

THE PROGRAM IN GLOBAL PUBLIC POLICY AND SOCIAL CHANGE

Learning from COVID, Building for the Future

**Project
Portfolio
2021-2022**



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Project Portfolio

THE PROGRAM IN GLOBAL PUBLIC POLICY AND SOCIAL CHANGE

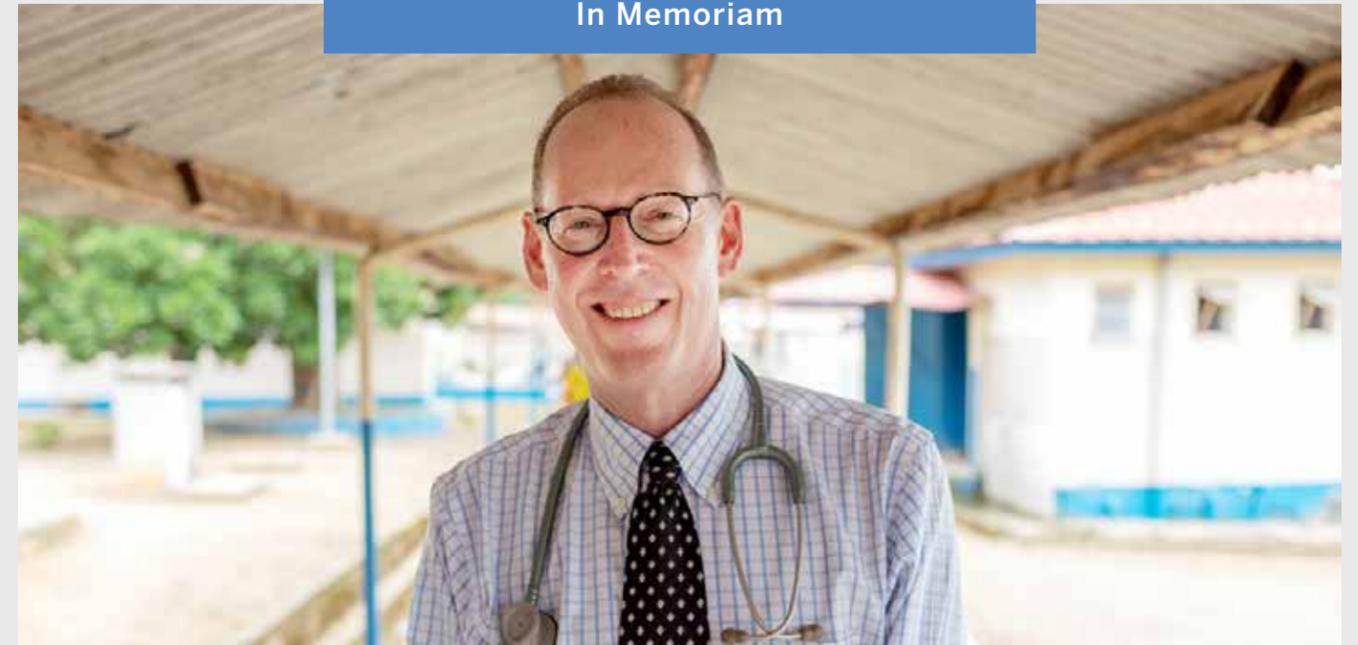
2021-2022

Table of Contents

In Memoriam	3
Message from the Directors	4
About PGPPSC	6
Strategy & Objectives	8
A Unique Approach to Policy Engagement	9
Partnerships and Collaborations	10
Leadership Team	12
Tackling the Pandemic—Research Portfolio to Date	14
Building for the Future—The Work Ahead	16
Partners and Funders	19



In Memoriam



“The idea that some lives matter less is the root of all that is wrong with the world.” -Paul Farmer

This year marked the passing of Dr. Paul Farmer, the Chair of Harvard Medical School’s Department of Global Health and Social Medicine and Kolokotronis University Professor, Chief of the Division of Global Health Equity at Brigham and Women’s Hospital in Boston, and co-founder and chief strategist of Partners In Health. He was also a father, husband, brother, son, friend, and mentor to so many.

Paul was an extraordinary force for what was right in this world and a voice of truth, hope, and inspiration. He taught us all and impacted millions through his fight for justice and equity, his commitment to those in need, his compassion, his evidence based persuasion, and his deep belief that anything is possible if we determine it can be so. He challenged the world to do better, rejected the status quo, and brought us on a journey with him, cultivating relationships and community and empowering us to adapt our mission to our strengths and vision.

Paul’s strength was in his ability to leverage multiple platforms for justice. He was a dedicated and brilliant academic, developing an entire field with rigor, pedagogy and cultivating investigation to tell the stories and unearth the truths we should know. He was a devoted teacher and mentor, expanding minds to understand history, dynamics and how to harness the future for good. He built a movement for social justice among young, old, liberal, and conservative, and which spanned continents, languages and backgrounds. He was a compassionate friend who held our hands in moments of grief and celebration and made us all feel we were seen and heard.

We at the **Program in Global Public Policy and Social Change** benefited from his leadership, wisdom, encouragement, and challenge to serve this world well. We will feel his loss daily. Paul was an important mentor, a close friend, and he provided us with much needed guidance as we launched this program. Our thoughts and support go to his family, friends, and community and to the world’s underserved population, to whom he brought immeasurable benefits.

Message from the Directors



The Program in Global Public Policy and Social Change (PGPPSC) aims to protect the world's most vulnerable populations from health crises. Our policy work is grounded in deep experience in combatting outbreaks, resurrecting failed health systems, and coordinating response among multi-sector stakeholders to ensure better health outcomes.

When SARS-COV-19 reached US shores, our team mobilized alongside leaders and policy makers to address the vast challenges posed by the coronavirus pandemic. We feared that the potential devastation to communities, health systems and economies would be enormous. In February 2020, the earliest days of COVID, we published **an opinion piece** warning of the impending hazards, as excerpted below:

“The devastation of health systems and economies are two significant hazards of a burgeoning epidemic. Both forms of collateral damage are worsened by political maneuvering, mismanagement, lack of resources, lack of transparency, corruption, and purposeful disinformation campaigns.... And perhaps most lethal: In the ensuing panic, the legitimacy-of the health system and political leadership can be undermined when people stop cooperating with those trying to contain the outbreak.” [Boston Globe 2/19/2020]

Our efforts since the pandemic's start have consisted of two critical tracks: a) bringing together experts and policymakers to address in real time the underlying deficiencies of the U.S. public health enterprise that hamper COVID response, and b) building the coalition and consensus to initiate widescale public health system reform for the future. Our work has brought us into close collaborations with the key actors across the private and public sector, including heads of vaccine manufacturers, the leaders of the Biden's administration's pandemic response efforts, foundations and NGOs leading the effort on behalf of equity and access, and critical thinkers and innovators at Harvard, across academia, and at leading research organizations.

The COVID pandemic remains with us, and health systems here and abroad continue to face stresses that will limit their capacity to protect global populations. Mitigation efforts have improved over the pandemic's trajectory, however public health responders and policy makers continue to face challenges in identifying sources of infection and transmission, detecting and responding to variants, updating medical countermeasures, and distributing vaccines and therapeutics where they are needed most. Every day we learn critical lessons that must be harnessed into smarter, targeted, and transformative policy. We cannot afford to lose the opportunity to leverage these lessons rapidly to end this pandemic and respond better to the next one.

In the Portfolio section of this report, we highlight our research portfolio, including collaborations with the Massachusetts Community Tracing Collaborative, the National Governor's Association, and the launch of the **“COVID Academy”** program for state responders, the Task Force on Medical Countermeasures (MCMx), and the Policy Working Group for Outbreak Investigation and Reform (POWOIR). We hope that in reading through the summary of our research portfolio, you will appreciate our commitment to creating powerful partnerships that feed our research and evidence-based policy formulation, leading to the significant advancements we have made over the last 18 months. We are optimistic that PGPPSC will continue to be a major contributor to the durable change in the way the US and our global partners address health security threats in the future, and we thank you for your support.

Vanessa Kerry
Margaret Bourdeaux
Annamarie Sasaki

About The Program in Global Public Policy and Social Change (PGPPSC)

The core of our approach is to amplify the voices and experiences of practitioners—from healthcare providers, to caregivers, to public health implementors, to bench researchers—to advance the policy discussions that impact health equity and determine health system resilience.



PGPPSC is an initiative within the Department of Global Health and Social Medicine at Harvard Medical School. Our team conducts health policy related research, convenes and facilitates multi-sector, cross-disciplinary policy discussions, and provides training and education to practitioners and policymakers about health systems, equity and delivery. Our focus on connecting practice to policy builds equitable access, delivery, and security in health care at the patient and population level.

Our team of seasoned health and policy professionals bring a wealth of experience in frontline healthcare delivery in fragile, underserved, and complex settings, as well as a deep ground-

ing in policy formulation and advancement to address the most pressing health policy and security challenges.

PGPPSC engages scholars and practitioners to build coalitions within and beyond Harvard University that spark innovation and advancements to global health and health security policymaking. Aligned with the Harvard Medical School's mission, PGPPSC operates squarely at the nexus of scholarship, discovery, teaching, continued learning, service, and leadership in order to alleviate suffering and improve health and well-being for all.



Pandemics, climate change, forced migration, bioterrorism, and regional armed conflicts all pose unprecedented global health threats by weakening and disrupting the very health institutions needed to mitigate them.

Strategy & Objectives

Our programs are conceived to elevate the voices of communities, health delivery practitioners, and non-health stakeholders critical to the policy formulation process, to bring about enduring health policies that improve access and equity to medical countermeasures and health care delivery across the globe.

Public policies to counter health threats must ensure that health institutions can emerge from periods of crisis with the resilience and capacity to mitigate future threats. This approach requires policy makers from a wide array of backgrounds to engage with health practitioners who build, govern and deliver health care.

- Place equity at the core of global health policymaking
- Inform policy development that reflects cross-sector stakeholder expertise.
- Integrate policy design and development with implementation strategies.

A Unique Approach to Policy Engagement

PGPPSC is leading efforts to analyze and advance policy recommendations by convening practitioners, developing protocols and policy recommendations, and producing data and analysis for senior policy makers across sectors. The strength of our research

process is vested in our “practice to policy” feedback loop that results in real-time, evidence-based learning. Our practitioner roundtables and policy working groups engage communities, practitioners, academics, policy makers and other stakeholders to

design and implement policy solutions to share their experiences and on-the-ground practicality to shape smart, effective, responsive policy and bridge the gap between tactical implementation and long-term strategy.

Pathways to Policies





A Commitment to Engaging Partners and Stakeholders

PGPPSC has established partnerships with leading multi-disciplinary experts and stakeholders as a key tenet to conducting research and formulating policy recommendations.

Across the Harvard University community and beyond, we seek to collaborate with faculty experts and other cross-disciplinary leaders. We bring together “unlikely allies” and disparate voices that enrich discussion and bridge critical knowledge gaps with the goal of bringing the highest levels of subject matter expertise to bear on our projects. Our collaborative engagements bring a multi-sector lens and deep evidence-based expertise to problem-solving.

Harvard University Collaborations

Berkman Klein Center at Harvard Law School

The Digital Pandemic Response working group was formed as an interdisciplinary program chaired by PGPPSC. Public and private sector decision makers convened to examine the use of digital tools and data to help attenuate the COVID-19 pandemic. BKC and PGPPSC jointly facilitated a series of working groups for academics and practitioners as well as a bi-monthly webinar series.

Harvard Kennedy School Belfer Center for Science and International Relations

PGPPSC maintains a research affiliation with the Belfer Center’s Security and Global Health project, where Dr. Margaret Bourdeaux is a fellow and research director. We have conducted joint research and authored two papers with Belfer Center faculty.

Harvard Chan School of Public Health

In collaboration with HCSPH, we are examining the deficient linkages between public health and medical care. Our upcoming launch of a Public Health Taskforce comprised of interdisciplinary leaders and policy makers, focuses on public health improvements related to data, governance, workforce, and finance.

Outside Partnerships

COVID Collaborative

At the request of the COVID Collaborative, PGPPSC produced a proposal for a **Governor’s Interstate Alliance**, an ambitious solution to expanding testing capacity within states, and deploying that capacity across states, according to surging/waning needs, thereby creating a mechanism through interoperability to address shortages of medical supplies. The proposal detailed how states could share lab capacity, tests kits, reagents, and other materials, help states decide best ways to distribute, administer and report testing results, and institute public health measures to ultimately drive down demand for testing to improve uptake and distribution of new innovations rapidly and effectively, and in the long term, be better prepared for health security threats.

National Governors Association (NGA)

PGPPSC supports the NGA’s health team in providing governors and their staffs information and strategies for mitigating the COVID pandemic in the short term and model practices for preparing their public health institutions and systems for the long term. Our collaboration includes spearheading monthly seminars for state responders, and producing and disseminating research briefs. This engagement is conducted under PGPPSC’s **COVID Academy** and the seminars are open to governors, state health officials and their staffs, and other state officials tasked with COVID response.

Massachusetts Building Trades Council (MBTC)

PGPPSC partnered with the Massachusetts Building Trades Council to bring worksite testing to 35,000 construction workers. Following this successful initiative, MBTC and PGPPSC are instituting a workplace safety program, focused on increasing vaccine uptake and introducing measures for preventing and mitigating airborne pathogens like COVID. *Workplace Safety in the time of COVID* seeks to articulate durable workplace strategies and assist employers in implementing practices that will protect workers and their families, while preventing, to the maximum extent possible, workplace disruptions, work stoppages, and livelihood losses.

Partners In Health (PIH):

PGPPSC worked alongside PIH on research and policymaking for the Massachusetts Community Tracing Collaborative throughout 2020. We then partnered with PIH to host an ongoing series of Outbreak Investigation Roundtables, convening state and local COVID response teams on a regular basis to create a sustainable community of practice.

Leadership Team



Vanessa Kerry, MD '05, MSc

Dr. Vanessa Kerry oversees PGPPSC. She is a physician who has worked at the intersection of health and policy for two decades. She is the founder and CEO of Seed Global Health, a non-profit that partners with the public sector to invest in health system strengthening by training needed health professionals in resource-limited settings. Through her work at Seed, she examines the role and impact of bold long term investment to transform health delivery and equity. She earned her BS with honors from Yale University with a major in molecular, cellular, and developmental biology. She received her medical degree from Harvard Medical School, where she graduated with honors, and a master's degree in Health Policy, Planning, and Financing from the London School of Economics and the London School of Hygiene and Tropical Medicine. While in London, she was a Fulbright Scholar. She is a World Economic Forum Young Global Leader and, a Draper Richards Kaplan Social Entrepreneur. Kerry completed her internal medicine residency and critical care fellowship at the Massachusetts General Hospital in Boston. She is now a physician specializing in critical care and also serves as an Associate Director for the hospital's Center for Global Health.



Margaret Bourdeaux, AB '97, MD, MPH '09

Dr. Margaret Bourdeaux is responsible for research and policy for PGPPSC. Her fieldwork focuses on health systems and institutions in conflict-affected states. She has worked with the Office of the Secretary of Defense Policy to analyze the US Department of Defense's global health projects and programs. She led a joint Harvard-NATO team of analysts to evaluate the impacts, challenges, and opportunities international security forces have in protecting and rebuilding health systems in conflict-affected states. She earned her BA at Harvard University, her MD from Yale Medical School, completed her combined residency in Internal Medicine and Pediatrics at Brigham and Women's Hospital in Boston, MA, and completed her MPH at Harvard T.H. Chan School of Public Health. She was one of the first graduates of the Global Women's Fellowship at Brigham and Women's Hospital.



Annmarie Sasdi

Annmarie Sasdi oversees programming and partnerships for PGPPSC. She was the senior director for new program development at the Harvard Kennedy School Division of Executive Programs. In this capacity, she worked with leading faculty from across Harvard institutions to research and design curriculum for training programs for senior public officials and policymakers from around the world. Previously, she was a Senior Fellow at the Harvard Kennedy School Mossavar-Rahmani Center for Business and Government, where she researched immigration and low wage labor. Prior to coming to Harvard, she spent 25 years in the financial services sector, most recently as an executive director in investment banking at Goldman Sachs International in London. She received her master's degree (MCRP) from the Harvard Kennedy School and her BA honors from Princeton University.



Flavia Chen, MPH

Flavia Chen, MPH, is the program manager for PGPPSC. Previously, she was an inaugural Technology and Public Purpose fellow at the Harvard Kennedy School. An interdisciplinary public health researcher, Flavia's expertise lies at the intersection of genomics, data governance, ethics, and policy. Flavia's primary responsibilities as PGPPSC Program Manager are to build and implement COVID Academy programs and to cultivate student work across the program's myriad projects. Flavia received her MPH from the University of Washington's Institute for Public Health Genetics and her BA in environmental studies and history from Bowdoin College. Prior to joining the Harvard community, Flavia worked for five years at the University of California San Francisco, managing NIH-funded research grants exploring the potential application and implications of using exome sequencing in public health newborn screening, prenatal-, and pediatric care.

Graduate Student Researchers

Anders Olsen MPP '22

Parsa Erfani, MD '22

Aser Abrha, MD '22

Sanjay Reddy, JD-MPP '22

Colin O'Leary, PhD, '22

PGPPSC Research Lab Alumni

Alex Pomerantz (MD, MPP Harvard '22)

Lily Scheindlin (MPP Brandeis '21)

Ann Hoyt (M.Ed Harvard '20)

Meghana Mishra (MD Harvard '23)

Colleen Narlock (MPP Harvard '20)

Noelle Castillo-Ojo (MD Harvard '22)

Elizabeth Weatherbee Tarbell (Stanford Law School '24)

Sophia Yin (MD Harvard '22)

Jessica Kaushal, MBA (Stanford '21) MPP (Harvard '21)

Vivian Carlson (MPH Columbia '20)

Joyce Wang (MD Harvard '22)

Tackling the Pandemic— Research Portfolio to Date

- In 2021, we launched “COVID Academy” to assist states in implementing COVID mitigation strategies. Today, COVID Academy has ongoing relationships with multiple partners including the National Governors Association and Partners in Health.
- In 2022, we presented our policy recommendations for Medical Countermeasures for “Disease X” to the Biden administration. Our proposal was based on findings from a task force convened in 2021, to examine the way in which medical countermeasures including vaccines and therapeutics, can be produced at scale, on time, and distributed to where they are needed most.



COVID Academy has an important role to play to document, inform, and sustain improved practices for schools, workplaces, and other congregate settings to avoid the spread of disease.

COVID Academy

PGPPSC launched COVID Academy in June, 2021, with funding from the MacArthur Foundation and the National Governors' Association, with the goals of identifying the most pressing issues related to COVID response and generating implementable solutions for state-level executives and policy makers. COVID Academy hosts an ongoing series of workshops and provides accompanying working papers and briefs on public health governance, finance, data, and workforce, all related to COVID response.

Longstanding deficiencies in public health infrastructure and delivery have contributed to a slow, inadequate, and highly inequitable response that has failed to end the COVID pandemic. COVID Academy was formed to provide opportunities for state-level COVID response implementors to systematically organize and share lessons, review best practices, address how to make the most of new federal support, and allow for rapid and continuous iteration and refinement of approaches. As a result, COVID Academy has served to create a vibrant community of local, state and federal level practitioners representing leaders and policy makers tasked with promoting and protecting public health, security, and welfare.

By convening health and non-health actors tasked with implementing COVID response strategies to share their

experiences, we are able to demystify and set normative practices around issues such as vaccines, testing, and disease surveillance. COVID Academy has an important role to play to document, inform, and sustain improved practices for schools, workplaces, and other congregate settings to avoid the spread of disease.

Medical Countermeasures for “Disease X”: Partnering for Public Good

Outbreaks are often addressed through crisis-driven partnerships and cycles of “panic and neglect” that are neither scalable nor sustainable and result in profound disparities in access. **The Task Force on Medical Countermeasures** for “Disease X” was formed with the express purpose of reversing this trend. In September 2020, PGPPSC invited 15 senior health leaders to form a task force to improve public-private collaboration for the development and distribution of vaccines and other medical countermeasures (MCMs). The diverse working group was comprised of committed leaders, including the head of vaccines from the leading COVID vaccine manufacturer, the former head of the US Biomedical Advanced Research and Development Authority, the heads of the two global vaccine development and distribution organizations focused on low and middle income countries, senior officials from biotech companies, and the heads of health policy at major private foundations. The result was a white paper entitled “MCMx: A Proposal for a Federal

Authority to Enhance Speed, Scale and Access to Medical Countermeasures.” The key recommendation is the need for the U.S. alongside other global innovation pipeline accelerators to build out a robust “just in time” MCM research and development capability that will put the public sector in the driver’s seat, identifying and prioritizing a portfolio of investments in needed MCMs, and enlisting the private sector to research, develop, manufacture, and distribute these MCMs. In particular, we argued that major reforms to public-private engagements is a key requirement to building out this capability so that need-based, equitable distribution is ensured. The key recommendations included an embedded governance structure to ensure sustainability coupled with new approaches to cooperation among government, the private sector, and academia, improved contracting, incentive structures for R&D and manufacturing, incentive structures for fair and equitable distribution, and improvements in fit-for-purpose funding.

Building for the Future—The Work Ahead:

PGPPSC 2022-2023 Research Portfolio



Our research incorporates lessons learned from the COVID pandemic. Our goal is to create meaningful policy changes in the public health enterprise—from disease surveillance to lab capacity, to scaled up interdigitation between public health services and health care delivery at the individual and community level. To ensure health security for all populations—from the most vulnerable to those with good access to health care, it is imperative that we address health inequities both domestically and abroad. To this end, our 2022-2023 research portfolio focuses on improving the public health enterprise in the US, while addressing health systems strengthening globally.

I. The Future of Public Health: from Practice to Policy Design and Reform

The US urgently requires comprehensive public health reform, including enhanced integration with medical delivery systems. PGPPSC is leading a multi-tiered strategy effort to analyze, characterize and generate policy recommendations required to rebuild our public health systems at home and abroad. Using our core model of convening practitioners our task force will bring together 15-20 multi-sector, multi-disciplinary experts and thought leaders representing health care, health security, data, technology, finance, and regulation from the public, private, and non-governmental sectors. As a first step, the task

force will consider the role of outbreak investigation and response (OIR) as a critical public health competency. This analysis will entail a review of model practices, the state of OIR competencies in the US and abroad, and capacity needs to improve OIR centered on data, governance, workforce, and financing. Additionally, our team will contribute to and assess ongoing legislative debates that may shape public health improvements going forward.

II. The Safe Workplaces Initiative

With sponsorship from one of the largest trade unions in Massachusetts and an endorsement from the US Secretary of Labor, PGPPSC is undertaking a project to pilot the Safe Workplaces Initiative, with the

aim of implementing model mitigation strategies to improve health and wellbeing across the building trades workforce. We have begun a three-month pilot phase that will aim to document the impact COVID has had on the Boston construction industry to date, understand what workplace mitigation measures have been tried and how effective they have been, and develop a strategy to increase the adoption of known mitigation measures and trial new ones. The pilot phase will result in drafting a set of initial recommendations regarding which mitigation measures should be widely adopted across the industry. Ultimately, the program will be scaled to include other industries and geographic regions, with the goal of developing national protocols for improving workplace safety.

III. Supporting Threatened Health Systems

Weak health systems, most often found in fragile or conflict-affected states, pose serious threats to global security and socioeconomic and political stability. Frequently called “the first lines of defense” against global health security threats like pandemics, functioning health systems are a prerequisite to protecting against instability, restoring peace to conflict-prone regions, and ensuring the safety and well being of global populations. The PGPPSC Health Systems Strengthening initiative aims to advance policy recommendations that support health systems through periods of crisis and recovery. Our primary research

focuses on The First Line of Defense Project. The aim is to develop indicators of health system stress and disruption that can be utilized by health and non-health actors and policymakers to recognize fragile health systems or protect and recover these systems during periods of crisis. These Indicators of Disruption (IoDs) will include metrics related to health system governance, workforce, financing, infrastructure, organization, and legitimacy. In addition to assisting health and security actors, the IoDs will be used to help peace negotiators, global financial institutions, and international security forces anticipate health sector needs to ensure that resources are available to protect and/or restore depleted health systems. In particular, the IoDs will provide important operational planning guidelines for military and security responders to ensure that valuable health system assets are protected during times of crisis and conflict. The project will also develop accompanying guides tailored for peace negotiators, health development aid agencies, and global financial institutions.

IV. MCMx: Phase II

In January, 2022 PGPPSC presented its findings from the MCMx task force to President Biden’s Office of Science and Technology Policy, as well as to the Senate HELP committee.

Our report highlighted deficiencies in rapidly developing medical coun-

termeasures (MCMs) against an unanticipated pathogen, manufacturing them with sufficient scale to access global markets, and assuring equitable distribution to vulnerable populations. The Task Force determined that the optimal way to achieve these goals would be for the U.S. government, under the auspices of an existing agency like BARDA, to stand up an MCM R&D program for unanticipated pathogens, or “Disease X”. This program would be charged with identifying and investing in a diversified portfolio of R&D capabilities through collaborations with the private sector so that targeted MCMs could be developed and produced at the speed, scale, and location necessary “just in time” to stop an outbreak. Robust partnerships between the public and private sector through the institution of durable, but flexible contracting agreements are critical to driving the success of this initiative. The MCMx 2.0 aims to generate a roadmap for the creation of this new entity, focusing on enhancing public-private partnerships.

We continue to analyze and provide feedback on legislation related to pandemic preparedness and health security to better ensure that the nation has the tools available to more equitably combat the next pandemic with speed and at scale.



Partners and Funders

PGPPSC conducts its policy work with the generous support of our partners and donors. We are thankful to the following organizations that been partners, collaborators and funders of our portfolio research:

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- Abundance Foundation
 - Construction Stops COVID
 - COVID Collaborative
 - MacArthur Foundation
 - National Governors' Association
 - Partners In Health/Massachusetts Community Tracing Collaborative
 - Schooner Foundation
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Portfolio Goals and Funding Needs for 2023

Full-time Research Fellows, program managers, and research assistants to support MCMx 2.0, COVID Academy and Safe Workplaces projects:	\$550,000
Launch of Practice-to-Policy webinars, seminars, and training programs for health and non-health practitioners and policy makers:	\$750,000
Launch of Future of Public Health Task Force and related white papers:	\$350,000
Threatened Health Systems Research Initiative:	\$250,000
Total Funding Goal for 2023:	\$1,900,000