



**SUMMIT ON SCIENCE ENABLEMENT FOR THE  
SUSTAINABLE DEVELOPMENT GOALS**

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**MEETING REPORT ON THE PEOPLE IN CRISIS STREAM**

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## SUMMARY

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The number of refugees and displaced populations has reached the highest level since the Second World War. This point rang through clearly during outgoing Secretary-General Ban Ki-moon's keynote address at the *Summit on Science and Technology Enablement for the Sustainable Development Goals*. Currently, over 60 million people are displaced around the world today—a number that does not include populations who are in distress in their own homes, or who are under threat of being displaced due to future climate change events, economic decline or political upheaval.

A cross-cutting theme at the Summit focusing on People in Crisis brought together an interdisciplinary working group of experts to brainstorm about the role of technology, science and research in helping to address the challenges that are created when people are removed from their communities, social networks and support systems.

The 17 Sustainable Development Goals (SDGs) with their 169 targets provide guidelines for governments, institutions, the private sector and civil society to collectively build more sustainable, equitable and safe environments. Given how interconnected the SDGs are, it can be argued that all 17 goals are related to People in Crisis. However, as highlighted by Jeffrey Sachs in his opening remarks, there are at least five SDGs that are essential for the safeguarding of lives and livelihood, starting from SDG 16 that calls for peace, justice and strong institutions, to four other goals which call for fostering good health and wellbeing (SDG 3), providing quality education (SDG 4), ensuring clean water and sanitation (SDG 6) and achieving affordable and clean energy (SDG 7).

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## OVERVIEW

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Over the span of three sessions, fourteen leaders from academia, the private sector, civil society, United Nations agencies and not-for-profit organizations came together to discuss the opportunities and barriers that science and technology have in advancing action around the SDGs that mostly impact the lives of people in crisis. As a whole, the task group focused on health and education (SDGs 3 and 4), and agreed on key activities for a holistic approach that defines a roadmap for future action, and rethinking key metrics for measuring success.

Early on, this task group a) set the scope of the discussion by defining the terms “people in crisis” and “crisis situation,” b) established a list of key barriers and opportunities for innovation in sciences and technology in the context of crisis, and c) and highlighted the need to engage and partner across sectors and disciplines in order to effectively meet the targets of the SDGs on health and education (SDGs 3 and 4) in crisis situations.

- a) The task group defined People in Crisis as people who are in, or at risk of, persistent displacement. The sessions focused on health and education challenges for these crisis situations.
- b) The urgent barriers, opportunities and areas for innovation for science and technology in crisis situations fall under three major themes:
  - Demographic identification and securing rights:
    - The opportunities and barriers of collecting demographic data affect the aid process at multiple levels from empowering communities, to delivery of services, scaling of programs, and access to funding. The challenge is collecting the data needed for providing assistance without compromising people's personal information, security and human rights.

- Areas for innovation are in establishing a collaborative, dynamic and decentralized identification system that reflects real time figures and allows for collaboration across sectors and disciplines, and engagement with the people in crisis.
- Implementation and scaling of programs:
  - While defining “scale” as the elimination of need, the opportunities and barriers are in developing holistic planning approaches that coordinate methodologies and data collection between sectors and disciplines, utilizing innovative research methods, understanding the contextual and cultural differences between crisis areas, and measuring the impact of successful programs.
  - Areas for innovation are in technologies that allow for interdisciplinary and cross-sectoral collaboration and in shifting funding incentives away from return on investments towards impact of investment.
- Research and advocacy:
  - Opportunities and barriers are in the potential for research to influence decision makers through prioritizing scope of research, analyzing programming and responses and supporting local research networks.
  - Areas for innovation are in shifting the incentives of research to focus on impact, researching preemptive and preventative methods in health care provision, and supporting innovations from the field.

Stream leads were as follows:

- Tine De Marez, Johnson & Johnson
- Ravi Gurumurthy, International Rescue Committee
- Stefan Swartling Peterson, UNICEF
- Anastasia Thatcher Marceau (facilitator), Accenture

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## SCOPE AND OPPORTUNITIES

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### **Who are the People in Crisis?**

The term “People in Crisis” was initially defined as “people who are forced to flee their homes due to armed conflict, violence, violations of human rights, or natural or human-made disasters and as a result are disconnected from their original environment and networks.” However, it was unanimously agreed that this definition excluded people who are considered to be in crisis without being displaced.

With that, the task group expanded the definition of “People in Crisis” to include people in, or at risk of persistent displacement. This incorporates refugees, people in economic crises, and people at risk of displacement by climate change events. It was also established that a crisis situation would consist of contexts of “conflict or a natural disaster, and where the state cannot provide basic needs” to populations.

Within this definition, the People in Crisis task group linked between SDG 3, which calls for promoting health, and SDG 4, which targets education, by focusing the discussion on the urgent needs in those sectors.

## **Barriers, Needs and Opportunities:**

The conversation in the People in Crisis stream was based on three principles that guided the conversation throughout the this and the following sessions: empowering people and their social resources, achieving an integrated planning approach to the SDGs, and focusing on the long term impacts of crisis situations on populations.

With these principles in mind, the group outlined key barriers and opportunities for science and technology in crisis contexts. Those can be synthesized under three main themes.

### **1. Demographic Identification and Securing Rights**

One major knowledge gap that was identified by the People in Crisis group is that lack of demographic information about the people in crisis. It is especially challenging to gather this information in rapidly shifting contexts and where people are constantly moving. Real-time data that reflects people's situation can clarify the needs in a particular situation, and the capacity required to address the crisis.

In regards to health and education, the lack of accurate demographic figures add to the challenges of grasping the scale of crises, prioritizing actions according to the most urgent needs, and planning preventive strategies. For example, accurate data on people's geographic locations and sex and age distribution can be beneficial in the development of specific vaccines, or for detecting emerging infections that may lead to major future threats.

The technological mechanisms and tools for quantifying and establishing identities for people who lack it are available and are in use today. This can be seen in different forms of tracking devices connected to people's paperwork or unique physical patterns such as fingerprints. However, different agencies and organization use varying methods to collect and store this data making it hard to share and coordinate across agencies and sectors.

This presents an opportunity for the development of tools that facilitate the coordination between stakeholders in conducting collaborative research and data collection in order to track crisis situations accurately over time. This includes identifying the scale of the crisis and humanitarian needs, population demographics, implemented programs, existing resources, and other factors that impact service delivery.

A point that was highly favorable in the group was to utilize decentralized technological platforms similar to that of Bitcoin. Such a platform can be used for both engaging with people by presenting them with options to personally accumulate their own data, and allow the aggregated data to be useful for program planning and development.

The conversation around the role of technology in providing, storing and tracking people's personal information, led to questions about ensuring people's privacy and safety. This was discussed further in the next sessions.

### **2. Implementation and Scaling of Programs**

Each on their own, nongovernmental organization, government agencies and the private sector involved with people in crisis are making positive advancements in terms of research, technology and new approaches to challenges. However, the information, findings, and learning methodologies are not shared between stakeholders, leading to siloed approaches that cannot be scaled or replicated across sectors.

Starting by defining “scale” as the elimination of needs, the task group agreed that the key to scaling of responses is a holistic planning and programming approach that brings people from different sectors and disciplines to the same table. An example of a successful holistic healthcare program is from Jordan, where displaced populations have access to a national healthcare system that is funded by the international community through a partnership between stakeholders.

However, challenges for consistently achieving such approaches include the lack of both horizontal collaboration between sectors and disciplines, and vertical collaboration that links administrative structures, governments or large-scale nongovernmental organizations across sectors.

In regards to healthcare, the presence of regulatory barriers hinders necessary approvals for the development and distribution of drugs, interrupt delivery of drugs in crisis contexts, and drive shortages in trained healthcare providers. This is exacerbated by the lack of holistic approaches that allow for collaboration between government agencies, aid organizations and healthcare providers in crisis contexts.

In the realm of education—a situation described as “a time-bomb” by one of the group members due to the compounded impact that continuous lack of education has on the development of youth and their future economic growth and employment opportunities—lack of collaboration between stakeholders makes it difficult to address the long-term impacts of interrupted education on youth, and therefore their progress over time and potential to overcome the crisis situation they grow up in. To address education delivery, technologies such as E-learning are already available in some contexts however effective scaling remains needed.

The opportunity for research and technology is to facilitate the scaling and outreach of such services and programs through enabling collaboration and data coordination between stakeholders, facilitating access to existing resources, and improving existing infrastructures.

Additionally, to scale such programs effectively, new and innovative funding mechanisms that incentivize funding in science, research and technology need to emerge. This point was discussed further in the next session as the group brainstormed ways to veer away from funding mechanisms that focus on return on investment, towards ones that rely on impact.

## 2. Research and Advocacy

There are multiple opportunities for research to advance the SDGs in crisis contexts. To begin with, there is a need for researchers to integrate health and education studies, and investigate emerging technologies in these sectors, such the E-learning and Telehealth platforms.

There is also a need for innovative research methods in impact assessment that are collaborative and accessible to different stakeholders. Such methods should identify and analyze programs that have been effective in meeting their goals for future reference and implementation.

Additionally, there is a missed opportunity in regards to the investment in research networks local to crisis contexts. Developing local researcher networks builds long-term and sustainable structures that can support and inform the planning and scaling of responses.

Another missed opportunity is for research to be utilized as a tool to influence policy. The challenge here is not in conducting more research; rather it is in communicating findings to political environments to influence decision makers. In other words, shifting the intended audience from fellow researchers or aid organizations, to policy makers.

Finally, it was largely agreed that in order for research to have a great impact on crisis situations, an overall shift in research incentives is required. This could happen on the academic level by shifting the “impact factor” from being measured by the number of citations, to instead measure the impact of science, evidence and research on the ground.

### **Disciplines and Sectors**

In conclusion, the People in Crisis task group established that in order to effectively advance the SDGs in crisis situations, there should be a planning strategy that is based on the coordination of stakeholders on three major actions: data collection and management, collaborative impact assessment methods, and access and scaling of programs.

This however is not possible without engaging and partnering horizontally and vertically across disciplines, sectors and government bodies. Therefore, all stakeholders in any crisis situation must collaborate on their actions. The list includes urban planners, local government agencies, civil society, academic institutions, donor organizations, policy makers, corporate sector, local research networks, grassroots and nongovernmental organizations, and most importantly, the people in crisis who can share their insights, experiences and resources.

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## **RESEARCH AND DATA**

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In the stream’s second breakout session, the task group highlighted two major points that are essential for more effective budgeting, prioritization of goals, and scaling of programs in crisis contexts. First, is the critical need for gaining accurate and real-time demographic data of the populations in crisis, and second is the need for an overarching body that coordinates between stakeholders and prioritizes goals for the development of collaborative research and programming.

With these needs in mind, the discussion focused on the three main areas identified in the previous session and that built on the discussion.

For each area, the task group focused on identifying knowledge and data gaps and research needs that will help advance the Sustainable Development Goals.

### **1. Demographic Identification and Securing Rights**

#### Data Gaps

As previously mentioned, one of the challenges faced by both people in crisis and the organizations assisting them, is the loss of identification, which leads to the lack of accurate demographic data. While such data can be essential in facilitating access to services, it is also highly sensitive, since it may jeopardize people’s privacy, rights and even safety. This is exceptionally critical in cases of persecution and cross-border displacement.

Therefore, the research questions the task group identified here were not limited to the technical aspects of how technology can help people access forms of identification, rather how technology, science and research can facilitate the process of gathering demographic data while securing the rights of the people involved, allowing for collaboration between multiple stakeholders including the people in crisis, and demonstrating the impact of acquiring such data on meeting goals. The later point is crucial since there has not been enough research on the comparative advantages of establishing unique identifiers for people in crisis.

With that, the task group identified a need for a governing body that will aggregate, manage and disseminate this information, especially in situations that involve failed states or cross-border mobility. At the same time, it was also agreed that excessive collection of data might jeopardize the safety of the people involved. Therefore, there must also be a consensus on the datasets needed for achieving the goals of empowering those involved, facilitating access to service, scaling of programs, and addressing the long-term impacts of the challenges at hand, without falling in the trap of storing irrelevant or non-essential data only because of its availability.

## 2. Implementation and Scaling of Programs

### Data Gaps

In the previous session, it was strongly agreed that without collaborative planning, scaling of programs could not happen effectively. This agreement acknowledged the necessity of “directed technological action” and RDD&D articulated by Jeffrey Sachs’ in his opening remarks.

Sachs stressed that the Sustainable Development Goals should be addressed as urgent time-based objectives, where investment in technological action is directed towards the timely meeting of each objective.

In his speech, Sachs maintained that, in order to achieve directed technological change, a rigorous and interdisciplinary process of Research, Development, Demonstration and Diffusion (RDD&D) is needed—thereby introducing two more Ds to the Research and Development process: the first in reference to a process that demonstrates the value and impact of the implemented programs; the second in reference to the diffusion of these programs by scaling response mechanisms and tools to eliminate the needs.

Loosely structuring their discussion around RDD&D, the task group outlined the knowledge gaps on the implementation and scaling of programming with a focus on three major themes:

- Context: people in crisis sit within cultural frameworks that are geopolitically different between regions, cultures and contexts, which are not always taken into account when implementing go-to responses to crisis situations. “We have been working on the hardware but not the software” a group member said, referencing this lack of contextual analysis, or “the software,” of crisis situations, and the urgent need to move away from the one-size-fits-all solutions to more flexible, adaptable and dynamic systems.
- Collaboration and partnerships: in order to scale programs effectively, both horizontal and vertical linkages are needed. Yet, those are difficult to achieve: this may be due to conflicts of interest between government agencies, private sector and nongovernmental organizations, uncoordinated implementation of programs between stakeholders that cannot be scaled, data that is limited to providing immediate service, or lack of effective impact assessment.
- Funding: it was strongly agreed that another barrier to scale is the lack of innovative funding mechanisms.

## 3. Research and Policy

### Data Gaps

All the aforementioned challenges, data gaps, and research questions are interconnected and rooted in the need for prioritizing and directing research towards building more collaborative, sustainable, and scalable responses for crisis situations.

Questions regarding the role of research in the advancement of the SDGs in crisis contexts, focused on how to leverage research to enhance and influence:

- Impact: crisis contexts are time sensitive situations requiring rapid and immediate response. The task group pointed out that this means that it is hard to rely on published reports, as they are outdated the minute a new crisis situation emerges. For such complex and rapidly evolving situations, it is important to have access to a collaborative, dynamic system for data needs.
- Policy: in order to scale programs and eliminate needs, public sector and intergovernmental funding guided by sets of priorities is needed. In crisis situations, priorities are usually set in an un-scalable, reactionary manner. As mentioned in the previous discussion, there is an opportunity to leverage directed research and data analysis to set priorities and influence policy makers. For example, aggregating demographic data can influence UN- and government-specific policy in regards to cross-border displacement.
- Funding: It was agreed in the previous session that one of the challenges of funding is that it does not focus on the impact of investments.

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## IMPLEMENTATION AND PARTNERSHIPS

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In this session, the People in Crisis group highlighted the need for establishing an overarching coordinating body between parallel initiatives at all levels, as the most urgent area for innovation in implementation.

The infrastructure of such a governing mechanism that brings organizations, groups and people together, should be based on the evaluation of “points of encounter” that define what is needed and when, what has worked in terms of impact, and how it can be replicated, matched and scaled. Based on these points of encounter, a partnership strategy could be set for horizontal and vertical collaboration between different stakeholders.

With the governing mechanism set as the larger area for innovation, the task group outlined additional needs for innovation specific to the three themes established in the previous sessions.

### 1. Demographic Identification and Securing Rights

The most urgent area for innovation in regards to securing forms of identity while aggregating demographic data is the use of unique identifiers. Given the sensitivity of this data, the task group established that innovation in this area must always put human and privacy rights before data needs. The challenge here is to limit data aggregation to the minimum amount needed for providing aid to vulnerable populations, where big data poses security challenges.

The group agreed that a “breakthrough” in this area of innovation would be to go beyond the immediate data collection for recording and tracking purposes, to rather create a system, or several coordinated systems, that ensure people’s security, utilize the data collected for planning, programming, funding and advocacy purposes, and most importantly, engage with the populations in crisis in order to bring them to the process of aid as actors.

From a technological perspective, a decentralized personal identification system has the potential to balance the challenge of ensuring secure identities while aggregating data for analysis and programming purposes. This system can be designed to allow an individual to add and manage their own data, while only

allowing aid providers to access a portion of this data relevant to their sector, where a public health worker for example can only access the person's healthcare data.

Such a system could utilize platforms that allow for two-way communications between the people in crisis and the aid providers in order to portray an accurate image of the needs on the ground; the system can also be linked to mapping tools that visualizes the geographic concentration of needs, and satellite imagery that monitor people's mobility.

Another example in this regard, is an initiative by the prime minister in India that funds a universal biometrically based ID system. Such an initiative can be helpful in crisis situations by cancelling the challenges of cross-border displacement, or incompatible data collection by various stakeholders.

## 2. Implementation and Scaling of Programs

It was agreed in the task group that technology alone could not lead to solutions. With that in mind, the discussion around innovation in this area focused on moving away from data aggregation to producing actionable knowledge.

The People in Crisis group were interested in innovative tools that translate aggregated data into action. One example is the use of satellite imagery that could track the daily movement of people to identify where real-time settlements are forming, which indicates where programming should take place.

Another example is to bring user experience design approaches from the private sector to development in order to make data more available, accessible and actionable to stakeholders.

Additionally, there are other implementation challenges that present major areas for innovation, such as the need for innovative and dynamic surveying methods, innovation in cash flow from donor to recipient, and innovation in dynamic service systems that adapt to shifting crisis contexts.

Specifically to health, two major areas for innovation were identified: prevention and holistic planning.

Innovation in preventative measures can be cost efficient on both the short and long run. Examples of such measures that have been used to prevent the spread of some communicable diseases are both as simple as installing mosquito nets and window screens, and as advanced as monitoring water bodies, rain patterns and mosquito densities in order to anticipate when and where future problem will arise.

Innovation in holistic planning means to plan for solutions that address the system as a whole. For example, it is not enough to design drugs for a certain disease, rather it is equally important to address the effective delivery of the drug to crisis situations. Therefore, what is needed is innovation in the healthcare delivery as a holistic system.

Building actionable knowledge requires partnerships between industry and the private sector, government agencies and aid organizations on the ground.

Regarding funding, it was unanimously agreed that innovative mechanisms are needed to measure the impact of investment on people's lives, therefore, steering away from the economic return of funding in crisis situations; in other words, shifting from measuring return on investment (ROI) to measuring impact of Investment (IOI).

Here, there is also an opportunity to use aggregated data for prioritizing challenges, which in turn can be used towards targeted investments. For example, a major foundation analyzes the funding requests it

receives to identify the major areas and themes where funding is needed the most. Then, it uses this analysis to direct donors to the areas that will have larger impacts on people. This is a form of the production of actionable knowledge.

### 3. Research and Advocacy

Three main areas for innovation were highlighted throughout the discussion in relation to research and advocacy.

First, it was agreed that there is an oversight of research in relations to the advancement of the SDGs. The innovation here is in finding ways to prioritize between the 17 goals in order to direct research accordingly. There are initiatives that act as a scientific advisory council for research around the SDGs. Such initiatives need to be formalized to prioritize research on the SDGs across the scientific field.

The second area for innovation in research stems from the need for preemptive and preventative research for crisis situations. This is especially specific for education and health provisions since both sectors have long-term impacts on populations.

Finally, there is a need to support innovation coming from the field itself. This connects to the effort to empower people who are in crisis and engage them in the problem-solving process. Here, the task group was inspired by the Patient Innovation (PI) presentation by Pedro Oliveira during the Plenary Lunch. PI is an initiative that aggregates and funds innovation projects developed by patients in order to facilitate their own lives.

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## KEY ACTIONS

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The result of the three sessions in the People in Crisis group was a set of key areas for action. These areas act as the base for the innovation needed in crisis situations and as roadmap for future action but different disciplines and sectors:

1. A collaborative approach to crisis situations is needed. This means building partnerships and collaborative platforms between the private and public sectors and the academic community in order to consolidate, integrate, and share different data sources across agencies and organizations.
2. Impact incentives are needed in both research and funding. In research, the publishing incentives need to shift from being based on the number of citations, to focus on the publication's impact on the ground. Similarly, the incentives for funding must shift from focusing on return on investment, to impact of investment.
3. There is a need for targeted evidence and data analysis. There is a need for targeted data analysis and representation tools that can make the data available for specific audiences whether it is for policy makers, community leaders and donors, or intermediaries such as advocates and media organizations.
4. The scientific community needs to focus on developing prevention methods for the populations at risk.
5. Holistic and systemic approaches are needed. This means analyzing the impacts of responses on the entire system and prioritizing between challenges and working collaboratively across sectors and disciplines.

6. Initiate a collaborative effort to monitor technological advances that have the potential to revolutionize global health and development. This also includes having a forward look on disease that may lead to future epidemics.

Additionally, the People in Crisis group identified four metrics that are integral for measuring the success of the action plan above:

- The first metric is the measuring of impact on the ground. As mentioned above impact can be used for all levels of the RDD&D process, including influencing policy and funding. By monitoring how impactful programs are, stakeholders can measure the success of the above action plan.
- Another metric is measuring how much evidence is used in planning and programming. For example, by monitoring where publications are referenced, stakeholders can measure whether or not evidence is being used in programming, advocacy, or funding.
- The third metric is to measure how interdisciplinary and collaborative approaches are impacting the development and scaling of programs. This will allow stakeholders to develop certain partnerships over others in order to have bigger impacts.
- Finally, stakeholders should measure the scientific consensus on next generation diseases and technologies and monitor how those are advancing the action plan outlined above.

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## NEXT STEPS

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The group expressed strong interest in taking this discussion forward by convening on a regular basis to continue to brainstorm and refine this action plan. However, there were no further details discussed during the sessions on where and when such meetings would take place.

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## OPEN QUESTIONS

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Several questions arose during the Research and Data session that remained open for the group.

The task group agreed on the need for a coordinating body that provides guidance on the needs on the ground, establishes priorities of goals, and identifies the various stakeholders needed for holistic approaches. Within that context:

- What can aid stakeholders learn from behavioral sciences to inform their RDD&D processes and better reflect the cultural frameworks between different crisis contexts?
- How can innovative research and data aggregating mechanisms improve the current methodologies for context analysis to include additional factors such as human resources and social and cultural capital?
- What can be gained by bringing methodologies and strategies from the private sector, such as rapid prototyping (learning by doing) and systems thinking, to the RDD&D process?
- How can a governing body be formed while bringing different sectors and disciplines to the same table and avoiding hierarchical structures that slow down responses?
- How can innovations in research and technology aid in the development of new funding mechanisms that focus on impact rather than economic efficiency?

The task group also focused on how technology can be a tool for establishing a decentralized identification system that can be managed by the individuals themselves while both providing limited access to stakeholders and securing personal information. The following questions were raised in that regard:

- How can such a system allow different organizations to link their existing and future datasets?
- How can the system allow different stakeholders to work with each other and with government bodies to recognize and secure these identities?
- What are the benefits of quantifying and tracking people in crisis situations, and how does the aggregation of this data affect access to services and scaling of programs?
- How can this tool allow stakeholders to leverage data to influence policy and incentivize funding?

The group then looked at: 1) how to create a coordinating body that sets the priorities and facilitates the partnerships needed in order to eliminate the needs of people in crisis and with that advance on the SDGs, and 2) how research can be directed towards goals, measured by impact on the ground and leveraged to influence policy.

Here are several questions the group identified as a framework for moving forward that address the three themes of knowledge gaps identified above:

- How can research that is directed towards implementation and scale inform and enhance “on the ground” programming and planning? Moreover, what innovative mechanisms can be used to measure the impact of such an effort?
- How can technology facilitate access to dynamic systems that aggregate real-time data? More specifically to directed, preemptive research on the impact of healthcare responses: how can technology be used to create a system that identifies and places various epidemics alongside a database of preventive, diagnostics and curative tactics, in order to assess the status of each epidemic and track potential opportunities for funding and partnerships with private sector and industry?
- What are some best practices for translating research and evidence from the field into policy and actionable information?
- How can data analysis lead to a prioritization plan that can influence both policy and funding?
- What can be learned from effective analysis and advocacy reports to build an advocacy agenda that meets the identified priorities and that goes beyond outlining recommendations?
- How can scientists be involved in policy making in order to collaborate on defining research questions and policy decisions that are evidence and science based? For that, how can technology provide the tools to make research, evidence, and data available to multiple sectors and intermediaries such as media outlets and lobbyists?
- How can directed research and data analysis be leveraged to present donors with scenarios that demonstrate the impacts of their investment in certain areas?

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**APPENDIX: WORKING GROUP PARTICIPANTS**


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<b>Full Name</b>	<b>Title</b>	<b>Primary Affiliation</b>
<b>Ravi Gurumurthy</b>	Chief Innovation Officer	International Rescue Committee
<b>David Le Blanc</b>	Senior Sustainable Development Officer	UN DESA
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<b>Hiro Yoshikawa</b>	Co-Director	Global TIES for Children Center
<b>Ann Gabriel</b>	Vice President, Academic & Research Relations	Elsevier
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<b>Paul M. Horn</b>	Senior Vice Provost for Research	Tandon School of Engineering, New York University
<b>Mariola Pogacnik</b>	Director	PricewaterhouseCoopers
<b>Josette Sheeran</b>	President and CEO	Asia Society
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<b>Karen Nelson</b>	President	J. Craig Venter Institute (JCVI)
<b>Tine De Marez</b>	Project Management Office Leader, Global Public Health	Johnson & Johnson
<b>Mohit Bhargava</b>	Manager - Sustainability Services	Ernst & Young
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<b>Sebastian Fries</b>	Executive Director, Population Health Partnership	Columbia University
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<b>Guillermo Herrera-Taracena</b>	Global Clinical Leader, Infectious Diseases and Global Public Health	Johnson & Johnson
<b>Heikki Hietala</b>	First Secretary, Unit for Development and Human Rights	Permanent Mission of Finland to the United Nations