MOONSHOT MOMENT

Why health care is the climate champion we need right now

2021 ANNUAL REPORT
Contents

3 Health care’s moonshot moment
7 Moonshot momentum: Decarbonizing global health care
11 Healing the planet from the heartland
14 A nurse knows: Tapping trusted messengers as climate champions
17 Healing communities through food
20 Consolidated financial statements
21 Thank you
If health care were a country, it would be the **fifth-largest emitter** of greenhouse gas pollution in the world.
Health care’s moonshot moment
Gary Cohen, founder and president

Heatwaves across the Pacific Northwest and northern Europe. Record-setting wildfires from California to Siberia. “100-year floods” in Texas and Thailand, sometimes more than once in the same year. Even as our systems are pushed to their limits by COVID-19 – hospitals with days-long wait times, patients treated in hallways and parking garages – the climate crisis rages on. We must confront the truth.

We’re no longer preparing for massive climate disruption, we’re living with it, and too many of us are sickened and dying from it. And like the pandemic we continue to navigate, climate disruptions are force multipliers for the social, racial, and economic disparities that disfigure our society.

Despite all of this, we find ourselves at a moment of great possibility.

At long last, important decision-makers from national governments to private health systems are stepping away from “business as usual” and embracing the solutions and strategies that Health Care Without Harm has been developing, testing, and proving for more than 25 years. This annual report features only a few of the incredible efforts underway all over the world that we have the privilege of supporting and accelerating.

Health care’s climate footprint is 4.4% of net emissions globally; if the sector were a country, it would be the fifth-largest emitter of greenhouse gas pollution in the world. The U.S. health care sector is a major contributor, accounting for 27% of the global health care footprint and 8.5% of all U.S. emissions.

The industry’s outsized emissions are affecting public health, including 1 billion children who are at “extremely high risk” of experiencing the impacts of the climate crisis. When emergencies hit, they challenge the mandate for health care institutions to provide care for their communities and to be the “last buildings standing” as they confront more frequent and powerful natural disasters, alongside increased disease resulting from air and water pollution.

When health care systems lead on climate – by reducing reliance on fossil fuels, purchasing sustainable products, supporting local businesses and food producers, and building resilience into everything they do – they not only lower emissions and save money, they improve health outcomes and community well-being. These efforts create ripple effects powerful enough to change entire markets, all while improving equitable access to care in emergencies.
“My wife and I share Health Care Without Harm’s core belief that health care organizations become essential partners in the nation’s goal of reducing climate change, while improving health equity. We are pleased to support their program designed to help clinicians conduct and publish the research required to slow climate change and promote health equity.”

BLAIR SADLER  
Rady Children’s Hospital past president & CEO and Health Care Without Harm board member

We know how to do this.

After 25 years of designing, iterating, and implementing health care systems change efforts, we welcome the participation of public and private sector leaders eager to take on the challenge of the climate crisis and once and for all address structural inequities that treat some lives as more expendable than others.

Join me in discovering and celebrating the governments, institutions, clinicians, and advocates leading the way to ensure that the health care sector delivers on its promise to “do no harm.” As we look ahead to all we can achieve, we must work together toward the deeper healing that is needed.

Indian Member of Parliament Gaurav Gogoi introduced a private member bill on reforming the Air Act to include health impacts of air pollution in the law. He took information provided by Health Care Without Harm partner Doctors For Clean Air, particularly the picture of human lungs with black spots from air pollution, to make his point. (Lung Care Foundation/Doctors for Clean Air)
Health Care Without Harm has spent more than 25 years building partnerships in the health care sector in order to activate all of its assets – economic, political, moral, clinical, financial – in service of environmental health and justice.

Health Care Without Harm serves as a systems orchestrator for the global transformation of the health care sector to embrace environmental sustainability within core operations, and to leverage the trusted role and voice of clinicians to advocate for “first, do no harm.”

Health Care Without Harm was founded on the basis of environmental health and justice – that every person deserves the right to live in a healthy environment, while recognizing people of color and people who are economically disadvantaged are disproportionately impacted by environmental degradation, resulting in elevated rates of disease, poverty, and shorter life expectancy.

Program areas include climate impacts on health, sustainable procurement, medical waste, toxic materials and chemicals of concern, green building and energy, food, pharmaceuticals, climate-smart health care, transportation, water

Staff includes policy experts, campaigners, health care clinical experts, and other health and environmental practitioners

Regional teams in the United States, Europe, Southeast Asia, and Latin America, where staff work on community-based projects as well as national and global initiatives

Strategic partner organizations in Australia, Brazil, China, India, Nepal, South Africa as well as joint projects with the United Nations Development Programme and World Bank

Hospital membership network representing over 50,000 hospitals and health centers, treating hundreds of millions of patients in 74 countries

Along the way we have:

• Catalyzed the closure of more than 4,400 carcinogenic medical waste incinerators, helping hospitals save money, reuse materials, reprocess surgical supplies, and utilize alternative waste treatment strategies.

• Eliminated the market for mercury thermometers and blood pressure devices in the United States by 2008, and collaborated with the World Health Organization to win a global phase out of mercury measuring devices in 2013.

• Launched an initiative to leverage the food purchasing power of hospitals to support more local, sustainable, and equitable food purchasing, leading to $340 million in food purchasing going to local and sustainable sources.

• Created and deployed a strategy to “green operating rooms” adopted by hundreds of hospitals, saving money and valuable resources, and reducing pollution and waste.

• Designed and implemented a plan to pressure furniture manufacturers to eliminate toxic chemicals from furnishings sold to the health care sector.

• Built Practice Greenhealth, a membership network of 1,400 U.S. hospitals, including the Veterans Administration health system and the Army’s MedCom facilities.

• Launched the Health Care Climate Challenge, which has over 300 participating institutions representing more than 22,000 hospitals across 40 countries committing to effective climate action focused on resilience, decarbonization, and leadership.

• Designed and enlisted use of environmental criteria of hundreds of products in the health care sector by focusing on those without chemicals of concern that contribute to chronic disease, as well as lower-carbon products and sustainable food standards.
“The burning of fossil fuels is killing us. Climate change is the single biggest health threat facing humanity. While no one is safe from the health impacts of climate change, they are disproportionately felt by the most vulnerable and disadvantaged.”

WORLD HEALTH ORGANIZATION
COP26 Special Report on Climate Change and Health

Photo: Flooding in Kerala, India. In October 2021, the state was confronted with catastrophic rains, mudslides, and dozens of deaths. Just days later, Kerala’s health ministry joined the UN-backed, multi-sectoral program Race to Zero. Health Care Without Harm officially launched Race to Zero for the health sector in the lead up to COP26.
Moonshot momentum: Decarbonizing global health care

A watershed moment, decades in the making, has arrived.

After years of diligent effort, we find ourselves on the verge of the tipping point we have envisioned since the founding of Health Care Without Harm more than 25 years ago.

While the climate negotiations at COP26 in November 2021 didn’t take the bold action many were hoping for, there was one undeniable climate champion that emerged: health care. National governments, health systems, clinicians, and hospital leaders are joining forces to demonstrate that health care is ready to decarbonize and build climate resilience.

“Fifty-one countries have made the bold commitment to design and implement climate-smart health care systems. This is bending the trajectory of the entire sector toward decarbonization,” shared Josh Karliner, Health Care Without Harm’s international director of program and strategy.

It was no accident. At the climate talks in Glasgow, the UK COP Presidency, World Health Organization, and Health Care Without Harm came together to lead the COP26 Health Programme, a unique and timely collaboration that strategized for months to ensure that public health was a top priority.

• Government and private health care systems representing tens of thousands of hospitals around the world are moving toward zero emissions and becoming more climate-resilient.

• Health professionals and their organizations, representing millions of doctors and nurses, are calling for governments to make human health and equity central to all climate change mitigation and adaptation actions.

• Governments, health systems, and clinicians came together powerfully at COP26, the United Nations Climate Change Summit, to place health at the center of the global climate negotiations for the first time.

The COP26 Health Programme decarbonization commitments represent 38% of health care’s greenhouse gas emissions.
These health care commitments emerged as one of the most promising outcomes from the summit, reflected in the unprecedented commitments of national health systems and the unified message from clinicians – both in the streets and inside COP26 – that decarbonization of health care can and must happen immediately.

In the United States, members of the Health Care Climate Council – a Health Care Without Harm program with representation from 18 health systems in 41 states – are decarbonizing and preparing their facilities and communities for the impacts of climate change.

In addition to the leadership of these private and nonprofit health systems, for the first time, the U.S. Department of Health and Human Services is prioritizing climate action and health equity as fundamental to health care delivery, through a newly established Office of Climate Change and Health Equity. Major U.S. health systems are also making ambitious climate commitments and simultaneously addressing racial equity as a strategic priority. From improving the functioning of facilities and shifting to renewable energy, to supporting home weatherization programs and reducing environmental exposures in low-income housing, these efforts improve the well-being of patients and communities, while reducing the global emissions burden that U.S. health care represents.

“Our doctors and nurses are calling us every day to do no harm, and we are taking action to get to net-zero,” said Shelly Schenkler, CommonSpirit Health’s executive vice president and chief advocacy officer. CommonSpirit Health has committed to achieving net-zero greenhouse gas emissions by 2040 with an interim goal to cut operational emissions in half by 2030. With approximately 150,000 employees and 25,000 clinicians, CommonSpirit operates 139 hospitals and more than 1,000 care centers. CommonSpirit’s pledge helps address the climate crisis while delivering more sustainable, resilient, and climate-smart health care across the 21 states it serves.

These efforts are part of a global movement to treat the climate crisis as a public health crisis.

- **51 countries, including the U.S., joined the COP26 Health Programme**, which commits them to designing and implementing climate-resilient and low-carbon health care systems. The majority are developing countries, and 15 of them, including the United States, have committed to net-zero health care.

- **450 health professional organizations from around the world, representing over 45 million health care workers**, signed onto a letter to COP negotiators raising the alarm that the climate crisis is the greatest public health threat, as well as the greatest health opportunity, facing humanity.

- **54 health systems representing 14,000 hospitals in 21 countries joined Race to Zero**, committing to net-zero emissions by 2050 or earlier. This group will leverage billions of dollars in low-carbon products and technologies and accelerate learning and progress.
The commitments that came out of COP26, while promising, are only as good as their implementation. Health Care Without Harm’s Global Road Map for Health Care Decarbonization, a navigational tool for achieving zero emissions with climate resilience and health equity, offers a range of pathways for health systems to achieve the ambitious targets they’ve set. It won’t be easy, in particular for developing countries that are experiencing the impacts of climate change most acutely.

Working alongside health care leaders at all levels, in all sectors, and around the world, Health Care Without Harm will continue to collaborate with partners by identifying and driving best practices, defining goals and strategies, providing the tools and resources for implementation, designing the metrics to track progress, and continuing to build public momentum toward decarbonizing the health care sector.

As health systems make progress on the commitments made at COP26, and through Race to Zero, we look forward to supporting and celebrating with them, as we continue to honor our shared mandate to “do no harm.”

healthcareclimateaction.org

“It is impossible to have healthy people on a sick planet.”

SHWETA NARAYAN
Health Care Without Harm climate and health campaigner
“The health care decarbonization roadmap is a tremendously important tool for countries, for the UN, the private sector and everybody involved in the health sector to deliver improved health and sustainable health care. We are excited to be a part of this effort, while also working with Health Care Without Harm to decarbonize the health care supply chain as we move towards the 2030 agenda and Sustainable Development Goals so the health sector is playing its part to help solve the climate crisis.”

MANDEEP DHALIWAL
United Nations Development Programme director of HIV, Health and Development Group
Healing the planet from the heartland

“Is there a type of rocket fuel that doesn’t involve carbon emissions? That’s Health Care Without Harm,” joked Ian Hughes, sustainability manager at Rush University Medical Center in Chicago. “They turbocharged our efforts to improve sustainability across campus and better serve our patients and community.”

As the first full-time employee at Rush focused on sustainability, Hughes’ job started where every institution begins its journey: by measuring the current organizational footprint and then seeing how that compares with others. In some areas there was good progress underway, like the creation of an engaged and passionate green team and active implementation of energy efficiency measures. In others, like the use of renewable energy, there was room to grow.

Hughes’ work has been accelerated through deep partnership with Health Care Without Harm. He is constantly seeking and discovering new allies and champions across 10,000 staff at Rush’s main Chicago campus and schools of health systems management and nursing.

When Hughes learned about the Impact Purchasing Commitment (IPC), designed by the Healthcare Anchor Network in partnership with Health Care Without Harm and Practice Greenhealth, he knew Rush had to sign on. Fortunately, he found several allies in Rush’s anchor mission team and strategic sourcing managers, as well as executive sponsor support from Dr. David Ansell, senior vice president for community health equity. The IPC launched in June 2021 with the support of 12 health systems, committing them to using their purchasing power to help build healthy, equitable, and climate-resilient local economies. The commitment directs health care purchasing toward industries that decrease their carbon footprint, produce safer products and services, and grow economic opportunities for minority and women-owned businesses by at least $1 billion over five years.

“The IPC showcases how anchor institutions can catalyze change in their communities, and in doing so, send very specific market signals that can change the marketplace and supply chains,” said John Ullman, Health Care Without Harm’s safer chemicals and procurement director.

Rush is doing exactly that. To improve sustainable purchasing practices over the next five years, Rush has committed to increasing renewable energy procurement, increasing total food purchases that meet sustainability criteria, purchasing healthier furniture and furnishings without priority chemicals of concern, and switching to specific medical products that do not contain hazardous PVC and DEHP.

Rush is also participating in a complementary initiative to further advance their goals around sustainable food procurement thanks to great leadership from their director of food and nutrition services, Erica Block, and the support of their team. The Chicago Good Food Healthcare project, co-led by Health Care Without Harm,
Chicago Food Policy Action Council, and the Illinois Public Health Institute (IPHI) Alliance for Health Equity, is part of a national effort to develop the first cross-sector, values-based food purchasing standard for hospitals, universities, and municipalities. The standard will be released in fall 2022 led by the national Anchors in Action alliance members Center for Good Food Purchasing, Health Care Without Harm, and Real Food Challenge.

The Anchors in Action alliance represents more than 1,800 hospitals, 7,800 elementary and secondary schools, 57 public institutions in 23 cities, and more than 100 colleges and universities, with food service budgets in the hundreds of millions of dollars.

Jess Lynch, program director at the IPHI Alliance for Health Equity, sees these collective efforts accelerating broader transformation of the health care sector and grounding local transformation in the heartland. “There are so many complementary initiatives underway across Chicago and Cook County, from the mayor’s racial equity task force to federal policy led by Senator Durbin to reduce violence in health care settings,” says Lynch. “These all help to unite efforts across the region.”

The power of food to improve individual and community health is a major focus across initiatives, allowing health care providers to advance their missions while more holistically addressing the needs of their patients. Says Lynch, “I’m particularly hopeful knowing that shared purchasing goals that require institutions to decentralize and localize healthy food production will increase the capacity of historically under-resourced suppliers and producers while creating demand for national distributors to adapt to more sustainable sourcing – which will translate to healthier people.”

Emma Sirois, director of Health Care Without Harm’s Healthy Food in Health Care program, sees food as a unique connector and force multiplier. “Food is so often seen as this separate thing,” says Sirois. “People are finally recognizing that it’s an area where all aspects of health converge. Data are increasingly connecting patient and community wellness to plant-forward and climate-friendly diets as we simultaneously see the benefits of reinforcing and scaling historically and currently excluded and underinvested Black and brown producers and suppliers.”

Like in so many parts of the world, extreme heat, flooding, and unstable supply chains continue to challenge health care institutions across the Midwest. Collective purchasing commitments and collaboration can transform markets and serve institutional missions at the pace and urgency required.

“As a sector committed to ‘doing no harm,’ sustainability bonds us together,” said Hughes. “We’re all working on something bigger than just Chicago or the Great Lakes region – this work is global and requires collaboration. From the anesthesiologist passionate about shifting to greener gases in our ORs, to the nursing students eager for a curriculum that incorporates climate resilience, to the capital projects team striving to incorporate sustainable best practices into their work across campus, the Rush team is ready to make a positive impact. Health Care Without Harm has been developing best practices for decades, and I rely on them every day as an invaluable resource and a means of inspiration for those passionate supporters so we can get further, faster, together.”

practicegreenhealth.org
“Health care must lead at the intersection of climate, health, and equity. Health Care Without Harm has been at the forefront of the global health care sector taking on the climate crisis in service of its healing mission. Their work to leverage health care’s economic clout and embed health, sustainability, and equity into its DNA is both brilliant and critical to our collective future. We must continue to address these intertwined issues together, find creative and partnership-based solutions that raise all boats in this work, and bring all voices and expertise to the table.”

DON GIPS
Skoll Foundation CEO

Photo: The mouth of the Betsiboka River in Madagascar. Madagascar is currently experiencing the first-ever documented climate-related famine in the world, according to the UN World Food Programme.
A nurse knows: Tapping trusted messengers as climate champions

It started with styrofoam. In late 2019, Caitlin MacLaren, a transplant nurse at Jackson Memorial Hospital in Miami, organized with her labor union to ban its use. “It was in the cafeteria, used in the patient meals, everywhere,” says MacLaren.

With a background in community organizing, MacLaren was well suited to spark collective action on environmental sustainability at her hospital. She and her team – who represent all areas of health care, from nursing to social services to human resources – got connected to the Nurses Climate Challenge. This gave them access to a suite of resources, tools, and tactics designed by Health Care Without Harm and Alliance of Nurses for Healthy Environments (ANHE) to educate clinicians and health system administrators.

“The more we dug into the offerings from the Nurses Climate Challenge, the more we realized that there are so many facets of the health care delivery system where we could take action, like reducing waste and saving energy,” says MacLaren. “That kept us ambitious.”

Armed with talking points and confidence thanks to Nurses Climate Challenge tools, MacLaren and her team successfully lobbied Jackson Memorial Hospital’s leadership to join Practice Greenhealth. Now, the hospital is starting its baseline assessment and establishing goals for decreasing their environmental impact.

“I thought it would be a heavier ask,” shares MacLaren. “As an employee, it’s rare to get leadership to be responsive around spending money, but they were immediately supportive. The reaction was, ‘we should have done this a long time ago.’”

The Nurses Climate Challenge is a global initiative mobilizing nurses to educate 50,000 health professionals about the health impacts of climate change and advocate for climate-smart health care within their hospitals and nursing schools. Using the challenge’s comprehensive set of resources, nearly 1,800 Nurse Climate Champions have educated almost 34,000 health professionals throughout 49 U.S. states and 30 countries.
“The World Health Organization has declared climate change the number one threat to health in the 21st century,” says Beth Schenk, executive director for environmental stewardship at Providence, a health system with over 1,100 clinics and hospitals across six states. Schenk sits on the board of ANHE and the Nurses Climate Challenge steering committee and is a leader in supporting clinician advocacy for climate action.

“As a nurse myself and someone charged with improving the environmental stewardship of health care facilities, I see the incredible challenges that providers face as climate events create more patients and more difficult conditions for operation,” says Schenk. “And I’m optimistic we can turn things around.”

Nurses don’t just make good climate advocates, however; they’re positioned to connect the dots across environmental and social issues. Working at a safety-net hospital, MacLaren routinely sees unhoused patients – many still with their hospital ID bracelets on – living on the streets. These patients are fully exposed to heat and air pollution and constantly in and out of the emergency department. Climate-related extreme heat and air pollution worsen chronic illnesses like kidney disease and asthma.

To MacLaren, the connections are clear. She asks, “How many more people will we be treating because climate change exacerbates their illness? And how do you manage chronic illness without shelter?”

Nurses are powerful allies and advocates. Eighty-four percent of Americans consider nursing the most highly trusted profession for honesty and ethical standards. “Nurses feel strongly about our moral obligation to advocate for patients,” says MacLaren. “When you see something like climate change, which affects ourselves and all of our patients, it makes sense to be proactive and use our health care knowledge to plug into that space.”

And it’s working. The Nurses Climate Challenge was established in 2018 with an initial goal of educating 5,000 health professionals in the United States. According to Schenk, “We passed our original goal so fast, we had to increase it tenfold.”

Having educated nearly 34,000 health professionals, and expanding across Canada and Europe, the Nurses Climate Challenge is well on its way toward reaching its goal of 50,000 by the end of 2022. Recognizing the need to embed training before nursing students become clinicians, the challenge now offers a School of Nursing partnership to provide educational resources, create communities of practice for nurse educators, and activate students to become climate leaders.

In the meantime, MacLaren and her team can celebrate achieving their first goal: styrofoam has been phased out of Jackson Memorial’s cafeteria, one of the many small and important steps in decreasing the institution’s environmental impact. Thanks to their participation in the Nurses Climate Challenge and Practice Greenhealth, it’s just the beginning of Jackson Memorial’s journey to improving the health of their patients and the planet.

nursesclimatechallenge.org
“Food is one of the most fundamental tools for creating a healthy, thriving society – a goal that hospitals and their staff hold deeply. With the right investments hospitals can nourish patients and communities, while also creating menus and sourcing ingredients that prioritize sustainability on our farms, equity in our food businesses, and shared prosperity in our local communities.”

NOAH COHEN-CLINE
Rockefeller Foundation food initiative lead program officer

Photo: Regenerative agriculture can be a systemic solution that benefits human health, animal welfare, the environment, and farm profitability. Hospitals in the Practice Greenhealth and Health Care Without Harm network champion small-scale, diversified agriculture by procuring limited amounts of grass-fed meat, sourcing from regenerative farms, and prioritizing organic foods. (William Hook)
Healing communities through food

“T he first time around they rejected our application,” recalled Hilary Bass, Alameda County Sheriff’s Office senior program specialist. “It’s not always easy to advocate for people with a criminal record.”

Bass’ job is to test innovative projects and investments that reduce rates of recidivism and improve community safety. One such project is Dig Deep Farms, a social enterprise that is part of the nonprofit Deputy Sheriffs’ Activities League (DSAL), which Bass oversees. DSAL was established as a strategy to create new local jobs and internships that can lead to careers for formerly incarcerated people and others experiencing barriers to employment. Dig Deep Farms trains community members on how to grow, process, and distribute healthy food in California’s East Bay.

Bass had submitted a proposal to the local park district to utilize a unique, city-owned, 90-acre parcel of land certified for organic food production. Farming on these acres would expand Dig Deep’s operations and increase local food production while scaling to serve patient needs at federally-qualified health care centers.

Why does a law enforcement agency care about food security? According to Bass, “The Sheriff’s Office is involved because we believe that creating jobs for local residents and making people healthy are some of the strategies to increase public safety.”

The mural on the front of the Dig Deep Farms commercial kitchen facility in Alameda County, opened in 2019 (Lucia Sayre/Health Care Without Harm)
Dig Deep has delivered powerful results, providing healthy produce and meals to community members with diet-related health conditions as part of a broader “food as medicine” movement. Even though procurement commitments had already been made by local institutions like Kaiser Permanente, there weren’t enough producers and suppliers who met the criteria for local sourcing. If Dig Deep could access this new farmland, they could create more jobs while providing healthier food for patients at local clinics.

Feeling dispirited at the rejection, Bass turned to Health Care Without Harm for support.

Lucia Sayre, Health Care Without Harm’s director of regional innovation and resilience, was ready and able to help. Sayre nurtures a broad ecosystem of coordinated activities through Anchors in Resilient Communities (ARC). Building on critical philanthropic investments and leveraging the procurement power of institutional partners, the ARC model is a framework that continues to bear new fruit – and vegetables – by creating good jobs, growing healthy food, and improving the health of people across the Bay Area.

ARC grew out of a partnership between Health Care Without Harm and Emerald Cities Collaborative, a coalition of environmental, community, and labor organizations that partners with municipalities, universities, schools, and hospitals to create good jobs while decreasing climate impacts. In Sayre’s words, “we believe that strong, equitable, regional food systems can play a major role in building community health, wealth, and climate resilience.”

Sayre was instrumental in working with the Democracy Collaborative to assess the procurement needs of East Bay anchor institutions and the capacity that communities in the area could ramp up to meet some of those demands. The assessment led to support for designing and opening a 56,000 square-foot food processing facility as part of the ARC Regional Food System Initiative. Completed in 2021, the facility was built in response to the need for increased food production and distribution space by one of Kaiser Permanente’s vendors, Food Service Partners, to meet Kaiser Permanente’s patient meal contract for northern California. The ultimate goal is to add new institutional contracts, bring the center to full

Fabio Edwards, lead farmer at Dig Deep Farms, says he’s passionate about providing families with healthy, affordable food. (Dmitryi Khlynin/Dig Deep Farms)
capacity in the next two years, and transition the facility to community ownership in seven years. To date, the facility has created 100 well-paying union jobs in the East Bay.

When Sayre and the ARC team heard about the park district’s decision to reject Dig Deep’s application, they penned a powerful, persuasive letter to the commission inviting them to reconsider their decision, using their connections to the health care sector to advocate for the people served by Dig Deep’s multifaceted mission.

“Dig Deep Farms provides an innovative approach to healing our collective land and our collective community, and they’re critical to the future of our regional food system,” they wrote. “They’re building economic opportunities for Black and brown farmers and food workers and addressing issues of equity in farming, land stewardship, and community health head on. They’re exactly the kind of effort that the county should be supporting.”

The combined efforts of Health Care Without Harm and long-time local leaders, like Tara Marchant of Emerald Cities Collaborative and the late Alameda County Supervisor Wilma Chan, inspired the county to reconsider. In the end, Dig Deep Farms was awarded the contract for the 90 acres.

“That letter was exactly what needed to be said, from the right messenger,” says Bass. “When Health Care Without Harm invites institutions to use their financial might differently, that’s a critical role and action that changes outcomes in important ways.”

Sayre reflects the appreciation back to Bass and Dig Deep Farms. “They’re cherished partners to ARC because they deepen our impact within the community and make our outcomes more equitable and inclusive. In short, they make our work better.”

anchorsinresilientcommunities.org
# Health Care Without Harm consolidated financial statements

For the year ending December 31, 2020

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<th>Revenue</th>
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|                               |       |
| Total net assets beginning of the year | $4,547,965 |

| Ending net assets               | $7,477,373 |
To our donors

Transformational change takes all of us. Health Care Without Harm thanks the many individual donors who share our vision of elevating community voices, leveraging trusted messengers in the health care sector, and seeking to address fundamental change at the systems level to create greater resilience in the face of many urgent challenges. We are humbled by and deeply grateful for your support.

To our partners

Health Care Without Harm could not create transformational impact without our partners in the health care sector and on the ground in communities around the world. Systems change and greater resilience require a flourishing ecosystem of collaborators at all levels. From community-based organizations to brave clinicians to UN agencies to advocates across sectors, the success Health Care Without Harm has achieved is a testament to our partnerships. It is not possible to make change alone. Thank you for the work you do and for the opportunity to work together.

Thank you

Our foundation donors who request to stay anonymous

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Our foundation donors who request to stay anonymous
In these unprecedented times where global climate change, a devastating pandemic, and severe economic disruption have converged, Health Care Without Harm’s global network reaffirms our collective vision to create an ecologically sustainable, equitable, and healthy world.

We are committed to working with our health care colleagues to mobilize our sector’s ethical, economic, and political influence to realize this vision. We are committed to nurturing positive change that is sprouting forth everywhere in this time of crisis. We are committed to working in collaboration with other parts of society to foster a world where healthy people are living on a healthy planet, embracing principles of justice and equity.

noharm.org