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## LETTER FROM THE EXECUTIVE DIRECTOR

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*Chrissie Juliano, MPP*

Members of the Big Cities Health Coalition (BCHC) have been at the forefront of public health practice since the Coalition was formed in 2002, and this year was no different. Our members continued their daily work this year, addressing ongoing challenges like substance use disorder and violence in their communities, as well as emerging ones. They led the response to measles outbreaks, a mysterious new vaping disease that signaled the next wave in the fight against tobacco, and a series of natural disasters, including wildfires, hurricanes, and floods.

As our members worked on the front lines of these challenges, the Coalition maintained a strong presence in important public health debates, engaging with policymakers, the media, and partner organizations to make the case for funding and evidence-based practice to protect and promote the public's health. BCHC provided a vital forum for leaders of the nation's largest urban health departments to share their challenges, expertise, and innovative public health interventions.

This year, the Coalition moved to the de Beaumont Foundation, one of our long-time partners and funders. 2019 has been a year of building new and different working relationships across the public health and city spaces, ultimately to help us realize BCHC's vision of healthy, more equitable communities through big city innovation and leadership.

For more than 15 years, with the support of our members, who pay annual dues, and de Beaumont, the Robert Wood Johnson Foundation, the W.K. Kellogg Foundation, and others, we have grown in size and influence to be a prominent voice in the policy and media debate. Our members, with the support of our staff, are collaborating and sharing innovative and promising practices that improve lives and move the field forward using data, evidence, and a deep understanding of their local communities. We know that when big city health departments lead, they improve the health of their residents —nearly 62 million Americans.

We are proud of the work our members are doing to do to help Americans live longer, happier, healthier lives. As 2020 dawns, we look forward to working to achieve even more together.

Sincerely,

A handwritten signature in black ink that reads "Chrissie Juliano". The signature is written in a cursive, flowing style.

Chrissie Juliano, MPP  
*Executive Director, Big Cities Health Coalition*

# LETTER FROM COALITION LEADERSHIP

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*Kelly Colopy, MPP*



*Sara Cody, MD*

Over the past year, big city health officials continued to lead the way in solving the complex public health challenges that our communities face. We are honored to work alongside such dedicated colleagues, and we are inspired every day by their commitment to improving the lives of the populations we all serve.

This year again demonstrated the critical role the Big Cities Health Coalition plays in advancing the work of health departments. As local health officials in Long Beach and Santa Clara County (San Jose), California, we can speak from first-hand experience as to the importance of having an ongoing dialogue with departments from around the country to learn from and share examples of innovation and best practice. Whether managing a measles outbreak, responding to the impact of wildfires, or dealing with ongoing or emerging issues like substance use disorder or the youth vaping epidemic, BCHC members value the many ways the Coalition informs and shapes the work we do in our communities.

By sharing the expertise from 30 member health departments, the Coalition is able to highlight the challenges faced by communities across the country and crowdsource solutions to best to address them.

We achieved much together in 2019 and look forward to continuing to improve the health of our communities in 2020.

Sincerely,

Handwritten signature of Kelly Colopy in black ink.

Kelly Colopy, MPP  
*2019 Chair, Big Cities Health Coalition  
and Director, Long Beach Department of  
Health and Human Services*

Handwritten signature of Sara Cody in black ink.

Sara Cody, MD  
*2019 Chair-Elect, Big Cities Health  
Coalition and Director, Santa Clara County  
Public Health Department*

# STRENGTH IN NUMBERS

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COALITION MEMBERS CAME TOGETHER TO LEVERAGE THEIR COLLECTIVE KNOWLEDGE, VOICES, AND SKILL SETS TO PROMOTE INNOVATIVE PROGRESS IN THE FIELD OF URBAN PUBLIC HEALTH.



NUMBER OF BIG CITIES  
HEALTH COALITION  
MEMBERS



NUMBER OF MEETINGS  
COALITION MEMBERS HELD  
WITH U.S. MEMBERS OF  
CONGRESS



NUMBER OF BLOG POSTS  
BY BCHC MEMBERS  
PUBLISHED ON BCHC AND  
PARTNER WEBSITES



NUMBER OF ADVOCACY LETTERS  
SENT TO CONGRESS AND THE  
TRUMP ADMINISTRATION IN  
SUPPORT OF PUBLIC HEALTH



## 30 MEMBERS

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- |                                |                              |                               |
|--------------------------------|------------------------------|-------------------------------|
| 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.              |
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# COALITION OVERVIEW & MEMBERSHIP

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## 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.





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## 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 March, the members came together in Washington, D.C., to outline

priorities for the year and visit with policymakers. They gathered again in Atlanta in October to meet with the U.S. Centers for Disease Control and Prevention (CDC) and share stories from their communities, learn from one another, and chart a collective path forward.

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 2019 officers:

### CHAIR

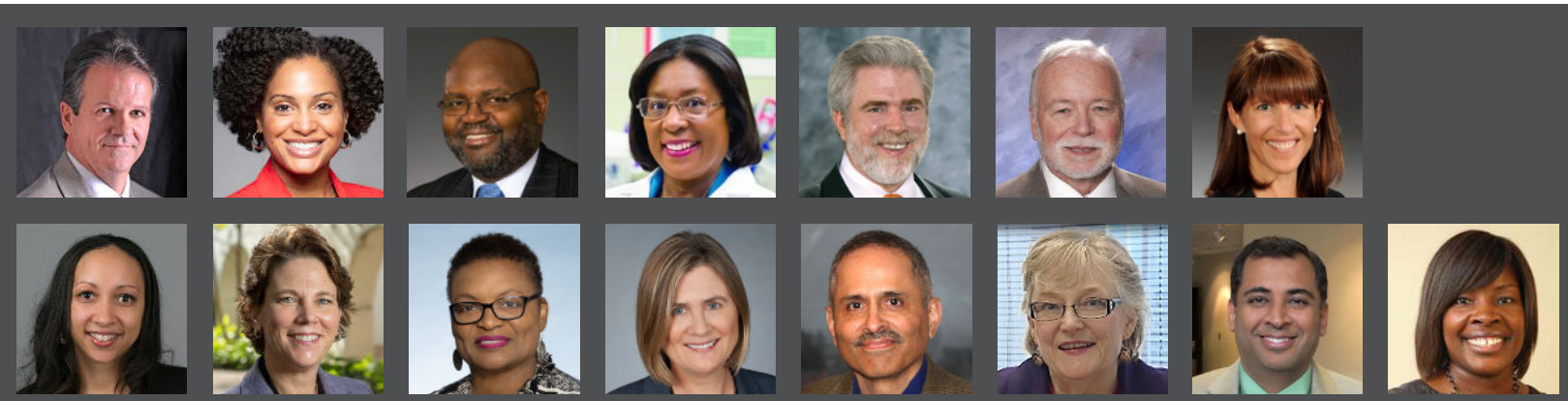
Kelly Colopy, MPP  
*Director, Long Beach Department of Health and Human Services*

### CHAIR-ELECT

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

### VICE CHAIR

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



# ADVANCING THE PRACTICE OF PUBLIC HEALTH

## MEASLES OUTBREAKS IN NUMBERS



### NATIONAL

**1,282**

Number of national cases in 2019

**\$32,805**

Cost of median measles case

**31**

Number of states reporting cases of measles

### NEW YORK CITY

**400**

Number of staff deployed to respond

**\$2M+**

Cost of the outbreaks to the local health department

### LOS ANGELES COUNTY

**3,000**

Approximate number of contacts identified and investigated by health department

**\$1,000–\$2,000**

Cost to the department of investigating each case

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, the opioids crisis, and community violence. This year health departments also had to deal with a series of measles outbreaks, as well as the increase in e-cigarette use among youth and a new disease associated with vaping.

As in years past, the Coalition showcased the good work being done in cities to protect communities and promote health, communicating with policymakers, the media, and other external audiences.

### MEASLES OUTBREAKS

CDC confirmed 1,282 cases of measles across 31 states in 2019, the most in any year since 1992. In 2000, measles was declared eliminated in the U.S.; 2019 saw us on the verge of losing that important designation.

Health departments led the response to measles outbreaks. In cities with high numbers of cases reported, addressing them often came at a high financial and resource cost. Each suspected case has to be investigated, and for each confirmed case of measles, "disease detectives" were employed to confirm where the patient had been and with whom they had come into contact while contagious.

The Coalition worked with members to tell the story of how measles outbreaks were impacting local communities and how local health departments responded effectively thanks to their knowledge of the communities they served. In New York City, high-risk communities were targeted with tailored

information, community meetings, and online resources, while in Los Angeles, information on symptoms and the importance of vaccinations was translated into 11 languages.

A central message for external audiences was the impact this additional workload placed on health departments. With financial and staff resources already stretched, the measles outbreaks placed further strain on departments.

The Coalition organized a Capitol Hill briefing in September, broadcast live on CSPAN, to share how health departments had managed the outbreaks and what types of federal resources are needed to help communities effectively prevent and respond to future outbreaks. In addition, the Coalition hosted a media webinar, provided several blog posts for publication on external health policy websites, and produced briefing materials for a range of audiences.

- NATIONAL case counts: U.S. Centers for Disease Control and Prevention
- \$32,805 cost of median case count: Pike et al. "Pike et al. "A review of measles outbreak cost estimates from the US in the post-elimination era (2004-2017)." *Clinical Infectious Disease*, 22 January 2020. (Based on outbreaks between 2001 and 2018)
- NYC and LA numbers: Provided by local health departments

## TOBACCO, E-CIGARETTES, AND VAPING

E-cigarettes and vaping products entered the market a decade ago, but the number of youth using these products has risen dramatically in recent years, aided by the availability of over 15,000 sweet flavors. These appeal to youth and lead to experimentation and addiction. With 5 million youth now using e-cigarettes, it is more important than ever to support flavor restrictions and movements to rid the market of them altogether, which we and our members have a long history of doing. It is critically important to protect children not just from current access to nicotine, but also future addiction to a drug that poses a unique risk of long-lasting harmful effects for developing brains in particular.

The Coalition signed onto several letters to the Administration along with other leading public health organizations this year to make the case for removing flavored products, maintaining pressure on lawmakers and the Administration throughout the year. The President said in September that he would heed the advice of the public health community and remove all non-tobacco-flavored e-cigarettes, but on January 2, 2020, the Administration announced that some, not all, flavors

would be further regulated. While Congress passed federal law in December to raise the age of legal sale of tobacco products to age 21, it did nothing to address flavors.

In addition to maintaining pressure for flavors to be taken off the market, the Coalition has written to the President to call for the voice of local health officials to be represented in these discussions. With public health departments working every day on tobacco prevention practice and policy, they are a crucial voice that must be included in the national policy debate.

With unrivaled regulatory experience and understanding of the challenges and impact in their communities, big city health departments provide many examples of local leadership and innovative solutions in addressing the growing youth e-cigarette epidemic. The Coalition has showcased the work being done by leading health departments, including those who have already implemented flavor regulation in their jurisdictions. These effective local examples and real-life experiences are instructive to further Federal action, and we will continue to tell these stories and urge addition regulatory and/or legislation activity on flavors in 2020.

## VAPING IN NUMBERS



### 5 MILLION

Number of children and teens who now use e-cigarettes

### 97%

Percent of current youth e-cigarette users who vape flavors

### 2,500+

hospitalized cases of e-cigarette or vaping use associated lung injury

### 54 DEATHS

in

### 27 STATES

and Washington, D.C.  
(through 2019)

- 5 million stat: National Youth Tobacco Survey
- 97% state: Population Assessment of Tobacco and Health (PATH)
- 2500+ and deaths - U.S. Centers for Disease Control and Prevention



## BUILDING PARTNERSHIPS

While the Coalition continued to work in partnership with leading public health organizations, amplifying our messages and strengthening the case for evidence-based policy, 2019 was also slightly different. We built new partnerships with new organizations and strengthened relationships with partners we've worked with before.

**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  
*Drexel's School of Public Health*

  
PREVENTION  
INSTITUTE

  
astho™

  
NACCHO  
National Association of County & City Health Officials

  
Trust for  
America's Health

  
SAFE STATES

  
CSTE

  
APHL

  
ASSOCIATION OF  
ASPPH  
SCHOOLS & PROGRAMS OF PUBLIC HEALTH

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



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Our key partners in advocacy include the National Association of County and City Health Officials (NACCHO), the Association of State and Territorial Health Officials (ASTHO), the American Public Health Association (APHA), and the Trust for America's Health (TFAH). These and other partners work collaboratively whenever possible to raise up the voice of government public health practice and the importance of prevention. In addition, as we worked to support our members' practice on key topics, we engaged with the Prevention Institute and Safe States Alliance on violence and substance use disorder.

The Coalition continued to build relationships with key leaders and important program staff at CDC and the Health Resources Service Administration (HRSA), as well as the U.S. Surgeon General and Assistant Secretary for Health at the U.S.

Department of Health and Human Services.

In late 2019, we also began a formal relationship with the Urban Health Collaborative (UHC) at Drexel University's Dornsife School of Public Health. This new partnership will help advance BCHC's work by bringing faculty, expertise, and additional resources in policy, planning, and evaluation, as well as data knowledge and infrastructure, to the Coalition's team and members. Working with the UHC will also enhance and support our commitment to evidence-based urban health practice. The creation and support for partnerships with organizations like BCHC is at the core of UHC's mission, and through this partnership, BCHC and UHC will enhance their ability to meet their shared vision of improving the health of people living in our nation's largest cities.



## LEVERAGING OUR COLLECTIVE VOICE

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BCHC members came together throughout 2019, calling for action on the country's biggest public health challenges with a collective voice.

### SHARING OUR STORIES WITH PUBLIC HEALTH LEADERS AT THE FEDERAL LEVEL

During our winter meeting in March, members heard from the Assistant Secretary of Health, Admiral Brett Giroir. We discussed opioids and substance use disorder, the Trump Administration's "Ending the HIV Epidemic" initiative, and challenges around the rise in sexually transmitted diseases (STDs), as well as specific local issues. At that same meeting, we also met with representatives from CDC's Center for State, Tribal, Local, and Territorial Support, who suggested our members come to Atlanta to share stories with agency leadership.

As such, our second member meeting of the year was held in October in Atlanta. Members met with CDC leaders and key programmatic staff, including those working on HIV/AIDS, violence prevention, opioids and substance use disorder, STDs, and tobacco. Those sessions were an invaluable opportunity to share experiences from the front lines, build understanding of the impact of these issues on communities, and discuss ways these challenges can be met.



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## ADVOCACY FOR COMMON-SENSE PUBLIC HEALTH PROGRAMS AND POLICIES

In addition to the September Capitol Hill briefing on the 2019 measles outbreaks, BCHC members visited more than 30 congressional offices to brief elected representatives and their staff on local public health priorities.

The Coalition regularly reached out to Congress and the Administration, sending more than 20 letters on a host of issues, including raising the legal age to purchase tobacco to 21, removing flavors from tobacco and e-cigarettes, providing federal dollars for gun violence prevention research, and protecting and increasing

funding for crucial public health programs. Some of these letters were written by partners with BCHC lending its name, strengthening relationships with the wider public health community and leveraging others' expertise; others were written by the Coalition with each member (or some subset of members) signing on individually.

A win late in the year included dollars for research into public health prevention of firearm injury and death being passed by Congress to go CDC and the National Institutes of Health. While this funding was

only \$25 million total to the two agencies, this is the first time in decades that the federal government has supported such research, which had a chilling effect on this kind of practice- and prevention-based public health research.

The Coalition also produced a series of briefing materials for lawmakers and a social media toolkit for members to build the case for increasing epidemiology capacity, addressing and preventing violence in communities, and reversing the tide of opioid use and misuse.

## EXTERNAL COMMUNICATIONS

The media profile of BCHC continued to grow in 2019, helping to elevate knowledge and understanding of major public health issues and the role of local health departments in addressing them.

In March, the Coalition hosted a media lunch and informal discussion in Washington, D.C., allowing members to meet with reporters from outlets including the *Washington Post*, *The Atlantic*, National Public Radio, and *BuzzFeed*. This session with health officials led not only to coverage in these publications, but also allowed the Coalition to continue to build its reputation as an expert and trusted source on a host of urban public health issues.

Media coverage was also secured as the Coalition and its members

continued to lead the way on protecting youth from smoking and vaping, with members taking steps to raise the age of legal tobacco purchase and remove youth-friendly flavorings from tobacco and e-cigarette products.

Nine press statements were released during 2019, drawing attention to the importance of federal funding for public health and urging the Administration to act on gun violence research and tobacco.



C-SPAN

POLITICO *The Atlantic*

The Coalition also successfully grew its online presence during 2019. BCHC is a leading voice in the social media debate on public health and participated in several Twitter chats, marked national awareness days and months with examples of members' work, and shared and participated in campaigns led by partner organizations. These and other activities helped increase the number of BCHC Twitter followers by 41 percent. In addition, a series of blog posts by members, supported by social media promotion, contributed to an increase in unique visitors and page views for the BCHC website. Blog posts by members were also posted on the websites of other partners, including *Health Affairs*, the Coalition for Health Funding, and the *Journal of Public Health Management and Practice*.

## PARTNERS & FUNDERS

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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 and safety of the 62 million people they serve, is incredibly appreciative of our funders and partners that help to make our work possible.

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

Further, our relationship with the de Beaumont Foundation deepened this year by literally taking the Coalition in, providing office space and infrastructure support in kind. The Centers for Disease Control and Prevention also continued its support for the Big Cities Health Inventory Data Platform.

BCHC is affiliated with the National Association of County and City Health Officials, which represents the nation’s nearly 3,000 local health departments.

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



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