learned, and adopt best practices based on the evidence that they have gathered through the years, rather than trying to re-invent the wheel.
3. The Committee recommends that all programs for Veterans relative to accessibility are posted on the websites of relevant agencies.

Emotional Ability

1. Barriers due to emotional ability manifest in numerous ways, e.g., female Veterans who have been the victim of military sexual trauma may feel unable to participate in mixed gender outdoor programs, or Veterans with depression or anxiety may feel unable to leave their home.

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2. Diversity of programming will be essential here. For example, when possible, agencies and organizations facilitating outdoor programs should develop some programming that is solely for male Veterans and some programming that is solely for female Veterans, as well as some programming that is open for all genders. Groups should also offer some programming that is for Veterans who are more experienced in the outdoors and other

programming that can be accessible for Veterans who are new to the outdoors — without stigmatizing the latter type of programming with labels such as “beginner,” “entry-level,” “first step,” etc.

3. A common “emotional ability” challenge regarding the outdoors (both from Veterans and “non-Veterans”) deals with age. Some older individuals want to engage in outdoor activities but are intimidated or concerned about getting “left behind,” or being “a burden to the group,” if they are engaging in an outdoor activity with people who are younger than them. It therefore would be beneficial to take participant age into consideration when developing outdoor recreational programming for Veterans and their families. Again, though, it will be important for any program that is developed largely for Veterans who are older to avoid language such as “senior citizen” or “senior Veterans program.”

4. Outdoor programs should be designed to select group leaders carefully, and to match group leaders with the appropriate groups. For example, some groups of Veterans will be deterred by a group leader who engages — even jokingly — in “drill sergeant”-esque behavior that reminds Veterans in the group too much of being back in the military again. Other groups of Veterans, by contrast, would embrace behavior such as calling out a cadence while on a hike and other behaviors that remind them of being part of the unit cohesion while in the military.

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5. Being sensitive to that emotional diversity among the Veteran population and making decisions accordingly when matching group leaders to groups for outings, is going to be a challenging but important aspect of this work.

6. Additionally, it will be important to ensure that group leaders are well-trained in recognizing “warning signs” of emotional barriers manifesting during an outdoor activity and well-versed in addressing these emotional challenges in a safe, healthy manner if

they arise during an outdoor activity. Gatekeeper suicide prevention training with tools such as the Columbia Protocol, SafeTalk, etc. seems essential here, as do other forms of “mental health first aid” and high-quality training regarding military cultural competency before someone is placed in the role of a group leader in these activities.

7. The Committee recommends continued exploration of issues relating to emotional barriers in the Outdoor Rx context.

Cognitive Ability

1. Barriers due to cognitive ability manifest in numerous ways, e.g., Veterans who have suffered a traumatic brain injury (TBI) may experience reduced cognitive ability. Cognitive impairments due to TBI are substantial sources of morbidity for affected individuals, their family members, and society. Disturbances of attention, memory, and executive functioning are the most common neurocognitive consequences of TBI at all levels of severity.
2. The Committee recommends continued exploration of issues relating to cognitive barriers in the Outdoor Rx context.

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Familial

1. Familial barriers are those that manifest from family expectations or family roles. E.g., when the female member of a family is held back while male members participate in an outdoor activity.
2. The Committee recommends Veteran family-oriented outdoor programs that would allow Veterans and their families the opportunity to participate in outdoor activities. These programs should emphasize the family-oriented nature of the outdoor programming and ensure that activities are designed for all family members to participate regardless of gender, age, etc.

3. In addition to the recommendation under all barriers, the Committee recommends that DVS engage with relevant State and local agencies and community-based organizations to expand women-only programs.

Risk Management

1. Barriers related to risk management include the perceived and actual [real] physical, emotional, and social risks to the participant and the risk to the environment. 2. In addition to the recommendations under all barriers the Committee recommends that dangerous trail or waterway conditions, and other information relative to safety, be posted on relevant agency websites.
3. Increase virtual or adventure from home opportunities that show how risk may be managed on solo or family/friend focused trips or how structured programs mitigate the different elements of risk.
4. Develop a 'what to expect' section on a relevant agency website to better communicate to the public what to expect when visiting New York parks, public lands, and facilities or

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participating in a recreational activity. This section will include information about location, cost of entry, activities available, degree of difficulty, level of accessibility, availability of guides or instructors, equipment needed and recommended to partake in the offered activities, and any other information that Veterans, active service members, their family members, and Gold Star Families will need to know to accurately assess the risk of engaging in these outdoors activities.

5. The Committee recommends that DVS and other State and local agencies and community-based organizations to explore opportunities to identify or develop a training program to develop various skills in serving Veterans and people with disabilities, including people experiencing stress from access limitation and Post-Traumatic Stress

Disorder. Training should include developing skills on conflict resolution and de escalation.

Financial

1. Financial barriers are any barriers that exist due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, etc. Financial barriers are also those barriers created when projects related to accessibility are un- or under-funded.
2. All Veterans should be referred to DVS so they may be screened for potential benefits that could result in increased income, thus lessening the financial barrier.
3. In addition to the recommendations under all barriers the Committee recommends that the DEC Accessibility Program, in coordination with the Accessibility Advisory Committee and program staff, conduct a review of a selection of DEC programs focused

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on identifying priority projects that would substantively improve program accessibility. There are many existing accessible outdoor recreation facilities that need funding to bring them back to accessibility standards, and/or are priorities for stakeholders for accessibility upgrades. Although accessibility projects are named in all unit management plans, funding would need to be allocated to fund the priorities identified in the review. Such funding would help defray the high costs to programs associated with maintaining accessible features and upgrading to accessibility standards. The high cost and challenges to maintaining accessible outdoor recreation features (e.g. erosion of accessible slopes and surface stability) are recognized nationwide, and there are opportunities to engage in studies and information sharing to capitalize on new research and partnerships.

4. In addition, the Committee recommends that DEC camp staff contact the Fort Drum

Morale, Welfare, and Recreation program to offer camperships to the children of active service member families.

5. The Committee recommends that agencies examine the feasibility of reducing the requirement for the Lifetime Liberty pass from a service-connected disability rating of 40% to any service-connected disability rating.

Availability

1. A person's lack of availability may function as a barrier. E.g., a single working parent of three school-aged children often has limited availability. This may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children.
2. The Committee recommends that existing programs be reviewed to determine if the days and hours offered by the program create or mitigate barriers related to availability.

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Gear, Equipment, Clothing

1. Not having access, owning, ability to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate in outdoor activities, or a belief that outdoor styled clothing is needed to explore State parks, public lands, or participate in outdoor programs, may act as a barrier. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water-based activities, multi-day backpacking, etc.). Barriers are also created where state agencies are unable to meet program accessibility requirements.
2. ADA regulations [Section 35.150(b)] specify "equipment redesign or acquisition" as one of the methods that state agencies should utilize to meet their ADA program accessibility requirement. The Committee recommends that DEC and OPRHP continue to provide adaptive equipment for Veterans with disabilities such as mobility devices for trails,

beach wheelchairs, charging stations for power-driven mobility devices (where appropriate), beach access mats, alternative forms of nature interpretation for visually and hearing-impaired individuals, and adaptive fishing and boating gear. However, more and updated equipment is needed to meet the current need. DEC recently did a review of needs for adaptive equipment and is in the process of acquiring a limited selection of adaptive equipment required to fill that need.

3. Explore the feasibility of creating a resource sharing program where Veterans can borrow or checkout gear, e.g., a public gear locker.

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4. In addition to the recommendations under all barriers the Committee recommends the promotion of beginner and family-friendly experiences that do not require specialized or expensive gear, equipment, or clothing.

Outdoor Education, Experience, or Competency

1. A lack of outdoor education, experience, or competency in the outdoors or with a particular outdoor activity may act as a barrier. E.g., someone might ask, Why should I spend time outdoors? Where should I go and what would I do? How do I get there?
2. See answer regarding risk management barriers, with a focus on demonstrating that exploring the outdoors is possible for someone new to outdoor activities; showing that participants will not be on their own, but rather in a safe space with access to trained leaders who have the skills and the experience to successfully guide them in outdoor activities.
3. The Committee recommends that existing outdoor education programs, to include virtual reality, be reviewed and considered for inclusion on relevant agency websites. Examples include: Cornell CALS Farm Ops at <https://cals.cornell.edu/news/cornell-farm-ops-sets-nys-veterans-success> and the DEC Becoming an Outdoors-Women at

Access to Nearby Nature

1. A lack of green space, parks, public lands, or programs is a barrier to some individuals.

The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature.

2. Often, this barrier seems to arise from a lack of knowledge about existing opportunities more than an actual lack of opportunity. DVS should explore the feasibility of joining

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forces with OPRHP to highlight Veteran-focused outdoor recreational therapy opportunities throughout New York State on both agencies' free download mobile apps. This could be an opportunity for Veterans and their families to discover that more opportunities for outdoor recreation exist than they ever realized before.

3. Some messaging about outdoor recreational therapy opportunities can be tailored to specific historically marginalized communities. If the messaging involves visual media, ensuring diversity in the people portrayed in the outdoor settings is important. Funding will not arrive for outdoor recreational therapy utilizing nearby nature within a community unless members of that community express an interest in Outdoor Rx opportunities. Ensuring that members of these historically underrepresented communities learn about these opportunities, and receive messaging showing people who look like them engaging with outdoor programming and enjoying it, will be a crucial first step before talks about funding for specific communities becomes a reality. NYC Parks & Recreation has some good examples of diverse messaging showing that within the five boroughs are far more outdoor recreational opportunities than one might expect and emphasizing that these outdoor opportunities are available to be enjoyed by all, not solely by people of certain races, ethnicities, income brackets, etc.

4. In addition to the recommendations under all barriers the Committee recommends that DEC engage the Division of Veterans’ Services and the Office of Mental Health in the planning processes for the NY Statewide Comprehensive Outdoor Recreation Plan and the NY Open Space Plan, as well as DEC’s unit management planning process.

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Individual agency responses

| | | | | | | | | | | | |
|---|-----------|--|-----------|--------------------------------------|-----------|-----------------------------------|-----------|--|-----------|---|-----------|
| Department of Conservation | 13 | Office of Parks, Recreation and Historic Preservation | 25 | Office of Mental Health | 32 | Department of Health | 38 | Office of Addiction Services and Supports | 44 | Division of Veterans’ Services | 50 |
|---|-----------|--|-----------|--------------------------------------|-----------|-----------------------------------|-----------|--|-----------|---|-----------|

Department of Environmental Conservation

| Barrier | Action (Committee members are asked to respond to each) |
|--|---|
| All barriers | The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act. |
| Your response to this recommendation: Open Space Institute is working with a consultant on an Open Spaces for All study/report. It is focused on DEI but will be looking at barriers to accessing the outdoors and State lands. Would be good to check in with OSI to learn from what they’re doing, take advantage of the work, and not engage in duplicative effort. | |
| A person’s availability , not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children. | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |

Your response to **availability** barriers here:

1. Programs are offered on **weekends** when possible, including First-Time Camper, Outdoors Day, Hike with Us-Catskills. DEC education centers offer **free outdoor programs every Saturday** throughout the year. Programs are offered after school and during school breaks and the summer for children. Some are sponsored by the centers' friends groups for a small fee to help support their costs of providing programs. During the summer, three of the friends groups have day camps for children and the fourth has a "family fun" program for children and their caregivers. In-school and on-site programs for students are offered on weekdays.

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Virtual programming, such as Adventure at Home and Explore Local, allow anyone to participate at any time.

2. Enhance promotions of opportunities available on weekends.
3. For liability reasons, education centers are not open if DEC staff are not available.

Financial, any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, etc.

1. What existing programs or policies within your agency fully or partially mitigate **financial** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **financial** barriers fully or partially?
3. Provide any additional comments regarding **financial** barriers.

Your response to **financial** barriers here:

1. DEC offers numerous **free and low-cost** opportunities to the public and to Veterans. See Worksheet for Objective 2. In addition, the **First-Time Camper Program, Outdoors Day, I Fish NY** fishing clinics, **First Day Hikes**, and **Hike with Us—Catskills** are all free programs, as well as (all/most) of the programs offered throughout the year at education centers. Rates for **camping** are kept low to be affordable.

The DEC **Motorized Access Program for People with Disabilities (MAPPWD)** is a popular program that accommodates individuals with mobility disabilities by providing a special permit for eligible individuals to drive a motor vehicle on select routes on DEC roads not open to the general public. Statewide, there are approximately 1,000 MAPPWD permits (i.e. valid five-year permits, not expired), with about 200 new permit and renewals a year. The MAPPWD program is primarily used by hunters, many of whom also have one the special hunting permits.

DEC offers several different types of **free and reduced-price fishing and hunting permits** for people with disabilities. The Permits for Hunters with Disabilities page lists the different type of special hunting permits available, which include non-ambulatory hunter permits, modified longbow authorizations, and modified crossbow permits.

DEC partners with State Parks in the **NY Access Pass** program which provides qualified people with disabilities free or discounted access to State recreation facilities which normally have a cost.

DEC also offers a **Case-by-Case Accommodation Program for Power-driven Mobility Devices** that has several requests a year. Wheelchairs are allowed anywhere open to the general public. DEC considers requests for other power-driven mobility devices to determine safe locations for their use in compliance with our environmental regulations.

DEC works with selected community-based organizations to offer a **free week at camp** for children who would not otherwise be able to attend. Camp staff also refer parents/guardians to potential sponsors like sports groups, garden clubs and civic organizations.

DEC collaborates with State Parks on the **Connect Kids Transportation Program** to provide reimbursement for transportation and program costs for Title 1 schools, youth bureaus and select non-profits to visit DEC education centers and fish hatcheries.

Operating under an agreement with the Stony Kill Foundation and located at Stony Kill Farm Environmental Education Center in Dutchess County, Common Ground Farm offers hands-on, farm-based education programs for adults and children of all ages and provides financial support to ensure access to people of all incomes. They provide weekly produce deliveries to seven different food pantries and soup kitchens in the Mid-Hudson region, thus supporting emergency food services for the local community. Through mobile markets in Beacon and Newburgh, Common Ground also distributes and sells produce at a discounted rate to parts of these cities where residents have limited access to fresh produce.

2. Camp staff will reach out to Fort Drum to offer camperships to the children of active service member families.

Transportation, not able to physically travel from home to a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car is unable to access a State park because they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans do not access services such as VA healthcare (DVS, n.d.). Transportation barriers are also a leading barrier to regularly accessing State parks, other public lands, and programs for marginalized communities. Barriers include cost, awareness, availability, etc.

1. What existing programs or policies within your agency fully or partially mitigate **transportation** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **transportation** barriers fully or partially?
3. Provide any additional comments regarding **transportation** barriers.

Your response to **transportation** barriers here:

1. **Outdoors Day** event locations are chosen based on their proximity to population centers and ease of access.
2. This is an area where **partnerships** are necessary to mitigate the barrier. This could be working with nonprofits or community/church groups who can provide transportation to events or programs or working with regional transportation providers to extend service or

offer a shuttle for specific events. For example, in 2019, AARP chartered a bus for its members and their families to attend an Outdoors Day event.

Events could also be offered in partnership with other organizations or locations that are accessible to public transportation instead of more remote DEC sites.

Five Rivers Center and Mohawk-Hudson Land Conservancy are working with the Capital District Transportation Authority to offer a free “nature bus” from underserved areas of downtown Albany to Five Rivers and other natural areas in Albany County on Saturdays from June to September if funding can be secured.

3. DEC lands are generally more remote and can be difficult to access by public transportation.

Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any **gear or equipment** needed to participate (e.g., the fishing rod loaner program at DEC <https://www.dec.ny.gov/outdoor/98019.html>). A belief that outdoor styled **clothing** is needed to explore State parks, public lands, or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized **gear, equipment, or clothing** is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).

1. What existing programs or policies within your agency fully or partially mitigate **gear, equipment, or clothing** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **gear, equipment, or clothing** barriers fully or partially?
 3. Provide any additional comments regarding **gear, equipment, or clothing** barriers.

Your response to **gear, equipment, or clothing** barriers here:

1. **First-time Camper program** provides participants with basic camping equipment free of charge. **Outdoors Day** participants can try activities and utilize equipment free of charge. **FISH NY fishing clinics** provides free equipment for use during clinic. **Summer youth camps** provide sleeping bags, mats, day packs and water bottles for the week to those who do not have needed items at camp. Most education centers’ programs and activities do not require any specialized gear, equipment or clothing. When allowed again, program participants will be able to borrow binoculars and field guides.
2. **Provide adaptive equipment** for Veterans with disabilities such as mobility devices for trails, beach wheelchairs, charging stations for power-driven mobility devices (where appropriate), beach access mats, alternative forms of nature interpretation for visually and hearing impaired individuals, and adaptive fishing and boating gear. DEC provides adaptive equipment, including scooters to check out at environmental education centers and access mats at waterfront locations; however, more and updated equipment is needed

to meet the current need. DEC recently did a review of needs for adaptive equipment and is in the process of acquiring a limited selection of adaptive equipment required to fill that need. More funding is needed to fill the gap.

Promote beginner and family-friendly experiences that do not require specialized or expensive gear, equipment, or clothing.

Snowshoes are provided by the friends groups at a modest cost to cover replacements; programs for groups needing financial assistance could be provided for free if approved by the friends groups.

Work with partners (i.e., nonprofits or outdoor retailers) to **donate equipment** for programs

Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to **risk management** includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.

1. What existing programs or policies within your agency fully or partially mitigate **risk management** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **risk management** barriers fully or partially?
3. Provide any additional comments regarding **risk management** barriers.

Your response to **risk management** barriers here:

1. **In-person programs:** DEC offers several **threshold experiences** designed to reduce perceived risks involved with trying new activities. **First-time Camper** program provides a campground ambassador and guided experience. **Outdoors Day** is promoted as a welcoming, safe, introductory experience for people of all ages, abilities, identities and backgrounds. **Hike with Us-Catskills** program offered guided hikes aimed at beginners and those new to hiking (on hold due to COVID-19). **First Day Hikes** offer guided, family-friendly hikes. The virtual **Adventure at Home** and **Explore Local** series are aimed at providing information on recreation for beginners. **Guided walks** are regularly offered at education centers.

Digital information: Dangerous trail conditions are noted on DEC’s web pages for individual sites. Information and tips can also be found under Be Tick Free, Hike Smart NY, Spring Recreation Tips and Winter Hiking Safety. Information is shared frequently on DEC social media channels.

Before each camp, public or school program, **DEC educators** review all potential risks such as ticks, sun exposure, hydration, and what to watch out for on the trail.

2. Develop a **‘what to expect’** section on DEC’s website to better communicate to the public what to expect when visiting DEC lands and facilities or participating in a recreational activity.

Develop and provide **training for staff** to develop various skills in serving Veterans and people with disabilities, including people experiencing stress from access limitation including Post-Traumatic Stress Disorders. Training has been requested from front-line DEC staff to develop skills on conflict resolution and de-escalation from interactions from hunters with PTSD.

Work across agencies to make **digital information** more detailed for those newer to activities and easier to find.

Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that **societal and cultural** barriers be included as part of further study.

1. What existing programs or policies within your agency fully or partially mitigate **societal and cultural** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **societal and cultural** barriers fully or partially?
3. Provide any additional comments regarding **societal and cultural** barriers.

Your response to **societal and cultural** barriers here:

1. Across programs, DEC utilizes **Language Line**.

Training: DEC summer youth camp counselors receive specific training to ensure all campers and staff are treated with respect and appreciation for different cultures, beliefs and gender identity.

Friends of Five Rivers and the inter-regional environmental educator work with local **refugee centers** to introduce them to outdoor activities like fishing and hiking.

DEC's **Diversity Resources in the Outdoors, Science and Environmental Justice web page** has a list of organizations and resources that provides insight into different experiences with nature from a wide variety of participants.

The inter-regional environmental educator was part of a multi-State team that developed a **curriculum on the Underground Railroad** and how persons who were enslaved used nature to help them find their way to freedom. The lessons were unveiled for 2021 Black History Month.

DEC educators partner with community organizations for **Juneteenth celebrations and other cultural events**. For example, in 2018 and 2019, Five Rivers and Central Office staff participated in the National Night Out event at Lincoln Park in Albany, organized by the South End Neighborhood Association (SENA). But for COVID, the event would have been held in 2020 as well. The purpose of SENA is to preserve and improve the quality of life for all residents in their culturally, economically, and racially diverse neighborhoods. SENA hosts National Night Out each year, which affords members of the community an opportunity to get

to know one another and to acquire information about resources that are available in and around our community.

2. **Increase awareness of opportunities** for Veterans and people with disabilities. For instance, DEC is partnering with John Dillon Park (a park in the Adirondacks designed for people with disabilities) to hold an Accessible Outreach Recreation Awareness Day- an open house showcasing accessible recreation equipment and facilities.

Strengthen existing mechanisms to engage Veterans and people with disabilities in State services such as the **DEC Accessibility Advisory Committee**.

When feasible and appropriate, offer programs and materials in multiple languages and work to recruit bilingual staff and volunteers.

Barriers caused by **physical ability** (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.

1. What existing programs or policies within your agency fully or partially mitigate **physical ability** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **physical ability** barriers fully or partially?
3. Provide any additional comments regarding **physical ability** barriers.

Your response to **physical ability** barriers here:

1. DEC has an Accessibility program consisting of one full-time ADA Accessibility Coordinator and several Division and Regional ADA Accessibility Coordinator who implement the goals of the program in their respective programs and regions. DEC's existing efforts to reduce barriers to physical access, coordinated by the DEC Accessibility Program, include:
 - building facilities ADA and ABA (Architectural Barriers Act) accessibility standards,
 - providing training to DEC staff on disability awareness and standards,
 - engaging a public Accessibility Advisory Committee,
 - conducting accessibility assessments of existing facilities and providing information to the public, and
 - incorporating ADA transition planning into all land unit management plans (UMPs).

The inter-regional environmental educator helps coordinate a **weekend of fly fishing** on the Salmon River each year in early November for Veterans. Each vet is paired with a volunteer assistant and they stay at the DEC Training Academy in Pulaski. The groups she works with are Project Healing Waters Fly Fishing, Inc. and OASIS Adaptive Sports, Inc. (Outdoor Adventures for Sacrifice in Service).

All education centers have trails that are accessible to persons with limited mobility. Reinstein Woods and Five Rivers offer a scooter for loan while on the trails, and both centers are listed in the NYS Inclusive Recreation Resources Center's online database that

provides information about physical accessibility and social inclusion of recreation areas, facilities, parks and programs across the State.

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Rogers Center in Chenango County is about to undergo major construction to make DEC’s first nature center accessible to persons with disabilities. An elevator is being installed, and the bathrooms will comply with ADA standards.

Visitor centers at Reinstein Woods, Five Rivers and Stony Kill are accessible to persons with physical disabilities; they are currently closed due to COVID.

Capital Region Nordic Alliance (CRNA) brings a group of people with disabilities to Five Rivers about twice a year for a weekend of orienteering; the executive director of the organization and many of the members are Veterans. Before COVID, the center director and CRNA director were talking about expanding the programs offered for the group; that will continue once we can have more participants in the outdoor programs. DEC and CRNA are piloting a program at Five Rivers to allow people who are blind or visually impaired to navigate selected trails using sounds.

2. An immediate action that could be taken to mitigate physical and emotional barriers is for the Accessibility Program, in coordination with the Accessibility Advisory Committee and program staff, **to conduct a review of a selection of DEC programs focused on identifying priority projects that would substantively improve program accessibility.** In particular, there are many existing accessible outdoor recreation facilities that need funding to bring them back to accessibility standards, and/or are priorities for stakeholders for accessibility upgrades.

Although accessibility projects are named in all unit management plans, funding would need to be allocated to fund the priorities identified in the review mentioned in #2.

Such funding would help **defray the high costs to programs associated with maintaining accessible features and upgrading to accessibility standards.** The high cost and challenges to maintaining accessible outdoor recreation features (e.g. erosion of accessible slopes and surface stability) are recognized nationwide, and there are opportunities to engage in studies and information sharing to capitalize on new research and partnerships.

Barriers due to **emotional ability.** These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.

1. What existing programs or policies within your agency fully or partially mitigate **emotional ability** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **emotional ability** barriers fully or partially?
3. Provide any additional comments regarding **emotional ability** barriers.

Your response to **emotional ability** barriers here:

We have provided a combined response to physical and emotional ability barriers and actions in the physical ability section above.

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| <p>Barriers due to race, ethnicity, age, gender identity, or sexual orientation. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives 1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.</p> | <ol style="list-style-type: none">1. What existing programs or policies within your agency fully or partially mitigate barriers due to race, ethnicity, age, gender identity, or sexual orientation?2. Are there any immediate actions that your agency would recommend mitigating barriers due to race, ethnicity, age, gender identity, or sexual orientation fully or partially?3. Provide any additional comments regarding barriers due to race, ethnicity, age, gender identity, or sexual orientation. |
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Your response to barriers due to **race, ethnicity, age, gender identity, or sexual orientation** here:

1. **Outreach efforts** by DEC educators and other staff to involve groups like Black Girls Hike Buffalo, Black Birders, Outdoors Afro, Latino Outdoors, Inclusive Woods & Us, and Queer Nature have been made or are planned.

Reinstein staff conducted an **Educator Workshop Webinar** on Pride Outside. Participants learned the basics of queer theory as related to education and the outdoors to create programming that is inviting and inclusive for members of the LGBTQIA+ community.

Particularly since the beginning of COVID, agency staff have participated in a variety of **webinars and training** related to Diversity, Equity and Inclusion.

Diversity and inclusion is an important component of the **camp experience**. To help new campers and staff feel safe and comfortable, the first two skits at each camp stress that “everyone has something to offer” and “I am loveable and capable.” First night cabin discussions include asking each camper their pronouns, stressing the importance of respecting everyone, and informing the counselors if something makes them uncomfortable. The staff and parent handbooks have been updated to replace he/she with they, and to include a section on gender identity and defining camp culture and terminology. The online registration form now includes optional fields on gender identity and pronouns for campers.

Each issue of the DEC Teacher and Educator Newsletter includes a **Diversity in the Outdoors** highlight featuring an underserved organization that encourages their constituents to get outside; issues also contain topical information for Black History Month, Women’s Month, etc.

All new shower buildings at DEC campgrounds are designed to include gender neutral/unisex facilities.

2. DEC is undergoing multiple efforts to analyze and make recommendations towards greater diversity, equity and inclusion. For example, there is an agency-wide Justice and Diversity Initiative and the agency’s Outdoor Recreation Promotions Working Group developed

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recommendations specific to outdoor recreation. Building on these efforts, the Bureau of Environmental Education is continuing an ongoing effort to improve accessibility and cultural relevancy of our programs.

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| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate familial barriers? 2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially? 3. Provide any additional comments regarding familial barriers. |
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Your response to **familial** barriers here:

1. In 2018, DEC hosted the first-ever **WomenHuntFishNY Photo Contest** and in 2019 hosted the first-ever **Women's Fishing Expo**. A partnership with State Parks, the Fishing Expo was held at Belmont Lake State Park and led primarily by female anglers, deckhands, fisheries scientists, women-owned businesses, and fishing clubs.

DEC hosts "**Becoming an Outdoors-Woman**" (**BOW**) workshops. These programs provide women with information, encouragement, and hands-on instruction in outdoor skills such as fishing, archery, hunting, map and compass, survival, camping, canoeing, outdoor cooking, and more. Simply put, the BOW program empowers women to take on a challenge that they may have been intimidated to take on their own.

Friends of Five Rivers offers summer family fun activities for children and their caretakers, who are primarily women.

Camps require that parents/guardians provide the names of those who are authorized to pick up their child; this protects the custodial parent from having the non-custodial parent remove a child from the camp.

2. Host and advertise additional/expanded women-only programs and events.

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| <p>Barriers due to a lack of outdoor education, experience, or competency in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate outdoor education, experience, or competency barriers? 2. Are there any immediate actions that your agency would recommend mitigating outdoor education, experience, or competency barriers fully or partially? |
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| | <ol style="list-style-type: none"> 3. Provide any additional comments regarding outdoor education, experience, or competency barriers. |
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Your response to **outdoor education, experience, or competency** barriers here: 1. **First-time Camper** program is a full-service program designed to teach people how to camp. Campers are also provided additional opportunities once on-site to deepen the experience, such as learning to fish and hike. **Outdoors Day** is an open-house style event that offers the public the opportunity to try a variety of activities and learn from experts. **Hike with Us Catskills** and **First Day Hikes** offer beginner, guided, family-friendly hikes. **Programs offered at centers** include introduction to bird watching, camping 101 and community (citizen) science, the last of which provides training on how to monitor wildlife like butterflies, frogs and bluebirds.

DEC has multiple **outreach and education programs** aimed at increasing outdoor competency as well as providing simpler, consolidated information to the public (i.e., Adventure NY booklet, email newsletters provide ideas for trips and activities, Explore Local Facebook series).

The **virtual Adventure at Home** series is aimed at providing information on recreation for beginners. DEC staff have developed **Facebook Live events** and **YouTube how-to presentations** on topics like nature scavenger hunts, snowshoeing, sound mapping, hiking in the winter, making tin foil dinners, and nature journaling.

Veterans up to age 28 are especially encouraged to participate in the **Excelsior Conservation Corps**, a 10-month residential partnership program with State Parks, DEC and the Student Conservation Association. Members work in teams on stewardship projects and receive extensive training in trail building and maintenance, wilderness first aid, chain saw operation and safety, and light carpentry skills. After their service, they are eligible for an AmeriCorps education award that can be used to pay off student debts or to attend college or graduate school.

Children in Buffalo, Capital Region and New York City who receive camperships are invited to participate in **pre-camp programs** that give them an opportunity to become familiar with activities they will have at camp, like hiking, bird watching and fishing. The program is suspended in 2021 due to COVID; the Capital District Campership Diversity Coordinator left the position and the Bureau of Environmental Education has not been able to replace her.

2. As above, develop a **‘what to expect’** section on DEC’s website to better communicate to the public what to expect when visiting DEC lands and facilities or participating in a recreational activity.

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| <p>Access to nearby nature, barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers?</p> |
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| <p>recommends further study on barriers to accessing nearby nature.</p> | <p>2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? 3. Provide any additional comments regarding accessing nearby nature barriers.</p> |
| <p>Your response to accessing nearby nature barriers here:</p> <p>1. DEC environmental educators work with community-based organizations and other governmental agencies to provide programs at public lands that are accessible by public transportation. This includes fishing clinics in New York City and Long Island, hiking at local parks in Buffalo, various programs at Rochester’s zoo, and pre-camp outings in Albany.</p> <p>DEC recently completed construction on the Frontier Town Campground, Equestrian and Day Use area, which includes 77 accessible campsites and many ADA features to accommodate a wide range of camping styles. The facility is also easily accessible just off of Exit 29 of the Northway.</p> <p>2. Engage Division of Veterans’ Services and the Office of Mental Health in the planning processes for the NY Statewide Comprehensive Outdoor Recreation Plan and the NY Open Space Plan, as well as DEC’s unit management planning process.</p> | |
| <p>Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee recommends further study on funding for public/private programs.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers.</p> |
| <p>Your response to funding for public programs here:</p> <p>1. DEC’s Hudson River Estuary grants funds river access projects and the Environmental Justice grants support communities’ efforts to address environmental issues, harms, and health hazards, build community consensus, set priorities, and improve public outreach and education. Both are awarded to community-based organizations.</p> <p>2 & 3: DEC is in the process of implementing new authority related to funding and partnerships. As a regulatory agency, there are limitations on how this can be managed and policies and procedures are being developed to ensure the agency is upholding the restrictions set forth in the law.</p> | |

Office of Parks, Recreation and Historic Preservation

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| Barrier | Action (Committee members are asked to respond to each) |
| All barriers | The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act. |
| Your response to this recommendation: OPRHP supports this recommendation. | |
| A person’s availability , not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children. | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |
| <p>Your response to availability barriers here:</p> <ol style="list-style-type: none"> 1. Programs and policies of the New York State Office of Parks, Recreation and Historic Preservation (OPRHP) that partially mitigate availability are the inclusion of broad weekend hours at parks and historic sites. There are also extensive virtual programs, in-house programs and various social media platforms that provide access to individuals and families who may have limited availability to travel to OPRHP facilities. . 2. None at this time. 3. Limitations on staffing. More staff would allow opportunity to add programming and provide better service for a broad array of visitors. | |
| Financial , any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, etc. | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate financial barriers? 2. Are there any immediate actions that your agency would recommend mitigating financial barriers fully or partially? 3. Provide any additional comments regarding financial barriers. |
| <p>Your response to financial barriers here:</p> <ol style="list-style-type: none"> 1. While budgetary limitations prevent OPRHP from extending free access to all Veterans and active service member families, we offer the following programs to help mitigate financial barriers: The Lifetime Liberty Pass, provides free vehicle entry to OPRHP and | |

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day-use areas, as well as numerous state boat launch sites, historic sites, arboretums, and park preserves discounts for NYS Veterans with 40% or greater disability:

- Free golf at State Park golf courses.
- Free swimming pool entrance at State Park pools.
- Discounted camping and cabin rental at all State Park and DEC campgrounds; and, ▪ The Patriot Plan offers a free Empire Pass, which provides free vehicle entry at state parks and sites for use by those service-members deployed in the war on terror and their immediate family during the time of their deployment and/or for his/her own use when returning home.

2. Given budgetary limitations, we are unable to recommend expanding free access to our parks and historic sites at this time.

Transportation, not able to physically travel from home to a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car is unable to access a State park because they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans do not access services such as VA healthcare (DVS, n.d.). Transportation barriers are also a leading barrier to regularly accessing State parks, other public lands, and programs for marginalized communities. Barriers include cost, awareness, availability, etc.

1. What existing programs or policies within your agency fully or partially mitigate **transportation** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **transportation** barriers fully or partially?
3. Provide any additional comments regarding **transportation** barriers.

Your response to **transportation** barriers here:

1. OPRHP partially mitigates transportation barriers by extended passes that allow free vehicle entry as noted above. In addition, OPRHP collaborates with DEC on the Connect Kids to Parks program which provides reimbursement for: transportation, program fees, entry fees, and/or pavilion fees to NYS Title 1 schools, youth bureaus, after-school programs, and not-for-profits.
2. No recommendations at this time.
3. With budgetary resources (e.g., additional dedicated funding), OPRHP might expand free access to a wider range of classes of Veterans.

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| <p>Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate (e.g., the fishing rod loaner program at DEC https://www.dec.ny.gov/outdoor/98019.html). A belief that outdoor styled clothing is</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate gear, equipment, or clothing barriers? 2. Are there any immediate actions that your agency would recommend mitigating gear, equipment, or clothing barriers fully or partially?</p> |
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| <p>needed to explore State parks, public lands, or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).</p> | <p>3. Provide any additional comments regarding gear, equipment, or clothing barriers.</p> |
| <p>Your response to gear, equipment, or clothing barriers here:</p> <p>1. None at this time. 2. Given budgetary limitations, we cannot recommend any immediate actions such as expanding free access to equipment. We do not provide gear, clothing, and related support to any park patrons. With additional budgetary resources and staffing, OPRHP could extend additional free and/or discounted equipment to this population for recreational use in many parks. OPRHP could start by offering information via social media about how to dress safely for different activities with what you have available to you.</p> | |
| <p>Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to risk management includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate risk management barriers? 2. Are there any immediate actions that your agency would recommend mitigating risk management barriers fully or partially? 3. Provide any additional comments regarding risk management barriers.</p> |

Your response to **risk management** barriers here:

1. OPRHP provides extensive communication and signage throughout its parks to notify visitors and patrons to any hazardous areas such as difficult hiking trails and access.

OPRHP also provides real time updates on its Parks Explore app to notify visitors and patrons of weather alerts, closures, or other barriers to access.

2. No immediate actions at this time.

3. Given that many OPRHPs' parks and sites include varied terrain and conditions, physical barriers will remain prevalent without substantial budgetary action for reducing barriers. In addition, extending recreational therapy opportunities for Veterans that are facilitated by trained professionals would be ideal if funding support were available.

Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that **societal and cultural** barriers be included as part of further study.

1. What existing programs or policies within your agency fully or partially mitigate

societal and cultural barriers?

2. Are there any immediate actions that your agency would recommend mitigating

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societal and cultural barriers fully or partially?

3. Provide any additional comments regarding **societal and cultural** barriers.

Your response to **societal and cultural** barriers here:

1. OPRHP has and continues to invest, in addressing societal and culture barriers in its parks, particularly at historic sites, where stories are being reinterpreted with an eye toward inclusivity and complete storytelling. Shirley Chisholm State Park, Marsha P. Johnson State Park, Ganondagan State Historic Site, the Sojourner Truth Statue at the Walkway Over the Hudson State Historic Site are examples of sites that explore the history that women, black suffragists, LGBTQ+, and Indigenous people have played in shaping our state’s history. OPRHP also has dedicated facilities to reflect the significant contributions of our Veterans. Sampson State Park hosts a military museum, The National Purple Heart Hall of Honor, as well as many other historic sites (Ft. Ontario, Ft. Niagara, Old Ft. Niagara etc.), interpret Veteran contributions throughout the history of the country from prior to our path to independence to today. In addition, OPRHP offers a “Learn to Swim Program,” providing free individual classes for all ages and levels, varying from swim lessons to water safety presentations at various parks throughout the state. Also, OPRHP offers the “Connect Kids Program,” a grant program to help transport schoolchildren to outdoor recreation and environmental education programs in State parks and historic sites; and partners with the National Park Service to extend free State Park day-use entry to all fourth-grade students and their families. Lastly, OPRHP offers the “Ladders to Outdoors” program, by providing introductory programs for those new to the outdoors— including the provision of all necessary equipment, skill instruction and transportation. This program is underway in the OPRHP Niagara Region with funding from the Wilson Foundation.

2. OPRHP is currently launching the “Our Whole History” campaign within our historic site system to expose all visitors and patrons to the rich diverse history of all individuals that contributed to the Empire State. **The campaign’s launch is at Philipse Manor Hall State Historic Site in Yonkers and will begin with a large capital investment to make the site fully ADA accessible and introduce exhibits that weave in the role that African Americans and Indigenous people have played in the shaping of the lower-Hudson Valley.**

3. Addressing cultural barriers to OPRHP resources is an agency priority and significant progress has been made to-date under Commissioner Kulleseid’s leadership with Governor Cuomo’s support. In addition, OPRHP has appointed a Chief Diversity Officer to address and expand diversity, equity, inclusion and access to parks and historic sites and within the agency.

Barriers caused by **physical ability** (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.

1. What existing programs or policies within your agency fully or partially mitigate **physical ability** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **physical ability** barriers fully or partially?
3. Provide any additional comments regarding **physical ability** barriers.

Your response to **physical ability** barriers here:

1. OPRHP continues to adapt facilities to make them more accessible in accordance with ADA requirements as funds become available for these purposes. For example, ADA swimming accommodations (pool lifts, mobility-mats, and beach wheelchairs, as well as our accommodation for Other Power-Driven Mobility Devices (OPDMD) where typical motor vehicles are prohibited to ensure accessibility.
2. Other than plans that are underway, there are immediate actions that could be addressed with increases in funding.
3. Increases in funding would provide OPRHP greater opportunity to improve accessibility (as mentioned above) ADA into some of its more challenging parks and historic site facilities

Barriers due to **emotional ability**. These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.

1. What existing programs or policies within your agency fully or partially mitigate **emotional ability** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **emotional ability** barriers fully or partially?
3. Provide any additional comments regarding **emotional ability** barriers.

Your response to **emotional ability** barriers here:

1. Parks does not have capacity to address these types of barriers.
2. Nothing at this time.
3. Nothing at this time.

Barriers due to **race, ethnicity, age, gender identity, or sexual orientation**. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives 1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.

1. What existing programs or policies within your agency fully or partially mitigate barriers due to **race, ethnicity, age, gender identity, or sexual orientation**?
2. Are there any immediate actions that your agency would recommend mitigating barriers due to **race, ethnicity, age, gender identity, or sexual orientation** fully or partially?
3. Provide any additional comments regarding barriers due to **race, ethnicity, age, gender identity, or sexual orientation**.

Your response to barriers due to **race, ethnicity, age, gender identity, or sexual orientation** here:

1. See responses pertaining to diversity in the section on Social and Cultural Barriers.
2. See responses pertaining to diversity in the section on Social and Cultural Barriers.
3. See responses pertaining to diversity in the section on Social and Cultural Barriers.

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| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate familial barriers? 2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially? 3. Provide any additional comments regarding familial barriers. |
| <p>Your response to familial barriers here:</p> <ol style="list-style-type: none"> 1. OPRHP markets the experiences in parks and historical sites as inclusive for families, and provides family-friendly, affordable recreation throughout NYS. While some activities may be historically gender dominant, we communicate and encourage visitors and patrons in gender neutral ways. For example, this past year, prior to COVID, we saw an increase in the number of women hosting camping experiences with their friends in our parks. Kayaking, fishing, and related outdoor sports are also attracting more gender and ethnic diversity. 2. No immediate actions at this time. 3. OPRHP is committed to providing family experiences and will continue to market all access to parks and historic sites in diverse sensitive ways. | |
| <p>Barriers due to a lack of outdoor education, experience, or competency in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate outdoor education, experience, or competency barriers? 2. Are there any immediate actions that your agency would recommend mitigating outdoor education, experience, or competency barriers fully or partially? 3. Provide any additional comments regarding outdoor education, experience, or competency barriers. |

Your response to **outdoor education, experience, or competency** barriers here:

1. OPRHP specializes in customer service including environmental and historical interpretive experiences to mitigate barriers to participation in parks and historic sites. For example, First Day Hikes, guided hikes, snowshoe hikes, bird watching, educational programming at our parks, historic sites and environmental centers, etc. In addition, prior to COVID we offered the First Time Camper Program, which provided free camping equipment to families for the weekend at selected state parks. This is a program we would be interesting in offering again, once it is safe to do so and if an appropriate sponsor is identified.
2. Without additional funding or staffing the agency may be limited in the amount of additional programming that can be accomplished immediately but may be able to consider adapting some of our existing programs where possible. For example, OPRHP would like to offer the “First Time Camper” program to Fort Drum’s active service member families.
3. OPRHP has plans to continue to expand similar initiatives as those described in question 1.

1. Absence of funding and staffing is the greatest impediment to this expansion.

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| <p>Access to nearby nature, barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers? 2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? 3. Provide any additional comments regarding accessing nearby nature barriers. |
| <p>Your response to accessing nearby nature barriers here:</p> <ol style="list-style-type: none"> 1. OPRHP has an extensive system of parks and historic sites throughout the state that border on other natural areas such as mountains, lakes, streams, parks in other local jurisdictions, and oceans. Tourism in NYS embraces our system in their promotions. We believe these promotions and additional outreach events sufficiently mitigates barrier to access to nearby nature. 2. Launching this summer, the Mohawk-Hudson Land Conservancy, and the Capital District Transportation Authority (CDTA) are collaborating to provide a free “nature bus” from underserved areas of downtown Albany to Thatcher State Park, Five Rivers and other natural areas in Albany County. 3. OPRHP is not able to control accessibility to nature outside the agency’s system so we cannot assume direct responsibility for mitigating those barriers. | |

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| <p>Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee recommends further study on funding for public/private programs.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers. |
| <p>Your response to funding for public programs here:</p> <ol style="list-style-type: none"> 1. Parks supports public-private programs that are inclusive of all populations including historically marginalized ones. “Ladders to the Outdoor Program,” which addresses the lack of equitable access to outdoor recreational spaces, recreational equipment, transportation and skills development for youth in under-served communities is operating in pilot status in the OPRHP Niagara Region with an expectation of expanding statewide eventually. 2. While there are no immediate actions to address potential barriers in this space, OPRHP continues to seek partnerships with organizations who share the values of diversity and accessibility that Parks does. | |

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Office of Mental Health

| Barrier | Action (Committee members are asked to respond to each) |
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| All barriers | The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act. |

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| <p>Your response to this recommendation: OMH supports the recommendation for a formal study, particularly for the purpose of the understanding differential barriers for specific populations, most notably traditionally marginalized/disenfranchised populations. As with any domain, it is likely that there are different barriers that will require different interventions for specific populations. Understanding the proportion of various populations represented will help to tier the interventions that should be rolled out.</p> <p>OMH specifically recommends that the formal study be carried out through a multi-stakeholder distribution mechanism. It is reasonable to suggest that some of the populations that experience barriers to accessing public lands will also experience barriers to filling out a survey. Therefore, extra efforts will likely need to be taken to survey a representative sample.</p> <p>Finally, OMH recommends that the survey be structured such that information can feed into recommendations, for example through a decision matrix that involves impact and investment of particular interventions, allowing tiering of interventions with high impact/low investment first, etc. To that end, OMH recommends that the action be expanded from conducting a formal study to making recommendations based on the findings.</p> | |
| <p>A person's availability, not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |
| <p>Your response to availability barriers here: OMH offers home and community-based services that often target families as a unit, and may be leveraged here to provide OutdoorRX. In the immediate term, training and marketing of OutdoorRX to overlap with existing services may mitigate this barrier. For example, a clinic patient may face a significant availability barrier</p> | |

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| <p>in adding such a service to their schedule; however, if services the client already participates in could be modified to have an OutdoorRX component, the client may experience the benefits without an additional ask of their availability.</p> | |
| <p>Financial, any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation,</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate financial barriers? 2. Are there any immediate actions that your agency would recommend mitigating financial barriers fully or partially? 3. Provide any additional comments |

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| etc. | regarding financial barriers. |
| <p>Your response to financial barriers here: While OMH does not have a significant method to push financial resources to service recipients directly, there are multiple ways in which financial barriers can be mitigated. As mentioned above, if OutdoorRX can be tied to existing services there are likely some costs that may be borne by the service provider such as transportation. Additionally, if accessing OutdoorRX is a goal on a treatment plan or recovery plan, part of the provided services may be the clinician or provider linking the client to financial resources such as education about free resources, signing the client up for low-cost rentals, or assisting the client in locating and securing grants to access equipment. Additionally, for many clients who receive public benefits the clinician or provider may, if access to OutdoorRX is a client's goal, work with the client to make decisions about how to allocate their funds to be able to prioritize that goal.</p> | |
| <p>Transportation, not able to physically travel from home to a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car is unable to access a State park because they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans do not access services such as VA healthcare (DVS, n.d.). Transportation barriers are also a leading barrier to regularly accessing State parks, other public lands, and programs for marginalized communities. Barriers include cost, awareness, availability, etc.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate transportation barriers? 2. Are there any immediate actions that your agency would recommend mitigating transportation barriers fully or partially? 3. Provide any additional comments regarding transportation barriers. |

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Your response to **transportation** barriers here: As noted above, the extent to which OutdoorRX may be integrated into existing services may mitigate this barrier. Medicaid funded transportation may be available in some cases to transport clients to their services.

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| <p>Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate (e.g., the fishing rod loaner program at DEC https://www.dec.ny.gov/outdoor/98019.html). A belief that outdoor styled clothing is needed to explore State parks, public lands, or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate gear, equipment, or clothing barriers? 2. Are there any immediate actions that your agency would recommend mitigating gear, equipment, or clothing barriers fully or partially? 3. Provide any additional comments regarding gear, equipment, or clothing barriers. |
| <p>Your response to gear, equipment, or clothing barriers here: OMH’s answer to financial barriers above applies to this action. OMH would recommend that the target of this action be around providing psychoeducation and models/trusted messengers delivering the message that a majority of activities on public land may be accessible without specialized gear, vs. prioritizing access to specialized gear as a first intervention.</p> | |
| <p>Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to risk management includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate risk management barriers? 2. Are there any immediate actions that your agency would recommend mitigating risk management barriers fully or partially? 3. Provide any additional comments regarding risk management barriers. |
| <p>Your response to risk management barriers here: For Veterans enrolled in OMH services, the psychotherapeutic and rehabilitation services provided by the agency are well placed to mitigate these barriers. Working with clients on making decisions towards their goals is a priority of OMH. One immediate action may be to message both clients and service providers about the availability and benefits of OutdoorRX programs; it is possible that some clients do not identify accessing OutdoorRX as a goal simply due to lack of knowledge. If the goal is not identified, service providers are unable to target it.</p> | |



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| <p>Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that societal and cultural barriers be included as part of further study.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate societal and cultural barriers? 2. Are there any immediate actions that your agency would recommend mitigating societal and cultural barriers fully or partially? 3. Provide any additional comments regarding societal and cultural barriers. |
| <p>Your response to societal and cultural barriers here: OMH recognizes this as a barrier. Across the agency, we have found that building strong collaboratives across stakeholders and stakeholder groups from multiple arenas provides the best opportunity to identify and mitigate such barriers. Messaging about societal and cultural barriers is most effective when the appropriate messenger is included from the outset.</p> | |
| <p>Barriers caused by physical ability (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate physical ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating physical ability barriers fully or partially? 3. Provide any additional comments regarding physical ability barriers. |
| <p>Your response to physical ability barriers here: OMH is fully in agreement with this recommendation.</p> | |
| <p>Barriers due to emotional ability. These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate emotional ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating emotional ability barriers fully or partially? 3. Provide any additional comments regarding emotional ability barriers. |
| <p>Your response to emotional ability barriers here: OMH's response to the risk management barrier applies in its entirety here. OMH providers are well positioned to assist clients with this barrier where access to OutdoorRx is identified as a goal.</p> | |

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| <p>Barriers due to race, ethnicity, age, gender identity, or sexual orientation. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives 1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate barriers due to race, ethnicity, age, gender identity, or sexual orientation? 2. Are there any immediate actions that your agency would recommend mitigating barriers due to race, ethnicity, age, gender identity, or sexual orientation fully or partially? 3. Provide any additional comments regarding barriers due to race, ethnicity, age, gender identity, or sexual orientation. |
| <p>Your response to barriers due to race, ethnicity, age, gender identity, or sexual orientation here: OMH recognize this as a significant barrier and recommends that planning processes actively recruit representatives from groups that historically be disenfranchised or marginalized. Building a strong stakeholder group will be the most effective way to ensure that planning and implementation is done in sensitive and inclusive manner that particularly targets populations that may have access challenges.</p> | |
| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate familial barriers? 2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially? 3. Provide any additional comments regarding familial barriers. |
| <p>Your response to familial barriers here: To the extent to which this is identified as a barrier for individual family units, those receiving services are likely to benefit from family counseling or family-based intervention that targets the larger dynamics that likely inform these barriers. Additionally, larger scale intervention efforts around societal/cultural barriers and barriers experienced by specific marginalized population will likely have trickle down effects in this domain.</p> | |
| <p>Barriers due to a lack of outdoor education, experience, or competency in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate outdoor education, experience, or competency barriers? 2. Are there any immediate actions that your agency would recommend mitigating |

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| | <p>outdoor education, experience, or competency barriers fully or partially? 3. Provide any additional comments regarding outdoor education, experience, or competency barriers.</p> |
| <p>Your response to outdoor education, experience, or competency barriers here: OMH suggests that it is important to clarify whether this barrier is primarily due to lack of perceived competency or lack of actual competency; i.e. will psychoeducation about the actual competencies required likely reassure individuals that they possess necessary skills or is actual skill-building required. Based on the nature of the barrier, existing OMH services for Veteran clients may be helpful either in the provision of psychoeducation or in the provision of rehabilitation.</p> | |
| <p>Access to nearby nature, barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers? 2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? 3. Provide any additional comments regarding accessing nearby nature barriers.</p> |
| <p>Your response to accessing nearby nature barriers here: OMH does not have immediate programs that or policies that mitigate this barrier. It seems likely that a full landscape of existing programs will surface options for the vast majority of service recipients and efforts may be best targeted towards such an endeavor. Alternately if a significant amount of the targeted population truly has no nearby nature, alleviating the transportation barriers above may be the appropriate intervention point.</p> | |
| <p>Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee recommends further study on funding for public/private programs.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers.</p> |

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Your response to **funding for public programs** here: OMH is in agreement with further study on funding and further recommends that to the extent that the mental health benefits of OutdoorRX have been well-documented, it may be useful to collaborate on such funding proposals, should the percentage clients of OMH services who are Veterans indicate the need.

Department of Health

| Barrier | Action (Committee members are asked to respond to each) |
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| All barriers | The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act. |
| Your response to this recommendation: A more in depth review should include engagement with additional stakeholders, such as Veteran support organizations and organizations that focus on expanding the use of public lands must be engaged to more fundamentally drill down on barriers and potential solutions. | |
| A person's availability , not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children. | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |
| Your response to availability barriers here: The DOH has established and does monitor prevention agenda targets including increasing access, for people of all ages and abilities, to indoor and/or outdoor places for physical activity. However, these metrics are not explicitly focused on increase access for veterans. | |
| Financial , any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate financial barriers? 2. Are there any immediate actions that your agency would recommend mitigating financial barriers fully or partially? 3. Provide any additional comments |

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| etc. | regarding financial barriers. |
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| <p>i. Your response to financial barriers here: DOH does not have programming that specifically mitigates financial barriers for veterans accessing these services. Perhaps there is opportunity to construct a program for Veterans on Medicaid, whereby, the fee to access certain outdoor recreational activities or areas is waived, or transportation costs to a park are covered as if it is a medical visit. .</p> | |
| <p>Transportation, not able to physically travel from home to a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car is unable to access a State park because they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans do not access services such as VA healthcare (DVS, n.d.). Transportation barriers are also a leading barrier to regularly accessing State parks, other public lands, and programs for marginalized communities. Barriers include cost, awareness, availability, etc.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate transportation barriers? 2. Are there any immediate actions that your agency would recommend mitigating transportation barriers fully or partially? 3. Provide any additional comments regarding transportation barriers.</p> |
| <p>Your response to transportation barriers here: DOH does not have policies that mitigate this barrier. Documenting where public lands are and transportation options that could help someone access those lands may be a good place to start to break down the transportation barrier.</p> | |

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| <p>Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate (e.g., the fishing rod loaner program at DEC https://www.dec.ny.gov/outdoor/98019.html). A belief that outdoor styled clothing is needed to explore State parks, public lands, or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate gear, equipment, or clothing barriers? 2. Are there any immediate actions that your agency would recommend mitigating gear, equipment, or clothing barriers fully or partially? 3. Provide any additional comments regarding gear, equipment, or clothing barriers. |
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| <p>Your response to gear, equipment, or clothing barriers here: DOH does not have policies or programs that mitigate this barrier. There are social support programs that provide income for needy families. Theoretically, some of that money could be used to buy clothing, but that would be at the expense of other necessities.</p> <p>We should keep the initial focus on trying to increase the number of folks that know where outdoor public lands are and how they can access them, before delving into these more detailed barriers.</p> | |
| <p>Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to risk management includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate risk management barriers? 2. Are there any immediate actions that your agency would recommend mitigating risk management barriers fully or partially? 3. Provide any additional comments regarding risk management barriers. |
| <p>Your response to risk management barriers here: This barrier seems like a good barrier to address when other, more general barriers, such as cost, knowledge of public lands and transportation are addressed.</p> | |

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| <p>Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that societal and cultural barriers be included as part of further.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate societal and cultural barriers? 2. Are there any immediate actions that your agency would recommend mitigating societal and cultural barriers fully or partially? 3. Provide any additional comments regarding societal and cultural barriers. |
| <p>Your response to societal and cultural barriers here: One of the best solutions is informing people of where public lands are, what commodities are available at the public land and how people can access the land. This information should be available in at least the languages required under E.O. 26.</p> | |
| <p>Barriers caused by physical ability (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate physical ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating physical ability barriers fully or partially? 3. Provide any additional comments regarding physical ability barriers. |

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| <p>Your response to physical ability barriers here: Sharing information about public lands should include information about ADA compliance.</p> | |
| <p>Barriers due to emotional ability. These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate emotional ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating emotional ability barriers fully or partially? 3. Provide any additional comments regarding emotional ability barriers. |
| <p>Your response to emotional ability barriers here: This barrier seems like a good barrier to address when other, more general barriers, such as cost, knowledge of public lands and transportation are addressed.</p> | |

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| <p>Barriers due to race, ethnicity, age, gender identity, or sexual orientation. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives 1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate barriers due to race, ethnicity, age, gender identity, or sexual orientation? 2. Are there any immediate actions that your agency would recommend mitigating barriers due to race, ethnicity, age, gender identity, or sexual orientation fully or partially? 3. Provide any additional comments regarding barriers due to race, ethnicity, age, gender identity, or sexual orientation. |
| <p>Your response to barriers due to race, ethnicity, age, gender identity, or sexual orientation here: This barrier seems like a good barrier to address when other, more general barriers, such as cost, knowledge of public lands and transportation are addressed.</p> | |
| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate familial barriers? 2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially? 3. Provide any additional comments regarding familial barriers. |

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| <p>Your response to familial barriers here: This barrier seems like a good barrier to address when other, more general barriers, such as cost, knowledge of public lands and transportation are addressed.</p> | |
| <p>Barriers due to a lack of outdoor education, experience, or competency in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate outdoor education, experience, or competency barriers? 2. Are there any immediate actions that your agency would recommend mitigating outdoor education, experience, or competency barriers fully or partially? 3. Provide any additional comments regarding outdoor education, |

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| | experience, or competency barriers. |
| Your response to outdoor education, experience, or competency barriers here: Scale up programs that help teach outdoor competencies. | |
| Access to nearby nature , barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature . | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers? 2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? 3. Provide any additional comments regarding accessing nearby nature barriers. |
| Your response to accessing nearby nature barriers here: | |
| Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee recommends further study on funding for public/private programs . | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers. |
| Your response to funding for public programs here: Agreed | |

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Office of Addiction Services and Supports

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| Barrier | Action (Committee members are asked to respond to each) |
| All barriers | The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act. |

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| <p>Your response to this recommendation: A formal study would assist in understanding the complexities and barriers in different demographics and regions.</p> | |
| <p>A person's availability, not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |
| <p>Your response to availability barriers here: OASAS has on their website a treatment availability Dashboard that describes types of programs, which can be filtered by programs suitable for gender types, age groups and location. Flexibility in scheduling to meet the needs of individuals is in evidence. Program has evening and/or weekend hours sufficient across the week to accommodate variety in individual schedules. Veteran's availability can cover any day and hours of the week; having Outdoor Rx available encompassing a variety of times throughout the day and days of the week would be helpful and address the availability issue. Also, offering free to low cost childcare would open access to parents to participate.</p> | |
| <p>Financial, any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, etc.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate financial barriers? 2. Are there any immediate actions that your agency would recommend mitigating financial barriers fully or partially? 3. Provide any additional comments regarding financial barriers. |

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| <p>Your response to financial barriers here: OASAS pursues State, federal, and private sources of funding for services. OASAS funded treatment providers cannot turn a person away for an inability to pay. OASAS has policies in place that provides rights and protections for the people they serve. Providing Outdoor Rx to all Veterans on a free or low-cost basis would reduce this barrier significantly.</p> |
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| | <p>1. What existing programs or policies within your agency fully or partially mitigate transportation barriers?</p> <p>2. Are there any immediate actions that your agency would recommend mitigating transportation barriers fully or partially? 3. Provide any additional comments regarding transportation barriers.</p> |
| <p>Your response to transportation barriers here:</p> <p>OASAS has established several innovative programs across the State to better meet the needs of New Yorkers. Locally based services increase access to assessments, referrals, and treatment. Centers of Treatment Innovation (COTIs) operate mobile treatment and transportation units to bring clinical services to you. Providing transportation services would have a positive impact on reducing transportation barriers.</p> | |
| <p>Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate (e.g., the fishing rod loaner program at DEC https://www.dec.ny.gov/outdoor/98019.html). A belief that outdoor styled clothing is needed to explore State parks, public lands, or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate gear, equipment, or clothing barriers?</p> <p>2. Are there any immediate actions that your agency would recommend mitigating gear, equipment, or clothing barriers fully or partially?</p> <p>3. Provide any additional comments regarding gear, equipment, or clothing barriers.</p> |
| <p>Your response to gear, equipment, or clothing barriers here:</p> <p>OASAS provides funding to not-for-profit organizations, local governmental units, and other businesses to support a comprehensive system of addiction services for all New Yorkers. The competitive procurement process enables OASAS to combat addiction at the local level by</p> | |

supporting new programs and expanding existing services for substance use disorders and compulsive gambling.

OASAS procures for a number of goods and services, including but not limited to: Substance Use Disorder services and programs;

OASAS Addiction Treatment Center supplies and equipment;

Office services, supplies, and equipment; Information technology services, systems, and equipment and Telecommunications equipment and services; and

Providing training on the proper gear and equipment, or clothing and providing use of gear and equipment, or clothing by the organization that would be providing the Outdoor Rx services would be very helping in mitigating this barrier.

Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to **risk management** includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.

1. What existing programs or policies within your agency fully or partially mitigate **risk management** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **risk management** barriers fully or partially?
3. Provide any additional comments regarding **risk management** barriers.

Your response to **risk management** barriers here:

OASAS has a Bureau of Quality Assurance which assesses risks and mitigation to ensure safety of the environment, participants, and staff. Providing ongoing training in safety and safety equipment is a high priority to protect employees, Veterans, and their families.

Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that **societal and cultural** barriers be included as part of further study.

1. What existing programs or policies within your agency fully or partially mitigate **societal and cultural** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **societal and cultural** barriers fully or partially?
3. Provide any additional comments regarding **societal and cultural** barriers.

Your response to **societal and cultural** barriers here:

OASAS has established trainings and standards which provides education on exploring biases, power, and privilege, building professional skills in cultural competence, and expanding an individual's knowledge and competence to effectively work in a multicultural workplace. Training should be providing to address cultural competence, diversity, social and systemic racism, and bias.

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| <p>Barriers caused by physical ability (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate physical ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating physical ability barriers fully or partially? 3. Provide any additional comments regarding physical ability barriers. |
| <p>Your response to physical ability barriers here: OASAS must conform with all relevant federal and State non-discrimination and affirmative action statutes, regulations, and other administrative directives. These include, but are not limited to, the Rehabilitation Act of 1973 as amended, the New York State Human Rights Law, the New York State Civil Rights Law, the Americans with Disabilities Act, and Executive Order No. 6. It is therefore the policy of OASAS to provide reasonable accommodations to persons with disabilities who are otherwise qualified for the State government position for which they are applying or in which they are employed, and to members of the public with disabilities who wish to access State-owned or operated programs and services. Programing can be developed to include Veterans and family members with physical ability barriers, so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.</p> | |
| <p>Barriers due to emotional ability. These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate emotional ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating emotional ability barriers fully or partially? 3. Provide any additional comments regarding emotional ability barriers. |
| <p>Your response to emotional ability barriers here: OASAS has standards of care which address potential barriers and current difficulties in participating in treatment., having qualified staff with experience in treating individuals with emotional ability barriers and providing training in managing emotional crisis would be recommended.</p> | |
| <p>Barriers due to race, ethnicity, age, gender identity, or sexual orientation. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate barriers due to race, ethnicity, age, gender identity, or sexual orientation? 2. Are there any immediate actions that your agency would recommend mitigating |

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| <p>1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.</p> | <p>barriers due to race, ethnicity, age, gender identity, or sexual orientation fully or partially?</p> <p>3. Provide any additional comments regarding barriers due to race, ethnicity, age, gender identity, or sexual orientation.</p> |
| <p>Your response to barriers due to race, ethnicity, age, gender identity, or sexual orientation here:</p> <p>OASAS has program standards which seeks to eliminate disparities in care for people of diverse backgrounds by: a. Making all reasonable efforts to provide care in a culturally competent manner to its prevalent populations through all stages of screening, treatment, and discharge. B. Ensuring that assessments capture individual/family cultural, linguistic, and literacy needs, ethnic and/or racial identification, sexual orientation, etc. and any impact on treatment. C. Assigning multicultural/multilingual clinicians to individuals from matching cultural groups wherever possible. 4. For individuals with Limited English Proficiency (LEP), the programs: a. Use language translation services as needed and as required by law. B. Make reasonable efforts to provide written correspondence and other documents to be used by the individual in their preferred language wherever possible. Training in diversity, race, ethnicity, age, gender identity, or sexual orientation should be provided and having some mechanism to report discrimination.</p> | |
| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <p>1. What existing programs or policies within your agency fully or partially mitigate familial barriers?</p> <p>2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially?</p> <p>3. Provide any additional comments regarding familial barriers.</p> |

Your response to **familial** barriers here:

1. OASAS has standards of care which supports communication with Families/Other Significant People, Families or significant others have all information necessary to contact treatment providers for both routine follow-up and immediate access during periods of crisis.
2. Staff can explain the parameters and policies concerning confidentiality, including the ability to receive information from family and others.
3. Clinicians seek to identify others involved in the individual's care and recovery and discuss benefits of their involvement with the individual.
4. There is documentation of efforts to communicate in person or by telephone with significant others involved in the individual's treatment and recovery as appropriate. A way to mitigate this barrier is by educating the family about the how Outdoor Rx can benefit all family members to include female members; this can be done by having family group sessions.

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Barriers due to a lack of **outdoor education, experience, or competency** in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?

1. What existing programs or policies within your agency fully or partially mitigate **outdoor education, experience, or competency** barriers?
2. Are there any immediate actions that your agency would recommend mitigating **outdoor education, experience, or competency** barriers fully or partially?
3. Provide any additional comments regarding **outdoor education, experience, or competency** barriers.

Your response to **outdoor education, experience, or competency** barriers here: Many OASAS providers offer expanded services that build on traditional prevention, treatment, and recovery programs. Locally based services address the needs of specific counties and regions and offer additional support to individuals, families, and communities, affected by addiction. Outdoor activities are provided by Clubhouses and Recovery Centers: **Clubhouses** provide non-clinical, drug-free environments for recreation and skill-building. **Recovery Centers** offer non-clinical recovery supports in the form of emotional, informational, instrumental (concrete) support and positive affiliation. Providing the proper training of participants, training and certification of staff and developing strategies to engage Veterans are ways to mitigate this barrier.

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| <p>Access to nearby nature, barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers? 2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? 3. Provide any additional comments regarding accessing nearby nature barriers. |
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Your response to **accessing nearby nature** barriers here:
 OASAS doesn't have any existing programs or policies to mitigate fully or partially, Access to nearby nature barriers related to access to State lands and Outdoor Rx. Strategies to mitigate this barrier are identification and educating the community about the locations and services offered by agencies providing Outdoor Rx and access to State lands.

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| <p>Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? |
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| <p>recommends further study on funding for public/private programs.</p> | <ol style="list-style-type: none"> 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers. |
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Your response to **funding for public programs** here:
 OASAS pursues State, federal, and private sources of funding for services. Mitigating funding for public/private programs barriers can be done through Federal Block Grants, State funding and public-private partnership opportunities and assisting agencies who provide Outdoor Rx services with sustainability planning.

Division of Veterans' Services

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| <p>Barrier</p> | <p>Action (Committee members are asked to respond to each)</p> |
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| <p>All barriers</p> | <p>The Outdoor Rx Committee recommends that a formal study be conducted to identify and examine barriers to accessing State parks, public lands, and programs relative to the Outdoor Rx act.</p> |
| <p>Your response to this recommendation: Agreed.</p> | |
| <p>A person's availability, not having time. E.g., a single working mom of three school aged children has limited availability that may be mitigated by offering outdoor programs that are designed for parents or guardians to bring children.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate availability barriers? 2. Are there any immediate actions that your agency would recommend mitigating availability barriers fully or partially? 3. Provide any additional comments regarding availability barriers. |
| <p>Your response to availability barriers here: Recommend Veteran family-oriented outdoor programs that would allow Veterans with limited time the opportunity to participate in outdoor activities in conjunction with their loved ones. Also recommend that programming be offered at a diversity of times when possible (e.g., some on weekends, some on weekdays, etc.) to accommodate various work schedules, school schedules, and family schedules.</p> | |

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| <p>Financial, any barrier that you feel exists due to cost. Financial barriers are one of the primary barriers that an individual can face and one of the fastest ways to discourage people from participation. Financial barriers include cost of access, license, gear, equipment, clothing, transportation, etc.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate financial barriers? 2. Are there any immediate actions that your agency would recommend mitigating financial barriers fully or partially? 3. Provide any additional comments regarding financial barriers. |
| <p>Your response to financial barriers here: All Veterans should be referred to DVS so they may be screened for potential benefits that could result in increased income; thus, lessening the financial barrier. If fiscally possible, it would be beneficial for New York State to open the Lifetime Liberty Pass to any Veteran with a service-connected disability, as has been discussed in the past, rather than "just" Veterans with a disability compensation rating of 40% or higher.</p> | |

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| <p>Transportation, not able to physically travel from home to a State park, other public lands, or program location. E.g., an elderly Veteran who does not have access to a car is unable to access a State park because they are unaware of public transportation options that currently exist. Transportation barriers are one of the primary reasons why Veterans do not access services such as VA healthcare (DVS, n.d.). Transportation barriers are also a leading barrier to regularly accessing State parks, other public lands, and programs for marginalized communities. Barriers include cost, awareness, availability, etc.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate transportation barriers? 2. Are there any immediate actions that your agency would recommend mitigating transportation barriers fully or partially? 3. Provide any additional comments regarding transportation barriers. |
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Your response to **transportation** barriers here: Creation of a Veteran social media page where Veterans could post their anticipated outdoor plans. Within their plans, they could state their travel route along with their availability to transport other Veterans to participate in the outdoor activity. Veterans needing transportation could then reach out to obtain a ride.

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| <p>Not having access, owning, able to acquire, or lacking knowledge or experience to access and use any gear or equipment needed to participate (e.g., the fishing rod loaner program at DEC https://www.dec.ny.gov/outdoor/98019.html). A belief that outdoor styled clothing is needed to explore State parks, public lands,</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate gear, equipment, or clothing barriers? 2. Are there any immediate actions that your agency would recommend mitigating gear, equipment, or clothing barriers fully or partially? |
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| <p>or participate in outdoor programs. Clearly there are some outdoor activities and seasons where specialized gear, equipment, or clothing is needed (e.g., winter outdoor activities, fishing, water based activities, multi-day backpacking, etc.).</p> | <ol style="list-style-type: none"> 3. Provide any additional comments regarding gear, equipment, or clothing barriers. |
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Your response to **gear, equipment, or clothing** barriers here: Contained in the above mentioned social media page, Veterans could post gear, equipment, clothing they no longer need and are willing to donate to other Veterans.

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| <p>Risk management, any barrier regarding physical, emotional, or social risk to the participant or physical risk to the environment. Barriers related to risk management includes the perceived and actual [real] physical, emotional, and social risk to the participant and the risk to the environment.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate risk management barriers? 2. Are there any immediate actions that your agency would recommend mitigating risk management barriers fully or partially? 3. Provide any additional comments regarding risk management barriers. |
| <p>Your response to risk management barriers here: Virtual programming can help alleviate some of the concerns and fears that individuals may have about certain types of outdoor activities. Videos and other visual media demonstrating certain outdoor activities — and addressing how the activities are designed to ameliorate risks rather than acting as if the risks do not exist — will help Veterans and their families recognize that measures are being taken to provide these outdoor recreational therapies in a way that accounts for, and seeks to mitigate, the risks of these activities.</p> | |
| <p>Societal and cultural barriers require further study. Responses from Objectives 1, 2, and 3 indicate that societal and cultural barriers be included as part of further.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate societal and cultural barriers? 2. Are there any immediate actions that your agency would recommend mitigating societal and cultural barriers fully or partially? 3. Provide any additional comments regarding societal and cultural barriers. |
| <p>Your response to societal and cultural barriers here: No response</p> | |

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| <p>Barriers caused by physical ability (ADA related). The consensus of Committee members is that ADA concerns must be a part of this plan, both from a legal perspective and from a practical perspective so Outdoor Rx opportunities can be provided to Veterans in the most integrated setting possible.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate physical ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating physical ability barriers fully or partially? 3. Provide any additional comments regarding physical ability barriers. |
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| <p>Your response to physical ability barriers here: Collaborate with Veteran adaptive sports programs and other similar groups that have experience helping Veterans overcome physical ability barriers in active outdoor settings. Use the lessons that these groups have learned, and adopt best practices based on the evidence that they have gathered through the years, rather than trying to re-invent the wheel.</p> | |
| <p>Barriers due to emotional ability. These barriers manifest in numerous ways, i.e., female Veterans unable to participate in mixed gender outdoor programs or Veterans with depression or anxiety unable to leave their home.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate emotional ability barriers? 2. Are there any immediate actions that your agency would recommend mitigating emotional ability barriers fully or partially? 3. Provide any additional comments regarding emotional ability barriers. |
| <p>Your response to emotional ability barriers here: Diversity of programming will be essential here. For example, when possible, offering some programming that is solely for male Veterans and some programming that is solely for female Veterans, as well as some programming that is open for all genders. Offering some programming that is for Veterans who are more experienced in the outdoors and offering other programming that can be accessible for Veterans who are new to the outdoors — <i>without</i> stigmatizing the latter type of programming with labels such as “beginner,” “entry-level,” “first step,” etc. that could be a turn-off to Veterans who would not want to take part in a program that carries such labels.</p> <p>A common “emotional ability” challenge regarding the outdoors (both from Veterans and “non Veterans”) deals with age. Some older individuals want to engage in outdoor activities but are intimidated or concerned about getting “left behind,” or being “a burden to the group,” if they are engaging in an outdoor activity with people who are younger than them. It therefore would be beneficial to take participant age into consideration when developing outdoor recreational programming for Veterans and their families. Again, though, it will be important that if a program is developed largely for Veterans who are older to avoid language such as “senior citizen” or “senior Veterans program,” as this could be a turnoff to Veterans who understandably do not want to be labeled in this manner. Selecting group leaders carefully, and matching group leaders with groups, will be crucial here. For example, some groups of Veterans will be deterred by a group leader who engages — even jokingly — in “drill</p> | |

sergeant”-esque behavior that reminds Veterans in the group too much of being back in the military again. Other groups of Veterans, by contrast, would embrace behavior such as calling out a cadence while on a hike and other behaviors that remind them of being part of the unit cohesion while in the military. Being sensitive to that emotional diversity among the Veteran population, and making decisions accordingly when matching group leaders to groups for outdoor outings, is going to be a challenging but important aspect of this work.

Additionally, it will be important to ensure that group leaders are well-trained in recognizing “warning signs” of emotional barriers manifesting during an outdoor activity and well-versed in addressing these emotional challenges in a safe, healthy manner if they arise during an outdoor activity. Gatekeeper suicide prevention training with tools such as the Columbia Protocol, SafeTalk, etc. seems essential here, as does other forms of “mental health first aid” and high quality training regarding military cultural competency before someone is placed in the role of a group leader in these activities.

Barriers due to **race, ethnicity, age, gender identity, or sexual orientation**. These are barriers within the Justice, Equity, Inclusion, and Diversity work emerging within many outdoor organizations. Responses from Objectives 1, 2, and 3 indicate that Committee members agree that these barriers be included as part of further study.

1. What existing programs or policies within your agency fully or partially mitigate barriers due to **race, ethnicity, age, gender identity, or sexual orientation**?
2. Are there any immediate actions that your agency would recommend mitigating barriers due to **race, ethnicity, age, gender identity, or sexual orientation** fully or partially?
3. Provide any additional comments regarding barriers due to **race, ethnicity, age, gender identity, or sexual orientation**.

Your response to barriers due to **race, ethnicity, age, gender identity, or sexual orientation** here: See above for the “emotional response” answer, much of which is relevant here (including the above response regarding age). Messaging around these programs need to focus on inclusiveness. People need to be able to see people who look like them engaging in these outdoor activities, encouraging them that they too can take part in these activities and benefit from the experience. Additionally, feedback regarding this issue needs to come from individuals — and particularly Veterans — representative of these diverse communities about how to best engage them in outdoor recreational therapy opportunities. There are Veterans organizations for diverse populations regarding race (e.g., Black Veterans for Social Justice, National Association of Black Military Women, Hispanic Heritage Council, etc.), sexual orientation and/or gender identity (e.g., SAGEVets, American Veterans for Equal Rights, Transgender Veterans Association, OutServe, etc.), and much, much more. Engaging with these groups and hearing their feedback on this issue — rather than a process where individuals who are not part of these populations try to guess how to address these barriers — will be important to our ability to help overcome these barriers.

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| <p>Familial barriers, those that manifest from family expectations, family roles. E.g., when the female member of a family is held-back while male members participate in an outdoor activity.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate familial barriers? 2. Are there any immediate actions that your agency would recommend mitigating familial barriers fully or partially? 3. Provide any additional comments regarding familial barriers. |
| <p>Your response to familial barriers here: Recommend Veteran family-oriented outdoor programs that would allow Veterans and their families the opportunity to participate in outdoor activities. Recommend Veteran family-oriented outdoor programs that would allow Veterans and their families the opportunity to participate in outdoor activities. Emphasize the family-oriented nature of the outdoor programming and ensure that activities are designed for all family members to participate regardless of gender, age, etc.</p> | |
| <p>Barriers due to a lack of outdoor education, experience, or competency in the outdoors or with an outdoor activity. E.g., Why should I spend time outdoors? Where should I go and what would I do? How do I get there?</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate outdoor education, experience, or competency barriers? 2. Are there any immediate actions that your agency would recommend mitigating outdoor education, experience, or competency barriers fully or partially? 3. Provide any additional comments regarding outdoor education, experience, or competency barriers. |
| <p>Your response to outdoor education, experience, or competency barriers here: See above answer regarding risk management barriers, with a focus on demonstrating that the outdoors are not as intimidating as someone new to outdoor activities might think and showing that participants will not be on their own, but rather will be with group leaders who have the skills and the experience to successfully guide them in outdoor activities.</p> | |
| <p>Access to nearby nature, barriers that exist due to a lack of parks, public lands, or programs. The Outdoor Rx Committee recommends further study on barriers to accessing nearby nature.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate accessing nearby nature barriers? 2. Are there any immediate actions that your agency would recommend mitigating accessing nearby nature barriers fully or partially? |

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| | <p>3. Provide any additional comments regarding accessing nearby nature barriers.</p> |
| <p>Your response to accessing nearby nature barriers here: Often, this barrier seems to arise from a lack of knowledge about existing opportunities more than an actual lack of opportunity. DVS can join forces with Parks & Recreation to highlight Veteran-focused outdoor recreational therapy opportunities throughout New York State on both agencies' free download mobile apps. This could be a great way for Veterans and their families to discover that more opportunities for outdoor recreation exist than they ever realized before.</p> | |
| <p>Funding for public/private programs create barriers to access through exclusion, most often seen within marginalized communities. The Outdoor Rx Committee recommends further study on funding for public/private programs.</p> | <ol style="list-style-type: none"> 1. What existing programs or policies within your agency fully or partially mitigate funding for public/private program barriers? 2. Are there any immediate actions that your agency would recommend mitigating funding for public/private program barriers fully or partially? 3. Provide any additional comments regarding funding for public/private program barriers. |
| <p>Your response to funding for public programs here: Some messaging about outdoor recreational therapy opportunities can be tailored to specific historically marginalized communities. If the messaging involves visual media, ensuring diversity in the people portrayed in the outdoor settings is important. Funding will not arrive for outdoor recreational therapy within a community unless members of that community express an interest in Outdoor Rx opportunities. Ensuring that members of these historically underrepresented communities learn about these opportunities, and receive messaging showing people who look like them engaging with outdoor programming and enjoying it, will be a crucial first step before talks about funding for specific communities becomes a reality. NYC Parks & Recreation has some good examples of diverse messaging showing that within the five boroughs are far more outdoor recreational opportunities than one might expect and emphasizing that these outdoor opportunities are available to be enjoyed by all, not solely by people of certain races, ethnicities, income brackets, etc.</p> | |

APPENDIX B 1

Appendix B

The Outdoor Rx Committee has reviewed current State policies regarding free and discounted access to State parks, lands, and recreational facilities by Veterans, service-connected

disabled Veterans, Gold Star Families, and other military-connected individuals. Appendix B contains the comprehensive listing of accessible lands and facilities, programming, fees and discounted access, special permits, and promotions relative to Outdoor Rx.

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APPENDIX B 2

Department of Environmental Conservation

Under the Adventure NY initiative and its Department-wide outdoor education programming, DEC is making strategic investments to expand access to healthy, active outdoor recreation and connect more New Yorkers and visitors to nature and the outdoors. Improving accessibility and information about our resources so that New Yorkers and visitors of all abilities can enjoy the outdoors is a priority. Below are some of the recent improvements, as well as

programs and other efforts currently taking place at DEC lands and facilities. Many of these efforts are accomplished in collaboration with other agency and public/private partners.

Committee Representative

Katharine Petronis, Deputy Commissioner, katharine.petronis@dec.ny.gov,
www.dec.ny.gov

Accessible Lands and Facilities

DEC manages more than 130 universally accessible sites, from campgrounds and trails, to fishing piers and boat launches. Recently completed accessible upgrades to our lands and facilities include:

Kenneth Wilson Campground and Day Use Area (Woodstock, Ulster County)

Several ADA-accessible facilities were added to the campground,

including:

- Rustic adventure playground

- Nature trail with a wildlife viewing platform

- Fishing pier

- Floating canoe/kayak launch

- New comfort stations

North/South Lake Day Use Area (Hunter, Greene County)

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A new accessible boathouse was built at South Lake, which includes a new sidewalk to the building and an accessible walkway leading to an accessible canoe/kayak launch system. ***Willie***

Wildlife Marsh Interpretive Trail (Peck Hill State Forest) (Johnstown, Fulton County)

The project includes replacement of three boardwalks totaling 600', a new 0.4-mile wheelchair-accessible trail leading to an accessible viewing platform and picnic area, and rehabilitation of the surrounding 1.5-mile foot trail.

Frontier Town Campground, Equestrian Day Use Area (North Hudson, Essex County) DEC

just opened a new, accessible State campground, equestrian campground and two day-use areas just off Exit 29 of the Northway. The facilities and 77 campsites include ADA compliant features, including two ADA-compliant horse mounting ramps. ***Accessible Trails***

DEC lands are home to thousands of miles of trails. Recent improvements to make those trails more accessible include the following.

- Hand Hollow State Forest (New Lebanon, Columbia County): A new trail is open to motorized use by permit for people with disabilities and leads to an accessible fishing dock at the pond.
- John Young Trail, Tug Hill State Forest (Jefferson and Lewis Counties): New 2,000-foot trail leading to the overlook of Inman Gulf, and two accessible parking spaces.
- Rocky Point Pine Barrens State Forest Multi-Use Trail Hub Project (Suffolk County): New half-mile accessible hiking trail and an accessible horse mountain platform. ***Accessible Boat Launches and Fishing Piers***

DEC manages more than 400 boating and fishing facilities across New York. Several have been recently upgraded to meet ADA accessibility standards, including:

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- Boat launches at Meacham Lake and Second Pond in Franklin County.
- Fishing and boat access on the Lower Esopus Creek in Ulster County.
- Fishing pier at Dunkirk Harbor in Chautauqua County.
- Fishing access site and accessible dock for canoes and kayaks at Forge Pond (Peconic Lake) in Suffolk County.

Programming

Through DEC's regional and Statewide programs, we provide a host of opportunities to engage with people with disabilities and encourage participation in outdoor recreation. ***Healing***

Veterans Fly Fishing Weekend on the Salmon River

For more than 10 years, DEC has hosted a “Healing Veterans Fly Fishing Weekend on the Salmon River.” The weekend is a collaboration with Project Healing Waters Fly Fishing, Inc. (Fort Drum and Syracuse chapters) and OASIS Adaptive Sports out of Rochester. Through this program, we host Veterans with PTSD, other mental injuries, and physical injuries at DEC’s Law Enforcement Training Academy.

Outdoors Day

DEC hosts free “Outdoors Day” events across the State on the second Saturday of June. Participants can discover new skills and try out a range of guided, introductory outdoor recreation activities such as fishing, paddling, hiking, biking, bird watching, archery, nature photography, camping, forest bathing and more. Locations are chosen for their accessibility, both geographically and with respect to facilities.

I Bird NY

[I Bird NY](#) was launched in 2017 to build on the State’s efforts to increase access to New York's vast natural resources and promote low-cost opportunities to explore the great outdoors

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and connect with nature. Birding is an activity that can be enjoyed by New Yorkers of any age and ability, no matter where they live. Two birding challenges were announced in 2018—one for beginners (youth 16 and under) and one for more experienced birders—to encourage people to get outdoors.

Through this initiative DEC has also hosted several events, including two inclusive birding activities for the NYS Self-Advocacy Association of New York, one in Schenectady and one at their second location in Kingston.

NEW: The Governor’s 2021 State of the State announced a NYS Birding Trail to promote birding locations in every region of the State.

First-time Camper Weekend Program

New York launched a [First-Time Camper Program](#) in 2017 to build on the State's efforts to increase access to New York's vast natural resources and promote low-cost opportunities to explore the great outdoors and connect with nature.

Long-time campers know the enjoyment and rewards of sleeping out in nature, but for those who have never slept in a tent before, spending the night outdoors can be an unfamiliar adventure. New York's First-Time Camper program provides more of a turnkey camping experience for families, especially those from underserved communities that have never camped before.

New campers are provided with a family tent, sleeping bags, sleeping pads, camp chairs, camp stove, lantern, and even firewood. This way, participants can see if they enjoy the great outdoors before investing in their own gear. A Camping Ambassador meets families at the campsite and help them get camp set up with a camping 101 lesson. To make the weekend

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getaway even more fun, campers have an opportunity to learn from experts how to fish, hike, bird watch, paddle and more, all while having fun and making memories that last forever.

Select locations hosted by DEC are in the Catskills and Adirondacks.

NEW/POTENTIAL: Outreach to Ft. Drum for possible partnership to have active service member families participate in the First Time Camper program.

DEC Environmental Education Centers and Youth Camps

DEC's four environmental education centers include accessible paths and trails and offer year-round programming for children, families, adults, and school groups. Of note: • Both Reinstein Woods Nature Preserve and Five Rivers Environmental Education Center have scooters available for those with limited mobility to borrow to explore the many trails on site.

- Five Rivers—Capital Region Nordic Alliance (CRNA) brings a group of people with

disabilities about twice a year for a weekend of orienteering; the executive director of the organization and many of the members are Veterans.

- The current Green Thumb worker at Five Rivers is a Veteran; this may be another avenue for outside work for someone who has served in the military.
- POTENTIAL: Before COVID, DEC and CRNA were discussing expanding the programs offered for the group, and that will continue once COVID protocols allow for more participants in programs. In addition, we are partnering with CRNA to “mark” a few of the trails for those with visual impairments. CRNA is testing a new app Microsoft is developing called Soundscape, and Five Rivers is a pilot test site.
- Reinstein Woods—This summer, staff conducted a virtual program for preschoolers from four military families. The center is located near an Air Force and Army base.

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- POTENTIAL: Reinstein staff could provide virtual programs on outdoor activities for Veterans and their families now and in-person programs.
- POTENTIAL: Camperships—For several years more than five years ago, the Camp program contacted staff at Ft. Drum to offer camperships to children of their active service member families, scholarships to attend DEC’s environmental youth camps. A partnership was not developed at that time, but it is something that could be pursued again.

First Day Hikes

DEC and State Parks kick off each new year with guided hikes on January 1. These family friendly outings allow New Yorkers to start off the new year with a healthy outdoor experience. Nearly 700 participants attended DEC events in 2020 across the State. ***Hike with Us Catskills***

Hike with Us Catskills was designed for families new to hiking. This series of 15 beginner-level hikes was designed to provide a fun, safe, introductory experience that encourages continued participation while providing educational messages and outdoor skills for participants. Guided hikes range from two to six miles and were held in Greene, Sullivan, and Ulster counties through October 2019.

The Hike with Us Catskills program supports Governor Cuomo's "Health Across All Policies/Age-Friendly NY" Executive Order, which directs State agencies to incorporate the principles of age- and health-friendly communities into all relevant programs and policies.

POTENTIAL: As with the First Time Camper Program, DEC could partner with specific organizations to develop beginner guided hiking opportunities for Veterans and their families.

Accessible Recreation Programs

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DEC has a Statewide Accessibility Coordinator and nine Regional ADA Coordinators who provide information on accessible recreation opportunities. In addition, programs have included:

- Partnership with Field and Stream and sportsmen's groups to host a free fishing day at Six-mile Waterworks in Albany for residents of several group homes.
- Free fishing event at Hole-in-the-Woods Ranch for children with serious illnesses. I FISH NY staff also trained staff and provided equipment so that the kids could keep on fishing.
- Free fishing clinic at the Helen Hayes Rehabilitation Hospital in partnership the Orange County Anglers Federation and the United Sportsmen Association of Rockland.
- Accessible Recreation Summer Campout at John Dillon Park (Long Lake). •

Table at the Assembly's Legislative Disability Awareness Day.

Adventure at Home

In response to the COVID-19 pandemic, Adventure NY turned its outdoor recreation programming into a weekly themed virtual campaign. The #AdventureAtHome program was created to provide engaging and interactive user-friendly digital content so the public could continue to enjoy the outdoors safely. The initial 8-week campaign provided weekly themes on outdoor recreation, targeted for a beginner audience. Topics covered included fishing, birding, finding nature nearby, outdoor safety, hiking, archery, paddling, and camping. Each week we provided a wide range of information through Facebook Live events, email newsletters, social media, YouTube playlists, and the DEC website. Materials were offered in multiple languages, including a Spanish language Facebook Live event. The program was well received and inspired

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many participants to try a new activity. The program was so successful it continued through the fall and winter and is an ongoing program.

POTENTIAL: Partner with Veterans organization to develop content tailored to Veterans community.

Fees, Discounts and Special Permits

The NYS Access Pass permits residents of New York State with disabilities, as defined in the application, free or discounted use of State parks, historic sites, and recreational facilities operated by the New York State Office of Parks, Recreation and Historic Preservation and DEC.

DEC offers special licenses and permits for Veterans and disabled residents that bring fishing and hunting within reach:

- Free Patriot hunting and fishing for Active Duty who are NYS residents with some restrictions.

- Veterans with disabilities can purchase fishing, hunting or trapping licenses for only \$5. Purchasing any one of these entitles the Veteran to receive the other two free. • Administrators of VA hospitals, nursing homes and other similar facilities can register their residents to fish for free without a license.
- Free permits allowing licensed hunters unable to walk without a mechanical aid to hunt from motor vehicles.
- Free fishing licenses are available for residents who are legally blind.
- Free permits allowing hunters who cannot draw or hold longbows, recurve or compound bows to use bows modified with devices to assist them. Applicants must also have NYS hunting and bow hunting licenses.

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- Free permits allowing hunters who are unable to use modified longbows, recurve, or compound bows to use mouth-triggered crossbows.

Promotions

Accessible Recreation Destinations

Through DEC's website, social media, email newsletters, and printed materials, we are promoting accessible recreation, including a central [web portal](#), specific listings of accessible recreation facilities, and a new brochure.

Partnership with DOH on Promotion through Health Across All Policies Through the Governor's *Health Across All Policies* initiative, DOH will be promoting DEC's efforts to get people outdoors on its website. Information will also be disseminated to 52 local county health departments.

Forest Bathing

DEC's [website](#) includes information on "forest bathing," the practice of immersing

oneself in the woods among trees to improve mental and physical health. As noted above, guided forest bathing walks are hosted at one of DEC's environmental education centers at Outdoors Day events.

Office of Parks, Recreation and Historic Preservation

Committee Representative

Yolanda Bostic-Williams, Special Assistant to the Commissioner for Community Affairs and Chief Diversity and Inclusion Officer, Yolanda.BosticWilliams@parks.ny.gov, parks.ny.gov The New York State Office of Parks, Recreation and Historic sites system comprises, 180 State parks, 37 historic sites, 17 nature centers, 15 golf courses, 100+ developed beaches, swimming pools and playgrounds, 8500+ campsites, an ice-skating rink, an athletic complex, a

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zoo, and 2000 miles of trails and offering countless opportunities to explore, learn and escape from the grind of the everyday and experience exciting new adventures.

Accessible Lands and Facilities

Given the vast size and scope of the New York State Park system, expanding accessible opportunities at Parks is an evolving and ongoing project. As we increasingly make our facilities and programs more accessible, information will continue to be made readily available at our facilities, in publications and informational materials, and on the OPRHP website. We encourage patrons to visit the "Amenities and Activities" sections of each park or site page to find the latest accessibility information for that facility. We also strongly recommend patrons contact the facility in advance of their visit to understand what to expect and how best to make the experience positive. If patrons require an accommodation, we welcome them to contact the Facility Manager of the park or historic site they plan to visit.

Originally opened in 2006, the [National Purple Heart Hall of Honor](#) is the first facility in the nation dedicated to the estimated 1.8 million recipients of the Purple Heart, which is awarded

to American military personnel who have been wounded or killed by enemy action. Located 12 miles north of West Point, on the same grounds that the Continental Army occupied during the final months of the American Revolution. Reopened on Veteran's Day of 2020, after a one year expansion project, which added 4,300 square feet of new space (7,000 total square feet), creating a new museum wing with upgraded exhibits increasing emphasis on stories of individual award recipients, improved visitor circulation and public gathering space.

In September of 2020, OPRHP opened the Jones Beach Energy and Nature Center (JBENC).

JBENC is a pioneering facility exploring how energy consumption shapes the natural environment. Through dynamic and accessible indoor and outdoor exhibits, educational

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programming, and public events, the Center showcases ways visitors can become conscientious environmental stewards and smart energy consumers. <https://www.jonesbeachenc.org/about-the-center>.

In December of 2020, the Governor announced the completion and opening of the Empire Trail. The 750-mile trail between New York City and Canada and Albany and Buffalo, is the longest multi-trail network in the nation, connecting 20 regional trails to create a continuous Statewide signed route. It is 75 percent off-road to provide a safe and accessible route for cyclist, hikers, runners, cross-country skiers and show-shoers. <https://empiretrail.ny.gov/>

In 2021, OPRHP will open the Autism Nature Trail at Letchworth State Park, a \$3.9 million public-private partnership to create a first in the nation trail comprised of eight different stations. Each station will offer something different, from quiet engagement to active exploration and adventure. The trail will provide a unique and welcoming experience in nature, inviting those with Autism Spectrum Disorder and other developmental disabilities to push boundaries, explore outdoor activities, and develop new skills.

Fees, Discounts and Special Permits

Lifetime Liberty Pass

The [Lifetime Liberty Pass](#) provides New York resident Veterans with a disability rating of 40% or above, free vehicle entry to State parks and DEC-operated day-use areas, as well as numerous State boat launch sites, historic sites, arboretums and park preserves; free golf at State Park golf courses; free swimming pool entrance at State Park pools; and discounted camping and cabin rentals at all State Park and DEC campgrounds. Requires VA letter, application, current New York State Driver License, Non-Driver Identification Card, or a copy of your New York

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State tax return form IT 201 or IT 150 and a passport size photo. Once issued, the Lifetime Liberty Pass will never have to be renewed.

New York Patriot Plan III

The [Patriot Plan](#) provides members of the New York State National Guard or military reserves who are currently serving on active duty in support of the war on terrorism is eligible for one free Empire Pass Card for use by his or her immediate family during deployment and/or for his or her own use when returning home. The member must be a New York State resident.

The agency currently does not have an accurate count of how many Veterans and active service members utilize the passes for all the amenities. In 2019, 11,180 rounds of golf were utilized at the 15 agency run golf courses throughout the State by Lifetime Liberty Pass holders. In 2019, there were 58,218 Access Passes and 26,944 of Lifetime Liberty Pass uses of free vehicle access.

Programming

OPRHP provides a host of Statewide and regional programs offering unlimited opportunities for visitors to engage in outdoor recreation.

- First Day Hikes: An annual collaboration between OPRHP and DEC to ring in the new

year on January 1. The walks, hikes, and self-guided options are family-friendly, and typically range from one to five miles depending on the location and conditions. Hikes are offered at OPRHP State parks, historic sites, DEC State lands, wildlife areas, forest preserve trail and environmental education centers.

- I Love My Park Day: Held the first Saturday in May, this event attracts thousands of volunteers from across the State to participate in cleanup, improvement, and beautification events at New York State parks and historic sites. Events include

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cleaning up park lands and beaches, planting trees and gardens, restoring trail and wildlife habitat, removing invasive species, and working on various site improvement projects.

- First Time Camper: Created in 2017, this unique program offers prospective campers a chance to learn and apply skills and fully embrace sleeping under the stars by providing know-how, equipment and fun activities which will help instill a lifelong enjoyment of the outdoors in selected OPRHP Taconic, Saratoga and Niagara regional campgrounds.
- Nature Centers: New York's State parks are home to 30 nature centers, offering diverse environmental education programs for children, families, adults, and school groups. <https://parks.ny.gov/environment/nature-centers/>
- Guided Recreational Opportunities: Throughout the Park system, Environmental Educators and park staff provide guided and interpretive hikes, snowshoeing/X Country skiing, and kayaking activities.
- Historic Sites: Over 2/3rds of the sites are former battlefields, forts, residences and museums connected to the French/Indian, Revolutionary and Civil Wars. These sites

provide a various of activities, including exhibits, tours, costumed interpreters and re enactments.

- Niagara Parks Region: Has partnered with Veterans One Stop (VOS) to provide annual or twice-annual programs for several years and are currently in contact with VOS to schedule more hikes. The staff planned to do a hike each month in 2020, but with the COVID restrictions it was not feasible. With the Veterans that participate, the staff needs to be sure the programs are designed with opportunities for mask

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breaks as many of them have issues such as PTSD that need accommodation. The staff are currently working to increase the number of programs, to have smaller groups to accommodate this issue.

Programming Potential Ideas

- Minnewaska State Park: Environmental Educator expressed their interpretive hikes could be offered specially to Veterans. Including content-based programs that are tied to an outing, i.e., Winter Animal Tracking, Winter Tree ID, Wild Edibles, Lenape Indians, etc. However, if there were mobility or other impairments concerns, there may be a barrier in adapting the programs.
- Saratoga Spa State Park: Environmental Educators proposed snowshoe hikes, nature walks, birding opportunities, and tours of the park/springs. One of the bathhouses was temporarily converted into a military hospital for disabled Veterans in the 1940's and has recently been renovated.
- First Time Campers Program: Outreach to Veteran organizations to have active service member families participate in First Time Camper Program.

DOH does not currently have any policies in place that directly impact Veterans or service members related to accessing State lands.

Committee Representative

Ryan Ashe, Director of Health Facilities Management, ryan.ashe@health.ny.gov,
www.health.ny.gov

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Programming

DOH does not currently have any policies in place that directly impact Veterans or Service Members related to accessing State lands. The DOH does have a link on the DOH website that guides Veterans and service members to an app for NYS Veterans. The app provides contact information for services related to substance abuse, housing for example.

https://www.health.ny.gov/health_care/Veterans/landing.htm

Office of Mental Health

While OMH has not specifically pursued outdoor therapy as a stand-alone service, the agency has messaged consistently the important of wellness, life role, and community inclusion related goals, which align well with the Outdoor RX framework. In addition, the agency has been proactive in ensuring that mental health services can be provided flexibly and, as possible, at the location preferred by the client. For example, OMH has invested in expanding person-centered and recovery-oriented rehabilitative services that can be provided in an individual's home and community, including outdoors. For example, OMH has encouraged implementation and uptake of Home and Community Based Services (HCBS) for individuals with behavioral health diagnoses. Other service models that may be able to provide therapeutic services outdoors include but are not limited to Personalized Recovery Oriented Services (PROS), Certified Community Behavioral Health Clinics (CCBHCs), Outreach, Mobile Integration Teams, and

Assertive Community Treatment (ACT). ACT teams are explicitly asked to provide a percentage of services in the community. OMH is currently pursuing movement of our Article 31 clinics to the CMS rehab State plan amendment which would allow clinic clinicians to provide services in individual's home and community. Veterans who are eligible for these services may be able to access therapeutic rehabilitative services encompassed under Outdoor RX through these

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mechanisms. Note, however, the operational and fiscal challenges may remain a constraint on providing outdoor services. OMH looks forward to working in collaboration to support Outdoor RX initiatives.

Additionally, OMH has prioritized suicide prevention efforts in Veterans. While analyzing data on suicide in Veterans is complex due to the heterogenous nature of the population, data from the U.S. Department of Veteran Affairs does indicate that Veteran status is a risk factor for suicide. In New York State, Veteran's account for 11.5% of suicide, with the high rates among young Veterans 18-34 years old. Factors contributing to higher risk include deployment, co-occurring mental health conditions, alcohol or other drug use, and time away from family.

Committee Representative

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Office of Addiction Services and Supports

The Office of Addiction Services and Supports (OASAS) does not currently have any policies in place that directly impact Veterans or service members related to accessing State lands.

The Office of Addiction Services and Supports understands the physical demands the trauma of combat, the debilitating impact of PTSD or TBI, and the difficulty in readjusting to the

civilian world have created a significant Substance Use Disorder (SUD) issue within the Veteran population.

To help to address this, OASAS has worked to develop and continues to support Veteran specific treatment programs which provide patient-centered care with trauma-informed