





TABLE OF CONTENTS

2	LETTER FROM THE EXECUTIVE DIRECTOR
3	LETTER FROM COALITION LEADERSHIP
4	STRENGTH IN NUMBERS
6	COALITION OVERVIEW & MEMBERSHIP
8	TAKING ACTION IN 2020
10	ADVANCING THE PRACTICE OF PUBLIC HEALTH
14	STRENGTHENING PARTNERSHIPS
15	PARTNERS & FUNDERS

LETTER FROM THE EXECUTIVE DIRECTOR



Chrissie Juliano, MPP

Each day our members make difficult decisions with one goal in mind: to protect the health and safety of all who live in their jurisdictions.

The past year has been immensely challenging and consequential for the field of public health, particularly our Big Cities Health Coalition members and their colleagues at local and state health departments across the country. A year after the first U.S. case of COVID-19, our member health officials remain on the front lines working to slow the spread of the virus, mitigate the impacts of the pandemic, and undertake a massive vaccination process. Each day our members make difficult decisions with one goal in mind: to protect the health and safety of all who live in their jurisdictions. At every turn, our members have stepped up to the challenge, in an incredibly difficult situation. Sometimes with the support of their elected officials at the local or state level, sometimes not. Sometimes with a thankful community recognizing their work, sometimes not. But always, always, putting the health and safety of their communities first.

Our members have been courageous and authentic messengers for the public health workforce, advocating for the needs of their departments and communities, and telling the public what they need to know, even when it wasn't easy to hear. Collectively, they corrected misinformation and worked together to tell people to stay home, wear masks, and look out for one another.

Through all of this, BCHC members and health department staff across the country have worked 24/7 in the face of unprecedented backlash. In far too many cases, they've received threats, simply for doing their jobs.

The health and well-being of our overworked public health colleagues remains a concern in a response that is turning out to be a marathon, not a sprint, with many wondering how long this level of effort can realistically be sustained.

This year more than ever, I am incredibly thankful to those who helped us support city health officials this year, including the de Beaumont Foundation, the CDC Foundation, Kaiser Permanente, the Kellogg Foundation, and the Robert Wood Johnson Foundation. We have forged even more meaningful and important partnerships with colleagues across the public health spectrum, and it has been a privilege to do so.

Sincerely,

A handwritten signature in black ink that reads "Chrissie Juliano". The signature is fluid and cursive, with a small dot above the "i" in Juliano.

Chrissie Juliano, MPP
Executive Director, Big Cities Health Coalition

LETTER FROM COALITION LEADERSHIP



Sara H. Cody, MD



Wilma Wooten, MD

Over the past year health officials across the country have faced immense challenges in responding to the COVID-19 pandemic, the greatest public health crisis of our lifetimes. All of us have worked tirelessly to protect the health and safety of our communities and we are honored to work alongside such dedicated colleagues. We are inspired every day by the public health workforce's commitment to improving the lives of people across the country.

This year, perhaps more than any other, validated the importance of our ongoing dialogue in the Big Cities Health Coalition. Whether deploying stay-at-home orders and mask mandates or addressing racial and health equity, we feel fortunate to be able to draw upon our fellow members for resources and feedback. The coming months will continue to present new and unforeseen challenges. We take solace in knowing that we will be able to lean on each other for support. And, we look forward to 2021 being a year where we emerge from this pandemic having re-built more resilient, equitable, and healthier communities.

Sincerely,

A handwritten signature in black ink that reads "Sara H. Cody, MD".

Sara H. Cody, MD
*2020 Chair, Big Cities Health
Coalition and Director, Santa Clara
County Public Health Department*

A handwritten signature in black ink that reads "Wilma J. Wooten, MD".

Wilma Wooten, MD
*2020 Chair-Elect, Big Cities Health
Coalition and Health Officer,
County of San Diego*

STRENGTH IN NUMBERS

EXPANDING IMPACT:



MEMBER CITIES



ADDITIONAL STAFF
MEMBERS

INCREASING VISIBILITY:



PRESS RELEASES



UNIQUE EARNED MEDIA
MENTIONS

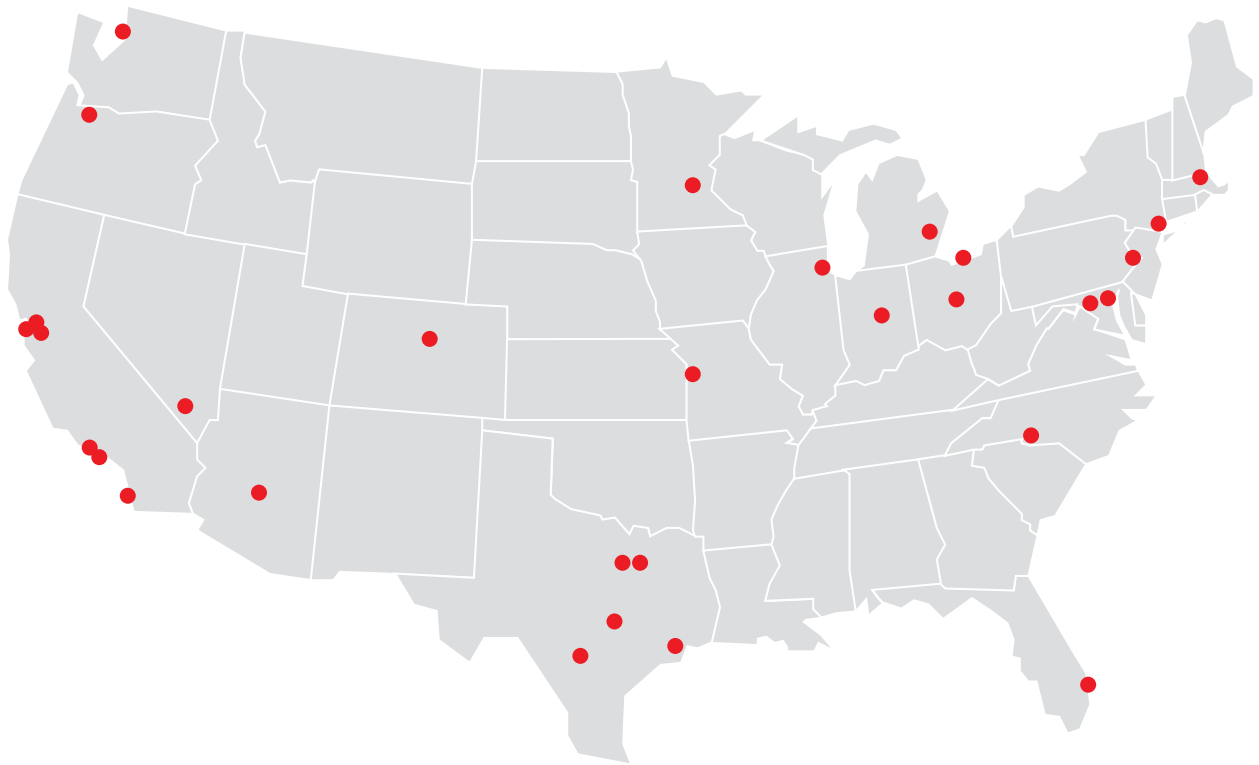
SHARING STRATEGIES:



MEMBER ZOOMS TO
EXCHANGE BEST
PRACTICES



WEBINARS



30 MEMBERS

AUSTIN	FORT WORTH (TARRANT COUNTY)	OAKLAND (ALAMEDA COUNTY)
BALTIMORE	HOUSTON	PHILADELPHIA
BOSTON	INDIANAPOLIS (MARION COUNTY)	PHOENIX (MARICOPA COUNTY)
CHARLOTTE (MECKLENBURG COUNTY)	KANSAS CITY	PORTLAND (MULTNOMAH COUNTY)
CHICAGO	LAS VEGAS (SOUTHERN NV HD)	SAN ANTONIO
CLEVELAND	LONG BEACH	SAN DIEGO COUNTY
COLUMBUS	LOS ANGELES COUNTY	SAN FRANCISCO
DALLAS COUNTY	MIAMI-DADE COUNTY	SAN JOSE (SANTA CLARA COUNTY)
DENVER	MINNEAPOLIS	SEATTLE (SEATTLE-KING COUNTY)
DETROIT	NEW YORK CITY	WASHINGTON, D.C.

COALITION OVERVIEW & MEMBERSHIP

MISSION

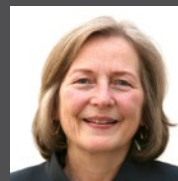
Advancing equity and health for present and future generations

VISION

Healthy, more equitable communities through big city innovation and leadership

STRATEGIC GOALS

- 1 Create, promote, and disseminate innovative best and/or promising policies and practices to address shared urban health challenges.
- 2 Provide shared value to BCHC membership to improve local health department infrastructure, build a strong organization that is a resource to members, and foster leadership development.
- 3 Advocate, primarily at the national level, for policies and funding to protect and improve the health of urban America.



MEMBERSHIP

To be eligible for membership, local public health departments must:

- Either serve a city in the top 30 most urban areas (according to 2010 U.S. Census measures) and have a city population of at least 400,000, **OR** have a city with a population of at least 800,000; **AND**
- Be locally controlled and not a state-run agency.

BCHC's main member is the city's health commissioner, health director, or health officer.

The relationships that are nurtured among members and the ability to share both knowledge and innovative practices are what set this Coalition apart from others. For these relationships to remain strong, the ability to come together in person, not just virtually, remains a key ingredient.

In February, the members came together in Washington, D.C. to outline priorities for the year and

visit with policymakers. Throughout the COVID-19 outbreak, the Coalition met bi-weekly to exchange best practices and share experiences from their respective responses. In the absence of a unified federal response, these meetings proved both informative and consequential.

Between meetings, Coalition staff members send weekly emails to members highlighting recent developments and hold monthly conference calls to discuss key topics, share new resources, and learn from each other.

The Coalition is served by a leadership team elected by members that works with staff to guide its actions. BCHC members and staff are deeply grateful to the 2020 officers:

CHAIR

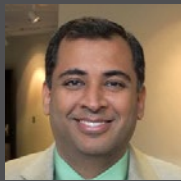
Sara Cody, MD
Health Officer and Director of Public Health, County of Santa Clara

CHAIR-ELECT

Wilma Wooten, MD, MPH
Public Health Officer, San Diego County Public Health

VICE CHAIR

Mysheika Roberts, MD
Health Commissioner, Columbus Public Health



BCHC: TAKING ACTION IN 2020

MARCH BCHC launches **'Views from the Big Cities'** webinar series, giving attendees a behind-the-scenes look at decisions made in urban health departments during the COVID-19 response.

MARCH BCHC advocates for **Congressional action to fund COVID-19** response.

MAY Estimates show **stay-at-home orders in BCHC cities** prevented 2.1 million hospitalizations and over 200,000 deaths.

January

February

March

April

May

June

FEBRUARY BCHC Winter Meeting is held in Washington, D.C.

APRIL BCHC launches ad campaign urging residents to **'Stay Home'** in major U.S. newspapers.

JUNE BCHC joins growing number of health departments in **declaring racism a public health crisis**.

JUNE BCHC provides comments on House Committee on Ways and Means hearing on the **disproportionate impact on COVID-19 on communities of color**.



SEPTEMBER

BCHC joins NACCHO in **calling on CDC to clarify their COVID-19** testing guidance for local health departments.

NOVEMBER

BCHC joins the **COVID Collaborative**, bipartisan group of governors and health leaders in strategic partnership to combat COVID-19 pandemic.

July

August

September

October

November

December

AUGUST BCHC and ASTHO collaborate to launch a **#MaskUp public service announcement**, urging Americans to help slow the spread by wearing a mask. The PSA is shared widely on social media.

OCTOBER BCHC releases the transition paper, **“Building Resilient, Equitable and Healthy Communities, Post-Pandemic and Always”** in the lead up to the Presidential election. The paper outlines key policy principles to protect the public’s health.

OCTOBER BCHC leads over 20 public health organizations in **condemning the “Great Barrington Declaration”** and their herd immunity scheme.

DECEMBER BCHC, de Beaumont Foundation and ASTHO release a **COVID-19 supplement** to the Journal of Public Health Management and Practice. The supplement provides original research and insights on the public health system’s pandemic response.

ADVANCING THE PRACTICE OF PUBLIC HEALTH

STAY AT HOME ORDER IN NUMBERS



NATIONAL

80% AGREE

that stay-at-home orders helped keep them and their communities **healthier and safer during the pandemic**, with agreement across age, gender, political and regional breakouts.

75% APPROVE

of the actions taken by their **local public health leaders**.

68% APPROVE

of their **elected officials' decisions**.

Year in and year out, local health departments across the country are on the front lines of the nation's most pressing health challenges—that's the job. In big cities, in particular, health leaders address ongoing management of issues such as emergency preparedness, opioids and the broader substance use disorder crisis, and community violence. Early in 2020, it became clear that the spread of the coronavirus would become an all-consuming public health event.

RESPONDING TO AN UNPRECEDENTED THREAT

Soon after the virus hit our shores, more information became available about how to best contain its spread. Big Cities Health Coalition members took immediate action, including issuing stay at home orders, procuring more personal protective equipment, and implementing plans for contact tracing and other community interventions that would provide some measure of defense. These decisions, while difficult, saved lives.

Additionally, a survey conducted in April by NP Strategy Group found that Americans in all regions of the country understood the impact of stay-at-home orders in place across the nation. (See sidebar)

Seventeen press statements were released during 2020, drawing

attention to importance of resources for public health, and the need for strong federal guidance and support for urban health departments during the pandemic response.

BCHC also weighed in on other topics of critical importance to the health and resilience of our communities, such as the murder of George Floyd, and in the face of a pandemic decimating black and brown people, the importance of labeling racism a public health crisis.

As misinformation spread about the efficacy of masks, BCHC and the Association of State and Territorial Health Officials (ASTHO) developed a public service announcement urging all Americans- regardless of their background or beliefs- to protect others around them and #MaskUp.

In addition to earned and owned media, BCHC leveraged a number of creative platforms to increase the impact of members and their work. The Coalition held a webinar series, "Views from the Big Cities," that allowed public health professionals to hear what was occurring behind the scenes at our nation's largest urban health departments. The series, which included ten events, was well-attended throughout.

BY STAYING HOME FOR 45 DAYS:

**RESIDENTS IN BCHC MEMBER CITIES
SAVED 232,878 LIVES AND
PREVENTED 2.1 MILLION HOSPITALIZATIONS**

KEEP STAYING HOME, CONTINUE TO SAVE LIVES

Data via the New York Times Model: bit.ly/NYTimesModel

[BIGCITIESHEALTH.ORG](https://bigcitieshealth.org) | [DREXEL.EDU/UHC](https://drexel.edu/uhc)

LIFTING UP PUBLIC HEALTH

BCHC members and staff continued to leverage the power of their collective voices to impact decision-making at the federal level.

Local health departments, historically overlooked and underfunded even in our nation's largest jurisdictions, were forced to do more with less throughout the pandemic response. Along with partner organizations, BCHC worked tirelessly to advocate for greater resources for public health at all levels of government.

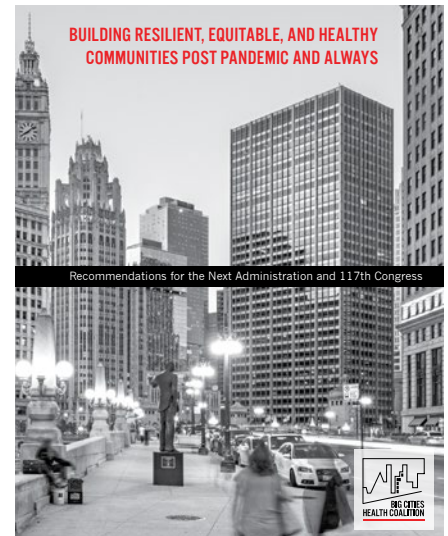
- In March, BCHC and NACCHO delivered a letter to the CDC urging them to allocate more funding to local departments.
- In May, BCHC wrote a letter to HHS urging greater allocation of testing resources for cities. Tragically, COVID-19 exacerbated many of the inequities that exist in our society.
- In June, BCHC provided comments on House Committee on Ways and Means Hearing on the disproportionate impact on COVID-19 on communities of color.
- And in August, BCHC and NACCHO issued a letter to the CDC challenging changes to testing guidance that were out of step with traditional public health disease control standards;



Sara Cody, MD speaks at Bloomberg American Health Summit.

the guidelines were subsequently changed to be more appropriate.

In advance of the 2020 elections, BCHC released a transition paper, “Building Resilient, Equitable, and Healthy Communities, Post Pandemic and Always.” The comprehensive policy paper outlined key actions that the next administration and Congress would need to take to better support big cities in the current pandemic response as well as rebuild the public health system for the future. The paper emphasized the need for the federal government to lead with science and data in a transparent manner, address structural racism, and address violence and substance



BCHC's Transition Paper, “Building Resilient, Equitable, and Healthy Communities Post Pandemic and Always.”

use disorders, among other issues. The paper was highlighted along with BCHC Chair Dr. Sara Cody, during the Bloomberg American Health Summit at the Johns Hopkins Bloomberg School of Public Health.

Following the election of President Joe Biden, BCHC members and staff began to engage in regular discussions with the Presidential Transition team regarding the pandemic response and vaccine rollout. This open dialogue will allow our members to provide candid feedback on pandemic response plans, “ground truth” their policies, and better protect the health and safety of their communities.



PROTECTING AND PROMOTING THE WORKFORCE

Sadly, decisions made by Big City Health Coalition members and other local or state officials received strong pushback from a vocal minority who were unhappy with perceived restrictions on their personal liberties. On more than one occasion, BCHC members were the target of violent and personal threats. These threats have led local communities to employ round the clock security for health department leaders and their families; a police detail is not something that any public health staffer should need. Especially, when you consider that their daily focus is to work around the clock to save lives.

BCHC members and staff leaned on earned media to increase awareness about the threats faced by public health professionals, securing interviews in *Associated Press*, *ProPublica*, and *Governing*.

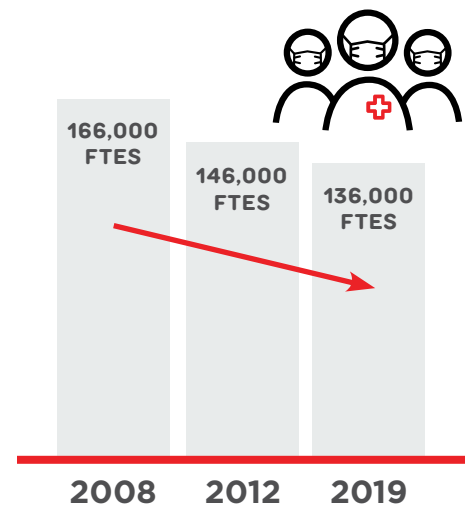
“It’s extraordinarily strange where public health officials are public figures, and part of this whole wild new life is threats,”

— Sara Cody, health officer for Santa Clara County, Calif. (GOVERNING, December 17, 2020)

The governmental public health workforce has been shrinking for years due the economic downturn a decade ago and the consistent lack of resources making hiring a challenge. Now, the burnout associated with the pandemic has exacerbated these problems, truly threatening an already slim pipeline of future public health leaders.

The Big Cities Health Coalition has engaged with policymakers to argue that the public health workforce should be better supported to prevent future pandemics and protect the health and safety of their communities.

A SHRINKING LOCAL PUBLIC HEALTH WORKFORCE



Source: <https://www.naccho.org/resources/lhd-research/national-profile-of-local-health-departments>

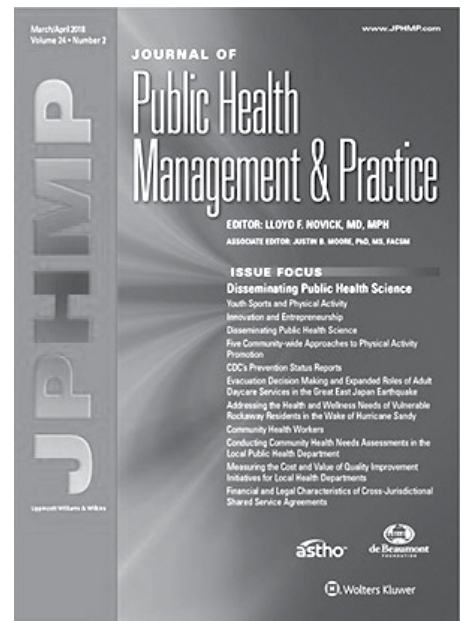
THOUGHT LEADERSHIP

In discussions with policymakers and with partners, BCHC members and staff emphasized the critical need for actions including leading with equity when making testing and vaccine distribution plans. Together with Human Impact Partners, BCHC created an Equity Lens Tool for health officials and their staffs to use in the context of COVID-related decision making.

With this tool, BCHC hopes that health departments can ensure all policy decisions are made with equity as the priority.

In partnership with de Beaumont Foundation and the Association

of State and Territorial Health Officials, BCHC co-sponsored a journal supplement “COVID-19 and Public Health: Looking Back, Moving Forward,” that accompanied the January issue of *Journal of Public Health Management and Practice*. The journal supplement offered BCHC members, staff, and alumni an opportunity to share their research and experiences in working to stem the spread of COVID-19, including, disparities in COVID-19 outcomes, working at the intersection of racism and public health, COVID-19 spread within vulnerable populations, and more.



<https://journals.lww.com/jphmp/toc/2021/01001>

EXPANDING OUR REACH

The COVID-19 pandemic brought unprecedented visibility to our members and their colleagues who work in public health across the country.

BCHC staff and members worked to further develop relationships with reporters and provide the urban, public health perspective to a wide range of media publications.

Over the course of the year, BCHC communications efforts garnered 2,095 unique media mentions, a considerable increase from the previous year. The Coalition also received placement in high-profile publications such as, The New York Times, Washington Post, Associated Press, and Wall Street Journal. This coverage highlighted the work of urban public health officials, as they responded to the COVID-19 pandemic.

AP

The
New York
Times

THE
WALL STREET
JOURNAL

The Washington Post

POLITICO

BCHC ON SOCIAL MEDIA



Highlighting the good work of our members and the field helped increase the number of BCHC followers



36% ▲



39% ▲



150% ▲

STRENGTHENING PARTNERSHIPS



de Beaumont
BOLD SOLUTIONS FOR HEALTHIER COMMUNITIES..


Robert Wood Johnson
Foundation

 W.K.
KELLOGG
FOUNDATION®


CENTERS FOR DISEASE
CONTROL AND PREVENTION

 DREXEL UNIVERSITY
Urban Health
Collaborative
Dornsife School of Public Health


PREVENTION
INSTITUTE

 astho™

NACCHO
National Association of County & City Health Officials

 Trust
for
America's Health


APHL

 CSTE


HUMAN IMPACT PARTNERS

 CDC Foundation
Together our impact is greater

ASSOCIATION OF
ASPPH
SCHOOLS & PROGRAMS OF PUBLIC HEALTH

 APHA
AMERICAN PUBLIC HEALTH ASSOCIATION
For science. For action. For health.

 SAFE STATES

Public Health
Communications
COLLABORATIVE

PARTNERS & FUNDERS

The Coalition, a forum for the leaders of America's largest metropolitan health departments to exchange strategies and jointly address issues to promote and protect the health of the 62 million people they serve, is incredibly appreciative of our funders and partners that make our work possible.

In addition to membership dues, programmatic support for the Coalition is generously provided by the de Beaumont Foundation, Robert Wood Johnson Foundation, the W.K. Kellogg Foundation, and the CDC Foundation.

The Centers for Disease Control and Prevention also continued its support for the Big Cities Health Inventory Data Platform.

The views expressed here do not necessarily reflect the views of our partners or funders.

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