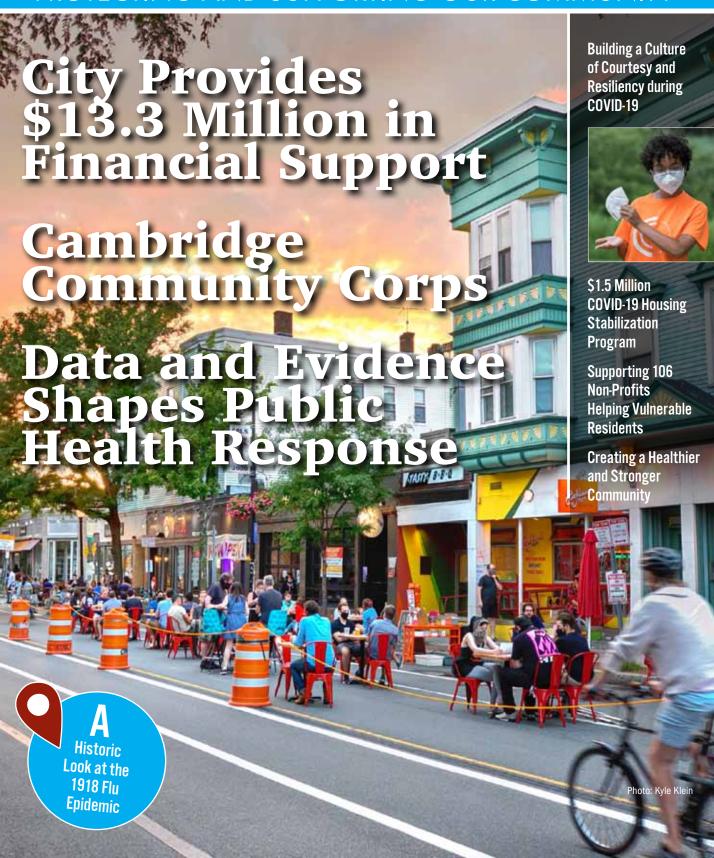
THE CAMBRIDGE | | | | |

PROTECTING AND SUPPORTING OUR COMMUNITY









Creating a Healthier and Stronger Community through the Cambridge Community Corps

This past July, the City Manager's Office in collaboration with the Cambridge Public Health Department (CPHD) launched the Cambridge Community Corps program.

The program was developed to help encourage Cambridge residents to adopt and keep practicing safe habits, such as wearing a mask and maintaining good hand hygiene, which will help slow the spread of COVID-19. Wearing bright orange shirts, Corps Members are out in the community in public parks, tot lots, basketball courts, and other open spaces.

Corps Members are locals from the community and their role is to be a friendly resource to their fellow neighbors. If residents have questions about COVID-19 and/or new safety protocols in public spaces, members can help field questions. They can also provide masks or hand sanitizer to neighbors in need.

"With information and policies about COVID-19 changing, it's useful to have someone available in the community that you can ask questions and talk to," said Deanna Wu, Partnerships for Success Project Coordinator at CPHD who manages the administrative side of the program.

However instead of enforcing rules, the Corps Members will be giving positive reinforcement on healthy behaviors and having friendly and helpful interactions with their neighbors.

"Our focus is not punitive, but rather to be helpful to people," said Nancy Rihan-Porter, Manager, Community Resilience and Preparedness at CPHD, who devised and implemented the program. "We want people to feel comfortable with approaching and interacting with the Corps Members. We are focusing on those who are compliant and supporting their efforts and encouraging that good behavior."

The program hopes to expand to help the community in other ways as well.

"The Cambridge Community Corps has been engaging the community by helping residents come together and support each other at such an uncertain time," said Claude Jacob, Chief Public Health Officer at CPHD, and who has similar experience directly working with communities as a former AmeriCorps volunteer member. "If this program is successful, we envision that the Corps could be deployed in the future to assist with climate change outreach, heat emergencies, and other efforts that build community resiliency."

Building community resiliency is the long-term goal for the program. A stronger community can withstand and recover from a disaster, public health emergency, or trauma more effectively than a community that is not resilient.

"If you have a close-knit community where people know and care about each other, these communities always come back stronger after an emergency," said Rihan-Porter. "Building close connections will help the community to not only bounce back, but move forward."

For more information about the program, please contact Nancy Rihan-Porter at nrihanporter@challiance.org.

Photos: Kyle Klein

City Manager's Message

hen Cambridge's first coronavirus (COVID-19) cases were announced on March 13, 2020, I did not imagine that a global pandemic would quickly consume us. During my more than 40 years with the City of Cambridge, I have not experienced a more challenging time for our city. I want to thank our residents for complying with the various state and local public health initiatives that have helped slow the spread of COVID-19 in our community. Our priority has been and will remain to prevent the loss of life.

Since March, we have used data and evidence to inform the development of the temporary emergency public health orders issued to mitigate the spread of the COVID-19 in Cambridge and support our most vulnerable residents. I wish to acknowledge the generosity that residents and businesses have demonstrated to those in need in our city.

I especially want to recognize Mayor Siddiqui for her partnership with me in leading the City's pandemic response. I also want to thank the City Council and City staff for their dedication to the City's response. Within the first five months of the pandemic, the City of Cambridge is providing over \$13.3 million in direct support to individuals and families, small businesses, and non-profits in Cambridge. We are working to prevent evictions, provide free COVID-19 testing, offer free in-home Internet to low-income public school families, support residents experiencing homelessness, increase access to shared streets that allow for physical distancing, and ensure safe options for voting. While City buildings closed to the public this spring, your City never stopped working.

As of August 18, over 7,000 COVID-19 tests have been completed in Cambridge through testing initiatives at long term care facilities, assisted living facilities, shelters and housing programs, CHA senior housing, and mobile community testing. Since the week of June 7th, the positivity rate has remained below 1% for all of Cambridge, in conjunction with increased testing availability.

I am incredibly proud of the Cambridge Public Health Department. They have demonstrated why they are nationally accredited.



City Manager Louis A. DePasquale

We owe our Chief Public Health Officer Claude Jacob and our Public Health Commissioner Dr. Assad Sayah an enormous amount of gratitude for their leadership. I also want to commend their teams for their dedication to the Cambridge community.

As always, you are welcome to send me your feedback or ideas by calling my office at 617-349-4300 or emailing me at citymanager@ Cambridgema.gov. My love and dedication to Cambridge have been an everyday part of my life, and I am committed to ensuring that Cambridge is the best possible place for our residents to live, work, and raise a family.











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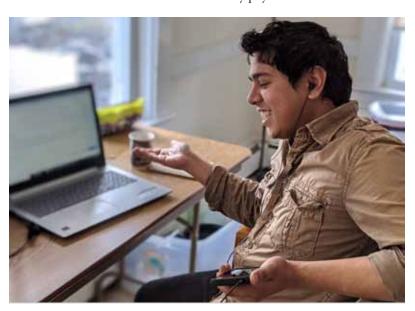
City & Community Support Provide Critical Financial Lifeline



ne of Cambridge's earliest actions in response to the emerging public health crisis was Mayor Sumbul Siddiqui and City Manager Louis A. DePasquale activating the Mayor's Disaster Relief Fund to provide emergency assistance to individuals and families in Cambridge experiencing extreme financial hardship. Since March, more than \$4.7 million in donations have been received from hundreds of generous residents and local corporations.

through this Fund. I am proud that the City continues to look at new approaches to support our community. I thank every donor who made this critical assistance possible."

As of mid-August, \$3.7 million in funds have been distributed so far – \$500,000 to support small business grants (see page 4) and over \$3.2 million to individuals and families. The initial round of funding was allocated for rent and utility payments or other household



About 59 City staff assisted Cambridge residents in applying for the Mayor's Disaster Relief Fund, offering support in seven different languages.

"Our goal was to provide relief to residents and small businesses who have been struggling due to the pandemic," said Mayor Sumbul Siddiqui. "To date, we have assisted over 1,500 individuals, families, and small businesses

needs. Funds were also provided for mortgage payments for homes purchased through the City's affordable homeownership programs. Checks were distributed from April through June. Each household was eligible to receive up to \$4,000.

Identifying Additional Housing Support

The City Administration knew this pandemic would go through many different phases and would have long-lasting effects in our community. Recognizing that the Mayor's Disaster Relief Fund could only be one part of a larger support package, the City looked for additional sources of funds to further help residents, but also support non-profits.

In July, City Manager Louis A. DePasquale announced the creation of a COVID-19 Housing Stabilization Program to provide short-term financial assistance to individuals and families in Cambridge who are experiencing housing instability due to the economic impact of the COVID-19 pandemic.

"This program is the City's next phase of financial assistance for housing-related needs," said City Manager Louis A. DePasquale. "I am incredibly proud that we can expand our efforts to help residents who need housing assistance. Through this new program, the City is providing \$1.5 million in direct support to help individuals and families who are facing housing instability due to the COVID-19 pandemic."

The program subsidizes eligible households whose rent, condominium fees, or cooperative carrying charges are more than 40% of their income at the time of application. Qualified applicants will receive a two-month subsidy for the amount by which their housing cost exceeds 40% of the household's current income.



CITY / COMMUNITY FINANCIAL SUPPORT AT A GLANCE

- \$4.7 Million Donations from Cambridge residents and corporations to the Mayor's Disaster Relief Fund.
- \$3.0 Million City funds used for COVID-19 related food, lodging, and shelter services
- \$3.1 Million Small business COVID-19 grants and loans through CARES Act, Community Development Block Grants, and Cambridge Redevelopment Authority.
- \$1.0 Million Grants provided by the City to nonprofits for COVID-19 related services to residents
- \$1.5 Million Direct City support provided through Housing Stabilization Program, funded by CARES Act and Community Preservation Act.

\$13.3 million to date in direct support to individuals and families, small businesses, and non-profits in Cambridge.

The program is administered jointly by the City Manager's Office through the Office of the Housing Liaison, the Department of Human Services Programs through the Multi-Service Center, and the Community Development Department. Residents can learn more at Cambridgema.gov/housingfund.

Supporting 106 Non-Profits to Help City's Vulnerable Residents

Cambridge's non-profit community provides basic needs and other critical supports for low-income, under-resourced, and vulnerable families and individuals at risk. To ensure these providers can give need support to our community, the City provided over \$1 Million in grants through the Community Benefits Stabilization Fund. 106 non-profit organizations (501c3) received \$10,000 grants to provide services to vulnerable Cambridge residents during the COVID-19 emergency and recovery.

HOUSING/RELIEF FUND ASSISTANCE AT A GLANCE

- 1,453 Recipients Assisted through Mayor's Disaster Relief Fund
- 1,000 Telephone inquiries answered
- 94% of applicants are Cambridge tenants
- 28% of calls directed to language lines for assistance

Applicants requested financial assistance for:

- 39% for rental assistance
- 6% for mortgage assistance
- 57% for utility payments
- 99% for household needs

Supporting Cambridge Small Businesses Impacted by COVID-19



n an extraordinary effort to provide much needed support to Cambridge small businesses financially impacted by the COVID-19 public health crisis, the City in collaboration with others, is distributing nearly \$3.6 Million.

"I am proud of the support the City is providing to Cambridge's small businesses, and I want to thank the community, Mayor, and City Council for supporting our small business community in this time of need," said City Manager Louis A. DePasquale. "We will continue to look at all internal and external resources available to help

about support for businesses and view the dashboard at Cambridgema.gov/covid-19/ business/assistance.

Qualifying businesses were eligible to receive grants of up to \$10,000 to assist with rent, salaries, utilities and cost of goods which will not have to be repaid.

Additional Business Support

The Cambridge Redevelopment Authority Zero-Interest Loan program, administered in cooperation with Cambridge Savings Bank, provided loans of up to \$15,000 to small businesses that

"I applied for help because unfortunately I did not have enough money in my business account to pay all the business bills while being closed. The City was so very helpful in so many ways because without their support I may not have been able to open. I am using the money to pay all bills to date and to get more supplies for the salon and

our small business ecosystem survive the economic impacts of this pandemic. Cambridge's small businesses are a vital part of our city."

In total, the City of Cambridge provided more than 468 grants and loans to assist Cambridge businesses. More than 70% of the recipients are women, minority, or women and minority owned businesses. The City has created a dashboard to help the public understand our small business assistance funding. Learn more



have qualified to participate in the Mayor's Disaster Relief Fund.

This money being distributed comes from three different programs, including \$500,000 from the Mayor's Disaster Relief Fund, \$1.5 Million from the Cambridge Redevelopment Authority Zero-Interest Loan program, and a combined \$1.6 Million from Community Development Block Grant Funds and Federal CARES Act Funds administered through the City of Cambridge Relief and Recovery Grant Programs.

The City is committed to identifying new resources to help businesses navigate this difficult time. Learn more at Cambridgema.gov/ covid19/business.

Cambridge Creates **Innovative Program to Feed** the Homeless and Support **Local Restaurants**

Through the City's Community Meals Program that started in March 2020 due to the emerging pandemic, the City has provided over 51,000 meals to our homeless community and provided over \$396,000 to local restaurants preparing these meals. This program is currently providing up to 2,835 meals a week to 14 shelters and programs. As of mid-August, 41 Cambridge restaurants have participated in this program so far and over 60 restaurants have signed up to participate. For more information on how to participate in this program, contact the City Manager's office at 617-349-4300.

Pick It Up, Cambridge Campaign and Outdoor Dining Expansion Supports Local Restaurants

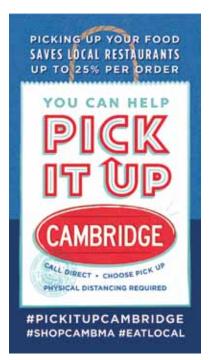


n an effort to support local businesses and their customers, the City of Cambridge instituted two new initiatives in partnership with organizations and restaurants across the city, including the Cambridge Office for Tourism, Cambridge Local First, Central Square Business Improvement District, East Cambridge Business Association, Harvard Square Business Association, and Kendall Square Association.

The first is the "Pick it Up, Cambridge" campaign, which encourages people ordering from restaurants to call directly and pick up if they are able to do so. Ordering via this method can save restaurants as much as 25% per order by ensuring that restaurants receive the full amount paid. Even selecting pick-up in delivery apps can cost restaurants a significant portion of the order through fees.

The City of Cambridge is supporting the campaign by providing educational materials for businesses and for the public, and by installing 15-minute pick-up zones in requested locations to allow for more short-term parking near businesses.

"As we have done throughout the COVID-19 pandemic, we will to continue to support our local businesses as much as we can, while protecting the health and welfare of our residents, visitors, and workforce."



The second initiative focuses on providing more space for outdoor dining to help support economic recovery. This work expands on the outdoor dining spaces that previously existed in Cambridge before COVID-19 and is made possible by increased flexibility in the State's rules relative to permitting outdoor dining areas. In most places, the outdoor dining is installed on the sidewalk or in the parking lane.

"We worked closely with restaurants to make flexible use of public space in order to expand opportunities for outdoor dining. As we have done throughout the COVID-19 pandemic, we will to continue to support our local businesses as much as we can, while protecting the health and

welfare of our residents, visitors, and workforce." said City Manager Louis A. DePasquale.

City Departments have collaborated with business associations in Central, Inman, and Harvard Squares to identify locations that would benefit from more significant changes, including the use of roadway space to create more space for outdoor dining.

The most significant change was made in Inman Square on Cambridge St from Springfield St to Prospect St where the street was converted to one-way for motor vehicle traffic: and a contraflow buffered bike lane and seven back-in angled parking spaces were installed. These changes allow restaurants on both sides of the street to provide outdoor dining, while also maintaining access for unloading to other businesses during the day time. Additionally, the Department of Public Works installed a floating bus stop to accommodate people riding the route 69 bus.

The City of Cambridge remains committed to helping local businesses while also supporting the health and safety of residents during these tough times. These changes to make space for outdoor dining are just one of the multiple approaches that the City is taking to ensure that our streets are used as efficiently as possible as we all work to stop the spread of COVID-19.

More information about these initiatives may be found at Cambridgema.gov/covid19/streets.

Photo: Kyle Klein



The U.S. entered the Great War on April 6, 1917. Thousands of Americans were trained and sent overseas, where they mixed with military personnel and civilians from Europe, Africa, and western Asia, creating an ideal environment for the spread of influenza. The first wave of the epidemic struck Europe in the spring of 1918. Demobilized servicemen carried the disease back to Boston, where the deadly second wave began in early September.

Hundreds of sailors in training at the Navy's Harvard Radio School were billeted in college halls and in temporary barracks on Cambridge Common; they mingled freely with locals and visited tourist spots. On September 8, alarmed by the high number of cases, Navy medical personnel placed the school under a 10-day quarantine. By then the epidemic had spread into civilian

Cambridge.

Mayor Edward Quinn vowed to turn the city into a "disease fighting machine." City schools were closed — "some 3,400 students were reported ill ... nearly a quarter of the total enrollment" (*Cambridge, Massachusetts, and the 1918-1919 Influenza Epidemic*, influenzaarchive. org). Church services and lodge meetings were banned and soda fountains, ice cream parlors, pool rooms, bowling alleys, billiard halls, and public auction rooms shuttered. Everyone wore masks.

There was a city-wide shortage of doctors, nurses, and hospital beds; cases multiplied too quickly to count. District and Visiting Nurses were dispatched wherever needed; residents "offered their automobiles and services as operators to get them about. During the next five weeks, from September 25, [the nurses] made 2,527 calls."



On September 27, the Board of Health declared a public emergency, which enabled them to commandeer the Merrill School and convert it, room by room, to an emergency hospital for the seriously ill. Initially, no "nurses or doctors could be found in the usual way and we had to depend on volunteers. It is greatly to the credit of many married women who had been trained in hospital, and to the schoolteachers unoccupied ... who cheerfully volunteered their services [and] gave up their homes to assist in this emergency. Others who could not do nursing volunteered for other duty [such as clerks, organizers, and supply managers] and the firemen also gave their days off to assist as the hospital."



Cambridge Visiting Nurses in front of their headquarters at 35 Bigelow Street

By early October every classroom was in use and every bed (more than 105) occupied. The Massachusetts State Guard erected a dozen tents in the school yard, and patients with pneumonia were moved there.

The Red Cross supplied beds, linens, towels, and surgical aprons and donated "all food which may be needed for patients and nurses and again all medicines and drugs." Navy physicians served with doctors from other parts of the country dispatched by the state health department.

Merrill Elementary School, 2 Fayette Street (present site of the Long fellow School)

Cambridge citizens rallied, including. Mr. J. Frank Facey, chair of the Committee on Public Safety, who neglected his own printing business to arrange transport for people and supplies, including food stuffs. The Cambridge Neighborhood House on Moore Street became a food distribution center, and Alice Moore, the head worker, supplied soups wherever needed.

Tuesday Came a More Rational
Celebration of the Event, With a
Celebration of the Event, With a
Big Parade in Which Thousands
Marched
If the inmates of the McLean, Danvers and Worcester asylums had beave
let loose they could not possibly have
let loose they could not possibly have
acted any more crazy than the general
acted any more crazy than the general
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counterment of the signing of the
nouncement of the signing of The
armistice terms, Monday morning. The
armistice terms, Monday morning. was
demonstration began early, and it was
one continuous performance, not ending until well into the night.

By mid-October, the peak of the epidemic had passed. The city lifted the ban on meetings and allowed shops to reopen.

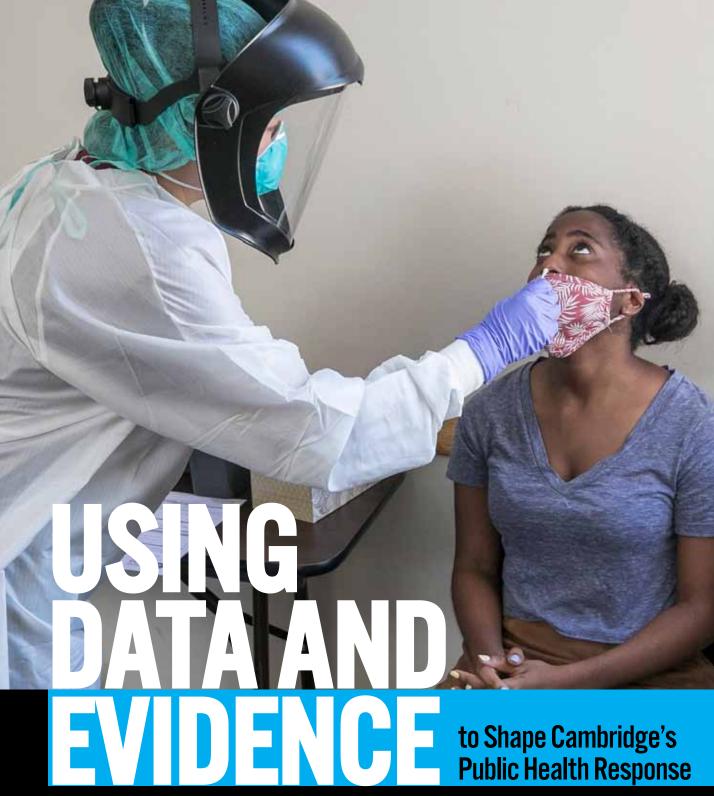
The outdoor camp at Merrill was dismantled, although the hospital remained open until November 6. Schools

resumed on October 28. From October 4 through the ended of 1918, 3,014 cases of influenza were reported; by the end of February 1919, Cambridge had lost 688 residents to influenza and pneumonia.

On November 11, 1918, the Great War came to an end.

The Cambridge Chronicle trumpeted: "Wild and Hilarious Scenes
Enacted on Monday on Receipt of News of the Signing of the Armistice."





pidemiology is the study of the spread of disease.
We try to figure out how disease outbreaks or illnesses are connected to people's daily experiences and behaviors. There's a classic story taught in almost every epidemiology class I've ever taken about early cholera epidemics. An early epidemiologist, John Snow, noticed in the 1830s that people in one London neighborhood were getting sick.



Q&A With Anna Kaplan, MPH

With data surrounding COVID-19 being in the spotlight, *The Cambridge Life* staff spoke with Anna Kaplan, MPH, to better understand the role that data plays in Cambridge's public health response. Anna is an epidemiologist with the Cambridge Public Health Department.

Thank you for talking with us. Can you start by telling us what epidemiology is?



That's a great question. Epidemiology is the study of the spread of disease. We try to figure out how disease outbreaks or illnesses are connected to people's daily experiences and behaviors. There's a classic story taught in almost every epidemiology class I've ever taken about early cholera epidemics. An early epidemiologist, John Snow, noticed in the 1830s that people in one London neighborhood were getting sick. After mapping all the houses where people were sick in the neighborhood, he realized that all the households had a connection to one particular water pump. After the water pump was closed, people stopped getting cholera in that neighborhood. Zooming back to the present moment, the building blocks of epidemiology rely on the same basic principles of who is getting sick and why.

As an epidemiologist, how do you fit into the Cambridge Public Health Department?

Currently, I manage and analyze all data connected to COVID-19. Some days I am investigating clusters, other days I am creating and interpreting maps and trend lines. All of the data and visualizations you see in Cambridge's COVID-19 webpage Cambridgema.gov/casecount, come from data that my team works on.

I am also involved in some of the nitty gritty work, like contact tracing, where we work to understand why clusters happen and how to prevent further spread. For example, I did a lot of work with Cambridge's long-term care facilities in the spring. We used the data we were seeing to understand how COVID-19 is spread and provide evidence-based guidance to prevent more people from getting sick. If we understand more about why and how this disease spreads, we can better implement interventions to prevent it. If you have received a call from one of the Public Health Nurses in Cambridge, you have helped contribute to this work!

How does your work help the City use data in its decision making?

Most people have now heard about the idea of the "curve" and how we need to flatten or bend it. An epidemiological curve ("epi curve") is one of the foundational tools in our field. Basically, you plot the number of new cases each day over time. If the slope is up (positive), that means spread of the disease is increasing, and if the slope is downward (negative), that means the spread of the disease is decreasing. This information then guides decision making in the City.

When we see the slope going up, we know we need to change strategies. And when we see the slope going back down, we know transmission is decreasing. We overlay Cambridge's epi curve with the dates specific interventions were introduced to help us understand potential impact. This includes the different reopening phases, major holidays, or when our face coverings order went into place.

Because COVID-19's incubation period is about 14 days, we can often see the impact within about two weeks after an important date or policy change. Depending on the behavior of our residents (or visitors) in the City, we may see more or fewer cases. As an example, after Memorial Day and July 4th, we saw a small bump in cases, likely from people socializing in person more. But when the mask order went into effect, we saw cases go down.

Can you give us an example of how data, like what is on the COVID-19 Data Center, have been used in the City's efforts to fight the virus?

Much of the data that we are using internally for decision making is also being shared with the public via Cambridge's COVID-19 Data Center Cambridgema.gov/casecount. For example, the





neighborhood-based data helped us decide where to locate our mobile testing sites. The City's community mobile testing program started in The Port because people who live there were being disproportionately impacted by COVID-19. Highquality data and mapping helped support advocacy at the neighborhood level to provide testing locations where they were needed. Providing testing in high transmission areas helps us stop the spread, by identifying low-symptom or asymptomatic cases and supporting them to isolate and their contacts to quarantine.

Where do you get your data from?

The way we get data as a city health department is through the state database called the Massachusetts Virtual Epidemiologic Network (MAVEN). All labs in Massachusetts report positive COVID-19 results to the state, and anyone with a Cambridge address gets filtered down to us. Our department was one of the earliest adopters of MAVEN in the state. Sometimes you will see the case count go down by one or two cases from the reported number from the day prior, because we find out during the contact tracing process that someone actually lives in another community. These case records contain lots of information, including all linked cases and contacts, demographic data, and clinical data.

Why doesn't the City release more data or information about who is infected?

There's a challenging balance between privacy and data transparency. We are very deliberate in the data that we release. We want our decision making factors to be transparent, so that the public understands why the City introduces or rolls back public health regulations. And while data transparency is important, the need to keep residents' personal health information private is a critical responsibility of the department. Also, we have gained more information over time, which allows us to improve the information we share with the public!

Why should the public be interested in the data being released?

Something I have learned a lot about over the course of the last few months is that data on its own is not enough to guide us through COVID-19. We need clear data visualizations paired with qualitative data on people's experiences, so people grasp what is going on in the community to understand and advocate for additional policy changes. Data can help ground our personal decisions in facts and help us not be inadvertently persuaded by misinformation or the latest rumor about the virus. The City, by having a transparent data communication strategy, can help

our residents understand what is happening in our community, help people assess their own risk, and help residents make choices that will positively impact their lives and keep their families and community safe.

What has the experience of doing your work during a pandemic been like for you?

During all of this, we've felt pretty reactive and like we're moving at high speed, but public health at its core is all about prevention. One of the things that's key to public health is that we consider how many parts of people's lives impact their health, and intersect with infectious disease like the coronavirus. For example, climate change and racism are huge public health issues. So I'm hopeful that people with power are learning from this pandemic, and will prioritize public health in the future.

On a personal note, my parents, friends, and family now have a much stronger understanding of what I do. They're like, "Oh, epidemiology, like those people I've seen on the news...I get it now!"

City Seizes Opportunity to Provide Testing to Residents



he City's first COVID-19 cases were announced on March 13. All three cases were linked to the Biogen conference in Boston, one of several "superspreader" events that helped fuel the early spread of COVID-19 in the U.S.

As new cases in Cambridge ticked upward, public health and city officials were especially concerned about COVID-19 transmission in skilled nursing and long-term care facilities, given that older adults are at greater risk from disease and death due to COVID-19. The Cambridge Public Health Department (CPHD) seized an opportunity to provide early intervention and support.

Rapid Testing Pilot is Launched

On April 9, in partnership with the City, The Broad Institute of Harvard and MIT, and Pro EMS—and funded by the City—Cambridge became the first city in the state to provide onsite testing to every resident in all skilled nursing and assisted living facilities, regardless of symptoms. The first round of testing in Cambridge's seven facilities revealed that 163 residents (29% of those tested) and 65 staff (13% of those tested) were infected. Residents who tested positive or were symptomatic were separated from those who were well. In total, the team conducted three rounds of testing in these facilities. In the third round of testing, 10% of residents tested positive, many of whom had been identified in prior rounds, and 5% of staff tested positive.

This strong partnership with the City, The Broad Institute, and Pro EMS has continued to provide testing throughout Cambridge to this very day.

Surveillance testing, which is what this pilot project undertook, is a different approach from how most COVID-19 testing is currently being conducted in the United States. Under the surveillance approach, everyone in a given population—in this case, those who live and work in skilled nursing facilities and assisted living facilities—is tested for COVID-19, regardless of whether they have symptoms or feel ill, or have an exposure to a confirmed case. It is equally important to test people who are asymptomatic in stemming the spread of the pandemic.

Surveillance testing provides a more accurate picture of the true infection rate at a given point in time. The goal of rapid identification of positive cases is to break the chain of transmission in these facilities and ultimately reduce the number of people who become infected.

Vulnerable Populations...and Testing Expands throughout Cambridge

CPHD cannot overstate the importance of testing as one of many evidence-based tools to effectively mitigate the spread of COVID-19. Testing allows us to identify who is infected (e.g., age, gender, race); where the infection is located (e.g., neighborhood); and how great the spread. In turn, we mitigate community spread by isolating those who test positive; quarantining those who come into contact with a positive case; and shutting down/restricting locales that are at greater risk for—or are already deemed—a cluster.

In late April, during the peak of the COVID-19 epidemic in Massachusetts, CPHD epidemiology and public health nursing team tracked and analyzed case data. Public health nurses and community health workers made calls to cases to support isolation and quarantine, as well as to fill in missing demographic information, and an epidemiologist created charts, tables, and maps that showed infections by age, gender, race, ethnicity, neighborhood, and zip code.

The data told a sobering story: When the state was in lockdown, people of color in Cambridge, particularly Black and multiracial residents, were being infected with the virus at a much higher rate than White residents. Certain neighborhoods had much higher rates of COVID-19 infection than others.

The data spurred City Manager Louis A. DePasquale to recommend an appropriation to the City Council to provide free, universal testing in the majority non-White neighborhoods. These City-funded mobile testing sites were open to all residents.

On May 19, mobile testing was launched in The Port neighborhood and in all Cambridge Housing Authority (CHA) senior buildings, expanding the City's mobile testing capabilities among more vulnerable populations. Since that first day, mobile testing has expanded to additional neighborhoods.

It is hoped that expanded testing will help prevent further spread and provide an improved understanding of the prevalence of COVID-19 in Cambridge, especially in neighborhoods being disproportionately impacted.

Cambridge's Disease Detectives Aim to Break the Chain of COVID-19 Transmission



undreds of Cambridge residents have learned they were infected with COVID-19 or had been exposed to the new coronavirus after getting a call from public health nurses from the Cambridge Public Health Department (CPHD). Thousands more have received calls from CPHD staff informing them of negative test results.

The phone calls are part of a massive behind-the-scenes effort to stop the chain of transmission of COVID-19.

The public health nurses lead a team that reaches out to every infected resident—also known as a case—providing them with support and guidance on how to isolate. They also try to identify and

connect with everyone the person was in close contact with while infectious, a process known as contact tracing. The team checks in frequently with cases and contacts in isolation or quarantine, making sure they have enough food and other necessities, are monitoring their health, and are taking precautions to protect others in their household.

"The vast majority of residents have conscientiously and often cheerfully assisted us in this communicable disease investigation work during the COVID-19 pandemic," said Shamsher Bam, RN, interim lead of the department's public health nursing program.

The department's public health nurses have extensive experience in case investigation and contact tracing, a specialized field that requires a mix of medical knowledge, detective skills, cultural sensitivity, and the ability to listen to and gain trust of people who may be reluctant to cooperate.

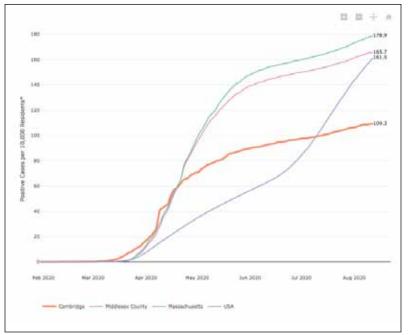
When COVID-19 cases surged in April, the department recruited CPHD school nurses, recently retired CPHD public health nurses, and outside staff from the Commonwealth's Community Tracing Collaborative to join the team.

The Community Tracing Collaborative **(CTC)** is assigned the more straightforward cases, while the health department handles the complex cases, which include residents in long-term care facilities, hospitalized patients, infected health care workers, patients over 70, and patients believed to be infected through a cluster event. By early August, the two teams had reached out to over 1,200 positive cases, which was split among CPHD (around 75% of cases) and the CTC (around 25% of cases). CPHD identified about 470 contacts with Cambridge residents, and the CTC identified about 250 contacts with

Top Photo: "The Community Tracing Collaborative"

Cambridge addresses.

"The vast majority of residents have conscientiously and often cheerfully assisted us in this communicable disease investigation work during the COVID-19 pandemic."





Fall is Flu Shot Season

Now more than ever, it is critically important to get a flu shot (also called seasonal flu vaccine). Flu season begins in the late fall and goes through winter, peaking between the months of December and February, but people can still get the flu as late as May.

The Cambridge Public Health Department (CPHD) strongly encourages residents to get a flu vaccine this fall in addition to maintaining healthy, safe habits of wearing a face covering, handwashing, and practicing physical distancing as a way to slow the spread of both the flu and COVID-19. Practicing these habits and getting a flu shot will help keep

each of us, our loved ones, and our neighbors healthy, especially those who are at higher risk for both the flu and COVID-19, and who may have chronic health conditions. Preventing the flu translates to fewer sick days and fewer flu-related medical visits or hospitalizations, ensuring healthcare centers and hospitals do not become overwhelmed during the pandemic and the flu season. Getting the flu vaccine also helps support healthcare and other frontline champions who have been working hard during COVID-19.

Cambridge residents can get a free flu shot at one of the flu clinics run by CPHD. Adults and children six months or older are highly encouraged to get a seasonal flu vaccine. To meet the expected higher demand, CPHD has ramped up its efforts to vaccinate more residents than in previous years while implementing procedures to help reduce the risk of gettingtransmitting—COVID-19. There will be new guidelines and recommendations for this year's flu shot in order to support health and safety measures.

To learn more about this year's flu clinics and how to get a free flu vaccine, visit the City of Cambridge's website at Cambridgema.gov



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Photos: Kyle Klein



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COVID-19 Resources and Useful Numbers

Housing Resource Line: Information and referral services for housing questions and concerns. Call 617-349-9777 or visit Cambridgema.gov/covid19/housing.

Cambridge Commission for Persons with Disabilities: 617-349-4692, ccpd@Cambridgema.gov, Cambridgema.gov/ covid19/pwdresources.

Support for Seniors: Contact the Council on Aging at 617-349-6220 or visit Cambridgema.gov/covid19/seniors.

Find It Cambridge: Your online resource for activities, programs, and services in Cambridge. Call 617-686-2998 or visit finditcambridge.org

COVID-19 Testing for Cambridge Residents: Appointments required. Call 617-665-2928. Call Center is open Monday - Friday, 8:30 a.m. - 4 p.m.

General City Inquiries: Call 617-349-4000 or email 311@Cambridgema.gov

Massachusetts State COVID-19 Information Line: Call 2-1-1.

Stay Informed. Learn more at: Cambridgema.gov/COVID19.