


HARVARD PUBLIC HEALTH

Winter 2015



A New
Name
for Our
New
Century

**HARVARD T.H. CHAN
SCHOOL OF PUBLIC HEALTH**



4 A Gift Unsolicited, Unrestricted, and Unexpected

FEATURES

3 Dean's Message

Harvard's Public Health Moment

The act of generosity that renamed the School bespeaks a powerful trust on the part of Gerald Chan, his brother Ronnie Chan, and the Chan family.



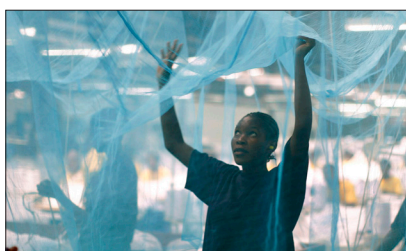
16 The Ebola Response

When Ebola struck West Africa, Harvard Chan faculty and alumni assisted on many fronts: on the ground, in the lab, on the humanitarian front, and in the political sphere.



24 Living Green

For Anthony Cortese, SD '76, environmental conditions are inseparable from the public's health.



28 Public Healthonomics

Assistant Professor Jessica Cohen brings a behavioral economics perspective to public health in Africa.

34 A Bold Pathway in Life—and Biology

For Anthony Covarrubias, PhD '15, the quest to cure metabolic diseases is personal.

DEPARTMENTS



10 2014 Alumni Awards

12 Frontlines

15 Off the Cuff

38 HARVARD T.H. CHAN SCHOOL OF PUBLIC HEALTH ANNUAL GIFT REPORT 2014



Gift Report

40 More about the Naming Gift

42 Events

46 Individuals

52 Institutional Partnerships

55 Tribute Gifts

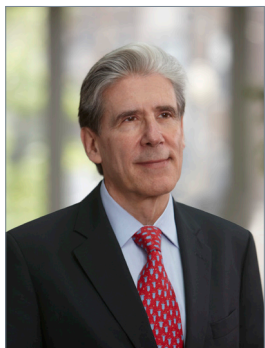
56 1913 Society

59 Named Financial Aid Funds

61 Faculty, Staff, and Faculty Emeriti

62 Volunteers

65 Financial Highlights



Harvard's Public Health Moment

The act of generosity that renamed our School this past September is an astonishingly bold gesture. The unsolicited \$350 million endowment—spearheaded by our distinguished alumnus, Gerald Chan, SM '75, SD '79, from his family's Morningside Foundation—is the largest gift in the history of Harvard University and one of the largest ever in the history of higher education.

This unrestricted endowment gift represents an “annuity in perpetuity,” because the School will benefit from income generated by investing the gift but cannot spend the principal itself. Beyond its financial value, it also bespeaks a powerful trust on the part of Gerald Chan, his brother Ronnie, and the rest of the Chan family. The gift was secured with

dedicated to slowing and reversing four global health threats: old and new pandemics, harmful physical and social environments, poverty and humanitarian crises, and failing health systems.

The Morningside Foundation's gift will directly support the education of new generations of global health leaders. It will boost student aid and enable our School to launch a loan forgiveness pilot program for graduates who go on to work in underserved communities in the U.S. or in developing countries. It will underwrite junior faculty sabbaticals and fund their innovative, untested ideas.

The gift will create a fund to encourage pathbreaking research ideas generated by both faculty and students. It

“With The Morningside Foundation gift, we have a chance to dream bigger than we ever thought possible.”

the crucial help of the Harvard Corporation—in particular, the stewardship of Senior Fellow William F. Lee and Fellow Lawrence S. Bacow. By requiring that the naming gift be unrestricted endowment, the Corporation has strengthened the School's long-term financial sustainability.

Among other things, that financial stability means that other donors to the School—including those making current-use and restricted gifts—can rely on a strong institutional platform to achieve their objectives. Indeed, over the past year, hundreds of donors have made similar statements of trust, giving a record-breaking \$103.3 million in the fiscal year that ended on June 30, 2014.

With The Morningside Foundation gift, we have a chance to dream bigger than we ever thought possible. This gift doesn't mean that our fundraising needs are over, but it supercharges our efforts. As Harvard University president Drew Gilpin Faust noted at the announcement ceremony, “The Chan family's generosity sends a signal to the world: This is the public health moment.”

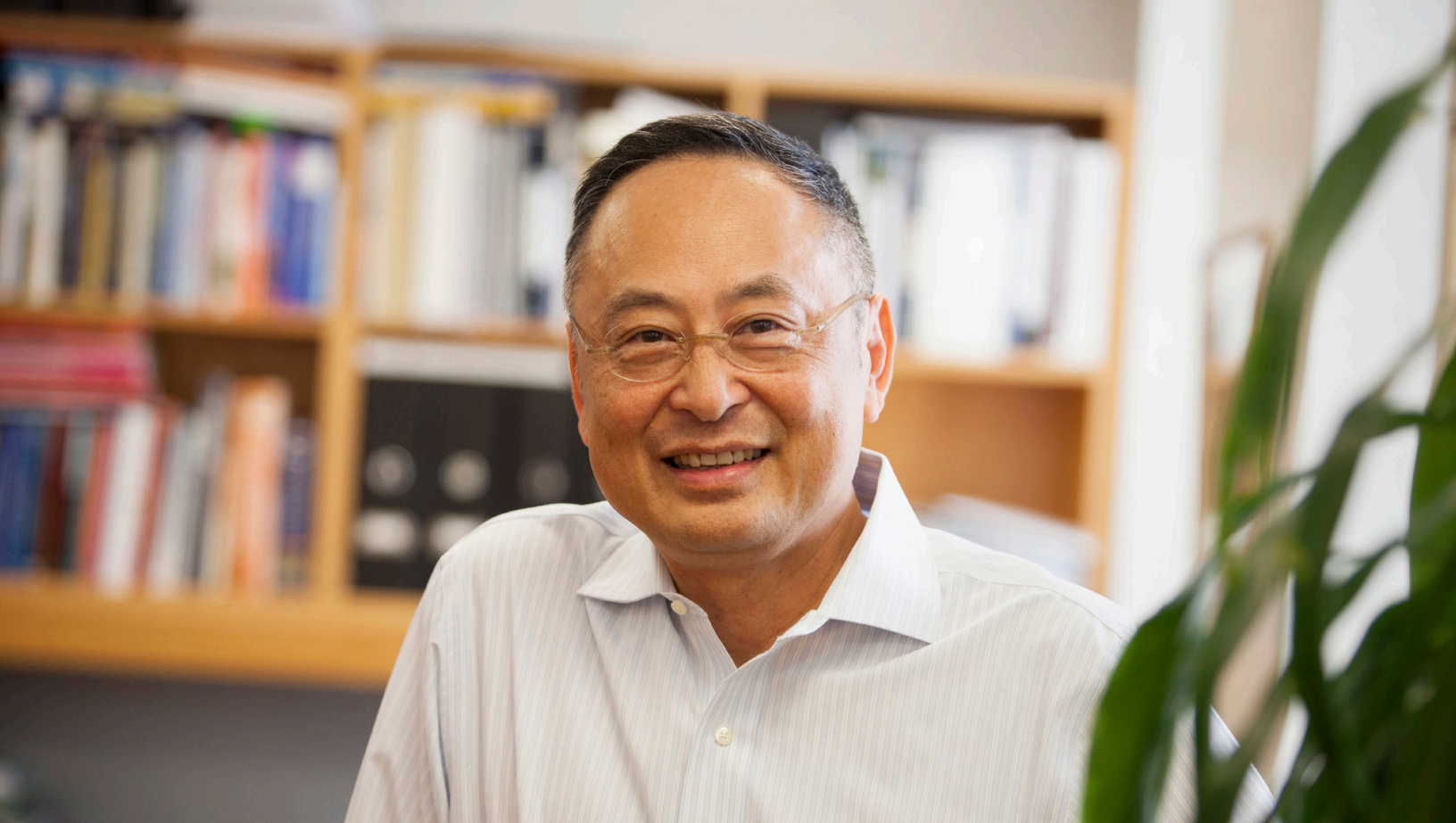
The cumulative power of gifts we will receive now and in the future will bolster the work of faculty and students

will make possible long-deferred building renovations and expanded funding for big data. And it will buffer the School against future financial crises.

In acknowledgment of the magnitude and impact of The Morningside Foundation's gift, the School has been renamed the Harvard T.H. Chan School of Public Health—honoring the brothers' late father, T.H. Chan. He believed profoundly in the power of education and science to improve people's lives—as do we. Our work will move forward with renewed vigor, sustained by the gratitude and trust and unbounded generosity of one of our own.

Julio Frenk
Dean of the Faculty and
T & G Angelopoulos Professor of Public Health
and International Development,
Harvard T.H. Chan School of Public Health

Learn more about the gift on page 40; hear in the donor's own words why the Chan family made this gift on page 4.



A Gift Unsolicited, Unrestricted, and Unexpected

Gerald L. Chan, SM '75, SD '79

Address to the Alumni of Harvard School of Public Health

October 25, 2014

On September 8, 2014, Harvard University announced that the Chan family and its Morningside Foundation will donate \$350 million to Harvard School of Public Health—the largest gift in the University's 378-year history. The School will be renamed the Harvard T.H. Chan School of Public Health, in recognition of the gift. During a speech at the School's Alumni Weekend in October, Gerald Chan, SM '75, SD '79, answered the questions: Why public health? Why now? And why Harvard?

Stephanie Mitchell / Harvard Staff

The gift that my family just gave to the Harvard School of Public Health, notwithstanding it being the largest gift in the history of Harvard University, was unsolicited, unrestricted, and unexpected—unsolicited by Harvard, unrestricted by the donor and unexpected by the public.

Harvard never came to me to solicit a gift. The best philanthropic giving comes from the heart, oftentimes a grateful heart. This gift is no exception. I am grateful to this University for the education that I received here. That education changed my life. I am also grateful to my late father who instilled in me the values by which I have lived my life. This gift is a way of memorializing my father and the values that he stood for.

TRIBUTE TO A FATHER

A little story serves to illustrate the kind of person my father was. This is a story I only learned about last month after the gift was announced. When my father came to Boston to visit me in 1975, he learned that I had received a fellowship for

graduates of this School to enter into public service careers. He talked about graduates of this School from developing countries who, rather than returning to their home country to work in public health, remain in this country to practice medicine which is financially far more lucrative.

An op-ed piece in *The Wall Street Journal* last week estimated that in Liberia where the Ebola epidemic is raging, there are 120 physicians serving a population of four million people. The database of the American Medical Association shows that there are 56 Liberia-trained physicians who have qualified and are practicing medicine in America. Using the estimate that about half of the foreign graduates who take the medical licensing examination in this country pass, the estimate is that there are about two-thirds as many Liberia-trained medical graduates in this country as there are working in their home country.

It is my hope that this gift to the School of Public Health will be a tool for stimulating the spirit of service amongst our graduates and a financial enablement for them to choose careers in public service.

“Harvard never came to me to solicit a gift. The best philanthropic giving comes from the heart, oftentimes a grateful heart.”



my doctoral studies at the School of Public Health. On his way back to Hong Kong from Boston, he stopped in San Francisco to visit his old friend Mr S.P. Wong. For the few days that he stayed with Mr. Wong, he could not stop talking about my fellowship. On the one hand, he was proud that I had received a fellowship which in his mind was an honorific scholarship. On the other hand, he was profoundly disturbed that my taking the fellowship meant that I had displaced someone who, without the support of the fellowship, would not have the means to attend this School.

He kept saying to his friend, “We have the means to pay tuition, why is Gerald taking the scholarship away from someone else?” That inner struggle between feeling proud of his son on the one hand and on the other hand feeling disturbed that social justice had been abrogated is a poignant portrait of my father.

SPIRIT OF SERVICE

I am so pleased that Dean Frenk has announced that part of this gift will be used for scholarships and student loan forgiveness programs designed to make it possible for

AN UNRESTRICTED GIFT

This gift is also unrestricted. The full amount of the donation goes into the endowment of the School and the use of its proceeds is entirely at the discretion of the dean. The unrestricted nature of this gift is a statement of faith in the current leadership of this School and of this University. It is also a statement of faith in the institution of this University. The leadership of any organization will change over time; it is its governance that will ensure that the institution remains true to its mission.

In talking about this gift in recent weeks, Dean Frenk often concluded his talk by quoting a verse from the Bible—the Gospel of Luke, chapter 21, verse 48, “From everyone who has been given much, much will be demanded; and from the one who has been entrusted with much, much more will be asked.” Dean Frenk speaks of this gift as resources entrusted to the School and that it is the solemn responsibility of the School’s leadership to put these resources to good use. It is in those who see themselves as being accountable that one can have faith.

continued

While it is common for donors to specify use of the donation for something dear to their heart, and I celebrate this because, as I said earlier, the best philanthropy comes from the heart, in this instance, both the Harvard Corporation and I saw fit that this gift should be unrestricted. Having been involved with many universities in various capacities, I worry that highly prescriptive donations can have the unintended consequence of balkanizing the university into a collection of special interests. I also worry that highly prescriptive donations will result in the university's resource allocation becoming a reflection of the interests of the donor base.

Some years ago, I attended a ceremony celebrating the establishment of chaired professorships in a university in Hong Kong. Of the twenty-some chairs established that year, most were established to support law, business, and medicine. These are schools within the university which are more likely to produce graduates who are financially capable of donating to the university later in their lives after they have become professionally successful. In that ceremony, there were also two chairs established for Buddhist studies. The only chair that was established in the natural or life sciences was the Morningside Professorship in Chemical Biology which my family endowed. That distribution of disciplines receiving support was an expression of the interests and



School, it would not have been a surprise. But the School of Public Health? That was totally unexpected.

After the gift was announced, one response I got from some people was, “What is public health?” as if it were the first time they heard of public health. Some others thought that the School of Public Health was the same as the Medical School. Why is it that public health is so poorly understood and so scarcely recognized by the general public?

The first reason has to do with the different objects of



“I worry that highly prescriptive donations can have the unintended consequence of balkanizing the university into a collection of special interests.”

sensibilities of the Hong Kong moneyed crowd. I question whether that distribution of resources best served the interest of the university, its local community, or humanity at large.

I was at a function here in the School last week. A gentleman was kind to come and congratulate me on the gift. He then proceeded to ask me what I plan to do to monitor the gift. I said, “Nothing.” He pressed me further and kept pressing me. “Surely you will monitor how the money will be spent.” My answers remained that it is the dean who runs the School, not me. Designated gifts can strengthen specific parts of the School; unrestricted gifts are designed to strengthen the School as a whole. My intention with this gift is the latter.

A SURPRISE

Finally, I want to talk about the unexpectedness of this gift. If the largest gift in the 378-year history of Harvard University had been given to the Business School or the Medical

the two disciplines of medicine and public health. The object of the practice of medicine is the individual, a patient. The object of the practice of public health is the public at large. If I may be facetious, medicine is about private health, public health is about health of the public.

INDIVIDUALITY AND INTERDEPENDENCE

We are all born as individuals, but we are also born into communities. One of the hallmarks of modernity is the recognition of the individual with his own identity and rights. A person is no longer defined only as in relation to a group. His thoughts, words, and actions can be his and his alone. This possibility of individual personhood has unleashed so much of the human potential that was locked up for centuries.

But it is also true that as much as individuality has flourished in modernity, individuals have never been more interconnected and interdependent. Public concerns with



Left, Harvard University president Drew Gilpin Faust addresses the audience at the September 8, 2014, announcement of the \$350 million endowment from The Morningside Foundation.

Opposite, Ronnie Chan (left), brother of Gerald Chan and co-founder of Morningside, speaks with William Hsiao, the K.T. Li Research Professor of Economics in the School of Public Health Departments of Health Policy and Management and of Global Health and Population.

privacy issues in recent years are but a minor expression of how this interconnectivity has eroded the autonomy of the individual. When it comes to health, it is no different. The Ebola epidemic today reminds us how interconnected humanity is. One country's problem can quickly become another country's problem.

As to the air that we breathe, the water that we drink, the food that we eat, we are involuntarily impacted by the actions of so many people in all parts of the world. While modernity has allowed individuality to flourish, modernity has also subsumed the individual to the public. The hand which gives is the same hand that takes away. It is no longer feasible that human health be addressed only at the level of the individual. Our highly connected world today makes it imperative that human health also be addressed at the level of the population as a whole.

To be sure, the individual patient being the object of curative medicine means that the benefits of medicine can

In contrast, the ultimate success of public health work is not that something happened, but that nothing happened. One does not read in the newspaper that, on this day, no epidemic broke out. That would not be newsworthy. Our society is conditioned by the media to celebrate spectacular events, not the absence of events. The only time I know of that the media celebrated the absence of news was on April 18, 1930. At the 6:30 p.m. news program of the BBC, the news presenter announced that there was no news that day and piano music was played for the remainder of the program.

LIMITS OF MEDICINE

As impressive as our modern medical enterprise is, we in America are acutely aware that it is pushing up against formidable limits. Such limits impose diminishing marginal returns and, in some cases, even negative marginal returns on incremental investments. I am sure you have seen the plot of life expectancy versus per capita health care expenditure

“While we do celebrate the spectacular advances in medicine which bring us cures that would have seemed miraculous to earlier generations, the real miracle is that nothing happens and we keep on living to our full potential.”

be perceived easily and tangibly. For a patient, these benefits can unfold over a short period of time and the results can be spectacular. A sick person becomes well again. Pathological metabolism is brought back in line, or lost physiological functions are regained. Something spectacular happens through the intervention of the physician. That is why grateful patients constitute a substantial donor base for hospitals.

of different countries in the world. The United States is by far an outlier. Our per capita health care expenditure is nearly 50 percent greater than the next highest nation, which is Norway, and yet our life expectancy is lower. Recent statistics show that life expectancy of the United States ranks 27th among the 34 members of the Organization for Economic Cooperation and Development (OECD) and is in fact below

continued



“We wanted to capitalize on the shock factor of the School of Public Health garnering the largest gift given to the University to send a message to the world that it is in public health that we should invest for a better future.”

the OECD average. Our pushing health care expenditure is clearly not effective in pushing the limit for life expectancy.

Two books in my recent reading list have spoken to the limits of modern medicine. The first book is *Medical Nemesis* by the philosopher Ivan Illich, first published in 1974. Illich subtitled his book *The Expropriation of Health*. He coined the term “medicalization of life” as a critique of the invasiveness of medicine into culture and therefore how we live our lives, the infringement of the medical establishment into the autonomy of the individual, and the harm that medicine brings to society at the same time that it brings healing. This book is chock-full of vintage 1970s radical left-wing rhetoric which I find to be rather amusing.

The other book is *Being Mortal*, published recently by our own Atul Gawande. This is a deeply moving book on old age and the end of life. I highly recommend this book to you. This book speaks specifically to the limits of medicine at the end of life, the juncture where the most aggressive medicine is often practiced when in fact it is at its feeblest.

While the two writers come from vastly different backgrounds—one a philosopher who writes with incendiary rhetoric and the other a surgeon who writes in mellifluous prose—both writers speak to the limits of modern medicine. Accepting these limits has profound ramifications. For the medical practitioners, it will mean a new ethics, a new definition of harm when they take the Hippocratic oath to do no harm. For the individual, it will be a new morality by

which he views the human life. For society, there will be ramifications of how the young and the old relate, a relationship that is fundamental to human existence. These are profound changes.

DAILY MIRACLES

Recognizing the limits of modern medicine calls for a new worldview by which we fashion our culture. When President Faust said in the gift ceremony that this is a public health moment, it must mean more than a call to having more public health initiatives. Public health must be a new worldview that catalyzes a cultural shift from celebrating only the cure of diseases to celebrating their nonincidence and therefore the allocation of society’s resources to creating conditions that favor disease nonincidence.

While we do celebrate the spectacular advances in medicine that bring us cures that would have seemed miraculous to earlier generations, the real miracle is that nothing happens and we keep on living to our full potential. This worldview should be a voice in our policymaking in government, in the structure of our economy, the running of our businesses, the conduct of our scientific research, the content of our education, and indeed, how each citizen conducts his personal life and what he expects of society.

The research and teaching that go on in the Harvard School of Public Health exemplify the efforts we must fortify at this public health moment. In working with Harvard

“My hope is that public health moving to center stage in the public’s awareness will translate to a better funding environment for public health endeavors.”



Above, the Chan family at the gift announcement event on September 8, 2014. Opposite, Gerald Chan speaking at the event.

University’s administration to design how this gift should be communicated to the outside world, my family’s wish was to minimize the attention given to the donor and that the spotlight should be on the field of public health. We wanted to capitalize on the shock factor of the School of Public Health garnering the largest gift given to the University to send a message to the world that it is in public health that we should invest for a better future.

I am gratified that the feedback from around the world confirms that this communication strategy has worked. Dean Frenk told us that he has received many phone calls from the deans of other schools of public health to say how much they appreciate this gift because it has elevated the standing of public health in the eyes of the public.

PUBLIC HEALTH TAKES CENTER STAGE

My hope is that public health’s moving to center stage in the public’s awareness will translate to a better funding environment for public health endeavors. I would also like to see public health capturing the imagination of more bright young people as they ponder their career choices. President Faust

said in the gift ceremony that global health is now one of the most popular secondary fields of concentration in Harvard College. This means that undergraduate students from a variety of majors are choosing global health as their minor.

The wind has indeed shifted. Having social impact has overshadowed going to Wall Street as the preeminent aspiration of the Harvard undergraduates. It would be wonderful if many of them would follow in our footsteps and come to the Harvard T.H. Chan School of Public Health for their graduate studies.

Howard Stevenson, an emeritus professor at Harvard Business School and fundraiser extraordinaire for this University once told me what he said to a potential donor: “You are not giving to Harvard. You are giving to all of humanity through Harvard.” His words are certainly true of my family’s gift.

To you, my fellow alumni, I want this gift to be an encouragement as you continue your work in public health. We benefited from receiving a great education in this School. We will share this benefit with our fellow men by putting our education to good use for the greater good. 🌸

2014 Alumni Awards

At Alumni Weekend, the School celebrated forward-looking individuals for their contributions to the public's health.



Four outstanding individuals nominated by their peers received the School's highest alumni honor at this year's Alumni Award of Merit Dinner held on October 25.

ROBERT EMMET MORRIS, MPH '86

Robert Morris has devoted over 40 years to improving the lives of vulnerable people, especially children, refugees, victims of conflict, and those affected by HIV/AIDS. His international policy leadership has resulted in better public health systems and health outcomes worldwide, particularly in the Middle East. Morris currently works through NoMoreVictims.org, which organizes free medical care for child victims of war, and consults on care for orphans in rural Thailand. Morris and his wife, Jill, funded the start-up of Mai Tam House of Hope in Ho Chi Minh City, Vietnam, which cares for nearly 400 orphans and widows with HIV/AIDS. Morris has mentored countless students.

JUDITH S. STERN, SM '66, SD '70

Judith Stern has advanced the fields of obesity prevention and treatment through research and advocacy. An elected member of the Institute of Medicine, Stern cofounded the American Obesity Association, now part of the nonprofit Obesity Society, and has worked with the FDA and other

federal organizations to develop standards on obesity and guidelines for the use of obesity drugs. At the University of California, Davis, where she serves as distinguished professor *emeritus* of both nutrition and internal medicine at the School of Medicine and the College of Agriculture and Environmental Sciences, Stern has mentored three generations of undergraduate and graduate students.

RAVI I. THADHANI, MPH '97

Ravi Thadhani, a professor of medicine at Harvard Medical School and chief of the Division of Nephrology at Massachusetts General Hospital, is a world-renowned researcher and academician. His contributions in the field of nephrology combine clinical and translational studies, going beyond typical epidemiological data and opening new opportunities in kidney research. In the field of preeclampsia, Thadhani has conducted large clinical studies and has developed a diagnostic test that is being used in clinics in Europe. More recently, he has focused on novel therapies and diagnostics to alleviate the symptoms of preeclampsia and to prolong pregnancy in women with the condition.

ABOVE, left to right, Anthony F. Vuturo, MPH '71; Judith S. Stern, SM '66, SD '70; Ravi I. Thadhani, MPH '97; and Robert Emmet Morris, MPH '86

Above and opposite, Kent Dayton / Harvard Chan

ANTHONY F. VUTURO, MPH '71

Anthony Vuturo has strengthened family medicine through work with the U.S. government, World Bank, Pan American Health Organization, private sector, and University of Arizona Medical Center and College of Medicine. A founding College of Medicine faculty member, he is now professor *emeritus*. He also cofounded what is now the University of Arizona Health Network, led the creation of the first and only nationally accredited college of public health in Arizona, and was instrumental in establishing a partnership between UA and China's Nanjing Normal University. He is senior vice president of Canyon Ranch Health Resorts and president of VSF International, a health care consultancy to governments worldwide.

Three additional alumni awards were presented during lunch on October 25 to recognize achievements in various arenas of public health and at various stages in public health careers.

LEADERSHIP IN PUBLIC HEALTH PRACTICE AWARD

Margo Wootan, SD '93, has directed, guided, and participated in a multitude of nutrition-related public health initiatives that have led to improvements in the health of millions of Americans, especially children. As director of nutrition policy at the Center for Science in the Public Interest, Wootan cofounded and coordinates the activities of the National Alliance for Nutrition and Activity, made up of more than 400 local, state, and national organizations advocating for policies and programs that promote healthy eating and physical activity. Among other activities, she has also spearheaded efforts to limit the marketing of unhealthy food and beverages to children.

PUBLIC HEALTH INNOVATOR AWARD

Murray Allen Mittleman, MPH '90, DPH '94, has conducted groundbreaking research in the application of analytical methods to the study of adverse health triggers, including

cardiovascular events, and his innovations have opened new vistas in epidemiology. He played a seminal role in the development of case-crossover study designs and expanded the use of the case-crossover method in several areas, including studies of the health effects of air pollution. An epidemiologist and chair of the MPH program at the School, Mittleman is an associate professor at Harvard Medical School and Harvard Chan, and holds several positions at Boston's Beth Israel Deaconess Medical Center.

EMERGING PUBLIC HEALTH PROFESSIONAL AWARD

Jacqueline Nwando Olayiwola, MPH '05, is an expert in practice transformation and systems redesign. A faculty member at the University of California, San Francisco, she is associate director of the Center for Excellence in Primary Care. She previously spent several years at Community Health Center, Inc. (CHC), the largest federally qualified health center network in Connecticut. Olayiwola brought academic rigor to CHC as a health services and practice-based researcher focused on disparities, vulnerable and disenfranchised populations, access to care, and translation of research into policy, while mentoring numerous community health professionals and trainees.



Murray Allen Mittleman, MPH '90, DPH '94, left, with Margo Wootan, SD '93. Not pictured, Jacqueline Nwando Olayiwola, MPH '05



FIRST PRIZE FOR FLU FORECASTING

A

new system for predicting seasonal peaks of influenza in cities across the U.S., developed by a team of scientists including Marc Lipsitch, professor of epidemiology and director of the Center for Communicable Disease Dynamics, won first place in the “Predict the Influenza Season Challenge,” sponsored by the U.S. Centers for Disease Control and Prevention (CDC). Participants in the contest were asked to forecast the timing, peak, and intensity of the 2013–14 flu season using digital data from various sources and innovative modeling approaches. Lipsitch and colleagues, including team leader Jeffrey Shaman of Columbia University’s Mailman School of Public Health, based their predictions on flu-related online search queries, reports of flulike illnesses, and weather conditions, such as humidity levels, known to drive flu transmission. The CDC awarded the winning team \$75,000.

‘Green’ Buildings Make Healthy Homes



Low-income housing built with eco-friendly materials and energy-efficient features seems to be as beneficial for residents as it is for the environment. A new study led by Meryl Colton of the Department of Environmental Health, in collaboration with the Boston Housing Authority, surveyed the health of people living in public housing units before and after they moved from conventional apartments into “green” ones. Colton and colleagues—including senior author Gary Adamkiewicz, assistant professor of environmental health and exposure disparities—also conducted environmental sampling and home inspections. They found that improved ventilation and pest management systems in the green apartments and the change from gas to electric stoves appeared to boost indoor air quality and also reduced “sick building syndrome” symptoms such as headaches and itchy or burning eyes. The study was published online last June in *Environmental Science & Technology*.

ARE VASECTOMIES A PROSTATE CANCER RISK?

Thousands of men each year choose vasectomies for the peace of mind of (near) permanent birth control. But a new study suggests that the procedure may increase their prostate cancer risk. In the largest and most comprehensive study to explore this potential connection, Harvard Chan researchers analyzed health data collected over 24 years from 49,405 U.S. men ages 40 to 75. One in four of these men reported having a vasectomy. Compared to men who did not have the surgery, vasectomies raised men’s risk of developing prostate cancer by 10 percent, and increased by 20 percent and 19 percent respectively their relative risk of developing advanced and lethal prostate cancer.

But that doesn’t mean that men need to cancel their appointments. As the researchers noted in the study, published last July in the *Journal of Clinical Oncology*, the absolute risk of an individual developing deadly prostate cancer over 24 years was small: 16 of every 1,000 men. “I don’t think we should conclude from this that men shouldn’t get vasectomies,” co-author Kathy Wilson, a research scientist in the Department of Epidemiology, told Fox News. “But it does suggest that there is something going on, which could tell us more about the underlying biology of the disease.”

Left, ©Terry Smith Images / Alamy; right, ©Science Photo Library / Alamy

IN MEMORIAM



MARVIN ZELEN

Professor Marvin Zelen of the Department of Biostatistics died on November 15 at age 87 after a battle with cancer. He was known as a giant in the field of biostatistics, as well as a man of vision, gener-

osity, and warmth. Zelen was Lemuel Shattuck Research Professor of Statistical Science, as well as an emeritus member of the Faculty of Arts and Sciences at Harvard University. He served in the 1980s as chair of the School's Department of Biostatistics, and is credited with transforming it into the best in the country.

Zelen was known for developing the statistical methods and study designs that are used in clinical cancer trials, in which experimental drugs are tested for toxicity, effectiveness, and proper dosage. He also introduced measures to ensure that data from trials are as free as possible of errors and biases—measures that are now standard. Zelen helped transform clinical trial research into a well-managed and statistically sophisticated branch of medical science. His work in this area led to significant medical advances, such as improved treatments for several forms of cancer. His research also focused on improved early detection of cancer; on modeling the progression of cancer and its response to treatment; and on using statistical models to help determine optimal screening strategies for common cancers. Zelen achieved another level of fame in the early 1980s, when he and his late colleague Stephen Lagakos launched a study of a possible connection between a cluster of childhood leukemia cases and a contaminated water supply—an investigation chronicled in the book and film *A Civil Action*. Read more at <http://hsph.me/zelen>.



JOHN BRISCOE

John Briscoe, professor of the practice of environmental health, died on November 12 at age 66. Briscoe, who also held appointments at the Harvard School of Engineering and Applied Sciences and at the Harvard Kennedy School, spent his career focused on global efforts to successfully manage and preserve one of our most precious resources—water—with a focus on the developing world. In fact, earlier this year, Briscoe received what is known as the “Nobel Prize of Water”—the Stockholm Water Prize—for his “unparalleled contributions to global and local management of water—contributions covering vast thematic, geographic, and institutional environments—that have improved the lives and livelihoods of millions of people worldwide.”

Before coming to Harvard, Briscoe worked as an engineer in the government water agencies of South Africa and Mozambique; an epidemiologist at the Cholera Research Center in Bangladesh; a professor of water resources at the University of North Carolina; and, for 20 years, at the World Bank, where he helped oversee projects in water resources, irrigation, hydropower, and sanitation. Shortly after Briscoe joined the School in 2009, former Dean Barry Bloom told the *Harvard Public Health Review* that, to a lot of economists, John was “Mr. Water: the most far-sighted, thoughtful, deeply thinking person in the field.” Read more at <http://hsph.me/briscoe>.

Left, Kent Dayton / Harvard Chan; right, ©Tony Rinaldo

LEARN MORE ONLINE Visit *Harvard Public Health* online at <http://hsph.me/frontlines> for links to press releases, news reports, videos, and the original research studies behind Frontlines stories.



MOST-WANTED POLLUTERS LIST

When it comes to air pollution, some particles are worse than others. A new Harvard Chan study finds that the effect of airborne particles on mortality rates was about 75 percent higher in cities with a high proportion of sulfates from coal-burning power plants than in cities with little sulfate pollution. It was about 50 percent higher in cities with a higher proportion of particles from road dust. For each 10 micrograms per cubic meter of air particles, city deaths from conditions linked to pollution—such as heart disease and lung disorders—increased by

more than 1 percent. The effects were greatest when the temperatures were mild and windows most likely to be open, said lead author Lingzhen Dai, doctoral student in the Department of Environmental Health. The authors hope the study, which was published online last May in *Environmental Health Perspectives*, will help the U.S. Environmental Protection Agency determine which sources of air pollution are most critical to control.

OUTSTANDING in Their Fields



Seventeen Harvard Chan faculty members—more than at any other school of public health—have been included on Thomson Reuters's 2014 list of the most highly cited researchers in the sciences and social sciences. Visit highlycited.com for the complete list from Thomson Reuters, or <http://hsph.me/17-most-cited> for details about the School's researchers who made the list.

STERILIZED WITHOUT CONSENT

In Latin America, some health care providers are coercing and even forcing women living with HIV to be sterilized, according to recent research. A new survey of HIV-positive women in El Salvador, Honduras, Mexico, and Nicaragua found that roughly one in four had been pressured to undergo sterilization. Women who either were diagnosed with HIV during prenatal care or had a pregnancy after the diagnosis were almost eight times more likely to experience pressure to sterilize. And only slightly more than half of the women who participated in the study were told that taking antiretroviral drugs could virtually eliminate the chance that they would transmit the virus to their babies. Author Tamil Kendall, a Canadian Institutes of Health Research postdoctoral fellow with the Women and Health Initiative and a Takemi Fellow in the Department of Global Health and Population at the time of the analysis, said that reproduction among people with HIV continues to be stigmatized, even in the U.S. She called for more education for women living with HIV and for health care providers. She also called for professional associations, policymakers, and the courts to hold accountable providers who violate women's reproductive rights.



LETTING DATA TELL THE STORY

DONNA SPIEGELMAN

PROFESSOR OF
EPIDEMIOLOGIC
METHODS, DEPARTMENTS
OF EPIDEMIOLOGY,
BIostatISTICS,
AND NUTRITION

This fall, Donna Spiegelman won a prestigious Director's Pioneer Award from the National Institutes of Health. Spiegelman is believed to be the first epidemiologist and biostatistician, and the first faculty member from a school of public health, to receive the five-year, \$2.5 million award.

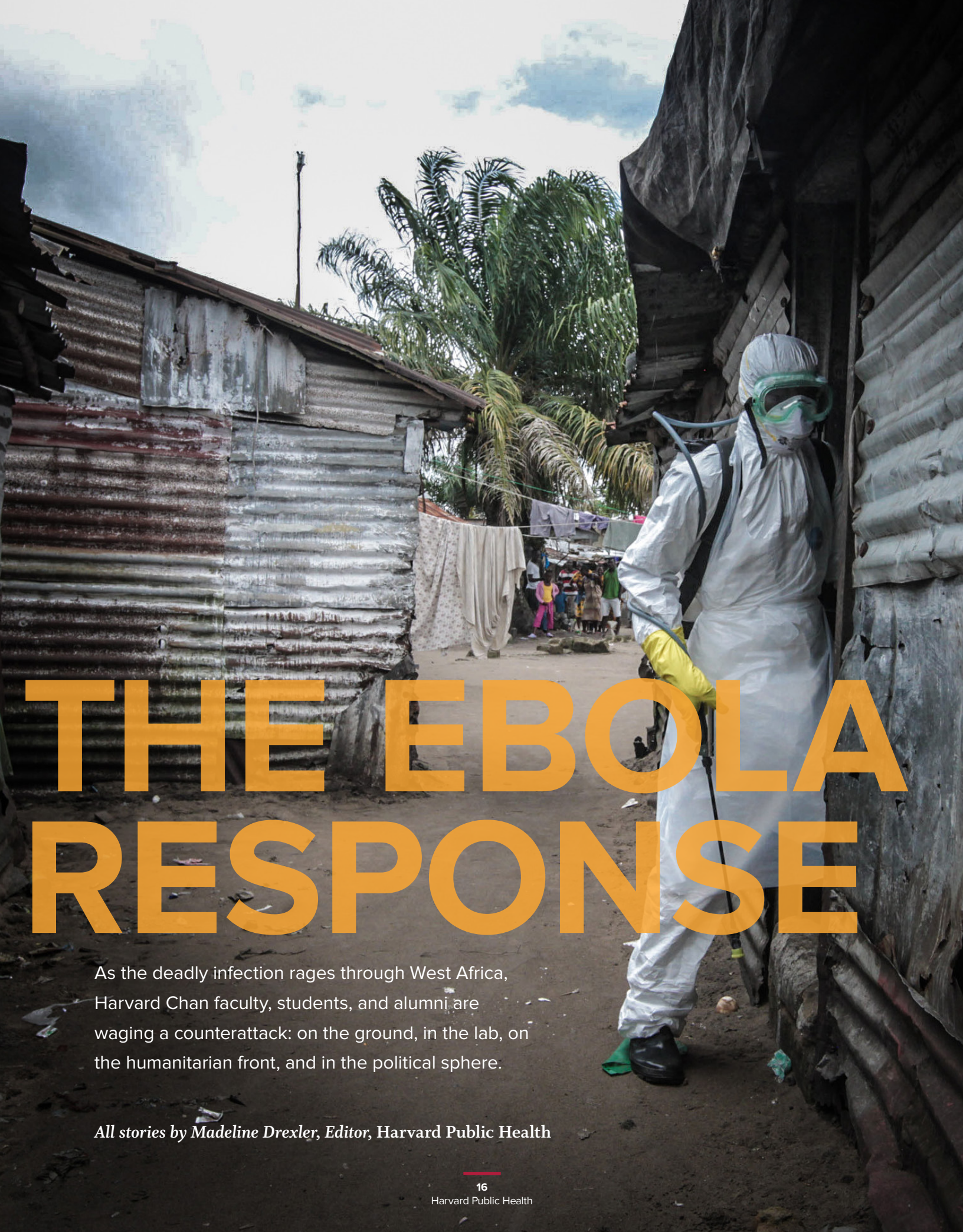
Q: This award recognizes “individual scientists of exceptional creativity, who propose pioneering, and possibly transforming, approaches to major challenges in biomedical and behavioral research.” What do you feel is transformative about your work?

“ I develop statistical and epidemiologic methods to identify which public health interventions work in real-world settings. My scientific questions are wide-ranging. For example, is second-line antiretroviral treatment for people with HIV and AIDS in sub-Saharan Africa beneficial and cost effective? Can we reduce rates of obesity, diabetes, and cardiovascular disease in India by offering work sites a package of interventions—more physical activity, healthy traditional diets instead of unhealthy Western diets, disease screening—and if so, does one element of the package have a stronger effect, or must they all be applied together? By increasing the cost of unhealthy foods and decreasing the cost of healthy foods, can we develop a budget-neutral change in the price structure at the Kresge cafeteria that incentivizes healthy eating at the School?

I have nearly 600 publications. I've produced a great deal of original methodological work and collaborated on a vast number of topics, and there have been some surprises. Our hypotheses are not always confirmed by the data. So I prefer to work on methods that make it possible to use data to tell us what's really going on. That's my philosophy about my work. I'm very empirical. Let's see what the data have to tell us. ”

LEARN MORE ONLINE

Visit *Harvard Public Health* online at <http://hsph.me/frontlines> for links to press releases, news reports, videos, and the original research studies behind Frontlines stories.



THE EBOLA RESPONSE

As the deadly infection rages through West Africa, Harvard Chan faculty, students, and alumni are waging a counterattack: on the ground, in the lab, on the humanitarian front, and in the political sphere.

All stories by Madeline Drexler, Editor, Harvard Public Health

ON THE GROUND: ALUMNUS BATTLES THE NIGHTMARE IN LIBERIA

The first Ebola case that Mosoka Fallah saw with his own eyes was in early April 2014. The woman had come from Lofa County, in northwestern Liberia. She had cared for her brother, who died of the infection. Sickened herself, she took a taxi bound for Monrovia, the capital. She stayed one night in a crowded squatters' district named Chicken Soup Factory, left the next morning, and died. Miraculously, no one else was infected.

Fallah, MPH '12, saw his second case on June 27. A young woman—the only surviving member of a family of seven who had died from Ebola—was brought from neighboring Sierra Leone by her uncle. They made their way to New Kru Town, a coastal suburb of Monrovia. She died and was buried by her relatives—five of whom contracted

Ebola and also died. The woman's infection spread to hospital staffers, who died. By now, Fallah had read extensively about the highly transmissible and fatal infection. He knew that the country's defenses were weak—the bureaucracy slow and resources meager—and that health workers were chasing outbreaks instead of anticipating them.

In interviews and in gripping emails chronicling the Ebola epidemic as it unfolded—“This is the perfect storm for an exponential increase in the transmission of the disease,” he wrote on August 15—he warned that the new clusters of Ebola would not be contained as readily as the first case in April. By the end of August, Liberia reported 225 confirmed deaths. Soon after, Fallah lost count of the dead and dying.

continued



Mosoka Fallah, MPH '12, meets with residents of New Kru Town, Liberia. Fallah helped launch grassroots public health efforts by winning the trust of Ebola-stricken communities.



“I was telling people back in August: ‘It’s going to engulf this country. We could not operate like a normal mood. We had to operate from the framework of extreme emergency,’” he said in an interview with *Harvard Public Health* in early November. “But many persons weren’t listening.”

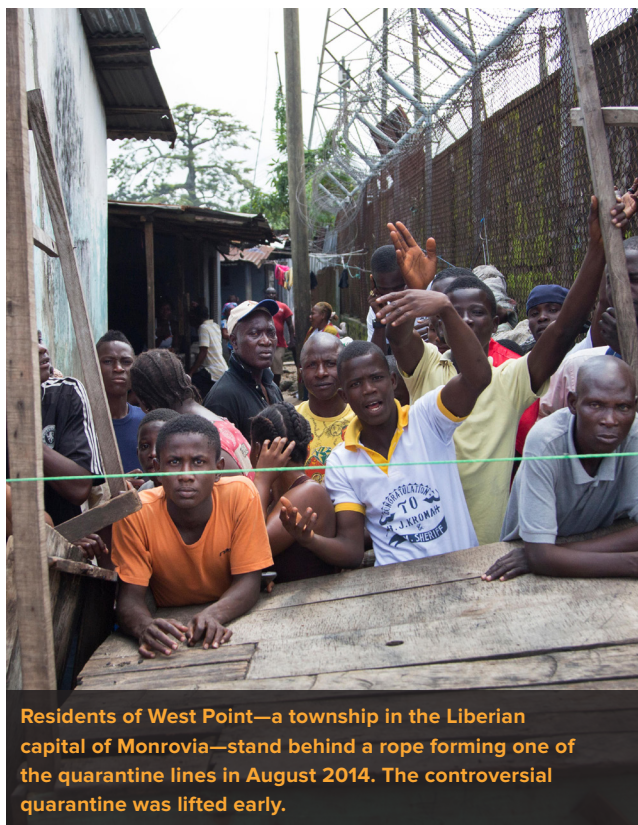
“WE ARE IN TROUBLE.”

August 12 was a day of ceaseless rain. Fallah and his fellow workers were toiling in the impoverished Monrovia township of West Point. “We pulled six bodies from houses that day.” At the time, it took two or three days for ambulances or burial crews to remove the dead. “We picked up a dead person, and I saw this lady crawl out of the house, vomiting and toileting blood all around. West Point is very congested, no sanitation,” he recalled.

He phoned his boss, the assistant minister for vital statistics in Liberia’s Ministry of Health and Social Welfare. “We are in trouble,” Fallah said. “Ebola has come to West Point.”

Luckily, Fallah had become a trusted presence among local tribal chiefs and community leaders. He himself had grown up in West Point and in Chicken Soup Factory. His secret to earning trust was no secret.

“Let them see you as part of them” he said. “When I entered West Point, I never stayed in my car. I got out and I walked and I met the leaders. I walked with them in the houses and in between the houses. I never touched them—it was an epidemic, and I kept my distance. But I



Residents of West Point—a township in the Liberian capital of Monrovia—stand behind a rope forming one of the quarantine lines in August 2014. The controversial quarantine was lifted early.

corner of a community room. He pressed for details about the outbreak. “It became apparent that what we were seeing was the tip of the iceberg. There had been secret burials. The people had been sworn to secrecy.”

Concerned that keeping the sick in densely crowded West Point would spark an uncontrollable explosion of the deadly disease, Fallah made a decision that, in retro-

“The thing about this epidemic that is even more deadly than the civil war is that the enemy is the person you love the most.” —Mosoka Fallah, MPH ’12

wasn’t bringing this big Harvard degree to them. I wasn’t telling them that I knew it all. I let the leaders make decisions and I guided them and followed them.” Even when he was approached by a criminal gang for a handout—“It was about \$1 U.S.”—he was showered with praise. “One of them said to me, ‘You are a true friend of West Point. You never abandoned us.’”

On that drenching August day when Ebola surfaced in West Point, Fallah discreetly approached some of the leaders and carried on whispered conversations in the

spect, he considers a mistake: He convinced his boss at the health ministry of the need for a holding center for Ebola-sickened residents. “The people did not understand. They said we were trying to bring Ebola to West Point.” After a mob stormed the center, the government ordered an army-enforced quarantine of the entire township. A series of misunderstandings led to violent protests.

Fallah once again acted as a trusted go-between, negotiating a de-quarantine and organizing a homegrown active case finding program that has since become the

national model of local surveillance during the crisis. To his amazement, communities that once fearfully denied Ebola are now coalescing around the crisis and organizing task forces and awareness teams.

“THE ENEMY IS THE PERSON YOU LOVE MOST.”

An epidemiologist and immunologist, Fallah came to the School in 2011 to study global health, with a concentration in infectious disease epidemiology. He focused on maternal, newborn, and child health in the slums of Monrovia. After earning his MPH, Fallah worked at Massachusetts General Hospital, studying the psychological ravages that followed Liberia’s two recent civil wars.

How does the trauma of the Ebola epidemic compare? “The pain is not too visible yet,” he explains, “but people are in shock. They are not going to even know where to start from. During the civil war, there were front lines, there were enemies.

“The thing about this epidemic that is even more deadly than the civil war is that the enemy is the person you love the most. The enemy can well be your mom or your husband or your children. How do we explain a family that has lost everyone except a single child? Will there be hopelessness? Fear? Aggression? Paranoia and psychosis? I don’t know the answer.”

“AM I LOSING MY HUMANITY?”

Nor does he know how he himself has survived psychologically. “On August 29th, I lost my sister in Ghana. She had a lung illness. I’m a very emotional person. The morning my sister died and I got the call, I was just about to go to West Point.” He asked another sister to inform their mother, and he drove to West Point, as he did every day, with the firm resolve to stop Ebola. “I didn’t cry or break down.”

When he returned home that night, he fell into bed exhausted. He remembers asking himself: “Am I losing my touch of humanity? I just lost my sister but I’m not crying. Is it because there’s so much death and dying around me? Is it that I’m in survival mode?”

He does cry when a baby dies. “It breaks my heart. So much innocence. They haven’t even started life and Ebola has already taken it away.”

A REFUGE FOR WOMEN AND CHILDREN

In 2013, before the Ebola crisis, Fallah was hired by Indiana University for a USAID project to develop a public health certificate program for mid-level health workers. After nine-and-a-half years of study in the U.S., he returned home that January to launch the program. Its mission was to train midwives and nurses in techniques that would reduce maternal and child mortality. Fallah also used the opportunity to construct a clinic catering to women and children in Monrovia’s slums. Refuge Place clinic began operation in early June 2014. A few weeks later, Ebola struck. The newly minted public health

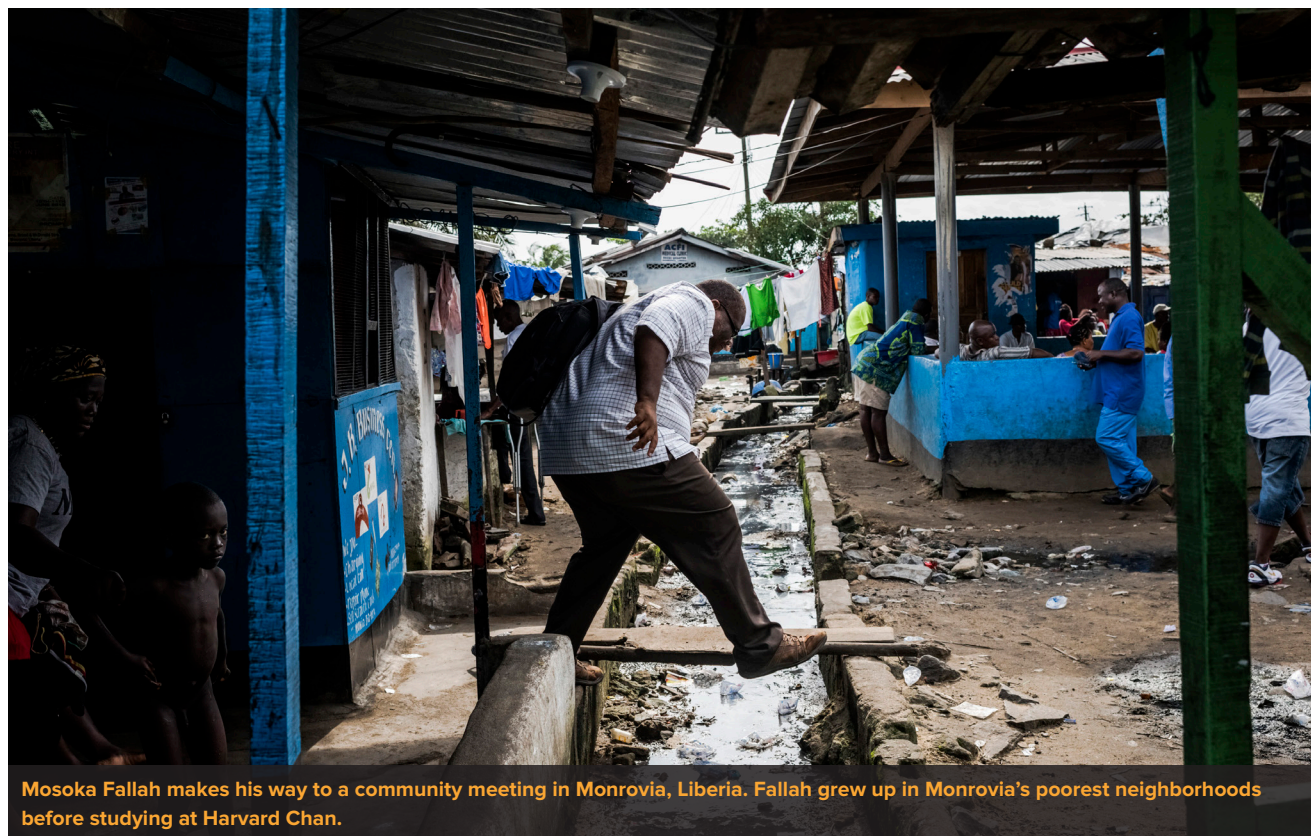
continued

BRINGING A HARVARD CHANCE EDUCATION TO AN EBOLA EPIDEMIC

As he helps direct Liberia’s emergency response to Ebola, Mosoka Fallah’s education at the School has frequently informed his work. “First of all, we learned a perspective of social justice. That was drilled in our heads over and over—whether it was health-systems strengthening, infectious disease, ecology. Richard Cash—what a great instructor, looking at health from a human rights perspective. These are issues that really got deep in my heart.”

In classes with the late Marc Roberts, professor of political economy emeritus, and Daniel Wikler, the Mary B. Saltonstall Professor of Population Ethics, Fallah learned the terms “natural lottery” and “social lottery.” “Maybe I have the IQ and my IQ allowed me to go to Harvard. Maybe because of that I have a new social class and social connections. It’s likely that I will have some opportunities in life because of the friends I make.

“But there are those who may not be as fortunate. Those in West Point—for three generations they have been there. Maybe their mom and dad are poor peddlers. In the grand scheme of things, they may not have won the lottery. Do we victimize them? Do we create a health care system that only caters to guys like me? During an epidemic, nobody shouldn’t have access to health care.”



Mosoka Fallah makes his way to a community meeting in Monrovia, Liberia. Fallah grew up in Monrovia's poorest neighborhoods before studying at Harvard Chan.

students were dispatched to the center of the crisis. But as the epidemic mounted and medical staffs around the country were becoming infected, Fallah decided to shutter Refuge Place.

By the fall, he had changed his mind. “I realized that pregnant women and children were still dying of common diseases—malaria, diarrhea, acute respiratory infections. They didn’t have anywhere to go.” And so, after rigorously training his staff in infection control and prevention, Fallah reopened Refuge Place in early October as a medical haven for pregnant women and children under 5, with all services free of charge.

“Not all of the sick have Ebola,” Fallah said. “It’s a complex paradox. On the one hand, you’re trying to stay alive in an epidemic. On the other hand, my fear is that we’re going to see a great increase in deaths from common, preventable diseases.”

Indeed, in early November, when he spoke to *Harvard Public Health*, a national lab in Monrovia had found that among the clinical samples it was testing, only 36 percent tested positive for Ebola; the rest were familiar infections endemic in the country. Today, said Fallah, there is a dire

need for ambulances to transport to treatment these non-Ebola sufferers who in normal circumstances could easily be saved.

What finally compelled Fallah to reopen Refuge Place was a horrifying scene he witnessed in the capital. “A pregnant woman was denied care because she could not afford the \$300 for delivery. While she was walking from the private hospital that turned her away, she gave birth to twins in the street. *In the street*. A guy helped her deliver—he had to wear plastic bags. Then we arrived on the scene. That is fundamentally unfair: that one person should have access to health care in the middle of an epidemic and a pregnant woman should be condemned to die. I gave the family \$20 to charter a taxi to the next hospital.”

TAMING THE EPIDEMIC

At times, Fallah is cynical about the world’s tardy notice of the public health wildfire that has ravaged West Africa. “Not until an American doctor became infected—not until it became an international threat—did they mount an effective response. If we had invested one-tenth of what we’re investing now back in July, when there were

just a few hundred cases, this epidemic could have been stopped.” By early November, Fallah estimates, the toll was likely 5,000–6,000 in Liberia alone—far more than the official estimates.

Today, the epidemic curve seems to be flattening. New cases are diminishing. Fallah worries that the success wrought by the all-out campaign that he has helped lead will lull Liberians into relaxing their vigilance. “The last mile,” he warned, “is when you must intensify your intervention.”

What will it take to extinguish the epidemic? Perfect contact tracing. Right now, said Fallah, health workers have been able to directly meet and follow some 60–70 percent of the contacts of infected people. Working with the U.S. Centers for Disease Control and Prevention, he and his colleagues are synthesizing treatment data, contact data, and GPS information from body retrievals and burials to sharply delineate the changing contours of the epidemic.

Every night, the data are analyzed at the Ministry of Health. Every morning, thousands of volunteers are handed address lists for known contacts of the infected. When they find these contacts, they ask them to go into 21-day quarantine, with the promise that neighbors will bring food and water. Other volunteers conduct active contact tracing, moving house to house to ferret out cases that haven’t come to light.

HARVARD SCHOOL OF PUBLIC HEALTH
Powerful ideas for a healthier world

A to Z Index Search go

People Calendar MyHSPH Email Newsletters

Ebola in the news

Home > Ebola in the news

HSPH home News@HSPH Press releases

Humanitarian response to Ebola outbreak rife with challenges

The humanitarian response to the Ebola outbreak in West Africa has been fraught with challenges, said Michael VanRooyen. “It’s been like building the firehouse while the building is burning.” [Read more.](#)

ONLINE EXTRAS

For more on the Ebola epidemic and the School’s role in responding to the crisis, go to:
<http://www.hsph.harvard.edu/ebola-in-the-news/>

Fallah’s goal is to train 6,000 active case finders throughout Liberia. “If we can find 100 percent of the contacts, we can break the transmission.”

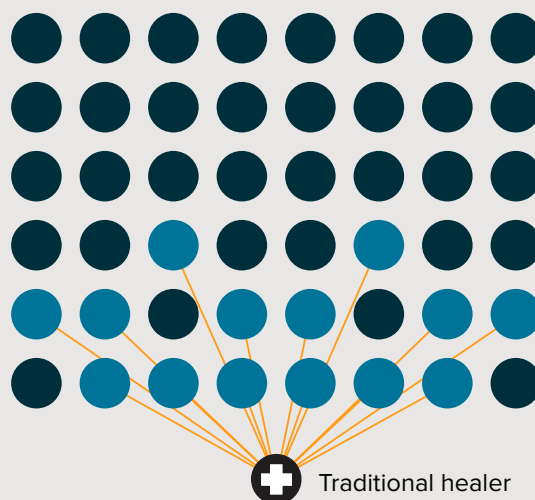
Years from now, what does Mosoka Fallah see in his mind’s eye when he looks back on Liberia’s Ebola nightmare? He answers in the present tense, as if he can’t imagine that this bad dream will recede in memory. “All of the unsung heroes. Some of them are ordinary people, uneducated, poor. The guys who track cases. The guys who pick up the phone and give us updates every day. The guys who stand by me. There are many good people in Liberia.” 🌟

In the Lab: Tracking a New Outbreak

The Ebola epidemic in Sierra Leone was sparked in late May 2014, when 13 women prepared for burial the body of a traditional healer who had been working in neighboring Guinea. Pardis Sabeti, associate professor in the Faculty of Arts and Sciences and at Harvard Chan, and associate member of the Broad Institute, and colleagues traced the path of the lethal virus from the healer to her burial attendants (see graphic at right). The Sabeti lab has also been tracking key genetic mutations as the virus spreads. During the course of the outbreak, Sabeti has lost five African colleagues to Ebola infection. Last August, she told the *Boston Globe*: “We wake up, we learn some news, we bawl our eyes out, and we try to figure out what we can do.”

FIRST WEEK OF OUTBREAK

● Suspected cases (35) ● Confirmed cases (14)





On the Humanitarian Front: Scaling Up

When the World Health Organization (WHO) belatedly declared Ebola virus disease a Public Health Emergency of International Concern, its parent agency, the United Nations, was already grappling with three other humanitarian catastrophes: in Syria, the Central African Republic, and South Sudan. A week after the WHO's Ebola announcement, the UN added Iraq to the list of countries with "Level 3" emergencies—the highest classification of crisis, requiring a swift and massive response from the UN.

For Michael VanRooyen, director of the Harvard Humanitarian Initiative, the congruence of five system-wide emergencies underscores the case for dramatically more money and political commitment to disease prevention, public health services, and humanitarian aid. But will the Ebola crisis spur such engagement?

The congruence of five system-wide emergencies underscores the case for dramatically more money and political commitment to disease prevention, public health services, and humanitarian aid.

ZERO TO SIXTY

As the epidemic gathered steam, HHI launched into action on many fronts. It convened global leaders and Ebola experts to discuss the practical implications of the crisis. It shared advanced database software to collect up-to-date information on the disease's spread for the UN. And it advised NGOs working in the stricken countries.

From the start, VanRooyen realized through conversations with relief groups that this Ebola epidemic was different

from earlier outbreaks. It erupted at the intersection of three impoverished nations; two had just emerged from civil wars, and all had seen a brain drain of medical providers. Their health care systems barely functioned. Local public health workers could not keep up with the task of identifying patients, tracking down their contacts, and educating residents to prevent the infection.

In contrast to the 2010 Haiti earthquake, when thousands of organizations converged on Port-au-Prince, aid groups were reluctant to address Ebola, because health workers' lives were at risk. They didn't have the expertise, infrastructure, training, and deep logistics capacity.

And with Ebola, one of the biggest challenges was "scale-up": landing in a country with the ability to set up a 200-bed treatment center, protect the staff, and activate a

robust supply chain. As VanRooyen puts it, "You have to go from zero to sixty very fast." The 2014 Ebola disaster might have been averted, he adds, if the UN and wealthy governments had funneled more money early to NGOs with proven know-how to fight infection and scale up quickly.

FIGHTING THE LAST THREAT—NOT THE NEXT ONE

The larger problem, VanRooyen says, is that in public health, resources tend to be steered toward the last emergency—rather than preparing for the next one. He would like to see health systems in vulnerable nations proficient in monitoring not just Ebola, but all lethal and highly transmissible diseases. One model: Uganda, which has effectively responded to deadly hemorrhagic infections—such as those caused by Lassa, Marburg, and Ebola viruses—through early case identification and timely quarantine.

Despite a slow and uncoordinated intervention, this latest Ebola epidemic will likely be controlled, VanRooyen says. Sadly, more lethal infections in the region will not soon go away. When officials look at excess mortality statistics from Liberia, Sierra Leone, and Guinea a year from now, the main cause will be not Ebola, but untreated malaria, diarrheal illness, maternal and infant infections, and other tragically commonplace threats.



Michael VanRooyen, director of the Harvard Humanitarian Initiative

In the United States: Public Health and Politics

When the Ebola virus was first diagnosed in the United States in September 2014, journalists, commentators, and political leaders responded in tones ranging from sensationalistic to philosophical, from fear-mongering to factual. But the School's Ashish Jha, MPH '04, K.T. Li Professor of International Health and director of the Harvard Global Health Institute, sees the lessons learned as starkly instructive. He spoke in early November with *Harvard Public Health*.

Q: Thomas Eric Duncan, a Liberian who had been visiting his family in Dallas, died of Ebola in early October at Texas Health Presbyterian Hospital. He had originally been sent home after showing early symptoms of the disease. Two of the nurses who cared for him also became infected. What went wrong?

A: In the first 48 to 72 hours, the hospital's leadership spent its time being defensive, finding other people and systems to blame for what happened. Instead, their CEO should have come out the morning after the diagnosis and



Ashish Jha, MPH '04, K.T. Li Professor of International Health and Director of the Harvard Global Health Institute

control. But the public is smarter than that. Especially now, with the proliferation of social media, if you try to hoodwink the public, they will figure it out quickly and you will lose credibility. I think honesty and humility are key to being reassuring.

If you try to hoodwink the public, they will figure it out quickly and you will lose credibility. —Ashish Jha

said: Look, we messed up. We did not catch this and I am deeply sorry. We're going to do two things. First, we're going to focus right now on taking really good care of this patient. Second, we're going to have a thorough accounting of what happened, where we messed up, where the systems failed, and how best to address those errors.

Q: Are you saying that during a public health crisis, the admission of failure is reassuring?

A: Normally, a lot of communications and crisis management people think the public needs to be assured, and the way you assure people is by telling them it's all under

Q: As you look back, what did the U.S. do admirably well when Ebola reached our shores?

A: We're a very dynamic country. There was an evolution in our response. The Centers for Disease Control and Prevention stayed faithful to the science. Despite the political pressure, they didn't give in to the ill-conceived notion of the 21-day quarantines for everybody. Despite the politics, President Obama didn't buckle. So while some politicians in New York and New Jersey clearly focused more on the politics than the science, the policy apparatus fundamentally got it right.

Visit HSPH's Ebola in the News website at hsph.harvard.edu/ebola-in-the-news for the latest information from the School on the crisis and what it means for public health globally.



LIVING GREEN

On a clear day, the air outside Anthony Cortese’s office in downtown Boston is filled with the unmistakable smell of the ocean—a pungent, brinelike perfume that hangs in the morning air. It floats in from the Inner Harbor, where fishing boats lazily motor out to lobster traps set just offshore.

It’s a pure New England scene, but it wasn’t always so idyllic. Cortese, SD ’76, who grew up in Boston’s North End neighborhood, remembers the harbor very differently. Throughout his childhood in the 1950s and ’60s, few people lingered on the shoreline. Raw sewage and industrial waste often clogged the water, and the air hung heavy with soot from industrial sites and the Central Artery, an infamous stretch of elevated highway that sliced downtown Boston in half after its construction in 1959.

“We couldn’t go swimming because the harbor was so dirty. The air quality was awful, too, and there were a lot of people in the neighborhood with chronic respiratory disease,” he says. “Many of my close friends had asthma, and a lot of older people in the neighborhood had a chronic cough. People spit everywhere because their lungs were so full of mucus.”

Cortese never forgot what it was like to be surrounded by neighbors who directly suffered from these ubiquitous industrial contaminants. For him, it drove home one point: Environmental conditions are inseparable from the public’s health. *continued*



ENVIRONMENTAL DEDICATION

This realization set the stage for Cortese's future work. He was one of the initial employees of the U.S. Environmental Protection Agency (EPA) when it was created in 1970. From 1979 to 1984, he served as commissioner of the Massachusetts Department of Environmental Protection (MassDEP), where he developed programs to address air and water pollution, hazardous waste, and drinking water



“I always feel that I’ve been behind the times of what society needs—and ahead of what it’s willing to do.” —Anthony Cortese, SD '76

quality. In the late 1980s, Cortese became the first dean of environmental programs at Tufts University and founded the school's Environmental Literacy Institute, one of the first to foster environmental education as a foundation of learning for all students, regardless of major.

By 1993, Cortese co-founded Second Nature, a Boston-based nonprofit that promotes sustainability at colleges and universities. This summer, having launched with a colleague the Intentional Endowments Network, he has been working to broaden that effort by supporting mission-driven, tax-exempt organizations to align their endowment investments with their health, social, and environmental values.

INSPIRED BY THE SIX CITIES STUDY

It's a storied career, but for Cortese one of the most influential experiences came at its start, while he was earning his doctorate at Harvard Chan. At the time, the School had just begun its now-famous Six Cities Study, an in-depth survey of the health effects of air pollution on more than 8,000 participants in six towns across the Midwest and New England. Cortese had moved to Harvard after a stint working on air quality management for the U.S. Public Health Service, and he was thrilled.

“It was an incredible time to be at Harvard,” he says. “The School was collecting real air pollution exposure and health data and showing that a significant number of people were dying each year as a result of exposure to these pollutants. The effects turned out to be even more harmful than we had originally thought in the early 1970s.”

This excitement around the Six Cities Study—research being conducted by his friends and mentors at the School—shaped Cortese's own work. For his thesis, he conducted a survey of urban residents' carbon monoxide exposure using portable sensors, a strategy that helped verify ambient measurements. Soon after graduation, he became the new head of MassDEP's Air Quality Division. By 1979, Cortese moved on to become commissioner of the department itself.

During his time in office, he implemented new regulations to encourage water conservation and protect water supply in the state, control the production of hazardous waste and speed its cleanup, and cap the allowable release of sulfur and nitric oxides—pollutants that cause acid rain. Years later, the federal government would adopt remarkably similar legislation as part of the Clean Air Act of 1990.

OVERCOMING SOCIETAL INERTIA

None of these achievements came easily. Industry and some state and local government opponents attacked the science behind the new laws. Some critics claimed the regulations would be too expensive or would cause severe economic distress. “There was a certain kind of inertia we had to overcome,” Cortese says. “When you do this kind of work, what you're really doing is promoting a cultural change—and cultural change is hard. It doesn't come overnight.”

After 17 years in public office, the agonizingly slow bureaucratic process involved in passing new regulations began to wear on him. “I always feel that I've been behind the times of what society needs—and ahead of what it's willing to do. In this case, we constantly came up against people with a mind-set of ‘jobs versus the environment,’ or ‘grow now, worry later,’” he says. “But if you wait too long, the health impacts are irreversible. If someone gets cancer, all you can do is treat it and hope for success. If your rivers and forests are contaminated enough by acid rain, then fish die, trees die. By the time you see the effects of environmental damage, it's often too late.”

SUSTAINABILITY ON CAMPUS

In the mid-1980s, Cortese shifted his focus back to academia as dean of environmental programs at Tufts. Returning to the nonprofit world, he founded Second Nature with Massachusetts Senator John Kerry and his wife, Teresa Heinz, serving as president from 1993 to 2012. Second Nature has addressed environmental issues through the lens of higher education. Instead of just teaching a few classes on sustainability, Cortese says, he wants colleges and universities to encourage environmental thinking across all disciplines and to model economic, social, and environmental sustainability in all aspects of their operations: purchasing, infrastructure, transportation, investments.

Even small changes on campus, he adds, can create a lasting impression on a college community—from creating biking and walking paths to using locally sourced foods in cafeterias. With these examples, he hopes that schools will have not only an immediate impact on their local environment, but also a long-term influence by instilling environmental values in graduates.



Sustainability should be a major consideration in the way we design buildings and cities, produce food, develop and regulate economies, and, most important, in the way we educate, so that it becomes “second nature,” says Anthony Cortese.

“AN INCREDIBLY VISIONARY APPROACH”

“That’s an incredibly visionary approach,” says Douglas Dockery, MS ’74, SD ’79, a former classmate of Cortese’s who is now chair of the Department of Environmental Health at Harvard Chan. “It makes enthusiasm for, and a commitment to, the environment intrinsic, not an afterthought. From a public health standpoint, that’s essential for preventing future environmental problems rather than just trying to remediate them.”

Over the past 20 years, Second Nature has worked with thousands of schools nationally and worldwide to achieve those goals, and has met with growing success. Even within the last decade, Cortese says, he’s seen a sea change in environmental thinking within higher education. Since 2006, nearly 700 schools have signed on to his former organization’s largest initiative, the American

College and University Presidents’ Climate Commitment. Signatories make a publicly accountable commitment to become carbon neutral, transform their curriculum to include education for sustainability, and work with other colleges or universities to do the same.

It’s a commitment that benefits both students and the universities themselves. “Many of those schools have reduced their greenhouse gas emissions by up to 25 percent during a time they were growing rapidly, and have saved more than three billion dollars in the process,” Cortese says. “That’s pretty remarkable.”

A FUTURE WITHOUT WASTE

Looking back, Cortese feels that these myriad accomplishments only scratch the surface, particularly with global climate disruption, which he calls an “existential crisis.” Right now, he says, public health focuses on preventing conditions in the environment that could cause disease—but he wants the field to reach further. He believes sustainability should be a major consideration in the way we design buildings and cities, produce food, develop and

regulate economies, and, most important, in the way we educate, so that it becomes “second nature.” His current public health vision: a society running on renewable energy, where the concept of waste is eliminated and one industry’s garbage becomes another’s raw materials. Put simply, we would live off nature’s income, not its capital.

That’s a tall order, but Cortese’s determination is clear: “You can go three minutes without air, three days without water, and three weeks without food. All the resources that make life possible come from the earth, yet we take for granted what it takes for us to live,” he says. “To me, environmental protection is the most fundamental way we can prevent illness and support wellness.”

David Levin is a Boston-based science journalist. He can be reached through his website at www.therealdavidlevin.com.


HERE'S THE THING, says Jessica Cohen. You can design a public health program or product that works wonderfully, that will spare suffering and save lives. And you could tell people all about it, when and why they should use it, and all the benefits.

“But, if you don’t think about the barriers to change, how the intervention actually fits into people’s lives and the human response to what you are doing, then all that work you have done, this incredible public health tool you’ve created—it could be all for naught.”



Public Healthonomics

Assistant Professor Jessica Cohen
is bringing a behavioral economics perspective
to public health interventions in Africa.



An assistant professor in the Department of Global Health and Population, Cohen is a behavioral economist who is pushing to bring the methods and insights of her field to international health projects, especially those in Africa. Rather than banish to the sidelines the messy aspects of human psychology such as procrastination, behavioral economics directly draws on them to explain economic and other aspects of human behavior.

Most of Cohen's research has involved malaria, a devastating infection that kills 600,000 people annually, most of them children. The disease has attracted A-list funders (the Gates Foundation, the Clinton Foundation, former President George W. Bush's 2005 President's Malaria Initiative). But malaria also plays to Cohen's strength as a behavioral economist: it's widespread, the symptoms are nonspecific, and there are dozens of decisions to be made at the individual and government level about how much time and effort to invest in its prevention and treatment: "Malaria is one of those diseases where you can't crack the code without understanding human behavior," says Cohen.

MALARIA AND EAR INFECTIONS: SURPRISING SIMILARITIES

For example, biologically, malaria and childhood ear infections have nothing in common. But from a behavioral economics point of view, Cohen sees a striking resemblance: "There are so many behavioral layers, so many judgment calls, involved with both conditions, especially for parents. Is it serious enough to need treatment or is it just a cold? That question frequently comes up with ear infections and with malaria—although if you miss a serious malaria case, the consequences can be dire. Medications for malaria are given out when the illness isn't really malaria, just like antibiotics are prescribed when kids really don't have bacterial ear infections. In both cases, we need to worry about resistance."

As the mother of a 2-year-old daughter, Cohen understands the fog of calculation surrounding ear infections: Mia has had two or three of them—but Cohen has taken her to the pediatrician six or seven times. "I guess I am batting about .300," she says. "But so often there's no problem and you've missed half a day of work for no reason and your child has been exposed to other illnesses at the pediatrician's office."

continued



WHAT IS BEHAVIORAL ECONOMICS?

Behavioral economics weaves together human psychology and economics to explain the decisions we make. In many ways, it's a response to traditional economics, with its classic supply-and-demand curves and assumptions that people are rational and fully informed. By contrast, behavioral economics sees rationality as one factor—a limited one—and instead looks for patterns and explanations for why people *don't* behave in their self-interest.

One key concept in behavioral economics is “anchoring”: we humans tend to make, or “anchor,” choices based on reference points that have little, if anything, to do with the matter at hand. For example, the quantity of food people eat at a meal is heavily influenced, not just by their perception of hunger, but by the size of the plate or bowl that the food is served on.

A SHOCKING EXPERIENCE

Cohen is 36 but seems much younger. She is 5-foot-2-inches tall with dark brown hair and brims with intellectual and kinetic energy. “People sometimes think I am a teenager,” she says with a laugh, adding that past attempts to look older with make-up and business attire were fruitless. “When I give talks, I get a sense that people are amused by the fact that here I am, looking like a teenager, while I am talking about advanced topics in public health and economics.”

That Cohen is at Harvard Chan and toiling on projects in Africa is the result of several serendipitous career swerves. As a student at Wesleyan University, she had no plans to pursue a career in economics until she was inspired by a charismatic economics professor. As a first-year graduate student at MIT, she intended to focus on domestic labor issues—until an

opportunity to work on a project in Kenya opened up after she took a course on international development, jointly taught by two academic superstars, Harvard's Michael Kremer and MIT's Esther Duflo.

“I'd like to tell you that I went to Kenya to save the world, but it was more of a selfish decision,” confesses Cohen. “Being a PhD student can be a soul-sucking experience. To be honest with you, I was looking for a shock to my system.”

The shock was delivered—by the sight of the terrible health conditions among glue-sniffing street children and the stark austerity of health care facilities and by an altogether different smell: a rich earthiness mingled with the smoke of burning trash. Cohen took several newcomer's risks: an overnight bus trip to Nairobi that left her, alone, in the bus station at 4:30 a.m. and a road trip to the dangerous northern part of the country. “I just did dumb, dumb stuff,” she says. “I think

the part of my brain that assesses risk was just not working.”

THE BEST PRICE IS FREE

Although Cohen was hired to work on an agriculture project, she and two colleagues started an NGO in 2004 called TAMTAM (TAM stands for Together Against Malaria) to distribute bed nets free through clinics providing prenatal services. At the time, other programs charged for bed nets, although at a heavily subsidized price (the full price of \$5 to \$7 is completely out of reach for many African families).

Cohen was presented a golden research opportunity. Kremer and others had already pioneered “random evaluation” of international development projects, which involved the same kind of rigorous, side-by-side comparisons made by randomized controlled clinical trials in health and medical research. Along with Pascaline Dupas, who is now an associate professor of

economics at Stanford, Cohen organized a study that involved 16 health clinics in the Western Province, a rural area of Kenya.

What Cohen, Dupas, and their co-investigators discovered was that charging even a small amount for the bed nets significantly dampened demand for them. Studies of other public health interventions in developing countries, including water purification tablets and deworming medications that get rid of intestinal parasites, have likewise found that free is the most effective price.

Is this really so surprising? At the time, it was. In international development circles, there had

been a widespread belief that free distribution was well intentioned but misguided. Having people pay a little, the thinking went, was an efficient way of identifying individuals who would really use and value the intervention. Free bed nets ended up in a heap in a corner or were made into clothes.

Since then, however, the World Bank and other organizations have been persuaded by Cohen's and other investigators' findings to back free distribution of public health products with widespread benefits which leads to more total use of the products—even if many people don't use them at all. Cohen says this shift

underscores the need for random evaluation. “Nearly all development policy has been based on whims and anecdotes and fashions, not good evidence,” she says. “We need to do a lot of these experiments to find out how to overcome seemingly strange behavioral choices, such as people paying \$12 a year to treat malaria with drugs but not willing to pay 50 cents for a bed net to prevent the infection in the first place.”

WHEN TO PAY A PRICE

Cohen's malaria research also includes an important study in Kenya of the pricing of the artemisinin-based combination therapy (ACT)

continued

In a hospital in Bujumbura, Burundi, women line up to meet a nurse and receive a free mosquito net to protect themselves against malaria.



recommended by the World Health Organization. In this case, the results were the opposite of the bed net findings: A lower subsidy and therefore a higher price led to “advantageous selection”: more people took the ACT treatment who actually needed it. Subsidies are essential, Cohen says,

and modify their malaria control efforts, to remain effective even as the perceived risk fades. “Right now we have these huge efforts that bring the rates down—but then the foot comes off the gas, the mosquitoes are still there, and the disease comes back. Everyone gets frustrated.”

and maternal health in east Africa, with department colleague Margaret McConnell, assistant professor of global health economics. One project involves post-partum contraceptive services, which are crucial to the spacing between births that improves the chances of bettering

“NEARLY ALL DEVELOPMENT POLICY HAS BEEN BASED ON WHIMS AND ANECDOTES AND FASHIONS, NOT GOOD EVIDENCE.” —Jessica Cohen

but a higher price makes people more selective about using the treatment drugs, so there’s less inappropriate use by people who believe they may have malaria but don’t.

When Cohen investigated subsidizing rapid diagnostic tests for malaria, about 60 percent of those who tested negative went on to buy treatment drugs anyway. “We need more research into how people perceive malaria and how certain they are that they have the disease when they have it,” she says.

Along those lines, Cohen is collaborating with Caroline Buckee, an assistant professor in the Department of Epidemiology and associate director of the School’s Center for Communicable Disease Dynamics, on a project that would connect data about perceptions of malaria risk to the actual risk. Cohen says malaria programs could use that information to calibrate

For public health, the key question is: When it is beneficial to charge a price for an intervention and when it is not? Research has shown that the best price for many prevention efforts is free, explains Cohen. It may not make economic or public health sense, but we human beings are much less likely to take steps to prevent illness than to treat it. We procrastinate. We forget. “If, on top of that, it costs something, then demand for preventive products like bed nets is too low,” she says.

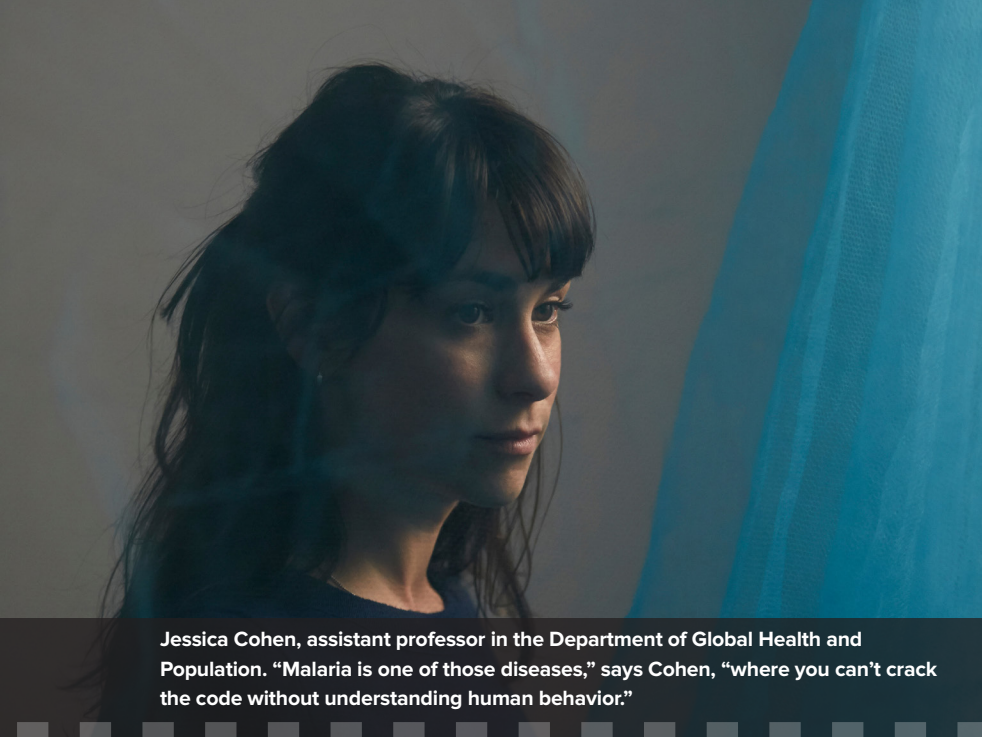
The behavioral economics of treatment is a different story. People recognize that they need it and are much more willing to pay. But there’s a sweet spot between charging too much, so people can’t afford the treatment, and charging too little, which can lead to indiscriminate and inappropriate use of a treatment.

OVERCOMING INACTION

Cohen is now branching out from malaria to explore family planning

both maternal and child health. As Cohen explains, it’s difficult to get women to even think about family planning after they’ve had a baby, let alone do something about it. “You have a lot of competing priorities. You are tired and overwhelmed. It’s hard to coordinate with your partner what type of contraception you should use. And there are a lot of mistaken beliefs about not needing it now and putting it off—that contraceptives have major side effects, that they interfere with breast-feeding, and that you can’t get pregnant if you are breast-feeding.”

Many government health programs offer vouchers that make family planning services free, but women don’t use them—suggesting that price and availability are not the issues. Cohen is now testing whether adding an expiration date to the vouchers might make a difference. The preliminary results are encour-



Jessica Cohen, assistant professor in the Department of Global Health and Population. “Malaria is one of those diseases,” says Cohen, “where you can’t crack the code without understanding human behavior.”

aging, she says. “We are applying a very simple concept from psychology: deadlines overcome inaction.”

Human behavior is tricky, she adds, but it is tricky in predictable ways. Theories of procrastination, limited attention, and habit formation can be used to design and test countless public health programs and projects, from vaccination campaigns to water purification projects to healthful-eating promotions. Cohen envisions a future of more efficient and effective public health and international development efforts, if only because governments, NGOs, and other organizations are finally taking evidence-based-and-burnished behavioral economic factors into account. To ignore them is to court failure, waste resources, and possibly cost lives. “Sometimes all you need is to nudge people and human behavior takes care of the rest,” she says.

LIFE ON THE EDGE

Although Cohen enjoys full professional support from her husband, Peter Kovalko, a building contractor, she is hyper-busy these days keeping up with motherhood and academic responsibilities. Her trips to eastern Africa are less frequent.

On her shelves is a reminder of what a dangerous part of the world it can be: about 30 binders of paper surveys of a malaria drug adherence project in Uganda, managed by her former doctoral student, Elif Yavuz, who was killed in the September 2013 terror attack on the Westgate mall in Nairobi. As she worked on a paper based on the project, Cohen read hundreds of e-mails she had received from Yavuz. “They have these wonderful personal notes like, ‘Today I taught the children in the village how to do the Thriller dance.’ It’s hard to read them. Really awful.”

Cohen says she has always worried about the people who work for her,

and Yavuz’s death made her that much more apprehensive. She insists on safety precautions but struggles with the “mother-mentoring balance.” “I remind myself that they are basically adults and that they make their own decisions. At the same time, I have to admit that if Elif had still been working for me at the time of her death, it might have pushed me to stop this line of research altogether.”

In her own career, Cohen describes herself as teetering on a line between public health and economics. There are practical problems to the balancing act. It is difficult, for example, to know where to publish her work—in an economics journal or a medical or public health one. “It’s not just about publishing,” she explains. “It is a matter of how to design projects that make sense and have an impact in both worlds.”

But Cohen finds it immensely satisfying—and important—to bring her behavioral health perspective to the realms of international development and public health programs. “Sometimes I worry that behavioral economics is viewed as just academic tinkering,” says Cohen. “But it is tinkering that can uncover ways to make public health smarter and more successful. What could be more important than that?”

Peter Wehrwein is a Newton, Massachusetts-based journalist, specializing in health care.

A

Anthony Covarrubias, PhD '15, grew up in a working-class neighborhood in South Los Angeles. While celebrities in sports cars whizzed to the beach just a few miles away, Covarrubias's neighbors waited in long lines at the local health clinic for low-quality care they couldn't afford. Although his parents worked hard to make ends meet, access to health care and health benefits was not always available. Acutely aware of this disparity from a young age, Covarrubias decided to get an education and help correct the injustice.

continued

A BOLD PATHWAY IN LIFE— AND BIOLOGY



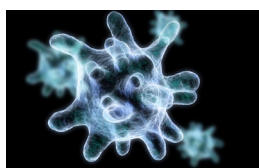
Anthony

HARVARD SCHOOL OF PUBLIC HEALTH



Department of Genetics & Complex Diseases

For this Harvard T.H. Chan School of Public Health doctoral student, now in his final year in the Biological Sciences program, the quest to cure metabolic diseases is personal. He's seen family members and neighbors suffer from diabetes and recently learned of a graduate from his high school who died young from atherosclerosis. Finding a cure for conditions that disproportion-



“The best part of being a molecular biologist is that we can think of crazy ideas and actually try them.”

—Anthony Covarrubias, PhD '15

ately shorten the lives of the poor and people of color won't be easy, but Covarrubias is in it for the long haul.

“Science teaches you to be patient and persevere,” he says. “Sometimes experiments don't work out. Sometimes we give it our best effort and it's still not enough. But that's what I have signed up for.”

CONVINCED OF THE POWER OF SCIENCE

Covarrubias brings a conviction in the power of science to explain the world and make it a better place, as well as an acute awareness of how the pathways in life—as well as in biology—can change.

On a typical day he pulls out a bottle of blue liquid and portions it into a plastic tray indented like an egg carton. In the tray are macrophages—crucial immune system cells.

He slides it into a gene sequencing machine and leans in close to the monitor, brow furrowed. Maybe this time the bar graphs filling the screen will unlock the mysteries of his lab-grown samples—and point the way to a cure for diabetes.

Macrophages are frontline troops in the war against infections, surrounding and digesting bacteria and other cellular invaders

and secreting chemicals that launch the process of inflammation. In many overweight and obese people, however, macrophages set off a state of chronic inflammation that can usher in a host of metabolic woes, such as diabetes and atherosclerosis.

Yet just as macrophages trigger inflammation, they also can shut it down. And locating the switch that determines whether the cells' inflammatory or anti-inflammatory pathway is activated could have lifesaving consequences for millions of people.

That's what Covarrubias hopes to find and learn how to control. “The best part of being a molecular biologist is that we can think of crazy ideas and actually try them,” he says. “Every now and then, one of them works—and that's what drives me.” One of his most important findings, which linked a protein in a genetically engineered mouse to macrophage

activation, was published this past November in *Nature Communications*.

LESSONS FROM SKID ROW

Covarrubias's family wasn't poor, but he grew up surrounded by poverty and saw clearly from a young age the ways it can stunt the health and potential of those it touches. Many of his friends dropped out of high school, got hooked on drugs, and joined gangs.

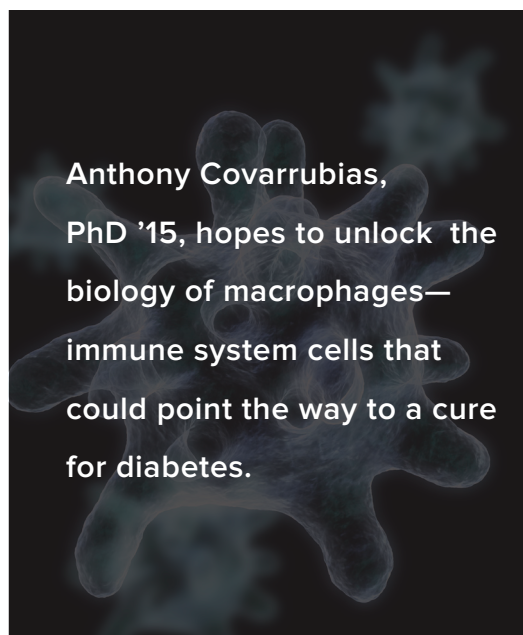
Visiting Los Angeles's Skid Row as a high school volunteer, he was drawn to talk to the people who call the five-block district of makeshift shelters home. “A lot of them were just like you and me, at one time,” he says. “They had jobs and families who cared about them. But then something happened, like a divorce, a death, or onset of mental illness, which made them lose control of their lives. With some assistance, many of them could get back on track.”

His focus returned to Skid Row as an undergraduate researcher at the University of California, Los Angeles (UCLA), assisting in the data analysis of a health care intervention for drug addicts in the neighborhood. Though he had once considered becoming a doctor to help improve health in his community, the experience introduced him to public health

as an avenue for using his passion for science to help improve people's lives. Here was a way to delve into the causes of disease at their most fundamental level.

SUPPORT AND HEALTHY COMPETITION

UCLA was also an eye-opener in other ways. Even coming from a respected Catholic high school, Covarrubias was behind his more privileged college classmates—including his film-major roommate—in science classes. But he persevered, and eventually formed a study group with other students of color who helped each other succeed. “We realized that together, we had so much more brain power,” he says.

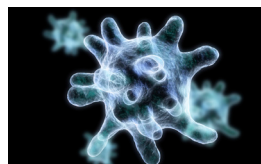


Anthony Covarrubias, PhD '15, hopes to unlock the biology of macrophages—immune system cells that could point the way to a cure for diabetes.



the lab next door to another student and see them every day, but still have no clue what they are doing,” says Covarrubias.

over the years, including those in the Biological Sciences in Public Health Summer Research Program for minority undergraduates.



“We realized that together, we had so much more brain power. We always tried to outdo each other. You’d see your friend get a 97, so you wanted to get a 98.”

—Anthony Covarrubias

The group became a source both of support and of healthy competition. “We always tried to outdo each other,” says Covarrubias. “You’d see your friend get a 97, so you wanted to get a 98.”

At Harvard Chan, Covarrubias helped launch a similar support group for students in his program. The Biological Sciences data club meets regularly to talk about highs and lows of members’ individual research efforts in a social, pressure-free environment. “You could be working in

INFECTIOUS ENTHUSIASM

His recent findings on the link between metabolism and macrophage activation have opened a new research direction in the lab of Tiffany Horng, his adviser. “It would not have been possible without him,” says Horng, assistant professor of genetics and complex diseases, adding that her lab has also benefited from Covarrubias’ “infectious enthusiasm.”

In Horng, Covarrubias has a mentor who won’t settle for less than the best. He tries to be as encouraging with the students he’s mentored

Covarrubias hopes to someday lead an academic research lab. He’s undaunted by statistics on the glut of graduates competing for dwindling tenure-track positions. “I’m not scared by numbers that say only 30 percent of us will get academic jobs,” he says. “Compared to where I started out, those are really good odds.”

—Amy Roeder is assistant editor of Harvard Public Health.

GIFT REPORT

Our supporter lists—including a complete list of alumni donors to the School—are available online at hsph.harvard.edu/campaign/honor-roll-of-donors/

Building on Our Momentum



Jeannie and Jonathan Lavine

When we signed on as co-chairs of the Campaign for Harvard School of Public Health in 2013, we could not have imagined the outpouring of generosity in support of public health research and education that the School would receive in just one year. Today, we celebrate an extraordinary gift from the Chan family's Morningside Foundation. We celebrate a record-breaking year in fundraising, during which the School raised \$103.3 million. And we celebrate the hundreds of individuals and organizations—including 580 new donors to the School—who joined together to improve the quality of life for people across the globe.

The following pages list many of those who generously stepped up over the past year to support people, ideas, and resources at the School. We would like to acknowledge just a few here: Murat Ülker, who contributed \$24 million on behalf of his family to establish the Sabri Ülker Center for Nutrient, Genetic, and Metabolic Research; Matthew and Monika McLennan, who established the McLennan Family Fund for Innovation and Entrepreneurship with a gift of \$5 million over five years; an anonymous donor who contributed \$10 million to the John B. Little Center for Radiation Sciences and Environmental Health; and Theo and Wendy Kolokotronis, who gave \$5.5 million to establish a joint professorship in the Departments of Biostatistics and Epidemiology.

The remarkable support from these individuals and from hundreds of other generous donors will have a dramatic impact on the School, on our students, and on the people we serve. In FY 2014, 1,645 donors made gifts of between \$25 and \$250,000 that together totaled more than \$4.5 million, demonstrating the cumulative effect that philanthropy at all levels can have.

But, as Winston Churchill once said, "Success is not final." We must build on our momentum.

The Ebola epidemic offers a sobering reminder that the four threats to global health that are the Campaign's focus have not abated. Each of these threats—old and new pandemics, poverty and humanitarian crises, harmful social and physical environments, and failing health systems—is starkly illustrated by the current crisis in West Africa. These threats are inextricably linked and must be tackled in a coordinated, multidisciplinary way. And that's where the School shines the brightest: Faculty, students, and alumni from a wide range of fields work together every day to solve complex problems that affect the health of millions.

Your support of these efforts is critically important for people suffering from disease, war, and lack of access to health care. Your continued generosity creates a beacon of hope both here at home and around the world. On behalf of the Campaign for Harvard T.H. Chan School of Public Health, we are grateful for every gift, large and small, each of which helps build positive change and brighter prospects for individuals and communities everywhere.

Jonathan Lavine, MBA '92

Co-chairs, Campaign for Harvard T.H. Chan School of Public Health

Jeannie Lavine, AB '88, MBA '92

More about the Naming Gift

Money from The Morningside Foundation and the Chan family creates “an annuity in perpetuity”

Dean Julio Frenk calls The Morningside Foundation gift an “annuity in perpetuity.” Here’s why:

The School may not spend the \$350 million itself. The income generated by this endowment—not the principal—will be available to support the School’s mission. A portion of the income will also go back into the endowment, to accommodate inflation and ensure that future generations will benefit from this generous gift.

INCOME FROM THE GIFT OVER TIME

FISCAL YEAR	PROJECTED INCOME FROM GIFT*
2014–2015	--
2015–2016	\$ 900,000
2016–2017	\$ 3,600,000
2017–2018	\$ 6,300,000
2018–2019	\$ 9,000,000
2019–2020	\$ 11,700,000
2020–2021	\$ 14,250,000
2021–2022	\$ 15,750,000

Because the gift from The Morningside Foundation will be received over a six-year period—and the income from the gift can be spent after it is earned, but the principal is never spent—the chart shows how the contribution will enhance the School’s budget over time. The School’s overall revenue for FY 2013–2014 was \$357 million.

**based on 4.5% distribution*

INITIAL INVESTMENT PRIORITIES

The School will focus on several important areas to support its mission of educating new generations of global health leaders and producing powerful ideas that improve the lives and health of people everywhere.



PEOPLE

STUDENTS

- Institute a loan forgiveness pilot program for graduates who go on to work in underserved communities in the U.S. or developing countries around the world.
- Increase student financial aid.

FACULTY

- Support a number of junior faculty sabbaticals.
- Supplement competitive recruitment packages to attract the next generation of faculty members.
- Provide a small but meaningful scholarly allowance for faculty who do not receive endowment support.

IDEAS

- Create a fund to support pathbreaking research ideas generated by faculty and students.
- Expand support for educational excellence initiatives.



RESOURCES

- Begin the building maintenance that had been deferred.
- Renovate aging laboratory space.
- Renovate learning spaces.
- Expand funding for “big data.”

SUSTAINABILITY

- Replenish reserves depleted by the 2008–09 financial crisis and create a buffer for the future.

The Leadership Council Annual Meeting: Big Data, Big Impact

OCTOBER 16–17

The annual meeting of the School's Leadership Council explored the many ways that researchers at the School are using big data to tackle today's public health challenges. Keynote speaker Kent Walker, AB '83, senior vice president and general counsel for Google, Inc., highlighted developments such as wearable devices that allow people to track and monitor their fitness, and satellite and cellphone data being used to track population movements in order to shed light on the spread of disease. Faculty sessions during the event focused on big data's role in research on smartphones and mental health; on its ability to help uncover connections between health and environmental exposures; and on its usefulness during humanitarian crises.

Top: Kent Walker, AB '83

Middle row from left: Leadership Council members Kathleen Ruddy; Frank Noonan and Barrie Damson, AB '56; Shaw McDermott, AB '71

Bottom row from left: Presenter Jocelyn Kelly, SM '08, director of the Harvard Humanitarian Initiative's Women in War Program; Harvard Corporation Senior Fellow William Lee, AB '72, with Dean Julio Frenk



The Fellowship Celebration

APRIL 9

The annual Fellowship Celebration honored the School's most generous supporters of financial aid. At this festive occasion, individuals and organizations that made gifts of \$10,000 or more to student aid in the past year met School leaders as well as the students who benefit from their extraordinary contributions.



Clockwise from top left: Leadership Council member Jeannine Rivet, Charlie Upton, SM '15, and Gund Endowment recipient Caitlin McMurray, SM '15; former Dean Barry R. Bloom with Perrine Marcenac, PhD '18, Barry R. and Irene Tilenius Bloom Fellow; Speaker Calvin Kagan, MPH '14, a Carson Scholar, with Russ and Judy Carson and Dean Julio Frenk; Carson Scholar Diagaunet Dodie, MPH '14, Russ Carson, Leandro Bournissaint, MPH '14, and Carson Scholar Imran Mahmud, MPH '14, Dean Julio Frenk; Peter Choo, MPH '91, DPH '96, and Stephanie Choo with Vwaire Orhurhu, MPH '14, a Hesed Africa Scholarship Fund recipient; Leadership Council Executive Committee member Mitchell Dong, AB '75, with Anusha Vable, SD '15, a former Dong Scholar and current recipient of the Mary E. Wilson and Harvey V. Fineberg Fellowship in Cancer Prevention



Sabri Ülker Center for Nutrient, Genetic, and Metabolic Research established



SEPTEMBER 29

Ali Ülker, representing the Ülker family of Istanbul, Turkey, visited the School for the announcement of a gift of \$24 million to establish the Sabri Ülker Center for Nutrient, Genetic, and Metabolic Research under the direction of Gökhan Hotamisligil, MD, PhD, Chair, Department of Genetics & Complex Diseases, J.S. Simmons Professor of Genetics and Metabolism.

Gökhan Hotamisligil, chair of the Department of Genetics and Complex Diseases and principal investigator of the Sabri Ülker Center for Nutrient, Genetic, and Metabolic Research, with Ali Ülker

Leadership Council Regional Event

Obamacare: Today and in the Future

JUNE 11

Timothy Johnson, MPH '76, former ABC News chief medical editor, led a conversation at the Harvard Faculty Club on universal health care in the United States, including the pros and cons of the Affordable Care Act and what to expect in the next five years. Panelists included: Robert Blendon, senior associate dean for policy translation and leadership development, Richard L. Menschel Professor of Public Health and professor of health policy and political analysis; and John McDonough, MPA '90, professor of the practice of public health. Johnson is a member of the Leadership Council and the Campaign Committee.



Top: John McDonough, MPA '90, professor of the practice of public health, and Chester Douglass, professor of oral health and epidemiology *emeritus*, Harvard Medical School

Bottom: Elinor Nelson and Meredith Benedict



Alumni Weekend: Big Data

OCTOBER 24–25

Nearly 200 alumni returned to the School to reconnect with former classmates, network, and learn more about current research in public health. This year's symposium focused on ways in which big data will have an impact on the future of public health. Speakers touched on big data's role in advancing science, and how it is affecting epidemiology, health care organizations, and the government. See page 10 for this year's alumni award winners.



Clockwise from top left, Alumni Weekend speaker Alex "Sandy" Pentland, MIT professor and author, *Social Physics*; A.G. Breitenstein, MPH '99; left to right, Sandeep Karnik, MPH '04; Anthony Dias, MPH '04; Thomas Mote, MPH '04; Laura Kozek, SM '07

Centennial Sculpture Unveiling

OCTOBER 6

Dean Julio Frenk welcomed Santiago Medina, MPH '97, for the unveiling of the sculpture he created and donated in honor of the School's centennial. Inspired by the double helix of a DNA molecule, the sculpture is entitled "Life." Medina is an American-Colombian artist and physician. An earlier sculpture of his, "Maternal Love," is on display in the lobby of the FXB Building.

Artist Santiago Medina, MPH '97, second from right, with members of his family



INDIVIDUALS

Individual donors provide critical support towards Harvard Chan's mission of promoting powerful ideas for a healthier world. Gifts of all levels from our alumni and friends provide crucial support for student scholarships, faculty research initiatives, innovations in educational strategies, equipment purchases, the renovation and upgrade of our facilities, and more. The following list recognizes individuals who made contributions of \$250 or more.

\$10,000,000+

Anonymous
Ülker Family

\$5,000,000–\$9,999,999

Marilyn B. Hoffman Trust
Theo A. Kolokotronis
Wendy E. Kolokotronis
Matthew McLennan
Monika McLennan

\$1,000,000–\$4,999,999

Anonymous
Mala Gaonkar *
Richard L. Menschel
Ronay A. Menschel
Estate of Theodore A. Montgomery, MPH '55
Ajay G. Piramal
Swati A. Piramal, MPH '92
Daniel H. Stern

\$500,000–\$999,999

Dhanin Chearavanont
Domenic J. Ferrante
Molly Ferrante
John C. Hansen, Jr.
Katie Vogelheim

\$250,000–\$499,999

Evelyn Byrd Donatelli
Mike M. Donatelli
Albina du Boisrouvray
Deborah Rose, SM '75
John W. Rowe
Valerie Ann Rowe
Jan A. Stolk
Linda Tao *

\$100,000–\$249,999

Anonymous (4)
Theodore Angelopoulos
Gianna Angelopoulos-Daskalaki
Lynne Berkowitz
Roger S. Berkowitz
Rita D. Berkson, SM '77 *
Amy M. Brakeman
Ed Brakeman
Judith Carson *

Russell L. Carson *
Irene M. Danilovich
John J. Danilovich
Sarah B. Glickenhause
Seth M. Glickenhause
Gustave M. Hauser
Rita E. Hauser
Ralph M. James
Jeannie Bachelor Lavine
Jonathan S. Lavine
Catie C. Marron
Donald B. Marron
Joseph M. Miller, MPH '60
Kristin Williams Mugford *
Stephen A. Mugford
Mark O'Friel
Lisle Payne
Roslyn B. Payne *
Elizabeth K. Pozen
Robert C. Pozen
Randolph B. Reinhold
J. Frederick Weintz, Jr. *
Rosemary Ross Weintz
Marvin Zelen†
Thelma Zelen
Jeffrey Zients *
Mary Menell Zients *

\$50,000–\$99,999

Phyllis D. Collins *
Jack Connors, Jr.
Eileen Connors
Joanna Berwind Creamer
Barrie M. Damson *
Joan Selig Damson
Bruce S. Gillis, MPH '74
Bayard Henry *
Julie E. Henry, MPH '91 *
Bernice Huang
Joan L. Jacobson
Julius H. Jacobson II
Nancy T. Lukitsh *
Fredrick K. Orkin, SM '01 *
Susan L. Orkin *
Mary Revelle Paci *
Irene Pollin *
Jeannine M. Rivet *
Srinivas M. Sastry, MPH '90 *

Eric E. Schmidt
Wendy B. Schmidt
Andrew B. Suzman
Xiaobin Wang
Nathalie Wong *
Stephen R. Wong *
Xiping Xu, SM '93

\$25,000–\$49,999

Leonard Berkowitz
Linda Berkowitz
Jane Carpenter Bradley *
John M. Bradley *
Katherine States Burke
T. R. Burke
Mary M. Finnegan
Paul J. Finnegan
Edward P. Flinter
Karine Flinter
Stephen B. Kay
Florence R. Koplow
John L. McGoldrick *
Pam Omidyar
Susan Butler Plum
Alejandro Ramirez
Carlos E. Represas
Phyllis Rose
Bernard Salick *
Gloria Salick *
Charles B. Sheppard II *
Fredericka O. Stevenson
Howard H. Stevenson *
Clare Villari
Jeffrey C. Walker
Suzanne C. Walker
Marilyn R. Walter *
Ronald A. Walter, SM '72 *
Fair H. Wang, SM '92 *
David C. Weinstein
Gail V. Willett
Walter C. Willett, MPH '73, DPH '80 *

\$10,000–\$24,999
Anonymous (3)
Christine Allen *
Roger L. Barnett
Sloan Barnett
Joan T. Bok

Joseph D. Brain, SM '63, SD '66
Judith B. Brain
John W. Brown *
Christy Turlington Burns
Tianxi Cai, SD '99
Mary Carlson-Earls
Raymond G. Chambers
Peter W. Choo, MPH '91, DPH '96 *
Stephanie S. Choo *
Lawrence H. Cohn
Roberta L. Cohn
Deirdre P. Connelly
Kenneth H. Cooper, MPH '62 *
Howard Cox *
James B. Crystal
Anne Fitzpatrick Cucchiari
Stephen Cucchiari
Joan P. Curhan *
Ronald C. Curhan *
Stuart Davies
Jan L. Deming
Pamela Dippel Choney
Felton J. Earls III
Benjamin B. Edmands
Barbara Field
Harvey V. Fineberg *
Molly Finn
Kiar First
Mike First
Dorothy J. Ganick, SM '67 *
David J. Goldhill
Ariella Golomb
Jeffrey A. Goodby
Laurence J. Hagerty *
Holly D. Hayes *
Paula Ivey Henry, SM '95
Snowden M. Henry
Warren G. Herried II
Robert M. Holster
Donald R. Hopkins, MPH '70
Ernestine Hopkins
Charlotte von Clemm Iselin
Charles H. Klippel, SM '80 *
Lee Klippel
Arthur L. Loeb
Per Lofberg
Beth V. Martignetti *

* individuals who have made a gift for five or more consecutive years

† deceased



Ali Ülker, at left, with the School's Gökhan Hotamisligil

“Our family wanted to establish a world-class research center in honor of my late grandfather, Sabri Ülker, founder of Yıldız Holding, who was an entrepreneurial pioneer in Turkey and was known for his spirit of generosity.

“We made a long-term commitment to support Professor Hotamisligil’s research because we believe his pathbreaking work holds the best potential for addressing what we feel is the biggest crisis facing people around the globe: metabolic diseases. This was very important for our family because we feel a deep sense of responsibility to carry on Sabri Ülker’s legacy of investing in the future of humanity.

“There should be a certain environment for science that fosters curiosity and innovation—a free environment of labs and research. This exists within the School of Public Health and it is why we chose Harvard and this School as the place to establish the Sabri Ülker Center for Nutrient, Genetic, and Metabolic Research. Our philosophy is: Where the best science is, we go.

“Even if there is only a small outcome to this research, there could be something that triggers another discovery that could solve other problems. We hope our gift will serve the whole of humanity in Turkey, the U.S., and all around the world.”

—Ali Ülker, grandson of Sabri Ülker and Vice Chairman of the Yıldız Holding Board of Directors, Turkey, speaking on behalf of Murat Ülker and the Ülker family

INDIVIDUALS (CONTINUED)

Carmine A. Martignetti *
 Eugene A. Mickey, MPH '82 *
 Sue Mickey
 Jane Mosakowski
 William Mosakowski
 Margaret S. Patricelli
 Robert E. Patricelli
 Michael R. Pollard, MPH '74
 Penelope Pollard
 Sheila L. Raghavan, SM '01
 Lawrence Rand
 Michael R. Reich
 David I. Scheer *
 Tracey Zarembler Scheer *
 Roberta Schneiderman *
 Lisa H. Schwartz
 Mark Schwartz
 Kate W. Sedgwick, MPH '10 *
 Theodore Sedgwick
 Eleanor G. Shore, MPH '70 *
 Miles F. Shore *
 Ivy Silver
 Richard M. Smith *
 Paula Sneddon
 Steven L. Sneddon, SM '77, SD '79 *
 Lynn Shapiro Snyder
 Carl W. Stern, Jr. *
 Natasha Stowe *
 Richard H. Stowe *
 Ruth L. Suzman
 Edwin J. Taff *
 Lynn R. Taff *
 Isabelle Valadian, MPH '53 *
 Louisa von Clemm *
 Stefanie C. von Clemm *
 Karen B. Watson
 Stuart H. Watson
 John J. Whyte, MPH '93 *
 Bradford W. Wilkinson
 Mary Stare Wilkinson *
 Michelle A. Williams, SM '88, SD '91
 Mary E. Wilson
 Dyann F. Wirth
 Peter K. Wirth
 Ellen M. Zane *

\$5,000–\$9,999

Anonymous (3)
 Jeanne B. Ackman
 Nancy Budge *
 Humayun J. Chaudhry, SM '01 *
 Prudence Slitor Crozier *
 William M. Crozier, Jr. *
 Samuel A. Forman, MPH '77,
 SM '80 *
 Yulika E. Forman

Elizabeth R. Foster
 Fred K. Foulkes
 Graceann E. Foulkes
 Ben S. Gambill, Jr.
 Katie H. Gambill *
 Jerome D. Gramaglia
 Susan M. Guillory *
 Kathryn I. Hentz
 Ned Hentz
 Christine S. Heuwing
 Ralph Heuwing
 Judith E. Hicks *
 Laurence J. Hicks
 James J. Hummer
 Priscilla S. Hunt
 Richard M. Hunt
 Edgar N. James, MPH '79
 G. Timothy Johnson, MPH '76
 Nancy Johnson
 Stefanos N. Kales, MPH '92 *
 Ana Y. Nieto-Kales
 Katherine Kinsella
 Steven Leshner
 Barbara N. Lubash, SM '76
 Bridget Macaskill
 John Macaskill
 Nyla Medlock
 Jennifer Miles
 Trevor Miller
 Robert L. Mittendorf, MPH '87,
 DPH '91 *†
 Carol Paraskevas *
 Karl E. Peace
 Susan Putnam Peck, SM '87, SD '91
 Marc A. Pfeffer
 Robert O. Preyer
 Douglas Rauch
 Caitlin T. Ravichandran, PhD '07
 Hari Ravichandran
 Eliot I. Snider
 Scott D. Solomon
 Carolyn Spengler
 John D. Spengler, SM '73
 Amy A. Spies
 Lu Tian, SD '02
 Josef H. von Rickenbach
 Michael P. Walsh
 Kim Williams
 Kazuko Yoshizawa, SD '97
 Jianming Yu, PhD '98
\$2,500–\$4,999
 Anonymous
 Laurent H. Adamowicz
 Arthur Bugs Baer
 Susanna E. Bedell
 David J. Berck, MPH '96 *

Jesse A. Berlin, SD '88 *
 Robert J. Blendon
 James D. Blum
 Jeanine Boyle, MPH '94
 Paul R. Branch, SM '82 *
 Irene S. Briedis
 John Briedis
 Mark L. Casey
 I-Shou Chang
 Norma Dana
 Karen L. Davis, SM '78 *
 Barbara Deane
 Maurice A. Deane
 Jean M. Doherty-Greenberg,
 MPH '79
 Harriett M. Eckstein
 Leslie M. Feder
 Julio Frenk *
 Barbara Goodman
 David Goodman
 David A. Greenberg, MPH '80
 Elizabeth M. Hagopian
 Alice J. Hausman, MPH '85
 Lilli Schwenk Hornig
 Chao Hsiung
 Ping Hu, SM '93, SD '96
 Susanna J. Jacobus, SM '03
 Marjorie E. Kanof, MPH '91 *
 Ellen L. Kaplan *
 James A. Kaye, MPH '99, DPH '01 *
 Nirmal K. Kumar
 Nisha Kumar
 Kuang-Kuo Gordon Lan
 Ana M. Langer
 Garrick H. Leonard
 John H. MacMillan IV *
 Louise P. MacMillan, SM '78 *
 James A. Manganello, MPH '80 *
 James L. McGee, SM '02
 Rumiko Mizuuchi-Adamowicz
 Augustine E. Moffitt, Jr., SM '69,
 SD '73 *
 Joanne Moffitt
 William M. Moore, MPH '66 *
 Patricia A. Moran, MPH '04 *
 Frank Noonan
 Patricia Noonan
 Peng Qu
 Carol Raphael *
 Kim Rubin
 Ruth C. Scheer
 Richard B. Siegrist, Jr.
 Hope H. Snider, MPH '64 *
 George H. Strong *†
 Eric C. Weintz
 Joy Weintz

Regina Wiedenski
 Stephen H. Wise
 H. Robert Wismar
 Theresa Woolverton
 William Woolverton
 Anson E. Wright, SM '05 *

\$1,000–\$2,499

Anonymous (2)
 Edward J. Alfrey, SM '05
 Laura Alpern *
 Louis M. Alpern, MPH '74 *
 Christopher N. Ames
 Amit Banerjee
 Donnalisa P. Barnum
 William M. Barnum
 Barbara D. Beck *
 Michael Behringer
 Baroline H. Bienia, SM '76
 Richard A. Bienia, MPH '74
 Kenneth D. Bloem, SM '77
 Barry R. Bloom
 Gerald H. Blum
 Donald S. Bosch
 Carolyn Kay Briggs
 Louis W. Cabot
 Mabel H. Cabot
 Lynne M. Cavanaugh, SM '79
 Hennessey Chang
 Kevin C. Chang, MPH '85 *
 Li Chen, SD '96
 Su-chun Cheng, SD '95
 Eunyoung Cho, SD '99 *
 Estate of Johanna F. H. Coy, '48
 Norene T. Culhane
 Thomas E. Culhane, SM '08
 Tom Daschle
 Richard M. Daum, SM '78
 Marc de Somer
 Andrew G. Dean, MPH '72 *
 Yolanda Do Espirit Santo
 Douglas W. Dockery, SM '74,
 SD '79 *
 Mitchell L. Dong *
 Robin LaFoley Dong *
 Mei Sheng Duh, SD '96 *
 Barbara E. Eckoff
 Ronald D. Eckoff, MPH '68 *
 Esther Feldberg
 Sumner L. Feldberg
 Jonathan E. Fielding, MPH '71
 Fred N. Fishman *
 Larry S. Gage *
 Peter Gardiner
 Rose H. Goldman, MPH '80,
 SM '81 *
 Natalia Gormley
 William B. Gormley, MPH '11

* individuals who have made a gift for five or
 more consecutive years
 † deceased

INDIVIDUALS (CONTINUED)

Jennifer N. Greenberg, SM '00
 Lanjiang Guo
 Thomas L. Hall, MPH '61 *
 Cheryl L. Hamlin, MPH '94
 Patricia Hartge, SM '76, SD '83 *
 Eileen P. Hayes, SD '79 *
 E. Rodman Heine, MPH '63 *
 Rita W. Herskovits
 Thomas Herskovits
 Christopher T. Hitt, SM '75 *
 Vincent T. Ho
 Helen M. Hunt
 Zhezhen Jin
 Anthony Kales *
 Joyce Kales *
 Linda W. Kalinowski, SM '80
 Thomas W. Kalinowski, SM '77, SD '81 *
 Robert S. Kaplan
 James G. Kitendaugh
 Pauline K. Koh-Banerjee, SD '03
 Shingchang S. Kou
 Bernard E. Kreger, MPH '70
 Simeon M. Kriesberg *
 Suzanne Steinbock Larsen
 Lucian L. Leape *
 Martha P. Leape
 Hee Ja P. Lee
 I-Min Lee, MPH '87, SD '91
 Jay Won Lee, MPH '07
 John W. Lehmann, MPH '88
 Kathleen S. Lehmann
 Elizabeth K. Liao *
 Danyu Lin
 Jin-Syng Lin
 Barbara J. Lind
 Jeanne E. Loughlin, SM '79 *
 Isabel W. Malkin *
 Peter L. Malkin *
 JoAnn E. Manson, MPH '84, DPH '87 *
 Shaw McDermott
 Marcus McKinney
 Cyrus Mehta
 Satu Mehta
 Anne Miller
 Ann E. Moran, MPH '75, DPH '80
 Royce Moser, Jr., MPH '65 *
 Robert Muh
 Linda C. Niessen, MPH '77 *
 Tianhua Niu, SD '98
 Thomas L. P. O'Donnell *
 Mayling Oey, SM '74
 Eileen D. Pearlman, SM '79 *
 Mei Peng
 Duncan B. Pitcairn
 Thomas D. Polton, SM '83 *

K. M. Maqsurur Rahman, MPH '68
 Carol H. Rice, SM '75 *
 John R. Robinson
 Donald J. Rosato, MPH '63 *
 Kathleen T. Ruddy
 Jack W. Schuler *
 Zubin C. Shroff, SM '09, SD '13
 Robert P. Smith
 Salwa J. Smith
 Alix Smullin *
 Robert Snyder *
 Ellie Starr *
 Howard R. Steinberg, MPH '75 *
 John Su
 Carol Jean W. Sutor, SM '85, SD '88 *
 Richard Sutor *
 Susie Y. Tam
 Elizabeth Tashjian
 Paula Thier
 Samuel O. Thier
 Gerald Tulis *
 Norma P. Veridiano, SM '01
 Anthony J. Vita, MPH '02
 Helen Hai-Ling Wang, MPH '76, DPH '79 *
 Virginia G. Watkin *
 Carl Wheat
 Andrew M. Wiesenthal, SM '04 *
 Daniel I. Wikler
 Dorothy L. Wilson, MPH '66 *
 James F. Wittmer, MPH '61 *
 Scott K. Wolff, SM '84, SD '00
 Erik J. Won, MPH '03 *
 Grace Wyshak, SM '56
 Xin Xu
 Qing Yao
 Tzy-Jyun Yao
 Wai Man Yue
 Summer L. Zheng, PhD '05
 Margaret Ferris Zimmermann

\$250-\$999

Anonymous
 Theodor Abelin, MPH '63 *
 Elie M. Abemayor, SM '80 *
 Susan G. Albert, SM '89 *
 Talib Y. Ali, MPH '12
 Elizabeth N. Allred, '78 *
 Teresita Alvarez-Bjelland
 Susan E. Andrade, SD '94
 Andrea J. Apter, SM '97 *
 Loreen J. Arbus
 Jean-Marie Arduino, SD '00
 Gale M. Aronson
 Stanley M. Aronson, MPH '81 *
 George T. J. Au, MPH '84
 Ronna C. Bach, MPH '91

Linda G. Baer, SM '93 *
 Stuart G. Baker, SM '82, SD '84
 Amy C. Barkin, MPH '76 *
 Lisa S. Barnes, SM '81 *
 Layla Parast Bartroff, PhD '12
 Ritu S. Batra, MPH '00
 Elizabeth L. Baum, MPH '86
 Joshua S. Benner, SM '00, SD '02
 Gabrielle Bercy, MPH '93 *
 Bennett Beres
 Klaus Berger, SM '94
 Robert Berke, MPH '75
 Lisa F. Berkman
 Henry H. Bernstein, SM '13
 Christian Bjelland
 Linda Cabot Black
 Bonnie B. Blanchfield, SM '91, SD '95 *
 Gregory S. Blaschke, MPH '99
 Sheila R. Bloom, SM '78 *
 John D. Blum, SM '74 *
 Lauren Hammer Breslow, MPH '06
 Mary L. Brown, MPH '01 *
 Chantal Z. Buchanan, SM '84
 Joanna Buffington, MPH '94 *
 Arnold Bunyaviroch, SM '90
 Jeffrey P. Burns, MPH '94
 Melanie W. Burns, MPH '93
 Buffy B. Cafritz
 Deana Calvelli
 Debra D. Carey, SM '79 *
 J. Jacques Carter, MPH '83 *
 Luella F. Carter
 Mary E. Chamberland, MPH '82 *
 N. Bruce Chase, MPH '68 *
 Zeina N. Chemali, MPH '08 *
 Anthony L-T Chen, MPH '06 *
 Harry H. Chen
 Julia Chen, MPH '63
 Tsai-Hsiu Ruth Chen
 Yung-Cheng Joseph Chen, MPH '83 *
 Frank L. Chiang, SM '81
 Eugene D. Choi, SM '04 *
 Marla Choslovsky
 Jane H. Chretien, MPH '70 *
 Paul B. Chretien
 David B. Clarke, Jr., MPH '87
 Melanie C. Clarke, SM '78
 Ruth L. Clay, MPH '85
 Joseph A. Cook, MPH '68 *
 Shirley M. Crall
 Kathleen Ridder Crampton, MPH '74
 Lewis S. W. Crampton
 Pierre Cremieux
 Eduardo Cruz

John D. Da Silva, MPH '87, SM '92
 Jonathan G. Davis
 Kenneth M. Davis, SM '90 *
 Margot Davis
 Susan C. Day, MPH '80
 Victoria P. de Menil, SM '06
 William R. DeFoor, MPH '05 *
 Michelle A. DeNatale, SM '06
 Anthony Dias, MPH '04 *
 Lena E. Dohman-Gerhart, MPH '93
 Barry C. Dorn, SM '04
 C. Richard Dorn, MPH '62 *
 Joseph C. d'Oronzio, MPH '80 *
 Marc Dorval, MPH '01
 Janice E. Doucet
 Keith Doucet
 Wayne M. Doucet
 Kelly J. Dougherty, SM '06
 Alan Drabkin
 Stacey J. Drubner, MPH '04
 Stanley L. Dryden, SM '64 *
 Jennie A. Ozog Duffy, SM '73 *
 Robert T. Duffy *
 Christopher P. Duggan, MPH '94 *
 Gerardo D. Durand, MPH '09
 Judith A. Dwyer
 Roland D. Eavey, SM '04
 Michael A. Egboah, MPH '94
 Azimah Pilus Ehr, MPH '78
 Sameh G. El-Saharty, MPH '91
 Lisa Garnsey Ensign, SM '87
 Arnold M. Epstein
 Shannon M. Escalante, SM '01 *
 Francis A. Farraye, SM '01
 Edmond F. Feeks, MPH '96
 James D. Felsen, MPH '72 *
 Laurence B. Flood *
 Joe Flynn
 Kathleen Frith
 Akiyo Fujii
 Patricia Temple Gabbe, MPH '74 *
 Dorothy Berlin Gail
 Mitchell H. Gail
 Paul Gallo
 Homero R. Garza, MPH '76 *
 Kristen A. Geiger, SM '10
 James N. Gilbert, SM '13
 Oemer-Necmi Goek, MPH '06
 David E. Golan
 Judith D. Goldberg, SM '67, SD '72 *
 Mark Goldstein
 Richard E. Goldstein, SM '10
 Amy W. Grace, SM '95 *
 Paul E. Greenberg
 Penelope Greene
 Wendy T. Gross, SM '89

INDIVIDUALS (CONTINUED)

Alan D. Guerci, SM '02 *
 Beverly Purcell-Guerra
 Fernando A. Guerra, MPH '83 *
 Donald Halstead
 Gina Halstead
 Jaroslaw Harezlak, PhD '05
 Ming-Rong Harn, '02 *
 Jeffrey N. Harper
 Tammy C. Harris, MPH '85 *
 Elizabeth E. Hatch, SM '81 *
 Francis W. Hatch III *
 Stanley W. Hatch, MPH '95
 Glenn E. Haughie, MPH '70 *
 Jennifer C. Hawes, SM '12
 Robin C. Herman
 Lyndon V. Hernandez, MPH '09 *
 Anita Highton, MPH '69
 Alan R. Hinman, MPH '69
 Warren W. Hodge, MPH '64 *
 Elliot Holin
 Kim Hornung-Marcy
 Jane B. Horton *
 Paul F. Horvitz
 Lois C. Howland, MPH '78, SM '94, DPH '98
 Peter A. Howland, MPH '78
 John Hsu
 Hui Huang
 Pin-Hua Huang, SM '79, SD '82
 Sean E. Hunt, SM '08 *
 David J. Hunter, MPH '85, SD '88
 Laurie B. Hutcheson, SM '89
 Tzung-Jeng Hwang, MPH '93
 Mayuri Ichinese
 Boris Iglewicz *
 Raja Iglewicz, '85 *
 Margaret Igne-Bianchi
 Joseph O. Jacobson, SM '98
 Jason Jagatic
 Erin K. James, SM '14
 Vincent W. James
 Sok-Ja Janket, MPH '02 *
 Denise Jarvinen
 Hongyu Jiang
 Jim M. John, MPH '06 *
 Christine C. Jones
 Sin-Ho Jung
 Charles T. Kaelber, MPH '67, DPH '69 *
 Nancy Kaelber
 Suzan Kaitz
 Elsbeth G. Kalenderian, MPH '89
 Kotagal S. Kant, SM '99
 Tripti C. Kataria, MPH '97
 Joel Kavet, SD '72 *
 Jerold S. Kayden

Stephanie R. Kayden, MPH '06 *
 Jack C. Keane, SM '76
 James G. Kelly, SM '60
 Courtenay L. Kessler, SM '08
 Hamed Khalili, MPH '12
 Ramin Khorasani, MPH '03
 Dillon Kim, MPH '02
 Mimi Y. Kim, SM '88, SD '90 *
 Jonathan D. Klein, MPH '84
 Nancie Koenigsberg
 Soichi Koike, MPH '01 *
 Colin G. Koransky
 Joan B. Koransky, SM '84
 Caroline T. Korves, SD '04 *
 Uma R. Kotagal, SM '96
 David P. Kraft, MPH '94 *
 Stephanie B. Kraft
 Ellen M. Kramer, SM '91, SD '96
 Geoffrey Kronik
 Daniela P. Ladner, MPH '08
 Chor Yin Lam, MPH '07
 David M. Larsen
 Augusta F. Law, MPH '51 *
 Celia M. Leal da Costa Genovez
 Jennifer Leaning, SM '70
 Alvin W. Lee *
 K. Francis Lee, MPH '86
 Melinda D. Lee, SM '86
 Thomas H. Lee, Jr., SM '87 *
 Howard Leshner
 Judith Leshner
 Samuel Levey, SM '63
 Paul M. LeVine, SM '92 *
 Alan Leviton, SM '71
 Barbara Lewis
 Robert Lewis
 John H. Lichten
 Shin-Yang Liu, MPH '80
 Victor Lo
 Michael J. MacDonald, MPH '95
 Bruce A. Madison, MPH '87
 Susan K. Madison
 Sandra G. Madrid, MPH '76
 Shannon R. Magari, SD '01
 Cheng-An Mao, MPH '91
 Theodore W. Marcy, MPH '01
 Lynn M. Marshall, SD '96 *
 Sarah Armstrong Marshall, SM '90 *
 Troy M. Martin, MPH '12
 Carol I. Master, SM '81, DPH '89 *
 Zene Matsuda, SD '93
 Sherry Mayrent *
 Rika Mazaki
 Maria E. Mazorra, SM '79 *
 John F. McCarthy III, SM '78, SD '87
 Marie C. McCormick

Marjorie L. McCullough, SD '99
 John E. McDonough
 Scott W. McPhee, MPH '06
 Dorothea P. Mead *
 Craig N. Melin, SM '75 *
 Teresa M. Menke-Hargrave, MPH '77
 Peter A. Merkel, MPH '95 *
 Noelle F. Metting, SD '94
 Gregg S. Meyer, SM '93
 Jack D. Miller
 Donald K. Milton, MIH '85, DPH '89
 Catherine M. Moeller *
 Matthew P. Moeller, SM '84 *
 Gail I. Moreschi, MPH '71
 Katharine E. Morley, MPH '10
 Michael G. Morley, SM '11
 Thomas R. Mote, MPH '04 *
 Craig Mowry
 Dariush Mozaffarian, DPH '06
 Rebecca Mozaffarian
 Ronald G. Nahass, SM '12
 Marva F. Nathan, SM '83
 Mary P. Naughton, MPH '99
 W. Patrick Naylor, MPH '81 *
 Ingrid M. Nembhard, SM '01
 Karen T. Nemeth-Bowe, SD '88
 Alfred K. Neumann, MPH '60
 Charlotte G. Neumann, MPH '60
 Jane W. Newburger, MPH '80 *
 Elizabeth M. Nicholson *
 Philip T. Nicholson, SM '74 *
 Yutaka Niihara, MPH '06
 Lonnie H. Norris, MPH '77
 Neil J. Numark, SM '83
 Jennifer B. Nuzzo, SM '01
 Bridgette Oberholzer
 Jose Oberholzer, SM '13
 Chideha M. Ohuoha, MPH '86
 David M. Okuji, SM '14
 Adeoye Y. Olukotun, MPH '83
 Judy Olukotun
 Michael A. Panzara, MPH '02
 Murtaza Parekh, MPH '99
 Joseph Paresky
 Susan S. Paresky
 Joungjoa Park
 Philip D. Parks, MOH '07
 Isabelle Peribere
 J. Christopher Perry, MPH '73 *
 Louis H. Philipson
 Lynn S. Philipson, SM '80
 Rudolph W. Pierce, MPH '71 *
 Sidney A. Pierce
 George C. Piper, MPH '84 *
 Sally S. Piper

Stephen E. Piwinski, MIH '82 *
 Edward Polansky
 Janet Polansky
 Cedric W. Porter, Jr., MPH '69
 Glenn Pransky, MIH '85
 Lee S. Prisament, MPH '06
 Michael S. Radeos, MPH '00 *
 Julie F. Rafferty
 Marcia Rappaport
 Beth Goldstein Raucher, SM '02 *
 Carl M. Reddix, MPH '85 *
 Young-Hee Rho, MPH '10
 Arthur R. Rhodes, MPH '73 *
 Erinn T. Rhodes, MPH '04 *
 Mariah Reed Rich, SM '12
 Valerie J. Ricker, SM '93 *
 A. E. C. Rietveld, MPH '94 *
 Lorenz Risch, MPH '07
 John Wellington Robinson, SM '04 *
 Christy Robson *
 John A. Rock, SM '03
 Max P. Rosen, MPH '99
 Daniel W. Rosenn, SM '74
 Deborah A. Roth, SM '86 *
 Marsha Roth
 Ronald T. Rozett, MPH '68 *
 Eric J. Rubin
 Gloria A. Rudisch, MPH '70 *
 Hyun Sook Ryu, SM '01
 Frank M. Sacks
 Jean-Marc R. Saffar, SM '97
 Laury E. Saligman, SM '95
 Jonathan M. Samet, SM '77 *
 Leona D. Samson
 Suresh Santanam, SD '89 *
 Phillip W. Sarocco, SM '93 *
 Tedd R. Saunders *
 Kenneth Scheer
 Marc B. Schenker, MPH '80
 Susan S. Schermerhorn, SM '72
 Jill Sickle Schield, SM '89 *
 Jerald D. Schindler
 Karen Schoelles, SM '05
 Stephen C. Schoenbaum, MPH '74 *
 Vern L. Schramm, SM '65
 Jennifer A. Schumi, PhD '06 *
 Kevin J. Schwartzman, MPH '95 *
 John D. Seeger, DPH '02
 Judith L. Shandling
 Craig T. Shelley, MPH '11
 Yu Shen
 Jo A. Shifrin, SM '79 *
 Bernard Shleien, SM '63 *
 Reinhard Sidor, SM '67, SD '73

* individuals who have made a gift for five or more consecutive years
 † deceased



HHI workers on the ground in Haiti

“When there’s a humanitarian crisis, a good amount of money often comes pouring in. But

how do we make sure these dollars are being well spent; that the people helping on the ground are well-trained; that we understand how to prepare for and respond to these situations?

“What attracted me to the Harvard Humanitarian Initiative (HHI) was the fact that they are stepping back and saying, “How do we do this better?” in a field that has not been well-studied.

“The list of unanswered questions in this field is long. The idea behind our Humanitarian Innovation Fund is to give HHI the flexibility they need to follow the opportunities and needs that arise, and to have the space to develop new ideas.

“I want more people to know about this hidden gem within Harvard. Everyone I know who has spent any time with this group has been just blown away by the team and by the possibilities of what they can accomplish.”

—*Kristin Williams Mugford, AB '89, MBA '93, is a senior director at Bain Capital, and a senior lecturer at Harvard Business School. With support from colleagues at Bain Capital, she established the Kristin W. Mugford Humanitarian Innovation Fund in July 2014.*

Joanna E. Siegel, SM '86, SD '90
James E. Signorovitch, PhD '07
Bernice S. Silberman
Stephen L. Silberman, MPH '73, DPH '75 *
Mindy Silver
John Simes
Donald C. Simonson, MPH '98, SM '99, SD '06 *
Salua J. Smith
Kristin Kendall Snow, SM '93, SD '00 *
Deborah L. Snyder, MPH '94 *
Karen L. Sobol
Kenneth R. Spaeth, MOH '07
Ann E. Spangler, SM '80
Simon D. Spivack, MPH '89
Richard W. Steketee, MPH '83 *
James M. Steven, SM '02 *
Patti Stoll
Jeffrie R. Strang, MPH '77
Tzipora Strauss, SM '13
Helen C. Stubbs, SM '99
Paul J. Styr, MPH '85
Huey-Jen J. Su, SM '87, SD '90
Heejoon Y. Sun, MPH '88
William Sun
Francisco S. Sy, SM '81
James Tacci
Tinh-hui E. Tan, MPH '03
Carol M. Tashjian
J. Michael Taylor, MPH '71 *
Mark J. Tedesco, MPH '94
Patty Tedesco
Maurice Tempelsman
Christine Thurber Ervin, MPH '79
David J. Thurman, MPH '84
Jennifer L. Tomasik, SM '00
Ming Tsai
Yi Tso
Hiroshi Tsuji, MPH '10
Osahon Ukponmwan, MPH '83, SM '84
Henry W. Vaillant, SM '69
Janet G. Vaillant
Sivabalan Vasudavan, MPH '09
Alicia C. Vela *
Leonel Vela, MPH '87 *
Diana K. Verrilli, SM '92
Elizabeth A. Vigdor, SM '95
Tonya L. Villafana, MPH '00
Michael W. Voligny *
Carrie G. Wager, SM '98, PhD '04
Julian A. Waller, MPH '60 *

Malcolm Walter
Abby Wang
Lujing Wang, MPH '03
Monica Wang, SM '09, SD '12
Naisyn Wang
Yongyu Wang, MPH '98 *
Boyd V. Washington, SM '05
Raymond W. Watters, MPH '96
Valerie D. Weber, SM '10
Carolyn A. Webster, SM '82 *
Henry Wechsler
David J. Wehrly, MPH '81
Bonnie R. Weinbach, SM '03
Jay S. Weisfeld, MPH '77 *
Bruce A. Weiss, MPH '84
Deborah J. Weiss
Scott T. Weiss, SM '77
Mary E. Wewers, MPH '99 *
Georgiana K. White, SM '79 *
Earnestine Willis, MPH '77 *
Beverly Winikoff, MPH '73 *
Cynthia E. Winne, MPH '74
Jay A. Winsten
Rich Wittman, MPH '01
Wendy J. Wolf, MPH '98
Ho Wong
Kenneth R. Wright, MPH '79
Qiong Wu
Chen-Chang Yang, MPH '99, DPH '02
Iris Yohai
Joel Yohai, SM '02 *
Florence H. Yong
David R. Younkin *
Song Yu
Bin Zhang, SD '05

INSTITUTIONAL PARTNERSHIPS

The School gratefully acknowledges the invaluable support of its many corporate, foundation, and institutional funders and sponsors. Through their engagement, these organizations are helping to improve the health of people around the world. The following lists recognize organizations that provided gifts and grants of \$1,000 and above, or made matching gifts to the School.

\$5,000,000+

The JPB Foundation
Robert Wood Johnson Foundation
Bill & Melinda Gates Foundation

\$1,000,000–\$4,999,999

Anonymous
Blue Cross Blue Shield of Massachusetts
Charina Endowment Fund, Inc.
The Children's Investment Fund Foundation
Commonwealth Fund
ExxonMobil Foundation
Morningside Foundation

\$500,000–\$999,999

American Heart Association, Inc.
Burroughs Wellcome Fund
Charoen Pokphand Group Co., Ltd.
John & Katie Hansen Family Foundation
The John D. and Catherine T. MacArthur Foundation
The Joyce Foundation
JD RF International
W. K. Kellogg Foundation
Ambrose Monell Foundation
National Multiple Sclerosis Society
Wells Fargo Foundation
Wildlife Conservation Society

\$250,000–\$499,999

Anonymous
American Diabetes Association
CBS Incorporated
Conrad N. Hilton Foundation
Ellison Medical Foundation
FXB International
Flight Attendant Medical Research Institute
Ford Foundation
GE Foundation
Google, Inc.
Government Pharmaceutical Organization of Thailand

Japan Medical Association
Legacy
Richard and Susan Smith Family Foundation
The Rockefeller Foundation
United Technologies Corporation

\$100,000–\$249,999

Alfred P. Sloan Foundation
ALS Therapy Alliance, Inc.
American Institute for Cancer Research
Breast Cancer Research Foundation
Bunge Corporation
Coverys
Damon Runyon Cancer Research Foundation
Dana-Farber Cancer Institute
Footwear Association Charity Event, Inc.
Frontier Science & Technology Research Foundation
Genentech, Inc.
GenoVive
Glickenhau Foundation
ILSI Research Foundation
InTrust Global Investments, LLC
Leape Foundation for Patient Safety
Malaria No More
Massachusetts General Hospital
Muscular Dystrophy Association, Inc.
New Venture Fund
Pharmaceutical Research and Manufacturers of America
Prostate Cancer Foundation
QR Pharmaceuticals
Kenneth Rainin Foundation
Rx Foundation
Searle Scholars Program
Sumitomo Chemical Company, Limited
Swiss Re
Swiss Re Foundation
J.T. Tai and Company Foundation, Inc.
Teikyo University
The Helen Hay Whitney Foundation
The James S. McDonnell Foundation
The William & Flora Hewlett Foundation

\$1,000–\$99,999

Anonymous (6)
3M Company
A Chance to Heal Foundation
Abbott Laboratories
AbbVie
Actelion Pharmaceuticals, Ltd.
Aetna Life & Casualty Company
Amgen, Inc.
ASISA
Baxter Healthcare Corporation
Beth Israel Deaconess Medical Center
The Brinson Foundation
Cambridge Public Health Commission
Cancer Research Institute, Inc.
Carrier Corporation
Center for Global Development
Civic Service, Inc.
Crohn's and Colitis Foundation of America
Cytel, Inc.
Danone, S.A.
Dassault Systemes
DentaQuest Foundation
Diagenode, Inc.
Edelman Public Relations Worldwide
EMD Serono Biotech Center, Inc.
Environmental Systems Research Institute, Inc.
Epizyme, Inc.
FAGE USA Dairy Industry, Inc.
Fine Family Foundation
Fondation Pour la Recherche Médicale
Fourjay Foundation
Francis Family Foundation
Gradient
Grameen Research, Inc.
Stella and Charles Guttman Foundation, Inc.
Heinz Endowment
Internews Network
J. C. Flowers Foundation
John Snow, Inc.
Johnson & Johnson International

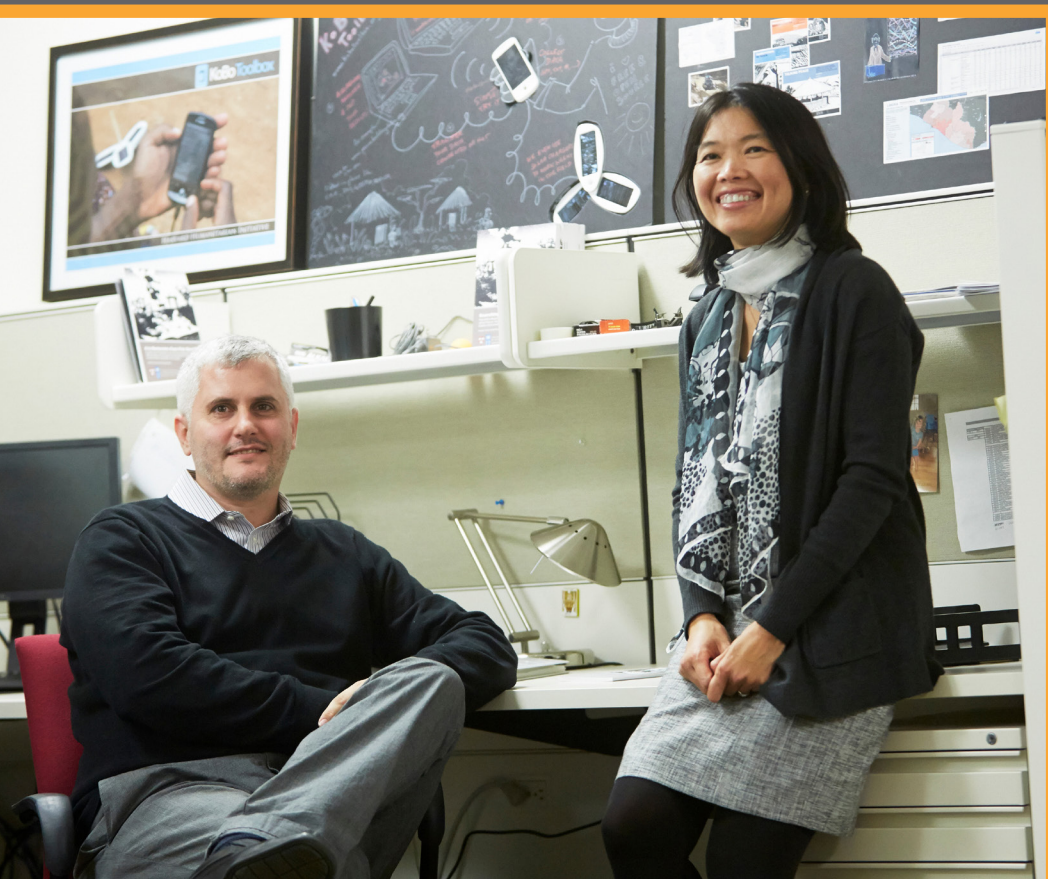
Improving responses to disasters is a top priority of the Conrad N. Hilton Foundation, the 70-year-old charitable organization created by the founder of Hilton hotels. With the recent uptick in disasters around the world—devastating storms, earthquakes, epidemics, famines, wars, and more—the Foundation’s mission has taken on new urgency.

That’s why the Foundation gave \$400,000 in support of a promising initiative from the Harvard Humanitarian Initiative (HHI): a suite of open-source software tools called KoBoToolbox, which improves information gathering, analysis, and coordination among responders during humanitarian disasters.

“KoBoToolbox is a standout among other such tools,” said the Hilton Foundation’s Shaheen Kassim-Lahka. “We’ve recognized that some past responses to large disasters have been somewhat disorganized, and we think that KoBoToolbox could greatly improve efficiency and effectiveness.”

KoBoToolbox has already generated much interest. In September 2013, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) designated it as the preferred platform for collecting and sharing data during crises. Said Kassim-Lahka, “Our hope is that, through the leadership of UNOCHA, KoBo will be adopted as the singular platform for coordination by most response organizations.”

The Hilton Foundation gift will provide support for training humanitarian workers in how to use KoBo; for real-time field assistance and technical support to users; and for the development of new tools to assess the effectiveness of humanitarian interventions.



KoBoToolbox was developed over the past decade by husband-and-wife team Phuong Pham and Patrick Vinck of HHI (pictured at left). In Iraq in 2003, helping assess post-war rebuilding priorities, they had to wait six months for data they’d gathered to be translated and entered into a database. That led them to develop a tool “that could work in places without electricity or Internet access, and that would be easy to use,” said Pham.

INSTITUTIONAL PARTNERSHIPS (CONTINUED)

Kohler Co.
 Kyoto University
 LAM Foundation
 Raymond P. Lavietes Foundation
 A. G. Leventis Foundation
 MAC AIDS Fund
 Margot Marsh Biodiversity Foundation
 Helen & William Mazer Foundation
 The MCJ Amelior Foundation
 The Medtronic Foundation
 Mitsubishi Corporation Foundation for the Americas
 Mylan Laboratories
 National Institute for Health Care Management Foundation
 NECOEM
 Net Hope, Inc.
 Novo Nordisk A/S
 Nunatsiavut Government
 OneWorld Boston
 The Organic Center
 Owens-Corning Fiberglas Corporation
 Panasonic
 Partners HealthCare System
 Peanut Institute Foundation
 Peter G. Peterson Foundation
 Project Bread - The Walk for Hunger, Inc.
 Public Consulting Group

Sankaty Advisors, LLC
 Sanofi
 Sanofi-Aventis K.K.
 Shionogi & Co., Ltd.
 Society for Progress and Innovation for the Near East
 Society of Family Planning Research
 South Shore Hospital
 T.J. Martell Foundation
 Target Corporation
 John Templeton Foundation, Inc.
 Tides Foundation
 Theresa Women's Clinic Pte., Ltd.
 The Trustee's Philanthropy Fund
 United Nations Foundation
 W. E. Upjohn Institute for Employment Research
 Urban Institute
 Ushahidi, Inc.
 Vertex Pharmaceuticals, Inc.
 ViiV Healthcare
 Michael & Louisa von Clemm Foundation
 The Walton Family Foundation, Inc.
 Wells Fargo Bank
 Westnet Inc.
 Winslow Foundation
 World Bank
 World Health Organization

Matching Gift Companies

AbbVie Inc. Employee Giving Campaign
 Aetna Foundation Incorporated
 Amgen Foundation Inc.
 Bill & Melinda Gates Foundation
 Boeing Company
 CA, Inc.
 Capital Group Companies Charitable Foundation
 Deloitte Foundation
 Elizabeth Doolittle Charitable Trusts
 Dow Jones & Company
 ExxonMobil Foundation
 Fidelity Foundation
 John D. and Catherine T. MacArthur Foundation
 Johnson & Johnson Family of Companies Contribution Fund
 Lone Pine Foundation Incorporated
 McKesson Foundation, Inc.
 Merck Company Foundation
 Odyssey America Reinsurance Corp.
 Pfizer Foundation
 Pfizer
 The William & Flora Hewlett Foundation
 TIAA-CREF
 Tiff Advisory Services
 Virginia Wellington Cabot Foundation

IN MEMORIAM

The Harvard T.H. Chan School of Public Health community mourns the passing of Mr. George Rowe Jr., a longtime president of the Ambrose Monell Foundation and enthusiastic champion of the School. Rowe, 92, died on August 14, 2014, following a long illness. The Monell Foundation has been a loyal supporter of the School of Public Health since the early 1980s and for the past 24 years has made generous unrestricted annual gifts to the School.



George Rowe Jr.

TRIBUTE GIFTS

Tribute gifts offer a meaningful way to advance the work of the School while also recognizing a beloved family member, friend, or colleague. Individuals who were honored with a tribute gift in fiscal year 2014 are listed below.

Honored

Lisa F. Berkman
Mrs. William McCormick Blair, Jr.
Gerald H. Blum
Lilian W. Cheung, SM '75, SD '78
E. Francis Cook, SM '77, SD '83
Michael Curren
Marilen J. Danguilan, '99
Sumner L. Feldberg
Joseph F. Fraumeni, Jr., SM '65
William C. Hsiao
Nancy M. Kane
Estelle Lee
Laura Matson
Alexander McCall Smith
Rima E. Rudd
Shan V. Sayles
Jules R. Schwaber
Jane Shure
Ivy Silver
Rachel Silver
Kristen Snow
Ellie Starr
Brian J. Swann, MPH '08
Mary A. Tavares-Sutula, MPH '80
Nancy Turnbull
Edward F. Voelkel
Lee-Jen Wei
Marvin Zelen[†]
Thelma Zelen

Memorialized

James W. Bridges
Joseph E. Brooks
Evelyn M. Cormier
Susan Curren
Donald F. Hornig
Hyoung O. Lee
Alan S. Morrison, SM '69, SD '72
Melvin R. Seiden
Seymour Slive
Fredrick J. Stare
Edward F. Voelkel
Donald M. Watkin, MPH '65
Bertram A. Yaffe



Mark O'Friel, AB '83

“After just one lunch with Bill Hsiao, I determined to support his work. He described the path to create a new health care system for China, and how government officials at the highest level in China are willing to listen to and follow his recommendations based on solid research. I found it very moving how his efforts are impacting the lives of millions and potentially tens of millions of people. That cemented everything I knew about the School of Public Health: They work on a huge scale. And they have an ability to influence at the highest levels.

It can be difficult to get funding for public policy research like Bill's, but the multiplier effect is so large. To really change the way health care is delivered, you need to change policy. It doesn't do much good if you have a great study and nobody reads it or acts on it.

I support the China Research and Education Fund because I believe it will strengthen current initiatives and broaden the scope of the new ideas Bill and his colleagues can pursue.”

—Mark O'Friel, AB '83, is the Managing Partner of MOF Capital and a member of the School's Leadership Council. The China Research and Education Fund was established through the gifts of alumni and friends in honor of William Hsiao, K.T. Li Research Professor of Economics.

1913 SOCIETY

The 1913 Society honors individuals who have made a life income gift or bequest provision to the School. The 1913 Society, named to commemorate the year the School was founded, recognizes the vital role our supporters have played over the past century and the role they play today in ensuring our continued success.

Anonymous (11)
 Don Abramowitz, SM '82
 Joanne H. Allport, MPH '87
 Joan M. Altekruise, MPH '65, and Ernest B. Altekruise
 Dorothy Q. Arnold and David B. Arnold, Jr.
 Nelson K. Aweh III
 Katherine L. Rhyne and Charles W. Axten
 Joan R. Baer and Arthur Bugs Baer
 Amy C. Barkin, MPH '76
 Judith Benfari and Robert C. Benfari, SM '67
 Terry M. Bennett, MPH '69
 Eugene P. Berg, Jr.
 Mrs. William McCormick Blair, Jr.
 Barry R. Bloom
 Stanley P. Bohrer, MPH '75
 Gary P. Bond, SM '76
 Robert D. Brodley
 William A. Burgess
 Annette B. Burke and Joseph A. Burke, SM '72
 Deanna L. Byck, SD '98
 Joan Selig Damson and Barrie M. Damson
 Mary Kerr Donaldson
 Patricia A. Donovan and William B. Donovan, SM '70
 G. Rita Dudley-Grant, MPH '84
 Sumner L. Feldberg
 Virginia O. Fine
 Katherine A. Forrest, MPH '71
 Niki Friedberg and A. Alan Friedberg
 Barbara A. Gales, MIH '91
 Jean M. Doherty-Greenberg, MPH '79, and David A. Greenberg, MPH '80
 Douglas I. Hammer, MPH '68, DPH '76

Peter O. Haughie, SM '98
 Francis Helminski, MPH '85
 Maria Helena Henriques-Mueller
 Jose R. Hernandez-Montoya, MPH '80
 Olive W. Holmes
 Lilli Schwenk Hornig
 Robin C. Herman and Paul F. Horvitz
 Howard Hu, MPH '82, SM '86, SD '90
 Joan L. Jacobson and Julius H. Jacobson II
 Nancy Elliott and Paul T. Johnston
 Marion A. Jordan, SM '77
 Apa Juntavee, MPH '95
 Stephen B. Kay
 Maurice E. Keenan, MPH '77
 Geoffrey Kronik
 Karim F. Lalji, SM '91
 Stanley N. Lapidus
 Mary Ann Lavin, SM '74, SD '78
 Paul S. Lee, Jr.
 Ann M. Lewicki, MPH '76
 Chunhua Liu, SM '98, SD '00
 Nancy J. Marr, SM '89
 Keitaro Matsuo, SM '03
 Marjorie J. McLemore
 Jeffrey W. Mecaskey, SM '90
 Diana H. Melvin and S. Noel Melvin
 Roger J. Meyer, MPH '59
 Joseph M. Miller, MPH '60
 Robert L. Mittendorf, MPH '87, DPH '91 †
 Lois H. Moser and Royce Moser, Jr., MPH '65
 Susan A. Elliott and Pat Nicolette
 Chong Moo Park, MPH '54
 George Putnam
 Kakaraparti V. Rao, SM '72
 Helen Z. Reinherz, SM '62, SD '65
 Rita D. Berkson, SM '77, and Randolph B. Reinhold

Christopher James Ronk, SM '08, SD '10
 Phyllis Rose
 Louise G. Schloerb and Paul R. Schloerb
 Marjorie W. Sharmat
 Bernard Shleien, SM '63
 Eleanor G. Shore, MPH '70, and Miles F. Shore
 Joan Smilow and Joel E. Smilow
 Sandi Snegireff and Sergei L. Snegireff
 Ruth F. Snider and Eliot I. Snider
 Virginia B. Taplin
 Lee L. Traub
 Steven Uranga McKane, MPH '79
 Isabelle Valadian, MPH '53
 Hasi M. Venkatachalam, MPH '68
 Marilyn R. Walter and Ronald A. Walter, SM '72
 Jay S. Weisfeld, MPH '77
 Thomas G. White, SM '52
 Dyann F. Wirth and Peter K. Wirth
 Elihu York, MPH '69
 Anthony J. Zangara, MPH '62

† deceased



Marilyn Brachman Hoffman

BEQUEST SUPPORTS RESEARCH ON MULTIPLE CHEMICAL SENSITIVITIES

In some people—Gulf War veterans, for example—exposure to certain chemicals appears to trigger persistent and lifelong toxic effects such as fatigue, pain, rashes, and gastrointestinal disorders. Now, thanks to a bequest of \$5 million, the School has begun a new research and education program to explore multiple chemical sensitivities, a little-understood condition known as “toxicant-induced loss of tolerance” (TILT).

The bequest is from Marilyn Brachman Hoffman, a woman who herself had numerous chemical sensitivities. A longtime resident of Boston, Hoffman closely followed the work of faculty members John Spengler, an expert in indoor air pollution, and Joseph Brain, who studies the health effects of inhaled gases, particulates, and microbes. Now, in accordance with the terms of Hoffman’s bequest, Spengler and Brain are leading the new program, called “The Marilyn Brachman Hoffman Program for Chemicals and Health.”

“This bequest is transformative,” said Brain. Added Spengler, “Some of the research we’re interested in is not considered mainstream, and wouldn’t win traditional funding. But with this gift, we now have the ability to support novel research—to take risks.”

First and foremost, the bequest will support research on how exposures to chemicals alter people’s subsequent responses to those chemicals. Pilot grants will be offered to attract new investigators and spur novel research that, hopefully, will subsequently win traditional grant funding.

“We want to uncover the biologic mechanisms that lead to these chemical sensitivities,” said Brain. “We need to know which chemicals are causing the problems, and where and how exposures occur. We also need to know why some people are affected by certain chemicals while others are not.”

The Hoffman Program will also provide support for visiting scientists and scholars; for lectures, seminars, and forums; and for a website to serve as a clearinghouse for scientific articles and other information on TILT. In addition, the website will address the rights of individuals with TILT in relation to health care, restaurants, hotels, transportation and other public environments, since people with TILT often report being excluded from using public places.

“Marilyn was concerned, legitimately so, that people don’t understand enough about chemical exposures and health,” said Spengler. “She also knew that, with information, you can make change. This generous bequest will enable us to propel that change.”



“During my studies, I was fortunate to work under Professor Lee-Jen “LJ” Wei, whose friendship and tutelage were as critical to my education as the funds that paid for it. LJ’s mentorship inspired many of his former protégés to donate to financial aid for future generations of doctoral students. These gifts are critical, especially to international students who are not eligible for the National Institutes of Health training grants that support many in our department.

On the occasion of LJ’s 65th birthday, Su-Chun Cheng, SD ’95, Hajime Uno, and I had an idea. LJ supports his students in such profound ways, so for his birthday, we wanted to create a tangible reflection of that support: a fellowship fund that would be the embodiment of all that he has done for us.

The idea quickly gathered momentum. The late Marvin Zelen, former chair and longtime professor in the Department, made a large initial gift that helped endow what is now the Wei Family Biostatistics Fellowship Fund. Dozens of gifts followed, most from alumni who have been influenced by LJ’s mentorship as Su-Chun, Hajime, and I have been.

After 20 years with the Department, I know the fellowships will be awarded to students who will change the world. Wei Family Fellows will bring home the skills they learn at Harvard to help improve biostatistics education and research across the globe.”

—Tianxi Cai, SD ’99, Professor of Biostatistics, Harvard T.H. Chan School of Public Health

NAMED FINANCIAL AID FUNDS AT HARVARD T.H. CHAN SCHOOL OF PUBLIC HEALTH

Financial aid for students remains the greatest fundraising priority for Harvard T.H. Chan School of Public Health. The School is extremely grateful to our donors who have established and contributed to the following named fellowships and financial aid funds, which serve as leadership examples for student financial support. Funds created in fiscal year 2014 are highlighted in bold.

Helen Thayer Adams Scholarship
 Andelot Scholarship
 Benjamin M. Banks Fellowship
 Berkowitz Fellowship in Public Health Nutrition
 Barry R. and Irene Tilenius Bloom Fellowship
 Stanley P. Bohrer Endowed Fellowship Fund
 Joseph D. Brain Fellowship in Environmental Health
 Wanda Lane Buck Fellowship
 Carson Family Fellowship
 Carson Family Scholarship Program
 Danilovich Family Fellowship
 Dillon Family Fellowship in Population and Development Studies
 Dillon Family Fellowship in Population and International Health
 Mike M. and Evelyn B. Donatelli Fellowship
 Mitchell L. Dong and Robin LaFoley Dong Scholarship
 Endowment Fund for Education of Physicians from Taiwan
 Myron E. Essex Fellowship for Students from Africa
 Sumner L. Feldberg Fellowship
 The Benjamin Greely Ferris, Jr. Fellowship in Environmental Epidemiology
Harvard-Thai Ministry of Public Health Fellowship
 Harvey V. Fineberg Fellowship in Cancer Prevention
 Mary E. Wilson and Harvey V. Fineberg Education Fund
 Mary E. Wilson and Harvey V. Fineberg Fellowship in Infectious Diseases
 Melvin W. First Fellowship
Joy and Steve Gibson Financial Aid Fund
 Glickenhau Financial Aid Fund
 Horace W. Goldsmith Fellowship
 George Gund Endowment Fund
 Lewis W. Hackett Scholarship

Julie E. Henry Student Support Fund for Maternal and Child Health
 Hesed Africa Scholarship
 HSPH DC Alumni Chapter Scholarship
 Vasilios Stavros Lagakos Fellowship in Biostatistics
 Leadership Incubator Fund
 A.G. Leventis Fellowship for Greek Cypriot Students
 A.G. Leventis Fellowship for Nigerian Students
 Bernard Lown Fund in Cardiovascular Health
 Lukitsh Family Fellowship
 The Jere Mead Fellowship
Nyla Medlock Occupational and Environmental Medicine Fellowship
 McLennan Family Fellowship
Joseph M. Miller Financial Aid Fund
Dr. Theodore A. Montgomery Scholarship Fund
 John Bruce Nichols and Margaret L. North Nichols Memorial Scholarship
 Novartis Doctoral Student Training Fellowship
 Paci Family Fellowship Fund in Public Health
 David H. Peipers Fellowship
 Margaret D. Penrose Scholarship
 Pfizer Pharmacoepidemiology Fellowship
 Pharmacoepidemiology Scholarship
 Muriel K. and David R. Pokross and Joan P. and Ronald C. Curhan Doctoral Student Support Fund in Nutrition
 The Prajna Chair's Scholarship in Public Health Nutrition
 Donald and Sue Pritzker Scholarship
 Bernard and Gloria Salick Fellowship in Public Health
 Joel E. and Joan L. Smilow Fellowship
 Leonid Sergius Snegireff Fellowship
 Mortimer Spiegelman Fellowship in Demographic Studies
 Irene M. and Fredrick J. Stare Nutrition Education Fund
 John F. and Virginia B. Taplin Fellowship
 Ming and Snow Tsuang Financial Aid Fund
 Gohar and Valad Valadian Fund

Wei Family Biostatistical Fellowship Fund
 Thomas H. Weller Fellowship
 Dr. Charles F. Wilinsky Award Fund
 Edwin Bidwell Wilson Memorial Fund
 Herbert S. Winokur, Jr. Fellowship in Public Health

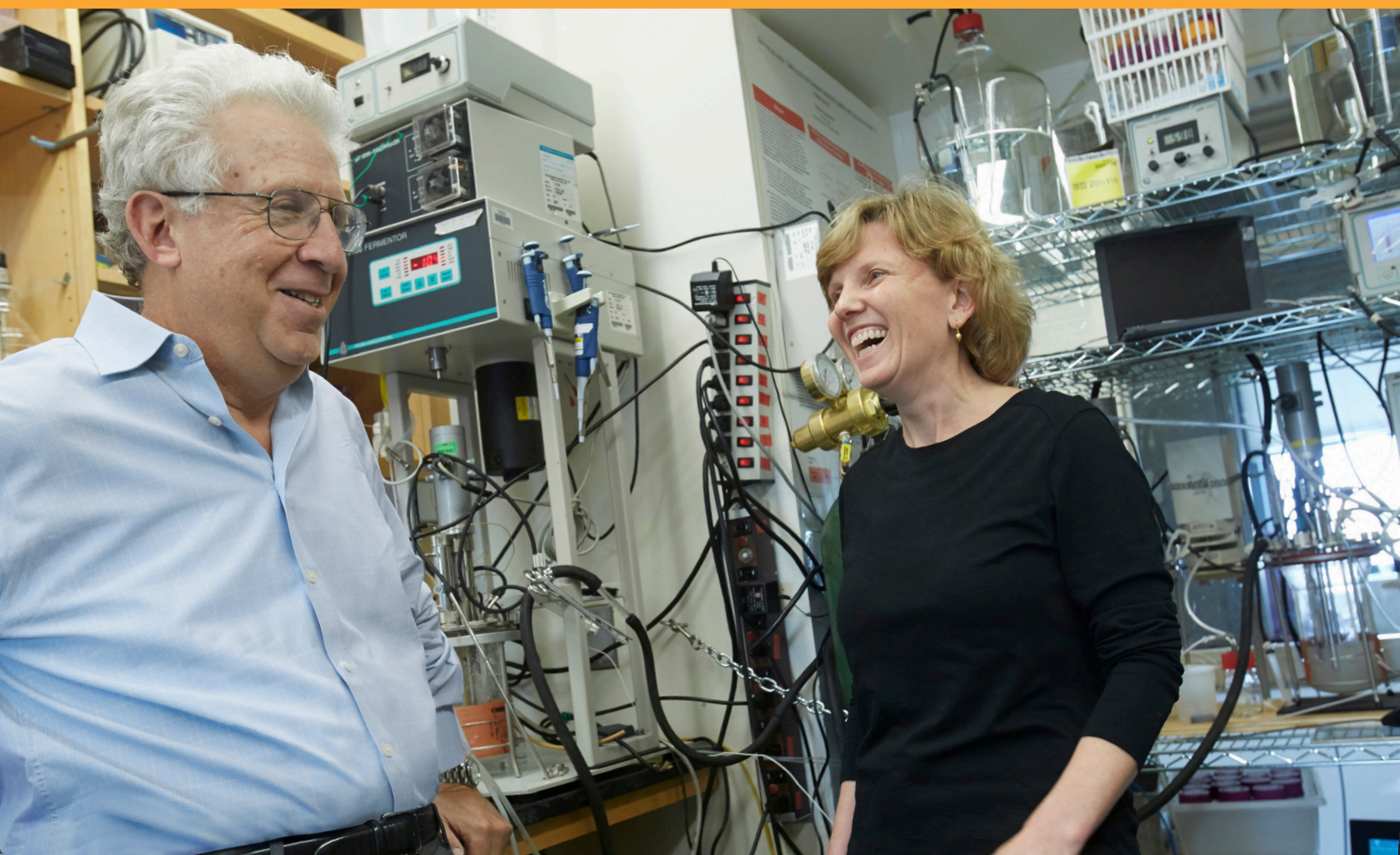
“S

arah Fortune’s research on drug-resistant tuberculosis enticed me because the TB problem is enormous; the disease kills over a million people per year around the globe, and drug resistance is the biggest reason why it’s so deadly. But there must be more than a compelling problem to justify funding a research project—there must also be a strong hypothesis and a process with the potential to produce useful results. What truly convinced me to make this gift was the smart plan and evaluation metrics Sarah developed for her project.

Sarah is investigating mechanisms by which people are protected from developing tuberculosis. For the project I’m supporting, her hypothesis is that a set of antibodies promotes the sterilization of the TB infection, and where antibodies succeed at protecting people, it is the antibodies’ pattern of sugars that determines their success. If this hypothesis bears out, Sarah could determine which pattern of sugars is successful in helping sterilize TB, opening the door for researchers to use that information to develop therapies.

This kind of early-stage work is rarely funded by government grants or pharmaceutical companies, and needs support like mine to help move forward. While I don’t have the ability to fund hundreds of millions of dollars of research into drug therapies, with my support, I believe Sarah’s results can be leveraged into something bigger.”

—Robert Pozen, AB ’68, is a former president of Fidelity Investments and teaches at Harvard Business School and Harvard T.H. Chan School of Public Health. He is pictured with Sarah Fortune, Melvin J. and Geraldine L. Glimcher Associate Professor of Biological Sciences.



FACULTY, STAFF, AND FACULTY *EMERITI*

We thank all members of our School's community for their work to make a healthier world. The following list recognizes our faculty and staff who made gifts to support the School.

Anonymous
Morgan Pendergast Baker
David W. Bates, SM '90
Lisa F. Berkman
Deborah L. Blacker, SD '92
Alicia W. Blatchford
Robert J. Blendon
Barry R. Bloom
Joseph D. Brain, SM '63, SD '66
Julie E. Buring, SD '83 *
Tianxi Cai, SD '99
Paul H. Campbell, SD '87
Anne Chakraborty
David C. Christiani, MPH '80, SM '81
Court Clayton
Todd R. Datz
Roger B. Davis, SD '88 *
Douglas W. Dockery, SM '74, SD '79 *
Barry C. Dorn, SM '04
Christopher P. Duggan, MPH '94 *
Felton J. Earls III
Arnold M. Epstein
Harvey V. Fineberg *
Troy Finn
Sarah E. Freeman
Julio Frenk *
Mary T. Gannon
Richard D. Gelber
Robert J. Glynn, SM '81, SD '85
Rose H. Goldman, MPH '80, SM '81 *
Donald Halstead
Russ B. Hauser, MPH '90, SD '94 *
David Hemenway
Chung-Cheng Hsieh, SM '80, SD '85 *
David J. Hunter, MPH '85, SD '88

George B. Hutchison, Jr., MPH '60 *
Vincent W. James
Stefanos N. Kales, MPH '92 *
Nancy M. Kane
Jeffrey N. Katz, SM '90
Jane J. Kim, SM '01
Peter P. Kraft
Edward F. LaCroix, Jr.
Ana M. Langer
Ian Lapp
Jennifer Leaning, SM '70
Lucian L. Leape *
I-Min Lee, MPH '87, SD '91
Thomas H. Lee, Jr., SM '87 *
Jonathan I. Levy, SD '99 *
John H. Lichten
Xihong Lin
Jon Lu
JoAnn E. Manson, MPH '84, DPH '87 *
Leonard J. Marcus
Marie C. McCormick
John E. McDonough
Mary F. McLane
Cyrus Mehta
Donald K. Milton, MIH '85, DPH '89
Lata Misra *
Joseph P. Mizgerd, SD '94
Dariush Mozaffarian, DPH '06
Rebecca Mozaffarian
Jennifer Musso
Laurie S. Pascal, MPH '95
Beatrice Podtschaske
John A. Quelch, SM '78
Julie F. Rafferty
Michael R. Reich
Stephen C. Resch
Joseph J. Rhatigan, Jr.
Eric J. Rubin
Edward T. Ryan
Frank M. Sacks
Ronald C. Samuels, MPH '95

George R. Seage III
John D. Seeger, DPH '02
Howard D. Sesso, SD '99 *
Zachary Shain
Nancy L. Sieber
Richard B. Siegrist, Jr.
Josko J. Silobrcic, MPH '88, SM '89
Daniel E. Singer, '82
Sara J. Singer
Alix Smullin *
John D. Spengler, SM '73
Ellie Starr *
Danielle Stevenson
Patti Stoll
Rebecca Tiernan
Isabelle Valadian, MPH '53 *
Michael W. Voligny *
Gregory R. Wagner
Scott T. Weiss, SM '77
Katie Whipkey
Daniel I. Wikler
Walter C. Willett, MPH '73, DPH '80 *
Michelle A. Williams, SM '88, SD '91
Mary E. Wilson
Jay A. Winsten
Dyann F. Wirth
Grace Wyshak, SM '56
Ellen M. Zane *
Marvin Zelen[†]

* individuals who have made a gift
for five or more consecutive years

[†] deceased

VOLUNTEERS

Harvard T.H. Chan School of Public Health is tremendously grateful to our many volunteers who, in partnership with faculty members and staff, are helping to advance the field of public health. We thank the following individuals for their commitment to the School and their service as volunteers during the 2014 fiscal year.

Visiting Committee

Jeffrey P. Koplan, MPH '78, *Chair*
Nancy E. Adler
Anita Berlin
Lincoln Chen
Walter Clair, MPH '85
Lawrence O. Gostin
Anne Mills
Kenneth Olden
Barbara Rimer
Mark Lewis Rosenberg
John W. Rowe
Bernard Salick
Edward M. Scolnick
Burton Singer
Kenneth E. Warner

Alumni Council

Anthony Dias, MPH '04, *President*
Sameh G. El-Saharty, MPH '91, *President-Elect*
Kelly J. Dougherty, SM '06, *Secretary*
Elsbeth G. Kalenderian, MPH '89, *Immediate Past President*
Marina G. Anderson, MPH '03
Haleh Armian, SM '93
Robert W. Buelow, SM '12
Lyndon Hernandez, MPH '09
Rebecca Hope, MPH '14
Kiran S. Kamble, MPH '10
Sadiqa Mahmood, MPH '13
M. Rashad Massoud, MPH '93
Tzipora Strauss, SM '13

Board of Dean's Advisors

Theodore Angelopoulos
Katherine States Burke
Christy Turlington Burns
Raymond G. Chambers
Gerald L. Chan, SM '75, SD '79
Lee M. Chin, SM '75, SD '79
Jack Connors, Jr.
Jamie A. Cooper-Hohn
Matthew E. Fishman
Stephen B. Kay
Jeannie Bachelor Lavine
Jonathan S. Lavine
Matthew McLennan
Monika McLennan

Richard L. Menschel
Roslyn B. Payne
Barbara Picower
Swati A. Piramal, MPH '92
Alejandro Ramirez
Lisa H. Schwartz
Mark Schwartz
Howard H. Stevenson
The JPB Foundation
Samuel O. Thier
Katie Vogelheim
Jeffrey C. Walker
J. Kent Walker

Campaign Committee

Katherine States Burke
Gerald L. Chan, SM '75, SD '79
Mike M. Donatelli
Mitchell L. Dong
G. Timothy Johnson, MPH '76
Stephen B. Kay
Jeannie Bachelor Lavine
Jonathan S. Lavine
Nancy T. Lukitsh
Matthew McLennan
Monika McLennan
Richard L. Menschel
Ronay A. Menschel
Kristin W. Mugford
Roslyn B. Payne
Kate W. Sedgwick, MPH '10
Steven L. Sneddon, SM '77, SD '79
Katie Vogelheim

Leadership Council Executive Committee

Joan P. Curhan
Ronald C. Curhan
Barrie M. Damson
Mitchell L. Dong
Joyce C. Gibson, SM '72, SD '74
Steven H. Gibson
Holly D. Hayes
Paula Ivey Henry, SM '95
Nancy T. Lukitsh
Matthew McLennan
Monika McLennan
Michael R. Pollard, MPH '74
Penelope Pollard
Kate W. Sedgwick, MPH '10

Paula Sneddon
Steven L. Sneddon, SM '77, SD '79
Amy A. Spies
Fair H. Wang, SM '92
Stuart H. Watson
John J. Whyte, MPH '93

Leadership Council

Jeanne B. Ackman
Christine Allen
Loreen J. Arbus
Phyllis August, MPH '02
Arthur Bugs Baer
Roger L. Barnett
Sloan Barnett
David J. Berck, MPH '96
Mortimer Berkowitz III
Roger S. Berkowitz
Jesse A. Berlin, SD '88
Joan T. Bok
Jeanine Boyle, MPH '94
Jane Carpenter Bradley
Katherine States Burke
Gilbert Butler, Jr.
Lynne M. Cavanaugh, SM '79
Humayun J. Chaudhry, SM '01
Lilian W. Cheung, SM '75, SD '78
Peter W. Choo, MPH '91, DPH '96
Cynthia L. Cohen, SM '76
Lawrence H. Cohn
Ambika Collins
Phyllis D. Collins
Francis L. Coolidge
Tyler C. Cooper, MPH '05
Lammot du Pont Copeland, Jr.
Gail E. Costa, SM '76
Howard Cox
Prudence Slitor Crozier
James B. Crystal
Joan P. Curhan
Ronald C. Curhan
Barrie M. Damson
Irene M. Danilovich
John J. Danilovich
Karen L. Davis, SM '78
Anthony Dias, MPH '04
Pamela Dippel Choney
Jean M. Doherty-Greenberg, MPH '79

Mike M. Donatelli
Mitchell L. Dong
Robin LaFoley Dong
Benjamin B. Edmands
Sameh G. El-Saharty, MPH '91
Leslie M. Feder
Michael S. Feldberg
Paul J. Finnegan
Fred N. Fishman
Elizabeth R. Foster
Larry S. Gage
Joyce C. Gibson, SM '72, SD '74
Steven H. Gibson
Nancy G. Glickenhau
Sarah B. Glickenhau
Seth M. Glickenhau
Maxine W. Goldenson
C. Boyden Gray
David A. Greenberg, MPH '80
Susan M. Guillory
Laurence J. Hagerty
Eileen P. Hayes, SD '79
Holly D. Hayes
Bayard Henry
Julie E. Henry, MPH '91
Christine S. Heuwing
Judith E. Hicks
Christopher T. Hitt, SM '75
Olive W. Holmes
James J. Hummer
Tsontcho A. Ianchulev, MPH '99
Charlotte von Clemm Iselin
Paula Ivey Henry, SM '95
Joan L. Jacobson
Julius H. Jacobson II
Susanna J. Jacobus, SM '03
Edgar N. James, MPH '79
G. Timothy Johnson, MPH '76
Elsbeth G. Kalenderian, MPH '89
Stefanos N. Kales, MPH '92
Kiran S. Kamble, MPH '10
Marjorie E. Kanof, MPH '91
Stephen B. Kay
James A. Kaye, MPH '99, DPH '01
Maurice E. Keenan, MPH '77
Rachel K. King
Charles H. Klippel, SM '80
Florence R. Koplow

Daman M. Kowalski
 Nirmal K. Kumar
 Nisha Kumar
 Joel Lamstein
 William C. Landreth
 Eric C. Larson
 Per Lofberg
 Barbara N. Lubash, SM '76
 Nancy T. Lukitsh
 Louise P. MacMillan, SM '78
 James A. Manganello, MPH '80
 Beth V. Martignetti
 Shaw McDermott
 John L. McGoldrick
 Robin B. McLay
 Matthew McLennan
 Monika McLennan
 Richard L. Menschel
 Eugene A. Mickey, MPH '82
 Robert L. Mittendorf, MPH '87,
 DPH '91†
 Augustine E. Moffitt, Jr., SM '69,
 SD '73
 William M. Moore, MPH '66
 Patricia A. Moran, MPH '04
 Wolfgang Munar, SM '89
 Jeremy J. Nobel, MPH '85, SM '86
 Mahsa Noble
 Frank Noonan
 Patricia Noonan
 William A. Oates, Sr.
 Tomoe Odahara
 Thomas L. P. O'Donnell
 Mark O'Friel
 Adeoye Y. Olukotun, MPH '83
 Fredrick K. Orkin, SM '01
 Susan L. Orkin
 Mary Reville Paci
 Carol Paraskevas
 Roslyn B. Payne
 Susan Putnam Peck, SM '87, SD '91
 Michael R. Pollard, MPH '74
 Penelope Pollard
 Irene Pollin
 Thomas D. Polton, SM '83
 Robert C. Pozen
 Robert O. Preyer
 Sheila L. Raghavan, SM '01
 Gail Rand
 James H. Rand IV
 Lawrence Rand
 Carol Raphael
 Jeannine M. Rivet
 Deborah Rose, SM '75
 John A. Ross
 Kathleen T. Ruddy
 Bernard Salick
 John A. Sanna III

continued

“Y

our time as a student at this School may be brief, but it changes the way that you look at our health care system, your job, and what needs to be done to improve health. For us, that change in perception has lasted a lifetime. Keeping in touch with the School as alumni and members of the Leadership Council inspires us to continue evolving in our understanding of public health. Our giving is paying back. As alumni, we owe a debt to those who came before us, and we really should be making sure that the School continues to train the leaders that our health care system needs.”

—Jean Doherty-Greenberg, MPH '79

“Alumni giving sets an example for future graduates, so they see that people who came before them care and really learned over time to appreciate how much they benefited from their time at the School.”

—David Greenberg, MPH '80

Jean and David met as students at the School of Public Health. Their daughter Alexandra Greenberg is earning her MPH this year.



VOLUNTEERS (CONTINUED)

Polly W. Sanna
 Phillip W. Sarocco, SM '93
 Srinivas M. Sastry, MPH '90
 David I. Scheer
 Ruth C. Scheer
 Roberta Schneiderman
 Kate W. Sedgwick, MPH '10
 Risa C. Shames, SM '92
 Eleanor G. Shore, MPH '70
 Miles F. Shore
 Richard B. Siegrist, Jr.
 Ivy Silver
 Charlotte V. Smith
 Richard W. Smith
 Paula Sneddon
 Steven L. Sneddon, SM '77, SD '79
 Eliot I. Snider
 Amy A. Spies
 Carl W. Stern, Jr.
 Howard H. Stevenson
 Natasha Stowe
 Richard H. Stowe
 George H. Strong†
 Tinh-hui E. Tan, MPH '03
 Ming T. Tsuang
 Randall G. Vickery
 Kelly Victory
 Clare Villari
 Robert C. Waggoner
 Michael P. Walsh
 Ronald A. Walter, SM '72
 Kenneth B. Waltzer, MPH '85
 Fair H. Wang, SM '92
 Lujing Wang, MPH '03
 Stuart H. Watson
 J. Frederick Weintz, Jr.
 John J. Whyte, MPH '93
 Kim Williams
 Stephen H. Wise
 Barbara J. Wu
 Ellen M. Zane
 Paul J. Zofnass

HSPH AIDS Initiative International Advisory Council

Maurice Tempelsman, *Chair*
 Mrs. William McCormick Blair, Jr.,
Co-Chair
 Peter A. Chernin
 Norma Dana
 John J. Danilovich
 Mitchell L. Dong
 Pierre G. Durand
 Douglass B. Given
 Cathy B. Graham
 Lisa M. Henson

John A. Lithgow
 Marguerite Littman
 Vincent P. McCarthy
 Joanne M. Cipolla
 Mary Revella Paci
 Susan Butler Plum
 Sidney Poitier
 Kate W. Sedgwick, MPH '10
 Richard M. Smith
 Salwa J. Smith
 Amy T. Wu
 Barbara J. Wu
 Soon-Young Yoon

Center for Health and the Global Environment Advisory Board

Francisco Acuña Mendez
 Dan Barber
 Mitchell L. Dong
 Rick Fedrizzi
 Deborah Fikes
 Carolyn Fine Friedman
 Molly Finn
 Robert F. Fox, Jr.
 Kathleen Frith
 Jesse Johnson
 Kevin Klose
 John F. McCarthy
 Kelly Meyer
 Franklin W. Nutter
 Fred Osborn III
 Tedd Saunders
 Karen Lee Sobol
 Lise Van Susteren

Harvard Center for Population and Development Studies Partners Council

Joan T. Bok
 Daniel Branton
 Lamot du Pont Copeland, Jr.
 Mitchell L. Dong
 Paula Ivey Henry, SM '95
 Mary Revella Paci

Valerie Ann Rowe
 Ruth C. Scheer
 Clare Villari

Health Policy and Management Executive Council

Jeannine M. Rivet, *Chair*
 John W. Brown
 Deirdre P. Connelly
 Howard Cox
 Tom Daschle
 Benjamin B. Edmands
 Larry S. Gage
 Katie H. Gambill
 David J. Goldhill
 Ariella Golomb
 Laurence J. Hagerty
 Robert M. Holster
 Charles H. Klippel, SM '80
 Per Lofberg
 William Mosakowski
 Robert E. Patricelli
 Carol Raphael
 Lynn Shapiro Snyder
 Richard H. Stowe
 Josef H. von Rickenbach
 Michael P. Walsh
 Phyllis R. Yale
 Ellen M. Zane

Nutrition Round Table Steering Committee

Roger S. Berkowitz
 Lilian W. Cheung, SM '75, SD '78
 Joan P. Curhan
 Joyce C. Gibson, SM '72, SD '74
 Irene Pollin
 Srinivas M. Sastry, MPH '90
 Christopher T. Stix
 Edwin J. Taff
 Stuart H. Watson

Nutrition Round Table

Joan P. Curhan, *Chair*
 Laurent H. Adamowicz
 Jody Adams

Susanna E. Bedell
 Roger S. Berkowitz
 Jane Carpenter Bradley
 Martin T. Breslin
 Nancy Budge
 Lilian W. Cheung, SM '75, SD '78
 Kenneth H. Cooper, MPH '62
 Prudence Slitor Crozier
 Ronald C. Curhan
 David P. Davidson
 Mitchell L. Dong
 Anne Fitzpatrick Cucchiario
 Fred K. Foulkes
 Joyce C. Gibson, SM '72, SD '74
 Frank Guidara
 Susan M. Guillory
 Elizabeth M. Hagopian
 Holly D. Hayes
 Ned Hentz
 Thomas Herskovits
 Judith E. Hicks
 Lee A. Iacocca
 Margaret Igne-Bianchi
 Michael E. Jacobson
 Ellen L. Kaplan
 Mollie Katzen
 Eric C. Larson
 Barbara J. Lind
 Louise P. MacMillan, SM '78
 Carmine A. Martignetti
 Linda D. Masiello
 Steven E. Miller
 Irene Pollin
 Douglas Rauch
 Gloria W. Sakata
 Srinivas M. Sastry, MPH '90
 Robert Snyder
 Christopher T. Stix
 Edwin J. Taff
 Ming Tsai
 Randall G. Vickery
 Stuart H. Watson
 Theresa Woolverton
 Peter M. Yeracaris, MPH '98
 Youko Yeracaris

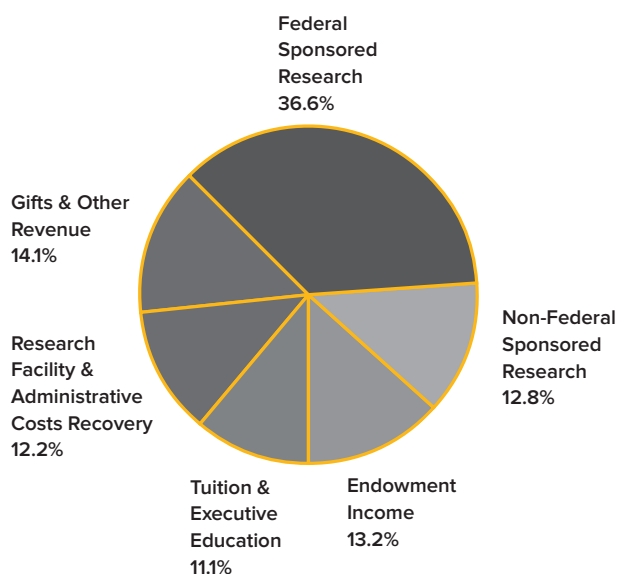
Donor lists reflect gifts received from July 1, 2013 through June 30, 2014. Every effort has been made to ensure the accuracy of the 2014 Gift Report. We apologize for any errors. Please report any discrepancies to Anna Sangalang, Director of Donor Relations. Phone: (617) 432-8445, Email: donorrelations@hsph.harvard.edu

In the 2014 fiscal year, more than 1,300 alumni made gifts to support the priorities across the School. For a full list of alumni donors, please visit our website at: www.hsph.harvard.edu/campaign/honor-roll-of-donors/

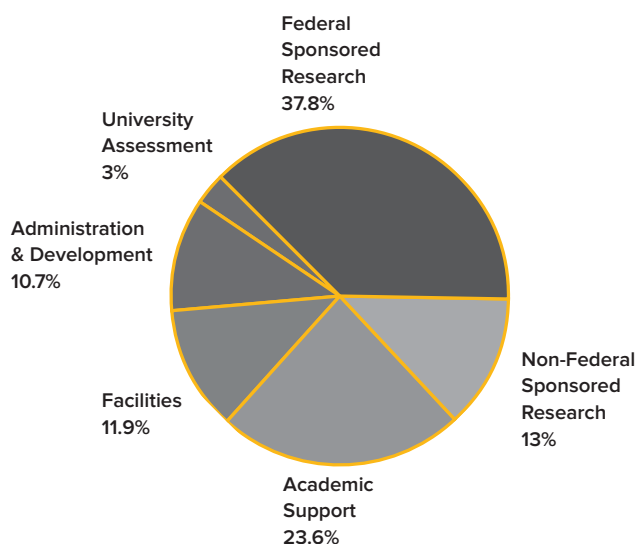
FINANCIAL HIGHLIGHTS

Fiscal Year 2014 Financial Highlights July 1, 2013–June 30, 2014

FISCAL YEAR 2014 Operating Revenue



FISCAL YEAR 2014 Operating Expenses



The School continued to improve its financial performance in fiscal year 2014, reflecting ongoing success in revenue diversification and expense management. Revenues totaled \$357 million, a year-over-year increase of 4 percent, while expenses rose less than 2 percent. The Campaign played a key role in the favorable fiscal year 2014 results, with current-use gifts growing by \$25 million over the previous year.

The success of the Campaign helped to offset a modest slowdown in sponsored research support in fiscal year 2014. The School's sponsored research pipeline remains strong, however, with the number of proposals submitted reaching record levels for the second consecutive year. Other important revenue sources, including endowment income and education revenue, continued to grow. With the momentous news of the T.H. Chan naming gift, announced after the close of fiscal year 2014, the School continues on the path to long-term financial stability.

FUNDRAISING HIGHLIGHTS

In fiscal year 2014, the Campaign continued to be the major focus of fundraising activity, energizing the entire School community. In a record-breaking year for fundraising, the School raised \$103.3 million in new gifts, grants, and pledges, a 63 percent increase over the previous year's amount, which brought total Campaign fundraising to \$258.8 million as of June 30, 2014. Faculty and staff giving increased by 19 percent in fiscal year 2014, bringing in more than \$613,000. Gifts from 1,342 graduates brought the alumni giving rate to 12 percent. Gifts to financial aid totaled \$3.3 million, and 580 new donors joined the ranks of supporters during the fiscal year.

HARVARD T.H. CHAN SCHOOL OF PUBLIC HEALTH

DEAN OF THE FACULTY

Julio Frenk

ALUMNI COUNCIL

As of November 2014

Officers

Anthony Dias, MPH '04
President

Sameh El-Saharty, MPH '91
President-Elect

Kelly Dougherty, SM '06
Secretary

Elsbeth Kalenderian, MPH '89
Immediate Past President

Alumni Councilors

2012–2015

Marina Anderson, MPH '03
Robert Buelow, SM '12*
M. Rashad Massoud, MPH '93

2013–2016

Kiran Kamble, MPH '10
Tzipora Strauss, SM '13

2014–2015

Haleh Armian, SM '93
Lyndon Hernandez, MPH '09

2014–2017

Rebecca Hope, MPH '14*

HAA APPOINTED DIRECTORS

Laura Kozek, SM '07
Patrick Johansson, MPH '01

*Class Representative

VISITING COMMITTEE

Jeffrey P. Koplan, MPH '78
Chair

Nancy E. Adler
Anita Berlin
Lincoln Chen
Walter Clair, MPH '85
Lawrence O. Gostin
Anne Mills
Kenneth Olden
Barbara Rimer
Mark Lewis Rosenberg
John W. Rowe
Bernard Salick
Edward M. Scolnick
Burton Singer
Kenneth E. Warner

BOARD OF

DEAN'S ADVISORS

Theodore Angelopoulos
Katherine States Burke
Christy Turlington Burns
Raymond G. Chambers
Gerald L. Chan, SM '75,
SD '79
Lee M. Chin, SM '75,
SD '79
Jack Connors, Jr.
Jamie A. Cooper-Hohn
Matthew E. Fishman
Stephen B. Kay
Jeannie Bachelor Lavine
Jonathan S. Lavine
Matthew McLennan
Monika McLennan
Richard L. Menschel*
Roslyn B. Payne
Barbara Picower
Swati A. Piramal, MPH '92
Alejandro Ramirez
Lisa H. Schwartz
Mark Schwartz
Howard Stevenson
The JPB Foundation
Samuel O. Thier
Katie Vogelheim
Jeffrey C. Walker
J. Kent Walker

*emeritus

HARVARD PUBLIC HEALTH

Harvard Public Health is an award-winning magazine published three times a year for supporters and alumni of Harvard T.H. Chan School of Public Health. Its readers share a commitment to protecting the health and improving the quality of life of all people.

Harvard Public Health

Harvard T.H. Chan School of Public Health
Office for External Relations
90 Smith Street
Fourth Floor
Boston, Massachusetts 02120
(617) 432-8470

Please visit <http://www.hsph.harvard.edu/news/magazine/> and email comments and suggestions to magazine@hsph.harvard.edu.

Dean of the Faculty

Julio Frenk
T & G Angelopoulos Professor of Public Health
and International Development

Interim Vice Dean for External Relations

Michael Voligny

Associate Vice Dean for Communications

Julie Fitzpatrick Rafferty

Director, Strategic Communications and Marketing

Samuel Harp

Editor

Madeline Drexler

Assistant Editor

Amy Roeder

Senior Art Director

Anne Hubbard

Senior Digital Designer

Alicia Doyon

Assistant Director for Development Communications and Marketing

Jan Reiss

Principal Photographer

Kent Dayton

Contributing Photographers

Shaina Andelman, Emily Cuccarese, Stephanie Mitchell, Tony Rinaldo

Contributing Writers and Researchers

Karen Feldscher, David Levin, Daphne Mazuz, Peter Wehrwein

Copy Editor

Michael Trotman

Proofreader

Elizabeth Gudrais

© 2014 President and Fellows of Harvard
College

For information about making a gift to the Harvard T.H. Chan School of Public Health, please contact:

Michael Voligny
Interim Vice Dean for External Relations
Office for External Relations
Harvard T.H. Chan School of Public Health
90 Smith Street
Fourth Floor
Boston, Massachusetts 02120
(617) 432-8449 or mvoligny@hsph.harvard.edu

For information regarding alumni relations and programs, please contact, at the above address:

Jim Smith, Assistant Dean for Alumni Affairs & Career Advancement
(617) 432-8446 or jsmith@hsph.harvard.edu

www.hsph.harvard.edu/give



“Harvard saw potential in me that I didn’t know I had. Being here has made me reach for the stars and know that I can grab them.”

—Nana Yaa Koram, MPH ’15
Health Care Management and Policy
2014–2015 Bernard and Gloria Salick Fellow

Nana Yaa Koram, MPH ’15, is a Ghanaian physician who ran the main outpatient department and ward at Ashaiman Polyclinic in Ashaiman, Ghana—a city of 250,000 served by only five doctors. With a particular interest in cardiovascular medicine, she felt that her clinical work was “just making a ripple on the vast ocean of chronic disease ailments,” such as atherosclerosis and hypertension.

To bring more profound help to her country, Koram is pursuing an MPH in health care management and policy at the School. Once she completes her degree, Koram plans to return to Ghana—where her husband and two young daughters are waiting for her—and work with the Ministry of Health to design policies that “ameliorate the scourge of chronic afflictions.” The Bernard and Gloria Salick Fellowship in Public Health has made her dream possible.

**By contributing to
financial aid, you nurture
the global health leaders
of tomorrow.**

To find out how you can support student financial aid, please visit <http://hsph.me/give> or contact:
Court Clayton
Associate Vice Dean of Campaign & Development
617-432-8070
cclayton@hsph.harvard.edu

**HARVARD T.H. CHAN
SCHOOL OF PUBLIC HEALTH**





Harvard University
Office for External Relations
90 Smith Street
Boston, Massachusetts 02120

Nonprofit Org.
U.S. Postage PD
Burlington, VT
Permit No. 586

Change Service Requested

EXECUTIVE AND CONTINUING PROFESSIONAL EDUCATION PROGRAMS

JANUARY 2015

January 11–23

Program for Chiefs of Clinical Services

January 26–29

Work, Health, and Well-being: Integrating Wellness and Occupational Health and Safety in the Workplace

FEBRUARY 2015

February 2–6 (Part 1) and June 1–5 (Part 2)

Leadership Strategies for Information Technology in Health Care

February 5–8

Healthy Kitchens, Healthy Lives: Caring for Our Patients and Ourselves

February 23–25

Meta-Leadership for Health Care: You're It! Building Unity of Effort Across Your Health System

MARCH 2015

March 9–12

Analyzing Risk: Principles, Concepts, and Applications

March 15–20

Leadership Strategies for Evolving Health Care Executives

March 23–26

Management and Leadership Skills for Environmental Health and Safety Professionals

March 30–April 2, 2015

Health Care Project Management: The Intersection of Strategy, People, and Process

APRIL 2015

April 13–17

Radiation Safety Officer Training for Laboratory Professionals

April 27–29

Beyond the Affordable Care Act: The Next Frontiers for US Health Reform

MAY 2015

May 4–8

Guidelines for Laboratory Design: Health and Safety Considerations

Customized programs are also available.

Foster the growth of your executives and your organization as a whole by developing a custom program that will address the specific challenges you face in today's marketplace. ECPE brings custom programs to organizations around the globe.

All programs are held in Boston unless otherwise noted.

For a complete list of topics and faculty, or to register,

visit: ecpe.sph.harvard.edu

email: contedu@hsph.harvard.edu

call: (617) 432-2100

Harvard T.H. Chan School of Public Health
Executive and Continuing Professional Education
677 Huntington Ave.
Boston, MA 02115