The Future of Public Health
Dear community,

2021 was a year like no other. From COVID-19, to a heightened visibility of racial injustices, to climate change’s undeniable, escalating impacts around the world, this last year was a clarion call to action. Under unprecedented demands, public health is faltering: with a workforce that is exhausted, attacked and dwindling; and an infrastructure that is out of date, underfunded and disconnected. Now more than ever, we need bold, strategic investment in public health, racial justice and health equity—for our health, our communities, and our planet.

In this report we’re sharing our lessons learned from the year, when COVID amplified the underlying root causes of dis-ease. Interrupting systemic racism isn’t a bullet point; it’s a foundational approach to building better health, a moral imperative, and a path to justice. That’s why we continue to strengthen equity and racial justice in our internal and external systems—in our partnerships, how we operate, who we include and how we approach every part of our work. We are learning how to better share power, funding and resources directly with those who need it most, and know best how to use it.

For PHI to respond quickly and effectively—sometimes getting millions of dollars directly to communities in a matter of just a few weeks—our teams worked tirelessly, partnering with funders, communities, local health departments, healthcare leaders, and organizations including the private sector. Thank you for trusting us.

Together, we reached more than 40 million people with lifesaving resources. We connected with them in the languages they know; they heard from people they already trust; together, we built important bridges with new partners.

In this annual report, you’ll find more than just our 2021 impacts and learnings from COVID. It’s a synthesis of all the lessons PHI has learned over the last 58 years.

It’s a roadmap for what comes next: The future of public health.

Mary A. Pittman, DrPH
President & CEO
Public Health Institute
The Future of Public Health

How do you turn a moment into a movement? Here are the lessons we learned from one of the most challenging times of a generation—and the path forward to doing things differently: better, faster, more effectively, more equitably, and for more people.

**2021 HIGHLIGHTS**

40M
reached through COVID education and vaccine access

FDA
booster recommendations informed by PHI research

3 wks
to disburse $14.7M in funding for food, shelter, vaccines to systemically excluded communities

200+
hospitals offering medication assisted treatment for substance use

$10M+
invested in building a public health workforce, fluent in more than 50 languages

2.4K
organizations activated with fast, flexible funding to serve as public health experts where they live

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**TRUST COMMUNITIES.**

**BUILD TOMORROW’S PUBLIC HEALTH WORKFORCE. TODAY.**

**RAPIDLY RESPOND TO UNEXPECTED NEEDS.**

**BELIEVE IN DATA. LISTEN TO COMMUNITIES.**

**BREAK DOWN SILOS. BUILD PARTNERSHIPS.**

Hover and click throughout the report to go deeper into our lessons, impacts and work.
“We didn’t come up with the plan; none of the government people did. It was the CBOs who talked with their communities that had been really looking at what the impacts were. And that’s why I think PHI’s Together Toward Health has been so successful and how we’ve been able to serve so many people and get so many people vaccinated in a very difficult part of California. We need to be able to listen.”

– Local Health Department

Trust Communities.
Community-based organizations (CBOs) are more than partners in public health—they are the leaders and trusted messengers who know best what resources their neighborhoods need and how to best reach those who are most systematically excluded. During the pandemic and beyond, we help shift resources, power and decision-making to support CBOs in their essential work.

**FAST, FLEXIBLE FUNDING TO SUPPORT COMMUNITIES AS EXPERTS**

The California Together Toward Health model was one of the first of its kind in the country. It uses fast, flexible funding and community messengers to activate more than 500 community-based organizations reaching 24 million so-called ‘hard to reach’ Californians with vaccinations and COVID prevention information.

The partners in the Communities RISE (Reach, Immunizations, System Change for Equity) Together alliance, including PHI, We in the World, Meals on Wheels, Chromatic Black and Latino Health Access, bring the same trusted messenger model to scale, connecting with more than 2400+ organizations across the U.S. Together, they reached 100 million Black, Indigenous, Latinx, Asian-Pacific Islander, immigrant and migrant, low-income, older adult, and LGBTQ+ people in 200 counties and 26 states. The HRSA-funded initiative received a $10m renewal grant to continue its vital work in 2022.

**FARMWORKERS CRITICAL TO ADDRESSING IMPACTS OF HEAT, WILDFIRE SMOKE**

Farmworkers are 20 times more likely to die from heat stress than the U.S. civilian workforce overall. As climate change exacerbates heat and wildfire smoke, resilience efforts in farmworker communities will be crucial. To help increase awareness of these issues and push for action, farmworker leaders from PHI’s Achieving Resilient Communities farmworker advisory committee participated in a digital storytelling workshop to develop short videos, in Mixteco and Spanish, that share their personal lived experiences with heat and wildfire smoke.
WOMAN-LED SEXUAL AND REPRODUCTIVE HEALTH SOLUTIONS

PHI’s CAMI Health captured first-hand stories from young women in South Africa, Zimbabwe and Uganda about their sexual and reproductive health experiences, providing glimpses into the diversity of their needs and insights into solutions to improve their lives. Their StoryMap serves as an advocacy tool to foster the adoption of woman-initiated multipurpose prevention technologies—which can prevent STI’s, pregnancy and HIV—a potential game-changer in addressing these issues.

GIRL LEADERS CHANGING GLOBAL POLICY

PHI’s Rise Up has provided seed funding and mentorship to local leaders, who successfully advocated for new and improved laws and policies, impacting 9 million people around the globe in 2021. Rise Up leader, Hameda Deedat, knows the urgency of addressing gender-based violence and harassment in the workplace—she experienced it herself in South Africa. After participating in Rise Up’s Leadership and Advocacy training, Hameda took action. Working with labor unions and the National Gender Coordinating Committee, she developed and successfully advocated for a comprehensive workplace policy that protects more than 1.2 million workers in South Africa from workplace gender-based violence and harassment.

ADVOCATING FOR COMMUNITY-LED APPROACHES TO HEALTH EQUITY & RACIAL JUSTICE

The California Health Equity and Racial Justice Fund is a dedicated fund to support nonprofit clinics, tribal organizations and community-based organizations to identify and address the health and justice issues most important to them. In 2021, PHI, along with multiple partners and hundreds of community members, advocated to win the commitment of the legislature, who included it in the 2022 budget. Though it was not included in the Governor’s final budget, the coalition is still fighting for the fund and the innovative model it supports—which is trusting that communities know best how to reach their neighbors and the best way to build health, racial justice and equity where they live.

40M
people reached with primary language COVID-19 information and vaccine resources

840K+
people assisted with vaccinations

2.4K
CBOs supported by PHI in communities of color and low-income communities across 29 states
How trusted messengers & flexible funding save lives

PHI’s Together Toward Health (TTH) is a $40 million program jointly initiated with 25 major philanthropic organizations. TTH supports 500+ community-based organizations (CBOs) that serve as trusted experts for COVID-19 education, testing and vaccination access in their communities. The work is rooted in how community members live, located where they are, organized by people they trust, and offered in the languages they speak. It was successful because of bridges and collaborations built across sectors—including clinics, health departments and government.

TTH prioritizes fast and flexible funding. Grant applications were shortened, a percent of awards were provided up front so that work could begin immediately, and reporting requirements were reduced to measure what mattered. This meant funds got out the door and into communities quickly—in days and weeks instead of months. Here’s how they reached deep into communities and saved lives:

- In a low-income and predominantly Black community in East Oakland, neighborhood messengers knocked on doors in one of the state’s least vaccinated communities to talk about vaccines. Messengers are provided with professional development and transferable skills for future employment, via bi-weekly training sessions. And thanks to a partnership with local clinics, including the Roots Community Health Clinic and Umoja Health, some messengers will be trained to become health workers who can go into homes to provide basic check-ups and education once the pandemic is over.

- The California Consortium for Urban Indian Health reached tribal groups across California with relevant, trustworthy COVID prevention and vaccine access information, including working with an artist-in-residence to develop artwork for their materials—incorporating traditional designs, Native-specific images and incorporation of community rituals.
In Santa Barbara, the Mixteco Indigena Community Organizing Project provided strategic consultation and guidance to support the local health department in creating culturally connected, primary language materials to reach 35,000 Mixteco, Zapotec and Purépecha neighbors.

The San Francisco African American Faith-Based Coalition hosted pop-up vaccine clinics at local churches, working to get the word out through trusted faith leaders, community members and youth. They vaccinated over 700 community members and their model was replicated in other communities.

San Diego’s Refugee Assistance Center used their local knowledge and relationships to connect recent immigrant communities with necessary resources and vaccines—for example, setting up COVID information tables at the only two stores in the county that sell the Ethiopian staple injera bread.

Community-based groups in the Salinas and Imperial Valleys created an unusual collaboration among farmworkers, growers, labor groups, local governments, schools, churches and health clinics. These rural, agricultural communities now have some of the state’s highest vaccination rates.

A collaboration with Alianza Translatinx identified barriers—including forms that didn’t have space for preferred names and pronouns—that built effective outreach and vaccination in the Orange County transgender community.

THANK YOU TO THE TOGETHER TOWARD HEALTH FUNDERS


539
local CBOs—churches, community centers, clinics & more—leveraging TTH funding

6.8M
individuals reached through TTH-funded CBOs, receiving COVID info., vaccines & more

$31M
committed to TTH’s community COVID response, as of Dec 2021
“Tracing Health staff provide critical health information as trusted messengers within their communities. Thanks to scholarships from Keck Graduate Institute Master of Science in Community Medicine, they are now on the path to advanced degrees and long-term public health careers. We know that we can foster better health outcomes when our workforce is as diverse as the communities we serve.”

— Dr. Marta Induni, Tracing Health Program Director
From community centers providing emergency meal bags to pastors hosting vaccine clinics in the parking lot after services, community public health workers are preventing COVID today—and are ready to work in their communities and local health departments tomorrow on health issues including chronic disease prevention, climate change, health equity, racial justice and more. When health and public health professionals look like and come from the communities they serve, patients receive better care and experience better health outcomes.

LAUNCHING THE NEXT GENERATION OF GLOBAL HEALTH LEADERS

Our Alcohol Research Group (ARG), Sustaining Technical and Analytical Resources (STAR) and CDC/Global Health Fellows programs train and mentor new and emerging health leaders around the world, as well as build capacity and partner with in-country institutions to create lasting and sustainable change. PHI’s ARG training program mentors and trains pre- and post-doctoral scholars engaged in alcohol and drug-related research. More than 270 ARG fellows work around the globe as researchers, scientists and public health professionals. STAR and PHI/CDC global health leaders recruit, hire and provide tailored experiences for a diverse cohort of health professionals for more collaborative and innovative contributions to global health. Through placements in more than 35 countries, nearly 200 fellows and more than 55 interns in these programs have developed the skills, experiences and frameworks they need to advance their global health careers and to contribute to more sustainable, stable leadership within countries around the world. Fellows speak 15 languages, hold advanced degrees from 23 universities and have previously worked in over 40 countries.

ACTIVATING YOUNG PEOPLE FOR MEDICAL & HEALTH CAREERS

PHI’s FACES for the Future Coalition puts high schoolers—many first generation, low-income and/or from communities of color—on health career pathways, providing trainings and experience in major hospitals, clinics and more. FACES works in four states, in seven locations and at 14 different high schools, serving over 600 students every year. In 2021, the program pivoted to address COVID-19 with Public Health Youth Corps, an initiative that trains high school students as peer vaccine educators—working in 86 zip codes, in 21 languages, to educate their friends, families and communities about vaccines, masks, social distancing and more. FACES students have gone on to be community health workers, doctors, nurse practitioners and more, often returning to the communities where they grew up.
PROVIDING THE SUPPORT THAT LEADS TO SUCCESS

We build and staff programs that create pathways to all levels of health careers, while also providing ongoing training, wrap-around services, mentoring and support—helping to create sustainable, community-based expertise. Tracing Health delivered 25,000 hours of staff training. PHI’s Communities RISE collaboration connected local groups, government and public health leaders for job opportunities and created a training hub where more than 1,800 community members nationwide accessed live and recorded online trainings in English and Spanish. Sustaining Technical and Analytical Resources (STAR) participants benefit from a dedicated team of Learning and Performance Management specialists who provide them with individualized training plans intended to develop core competencies in global health, technical skills and achieve professional goals.

VALUING—AND REIMBURSING—COMMUNITY HEALTH WORKERS

Through a grant from the Blue Shield of CA Foundation, PHI’s Center to Advance Community Health & Equity and diverse stakeholders in San Joaquin and Sonoma counties are designing a more systemic, collaborative approach to engagement of Community Health Workers and Promotoras. A partnership with the Pathways Community Hub Institute supports teams in multiple states using an evidence-informed strategy and incentive payment structure for Community Health Workers, linking people to support services to be reimbursed by CalAIM.

RACIAL EQUITY, DIVERSITY AND INCLUSION (REDI) AT PHI

PHI has a broadly diverse staff, including across race, gender and LGBTQ+ identity, age and people with disabilities. In 2021, an outside consulting group conducted an organization-wide REDI assessment of PHI, including an all-staff survey, stakeholder interviews and focus groups (Hispanic/Latinx employees, Black/African American employees, employees who have a disability and LGBTQI+ employees). The findings were presented to the board and to all staff, with related action steps starting to be implemented across all levels of the organization, such as adding non-binary fields to forms and including salary ranges for job opportunities. PHI leadership approved funding to support additional consulting assistance and to hire a full-time REDI position in 2022.
In 2021, California counties had assigned more than 40,000 COVID-19 cases to PHI’s Tracing Health program for contact tracing and case investigations. The program hired more than 600 new team members, fluent in more than 50 languages, with 60% coming from communities just like the ones they were helping. A workforce that looks like, speaks the same languages as, and comes from the communities it serves can interrupt medical racism and ultimately provide better care.

Tracing Health hires predominantly in local communities with the greatest health inequities. They reach many job applicants traditionally overlooked or excluded from governmental public health—those without college or advanced degrees—and place them in positions where they develop skills and experience for public health careers. Many came to PHI with personal experiences in navigating complex health systems; some came to PHI from families or communities who faced barriers to health care and distrust of government; others grew up helping their refugee families navigate our medical and social systems.

Each staff receives over 100 hours of training and a variety of career development opportunities to launch their health care or public health careers, including:

- Support in pursuit of formal professional certifications, such as Occupational Health, Mental Health First Aid, Migrant Health and others.
- Personal, one-on-one job search coaching, including resume review, networking, interview skills and more.
- Opportunities to explore employment pathways, such as job fairs and webinars with a wide range of health employers, including government, community-based organizations, advocacy groups, environmental health nonprofits, community clinics and other health-focused groups.
- Social and emotional support systems, including network and mentoring supports that go beyond traditional employee assistance programs.
Many Tracing Health staff are already moving forward in their health careers. In 2021, four Tracing Health staff were admitted to the new Keck Graduate Institute Master of Science in Community Medicine program; two were awarded L.A. Care Scholarships to the program. Tracing Health trained 25 first-generation college students at the University of California, Santa Cruz in contract tracing and case investigation, to help foster their career interests in public health. Ninety Tracing Health staff received internal promotions to supervisory positions.

Even after they leave the program, former employees can access and continue on in professional development classes and other certification programs. This keeps Tracing Health former team members engaged in the public health field as they start the job search process. Tracing Health former employees have the benefit of a work history with a respected organization, along with a set of hard and soft skills that prepare them for a variety of employment opportunities.

“We are all trained in mental health first aid, and I am also now taking a Migrant Health and Nutrition certification. These are going to help propel me to my ultimate goal of helping the Latino community in mental health and general health.”

— Paulina Jafarzadeh, Tracing Health bilingual contact tracer

93% of Tracing Health contact tracers are bilingual or multilingual

50+ languages spoken by Tracing Health contact tracers and staff

100+ hrs of training provided to each staff
“If you’re in a crisis and you have to spend a week doing paperwork, that’s a week you’re not getting out to get people scheduled for vaccinations. Two months would be the difference between whether people in our community live or die. So that flexibility was everything.”

— Felisia Thibodeaux, Executive Director, Southwest Community Corporation, I.T. Bookman Community Center
As an implementing organization and fiscal sponsor, PHI helps foundations, the government and healthcare systems implement funding priorities efficiently and effectively. In 2021, PHI’s broad network, nimble infrastructure and ability to hire quickly meant we could launch and scale COVID response initiatives, address growing and emerging issues like food insecurity, and direct millions of funder dollars to priority needs in a matter of days or weeks, instead of months or years.

ROLLING OUT SCHOOL-BASED RAPID TESTS

In early 2021, before vaccinations were widely available, PHI’s Safely Opening Schools partnered with the California Department of Public Health, schools and private partners to pilot and support the rollout of school-based rapid antigen testing across the state. They provided technical assistance to school districts about how to set up school COVID-19 testing programs in multiple languages, and worked with school communities to incentivize consent and support for on-site COVID-19 testing.

OPERATIONAL EXCELLENCE TO ENSURE PROGRAM SUCCESS

PHI’s Bid & Proposal team executed 16 contracts totaling over $6.5 million within a matter of weeks to continue contact tracing, case investigation and vaccine support to combat rising COVID cases, allowing 140 community-based employees to be retained and continue their public health work.

As a number of high-volume, equity-focused and community-based projects were implemented, PHI legal and contracting teams provided customized support to sub-awardees—many of which were community-based organizations without prior experience with federal regulations—to ensure timely implementation of program objectives while still ensuring compliance with a complex set of federal regulations. These PHI teams approved more than 12,000 financial and agreement transactions in 2021.
TRAUMA-INFORMED MENTAL HEALTH TRAINING

In 2021, the United States saw increases in drug overdose, signs and symptoms of anxiety and depression, and escalation in rates of suicide for youth. In response, PHI’s Cypress Behavioral Health team worked in partnership with health departments and healthcare systems, first responders, school districts and other stakeholders to deliver critical mental health and behavioral health training. This year, they certified over 1,100 people in Mental Health First Aid including public health officials, educators, law enforcement and staff in community-based organizations providing services in high need communities. The team provided trainings in Adult and Youth Mental Health First Aid (for adults supporting youth) and an additional 620 hours of training in mono-lingual Spanish classes. Cypress connected people to broad community resources and also trained over 2,500 people in trauma-informed practices through more than 8,500 hours of trainings.

CREATING CLEAR MESSAGING TO COMBAT VACCINE MISINFORMATION AND BARRIERS

To help providers, educators and advocates combat COVID misinformation, disinformation and vaccine barriers, PHI’s Berkeley Media Studies Group created strategic messaging resources, including sample talking points, videos and more. They shared best practices for communicating with the public in ways that foster trust—like leading with values, avoiding myths and using a “truth sandwich.” Used by health departments, local community-based groups and others, BMSG’s recommendations helped experts deliver critical health and safety messages about vaccines, masks and other strategies to keep communities healthy—even amidst rapidly shifting case counts.

OPERATIONAL INFRASTRUCTURE TO SCALE, TAKE RISKS AND GROW

PHI’s Alameda County Care Alliance (ACCA) provides a free Advanced Illness Care Program serving predominantly African American adults with advanced illness and their caregivers, working primarily in faith-based settings. A small PHI seed grant in 2021 gave ACCA the capacity to apply for and receive an award from the California Health Care Foundation, ten times the size of the initial investment. Now they’ve connected with more than 50 organizations and community leaders interested in expanding their model in communities across Los Angeles, as well as several cities across the country. In 2021, the program won an Award for Excellence in Program Innovation from The Aging & Public Health Section of The American Public Health Association and the Archstone Foundation.

8.5K hours of training on trauma-informed practices
10x ROI from a small PHI seed grant leveraged to a large foundation award
45/day financial and agreement transactions—more than 12000—completed by PHI teams to support programs
As COVID-19 vaccines became available to wider swaths of Los Angeles County in the spring of 2021, some neighborhoods were still experiencing barriers to access. Data from LA County in mid-April showed lower-income areas and communities of color had lower vaccination rates than wealthier, white areas. Only about 26% of people in Southeast LA, a primarily low-income, community of color, had accessed vaccinations by early April, compared to 53% of those in wealthier areas.

Counties often have resources available to communities, but getting them out the door and to the places that need it most can take time—even in a pandemic.

On April 15, 2021, PHI contracted with the California Government Operations Agency to serve as the implementing partner to distribute $14.7 million to trusted, local LA community health centers, mobile clinics, pharmacies, home health and other local organizations who could provide and promote vaccines in their communities.

Within two business days, PHI’s Agreements Team began contacting all of the local groups, and before the end of the month all 25 of the community groups who had provided their organizational information received their funding agreements. By May 3—less than three weeks later—local groups started to receive the funding to support their vaccine efforts.

Community members faced real barriers to vaccinations, including transportation concerns, lack of internet access, cultural and linguistic needs, misinformation about the vaccine and the side-effects and fear of deportation and/or mistreatment by immigration authorities.
Thanks to this effort, local organizations provided community health workers, vaccine registration, mobile vaccination clinics, and home health care support in languages including (among others) Spanish, Chinese, Vietnamese, Tagalog and Korean. They relied on trusted messengers; training residents who were already known as trusted voices in their community; partnering with well-known community leaders and working with local small business leaders who served as vaccine ambassadors and shared information with their patrons and community members.

From May through December 2021, they trained 1,565 staff in vaccine administration, data reporting, vaccine registration and other topics, and also hired 424 new staff and community ambassadors to support more than 395 vaccine providers and 1,205 mobile clinics. In all, they reached 14,580,338 people with COVID-19 vaccine outreach and provided at least one vaccine dose to 338,220 people.

The local organizations also helped residents apply for health care coverage, CalFresh benefits, economic injury disaster loans, unemployment applications, small business relief grants and more. A successful collaboration between LA County Public Health, paratransit providers, Lyft and local organizations worked to ensure vaccine equity for people with disabilities, by developing transportation solutions and implementing ADA accessibility standards at testing and vaccination sites.

338K people received at least one vaccine dose

$15M funds disbursed to 40 local organizations in a matter of weeks

14M people were reached with vaccine information and support

84% of communities served were people with low incomes, without residency documents and/or health insurance.
“In January 2021, the vaccine supply was rather limited. What we wanted to do was outreach to communities that are traditionally marginalized and help them access the vaccine. We picked areas that have a low score on the Healthy Places Index.”

— Dr. Kishore Nath, John Muir Health Mobile Health Clinic
Data is critical to steer public health, and we also need to make sure that we are hearing from communities to give us the nuance of what is happening on the ground and to understand the data we collect. We know from CBOs what the unmet needs are—where community members are not accessing vaccines, where they may not have health services, where they are experiencing food insecurity or other challenges in accessing the vital conditions for health.

LOCAL KNOWLEDGE AND DATA FOR TARGETED SUPPORT

PHI’s contact tracing partnership with Kaiser Permanente blended epidemiologic data on COVID-19 incidence and trends, along with data from PHI’s Healthy Places Index tool on prevalence and location of vulnerable populations. To prioritize areas with the greatest need and fewest resources, PHI mapped where health department partnerships were strong, incorporated data on intensive care unit and emergency department capacity, and identified hard-hit areas like nursing homes and assisted living facilities that struggled to maintain staffing.

A ONE-OF-A-KIND, MULTI-GENERATIONAL STUDY FOR SAFER PREGNANCIES

A 2021 study from PHI’s Child Health and Development Studies (CHDS) found that children exposed in utero to the active ingredient in Makena—used for over a decade by pregnant women to prevent premature births—had nearly double the risk of any cancer, compared to those not exposed. The Federal Drug Administration has said that the drug doesn’t work and should be taken off the market; instead, it continues to be used today—and is often marketed specifically towards Black women, who are most at risk of preterm births. The study was published in the American Journal of Obstetrics and Gynecology, and received national and global media coverage including STAT News and the LA Times.

In the 1950s, CHDS collected blood samples from over 15,000 pregnant women. This data set—along with their children’s and grandchildren’s samples—is used to investigate the relationships between health and the environment. CHDS is the only existing 3–4 generational study on the health impacts of environmental chemicals during critical windows of pregnancy.
STRENGTHENING COMMUNITY POWER & TRUST THROUGH RESEARCH ENGAGEMENT

Surprisingly, research data isn’t always shared directly with those from whom it’s collected. PHI is pioneering best practices for engaging participants in the reporting process so they can protect their health—a critical step in communities that experience harm from how their data has been used. PHI’s CHDS tested blood levels of 150 Black and 150 non-Black women for chemicals like pesticides, then shared back the results, individually and as a cohort. The personal report-backs led to greater motivation to access health and safety information, and increased engagement with the reports among Black participants. After California’s Paradise Fire, neighbors were concerned about home drinking water safety. PHI’s Gina Solomon and Tracking California tested water samples, and provided results directly to the community—helping to mitigate some of the ongoing trauma from the wildfire and support rebuilding a sense of community and personal agency.

RAPID RESEARCH TO BOLSTER HUNGER INTERVENTIONS

Research from PHI’s Center for Wellness and Nutrition, published in the CDC’s Preventing Chronic Disease, found that increases in food assistance programs implemented by the California Department of Social Services during the COVID-19 pandemic, helped decrease food insecurity for low-income Californians. The agency increased CalFresh benefits and distributed $1.36 billion in food assistance. The PHI study showed that the agency efforts had an impact: 14% of low-income Californians reported facing very low food security during the COVID-19 pandemic, compared with 19.4% who reported that status in the pre-COVID period. The PHI data supported federal decisions to extend and expand the federal Pandemic EBT and SNAP food assistance programs.

TECHNOLOGY FOR MORE EQUITABLE HEALTH OUTCOMES

A 2021 survey found that the percentage of health centers using telehealth jumped from 43% before the pandemic to 98% during the crisis. PHI promoted improved access to health care through telehealth, which has shown to result in significant cost savings, improved convenience, less work absenteeism and can be especially important for low-income people and communities of color. PHI’s Center for Connected Health Policy (CCHP) created a 16-video series on COVID-19 and telehealth, and their 2021 Telehealth Policy Finder gave advocates and policymakers an essential tool for exploring telehealth-related regulations. In 2021, CCHP promoted the vital role of telehealth beyond the pandemic, advocating for maintaining policy changes that helped millions of people receive care digitally during COVID-19.
IMPACT: Healthy Places Index

Data to drive resources & vaccines where they’re needed most

The Healthy Places Index (HPI), developed by PHI’s Public Health Alliance of Southern California, is a powerful data, mapping, and policy platform designed to identify opportunities to improve neighborhood health in areas where it will have the strongest impact on life expectancy. Public health and health care leaders have used HPI to guide public health resources for years; during the pandemic, it became a core tool to guide COVID policy and strategy, particularly to identify and direct resources to communities experiencing the most disproportionate impacts of COVID-19.

THE BASE OF STATE EQUITY METRICS

The State of California’s Health Equity Metric (HEM) and Vaccine Equity Metric (VEM) were based on the HPI. When vaccines were in short supply, the state used the VEM to prioritize allocation of 40% of vaccine doses to California’s lowest VEM quartile. Dr. Rohan Radhakrishna, Deputy Director of the California Department of Public Health Office of Health Equity, said that the state VEM led to an additional 800 shots in arms per day to people living in these areas that otherwise would not have been prioritized.

REACHING COMMUNITIES; PRIORITIZING VACCINE EQUITY

Counties across California—including Los Angeles, Orange, Riverside, Alameda and Marin—used the HPI to help inform their plan to vaccinate communities hardest hit by the COVID-19 pandemic, particularly communities of color and migrant communities. Counties used HPI to identify highly impacted and hardly reached community members, and to partner with community-based organizations for their expertise. Counties used HPI to prioritize vaccine allocation and assist with focused outreach to provide priority notification of available vaccine appointments in HPI tracts with the least healthy conditions and in communities of color. HPI also helped counties determine where to add additional vaccination sites, how to understand mobile vaccination needs and how to tailor informal and education strategies.
GUIDING RESOURCES

Orange and Alameda County used the HPI to inform its Targeted Equity Investments (TEI) to support neighbors who experience the least healthy living conditions, contracting with CBOs to expand multilingual, culturally appropriate COVID testing, tracing and health education.

SUPPORTING HEALTHCARE

Sutter Health’s COVID Vaccine Equity Index (CVEI) took race/ethnicity, age and socioeconomic status into account. The CVEI helped Sutter Health determine the vaccination rate needed to overcome COVID’s differential impact, setting goals for subgroups (e.g. Black and Latinx), accounting for disproportionate illness and then prioritizing vaccinations to strengthen equity.

Kaiser Permanente included HPI percentiles in the panel management system for its Southern California region, so physicians could see estimated HPI percentiles alongside clinical data when reviewing patient records. Kaiser’s COVID-19 Vaccine Confidence Toolkit, a guide for health care providers, government agencies, local groups and others, includes the HPI as a data source.

The HPI’s granular neighborhood data made it possible for organizations, hospitals and health departments to monitor COVID impact, vaccine coverage and demand. This helped prioritize vulnerable residents to get vaccinated throughout critical points of the pandemic, ultimately saving many lives.

The HPI relaunched with new data and enhanced features in early 2022.

$272M in federal COVID funding directed to highly impacted communities
40% of vaccine doses directed to areas with highest need
800/day shots directed to systemically excluded people who otherwise would not have been prioritized
Break down silos.
Build partnerships.

“The Department of Health Care Services envisions a future where people with addiction can go into an emergency department or hospital and expect compassionate screening, appropriate treatment and facilitated referral to ongoing care, just as they would for any other chronic disease. CA Bridge should be proud to have grown this initiative in the face of what have been some very substantial external challenges—they are well on [their] way to making this future a reality.”

– Kelly Pfeifer, MD, Deputy Director, Behavioral Health
We work best when we work together, and that is true at a systems level, too. PHI and its teams provide expert advice, partnership opportunities, technical assistance, consultation and collaboration to public, private and non-governmental stakeholders at the local, state, and national levels around the globe. We each have a vital role to play and bring specific kinds of expertise to the table.

**STRENGTHENING PARTNERSHIPS TO PREVENT & TREAT ACES**

PHI’s Population Health Innovation Lab (PHIL) serves as the backbone for the Northern California ACEs Collaborative, bringing together leaders from public health, social services, probation, First 5, education, and domestic violence prevention agencies from six rural California counties with some of the highest Adverse Childhood Experiences (ACEs) rates in the state. In 2021, PHIL hosted the annual Rural ACEs Summit and launched new research and tools, including an online training and resource hub to help prepare community health workers to prevent, treat and heal toxic stress.

**TREATING OPIOID USE & OVERDOSE AS AN EMERGENCY**

According to the CDC, more than 100,000 Americans died of drug overdoses during the first year of the COVID-19 pandemic. PHI’s CA Bridge program works with 200+ California hospitals to treat opioid use disorder by implementing medication for addiction treatment (MAT) in their emergency departments and using substance use navigators to help patients with follow-up. Altogether, these hospitals have identified more than 52,000 patients with opioid use disorder and started more than 23,000 on buprenorphine.

Through PHI’s California Overdose Prevention Network, 30 regional coalitions across California share ideas, learn better methods, discover the latest strategies to prevent new addictions, increase access to treatment and stop overdose deaths. In Plumas County, which had the highest rate of opioid-related deaths in California, COPN’s work helped bring the county’s opioid-related death rate to zero. COSN also sponsors the largest AmeriCorps VISTA program dedicated to opioid safety in the country, with the capacity to place 40 VISTA members in coalitions across the state.
ADDRESSING HUNGER AND FOOD INSECURITY

In 2021, PHI’s Center for Wellness and Nutrition (CWN) collaborated with 303 partners in 39 states across the nation, providing training and educational programs, promoting healthy drink options over sugar-sweetened beverages, working to include Native American perspectives, cultural practices and traditions in CalFresh, and leading other projects to address food insecurity among those most at risk for experiencing hunger. Altogether, they reached 1.1 million people.

JOINING ACROSS SECTORS TO HELP NEIGHBORS BREATHE CLEANER AIR

Wildfire smoke is unhealthy to breathe and can be especially dangerous for thousands of Bay Area asthma residents, particularly in low-income communities of color. But the cost of a quality home air filter can be prohibitive. A partnership with the Bay Area Air Quality Management District, PHI’s RAMP, seven Bay Area nonprofit organizations, community-based health care providers, health departments and managed care organizations provided portable air filtration units, along with primary-language asthma home visits, education and environmental remediation to more than 2,000 low-income neighbors.

EMBEDDING HEALTH EQUITY AND ADDRESSING SYSTEMIC RACISM

Capitol Collaborative on Race & Equity (CCORE), a partnership between PHI, Government Alliance on Race and Equity, and Strategic Growth Council, convenes government entities to work together to learn about, plan for, and implement activities that embed racial equity approaches into institutional culture, policies and practices. More than 27 state entities have committed to racial equity plans, with concrete results including an equity dashboard developed by the California Health and Human Services Agency to identify data gaps by race, ethnicity, sexual orientation, and gender identity across programs, and an office of race and equity created within the Department of Transportation.

23K
patients started on buprenorphine at 200+ hospitals

2K
families provided free air filters to tackle smoke-induced asthma

1.1M
Adults and children at risk of hunger and food insecurity reached with nutrition education
In early November 2021, new research on COVID-19 breakthrough infections and vaccine efficacy from Dr. Barbara Cohn, who heads PHI’s Child Health and Development Studies (CHDS), was published in the prestigious journal *Science*. The research quickly became a critical analysis for informing discussions around strategy and recommendations nationally and globally on our next steps with vaccines.

Dr. Cohn’s study, undertaken in partnership with the Veterans Affairs Medical Center and the University of Texas Health Science Center, looked at vaccine efficacy over six months, across the three U.S. vaccines, in a cohort of over 780,000 veterans. The findings: an alarming decline over time in all vaccines’ ability to protect against COVID-19 infection. The *Science* study was the first to compare protection declines across the three main vaccine types, and the first to show the comparably dramatic decline in effectiveness for the Janssen (Johnson & Johnson) vaccine. Overall vaccine protection against infection declined from 87.9% in February to 48.1% by October 2021. Over the six months, efficacy in Johnson & Johnson’s single-dose vaccine dropped from 86% to just 13%, followed by Pfizer (86.9% to 43.3%) and Moderna (89.2% to 58%). The data did confirm that the vaccines are still protective against severe COVID-19 and death.

The study was released early in order to be included in FDA considerations that week regarding booster shots, which helped inform the FDA decision to recommend them.

"The most comprehensive comparison yet of how the three vaccines have performed across the nation this year."

Los Angeles Times
## Financials

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior year restricted revenue: released</td>
<td>$18,460,287</td>
</tr>
<tr>
<td>Other revenue</td>
<td>$242,342,512</td>
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<tr>
<td>Change in net assets</td>
<td>$1,675,395</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$262,478,194</strong></td>
</tr>
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</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research and program services</td>
<td>$230,353,554</td>
</tr>
<tr>
<td>Management and general</td>
<td>$22,792,375</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$253,145,929</strong></td>
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</table>

### Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net assets at beginning of year</td>
<td>$58,940,385</td>
</tr>
<tr>
<td>Change in net assets</td>
<td>$9,128,022</td>
</tr>
</tbody>
</table>

### Program Allocation

- 90% Direct Research & Program Services
- 10% Management and General Rate
- <1% Fundraising

### Funding Sources

- 50% Federal
- 23% Foundation
- 14% Other
- 13% State

### COVID Allocation

- 78% Non-COVID program support
- 22% COVID-related funding

For five decades, PHI has served as the fiscal agent for the innovative projects it supports and the dynamic public health leaders it attracts. PHI is committed to financial integrity, transparency, and stability, and to leveraging resources, partnerships and collaboration to maximize advances that improve public health and well-being. PHI has a history of receiving unqualified opinions on its audits—an important designation that indicates financial compliance and transparency, and which makes PHI competitive for federal and other funding streams. PHI’s financial stability gives programs a base to take calculated risks while funders know their investments are securely shepherded.
2021 Leadership & Board

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Mary A. Pittman, DrPH
PHI President & Chief Executive Officer

Mélange Matthews, MPH, MCP
Executive Vice President & Chief Operating Officer

Israel Ghebretinsae, MPA
Chief Financial Officer

Matthew Marsom
Senior Vice President for Program & Public Policy

Valerie McCann Woodson
Senior Vice President of Human Resources

Leah D. Williams, Esq
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Carmen Nevarez, MD, MPH
Senior Vice President for Preventative Medicine & External Relations

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Anthony Barrueta
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Senior Vice President, Head of Global Marketing & Communications, Peloton

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Director, Center for Reducing Health Disparities

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Director, County of San Diego Health & Human Services Agency

Mary A. Pittman, DrPH
President & Chief Executive Officer, Public Health Institute

Susan Watson, MPH
Program Director, CA4Health, Public Health Institute

Adeze Enekwechi, PhD, MPP
Secretary/Treasurer
Research Associate Professor, Welsh, Carson, Anderson & Stowe

Afia Asamoah, JD, MPP
Head of Legal & People, Waymark, Inc.

Santiago Muñoz
Chief Strategy Officer, UCLA Health System
Work With Us

FISCAL SPONSOR

The Public Health Institute (PHI) leads and manages public health projects as a fiscal sponsor. We provide operational infrastructure and administrative support—human resources, grant development and support, compliance, staffing—that allow programs to focus on what they do best: making an impact. PHI helps public health professionals launch, scale and grow and develops the next generation of public health leaders and advocates.

THOUGHT LEADER & CATALYST

PHI advocates for policies and legislative solutions. We develop new research and work with communities, policy-makers, and legislators to enact policies and influence practices that promote equitable health outcomes. We identify emerging issues and speed staffing and resources where they can quickly make an impact. We bring the right people to the table. We influence and shape how public health issues are understood, sharing evidence for action.

PARTNER

PHI works with funders, the private sector, government and other agencies to strengthen and implement their vision. Our multi-disciplinary team provides specialized expertise—all based on best practices and rooted in equity. We bring a broad network, nimble infrastructure and a roster of proven interventions. This allows us to launch new projects quickly and bring effective work to scale.

Let us make your work stronger: phi.org/partner-with-phi

OPERATIONAL INFRASTRUCTURE TO LAUNCH, SCALE & GROW

58 yrs
of experience as a fiscal sponsor and non-profit public health leader

185
countries where PHI can immediately hire staff

270
funding sources: federal, state, county, foundation and private sector

800+
projects working on issues across public health across the globe

1200+
employees at the heart of our mission to build a healthier more equitable world
By making more & larger gifts, lessening funding restrictions, and providing longer-term support, philanthropists can enable nonprofits to transform our systems and solve the world’s toughest problems...
By trusting and putting power into the hands of the organizations she supports, Scott is expanding philanthropy’s potential to create lasting change.”

– Denise Dunning, of PHI’s Rise Up, on receiving a large, unrestricted gift from philanthropist Mackenzie Scott

Chronicle of Philanthropy