

Launching & Scaling What Works

Thanks to support from funders and partners, trusted relationships with communities, and a strong operational infrastructure, PHI is able to quickly and efficiently get resources where they are needed most. This means we can rapidly hire staff and launch new initiatives. It also allows us to scale and expand existing work over time—by bringing successful models to new geographical areas, for example, or building on established community relationships to address a priority, urgent or emerging public health concern.





Giving Young People Training and Tools to Prevent and Treat Overdoses

Jada Solis was 14 when her friend’s brother died of an opioid overdose. Overdoses and hospitalizations due to opioid drugs among teenagers and young adults in the United States almost quadrupled between 2010 and 2021. Fentanyl accounted for 80% of overdose deaths among young people in 2021.

Solis, who attended high school in Alameda, California, received her own Narcan kit after a training with PHI’s FACES for the Future’s Youth Corps. “I know to tell an adult if I know anyone who is abusing opioids, and I have the Narcan kit that I can use if I need to,” said Solis, who is now considering a future medical career in nursing or mental health therapy.

FACES Youth Corps works closely with high school youth from diverse backgrounds—many of them first generation, low-income and/or teens of color—to prepare them for career pathways in health and public health. Through trainings and skill building, the teens learn how to handle emergency and crisis situations in their communities, including opioid overdoses. During the 9-month program, high schoolers are trained in the social determinants of health, CPR, the dangers of opioid abuse, overdose intervention, mental health first aid and tourniquet application.

In 2023, FACES also continued their academic year and summer programs in multiple locations, supporting students’ entry into healthcare professions through clinical internships, workshops, academic guidance, college preparation and wellness resources.



“I know to tell an adult if I know anyone who is abusing opioids, and I have the Narcan kit that I can use if I need to.”

— JADA SOLIS, FACES PUBLIC HEALTH YOUTH CORPS

LOOKING BACK

Changing the Face of Healthcare and Public Health



Thanks to FACES, more young people from low-income communities and communities of color are gaining the confidence, skills and support necessary to pursue careers in public health, medicine and related fields—building a pathway of dedicated, diverse health professionals who look like and come from the communities they serve. Since launching in 2000 in California, FACES has expanded nationally to Colorado, Michigan and New Mexico, and has served over 4,500 students in total. 100% of FACES participants graduate from high school compared to just 40% of their peers in some communities, and over 90% continue directly to a post-secondary pathway, leading to college, employment or certification programs in health.

“It was on a FACES rotation at Highland Hospital—on the labor and delivery floor—that I solidified my goal of becoming an OBGYN... **Participating in FACES allowed me to experience multiple ‘once in a lifetime’ opportunities that a young brown girl from Oakland could have never imagined possible, such as witnessing childbirths, pediatric surgeries and numerous patient-provider interactions. On top of having the unique privilege of stepping foot in clinical settings alongside medical professionals who sought to inspire me, most important is that I’ve been provided with lifelong mentors through the FACES staff and founders who genuinely care for me and believe in my journey.**”

— LUPITA MEDRANO, CLASS OF 2011

Ensuring Access to Sexual and Reproductive Health Care



With current restrictions on reproductive rights and nearly half of the states banning abortions, the United States is facing a public health emergency. These significant and alarming changes have a tremendous impact on managing pregnancy emergencies and access to basic contraception. Hospital emergency rooms are an anchor in communities—they're open 24/7, available in most communities, and are staffed by clinicians who are trained to manage multiple specialties. PHI's Access Bridge launched in 2023 to address the critical role that hospital emergency departments can play in improving access to reproductive health care by integrating these vital services into emergency departments (EDs) in abortion-restricted states and regions.

Through the Access Bridge fellowship program, 22 clinicians are working in 19 hospitals across 13 states to implement core reproductive health services in their hospital emergency departments, including in: four states that have reproductive health care restrictions; five states where demographic, geographic or political realities threaten the access to reproductive health care services; and four states that have progressive policies.

Access Bridge created first-of-its-kind clinical protocols to provide emergency department physicians with clear, evidence-based guidance on the diagnosis and treatment of early pregnancy loss, along with quick-start contraception guidelines. Access Bridge staff and content experts provide training, track fellowship key performance indicators, offer individual coaching, and collaborate with national professional associations to spread best practices.



19

hospitals in 13 states participating in Access Bridge program

LOOKING BACK

Accessing Emergency Contraception

In 2002 the Public Health Institute sponsored landmark legislation that allowed pharmacists to dispense emergency contraception, also called the morning after pill or Plan B, to all women of childbearing age without a doctor's prescription. This marked the first time PHI sponsored public health legislation. PHI's Pharmacy Access Partnership led the fight for the law's passage. At the time, California was only the second state in the nation to allow pharmacists to provide emergency contraception. The legislation was expected to prevent unintended pregnancies and abortions and provide another important family planning tool. The Pharmacy Access Partnership had conducted a trial with 70 pharmacies and clinics that demonstrated the effectiveness of this approach. The partnership went on to recruit and train pharmacists throughout California after the law was passed. The *San Francisco Chronicle* said partnership director Jane Boggess "won national recognition for leading the effort that made the 'morning-after' contraceptive pill available without advanced prescriptions at about 800 participating pharmacies in California."



photo: Sarahmirk



Expanding a Lifesaving Addiction Treatment Model

Medication-Assisted Treatment (MAT) is effective in the treatment of opioid use disorders and its multi-pronged approach—the use of medication in combination with counseling and behavioral therapies—offers a collective form of treatment, helping people to recover.

The Public Health Institute’s Bridge program works to transform addiction treatment by ensuring that every hospital provides 24/7 access to evidence-based care. Bridge supports hospital emergency rooms in offering medicine to treat opioid use, particularly buprenorphine.

Since 2018, Bridge has partnered with 276 of the state’s 331 hospital emergency departments, which now offer medication for addiction treatment, access to substance use navigators, and connections to ongoing care in the community. With growing numbers of people diagnosed with substance use disorders and seeking care, it’s critical to be able to meet the needs of the community and reach more people through the expansion of emergency department services. Nearly 237,000 patients had been seen for substance use disorders as of mid-2023, more than 175,000 were identified with opioid use disorders, and more than 76,000 were provided with buprenorphine.

276
EDs in California served
65k patients with
substance use disorder
using the Bridge model

Bridge achieved these results by growing a movement for universal access to addiction treatment. By focusing on harm reduction and connection, hospital emergency departments who utilize the Bridge model are better able to reach patients that may have otherwise been missed.

Bridge has led the largest expansion of ED MAT in the country, growing from an initial award of \$5 million in 2018, to a portfolio totaling \$32 million by the end of 2023.

Today, more than 600 EDs across the country now serve as treatment access hubs in their communities.

“You might only have this one interaction. And the question is, how powerful can you make it?”

— ANDREW HERRING, MD, BRIDGE



Addressing the Health of Refugee Children and Families

Due to growing conflict, violence and poverty, millions of children and adults from Afghanistan and Ukraine have been forced to flee their country, leaving behind everything that they have and know—their homes, country, families, and way of life. Many have also experienced the loss of loved ones.

Upon arriving in the United States, refugee families face additional challenges, such as a lack of economic resources, social networks, healthcare access, literacy, and knowledge of language and culture. Children also develop significantly within their first five years, and the challenging and traumatic experiences experienced by refugee children can cause great emotional, physical, social, and mental stress, impacting their development.

Zarmina started as a client with PHI's Refugee Family Support project after escaping challenging conditions in Afghanistan. "The conditions in Afghanistan got so bad, and I couldn't longer stay in my country because I was working in an international organization," she explains. "After we came to California, we started a new life; it was very different to me. When we came here, we had nothing, we didn't have any home things or any clothes. Then we met an American lady...She was working for one of the organizations as a volunteer. She helped us with a lot of things, she bought us home supplies, clothes and food. She was so kind. She did all the paperwork for me. Then slowly I registered in PHI as a client. The first time I talked to Esra [of PHI's Sehat Initiative], we talked for about an hour. She told me about a lot of resources."

The Sehat Initiative at the Public Health Institute provides humanitarian and health supports to newly arriving refugee families from Afghanistan and Ukraine to address their critical health and well-being needs. Founded by medical and public health experts from within the refugee community, The Sehat Initiative serves as a crucial bridge between refugees and their broader health and social environment.

“Even though I worked in Afghanistan for 16 years with people and society, I’m grateful for the job that I have now, because I never thought I would become that successful in 2 years.”

— ZARMINA, HEALTH EDUCATOR AND FORMER CLIENT, SEHAT INITIATIVE

The Refugee Family Support project doesn’t just provide services; it also encourages the active involvement of and forging partnerships with community members. The Refugee Family Support project shares trust and power with the Afghan refugee community by welcoming and encouraging individuals, like Zarmina, with refugee backgrounds to join the program, while honoring their lived experiences and cultural ties, and cultivating opportunities where they can contribute positively to the community.

“I started working as a volunteer at PHI” says Zarmina. “During my volunteer time, I’ve learned a lot of new things, even though I worked in Afghanistan for 16 years with people and society. I’m grateful for the job that I have now, because I never thought I would become that successful in 2 years.” Today, Zarmina is a paid Health Educator for the Sehat Initiative at the Public Health Institute, recognized for her commitment to advancing the quality of life for her community.

Sehat Initiative began its work in 2022, with a \$133,000 grant. In 2023, through a twenty-five million dollar award from the California Department of Social Services, Sehat has rapidly expanded its successful local model, partnering with community-based organizations across California to provide support services to newly arrived youth and families from Afghanistan and Ukraine.



Reducing the Impacts of Indoor Heat & Smoke

In California's Central Valley, agricultural workers are disproportionately exposed to wildfire smoke. Agricultural workers are typically on the front lines during climate change events such as wildfires, and the Central Valley's unique topography traps smoke from the fires that travel from Northern and Southern California, resulting in extremely high particulate matter concentrations. Structural limitations also make it challenging to control smoke exposure for farmworkers during work hours and during the hotter months, many low-income families in the Central Valley don't have air conditioning for their homes or rely on swamp coolers that don't sufficiently filter air.



The Filtration for Respiratory Exposures from Swamp Cooler Air (FRESSCA) project led by a team of researchers at PHI and community partners focuses on installing a prototype model of a filtration system in homes to collect data and help residents breathe cleaner air, especially during wildfires. FRESSCA aims to reduce wildfire smoke exposures and health risks among agricultural workers and other low-income families by designing and field testing an affordable and effective filtration system for swamp coolers.

The project evolved after community members in the Central Valley were exposed to a convergence of wildfire smoke from multiple fires in 2020, creating hazardous smoke conditions combined with high heat for many weeks. FRESSCA grew out of these concerns from farmworkers and involves community members and community partners. Collectively, the partners are working on testing an effective and affordable air filter that community members can install in their homes and which could protect thousands of low-income families from the adverse effects of heat and wildfire smoke.

