# University People

### EVP

Edward C. Forst '82 has been named Harvard's first executive vice president, effective September 1. As the "principal ranking operating officer" at the University, he will oversee financial, administrative, and human-resources functions (each run by a vice president) and administrative information technology. The new position relieves somewhat the administrative pressures on the president and provost, to whom seven vice presidents and 11 deans, among others, now report. Forst, a Goldman Sachs partner since 1998, was most recently global head of investment management (and now becomes a board member at Harvard Management Company, which invests the endowment); previously, he served as chief administrative officer at Goldman Sachs. He has been actively involved in his College class's reunions and gift commitee.

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**Edward C. Forst**

### Diversity Development

Conant professor of education **Judith D. Singer**, former academic dean and acting dean at the Harvard Graduate School of Education, has been appointed the University's senior vice provost for faculty development and diversity. In that role, Singer, known for developing quantitative methods of social-science research, will oversee and monitor faculty-appointment processes; review junior-faculty appointments; administer University funds used to appoint scholars who make the faculty more diverse; and gather data and report on the status of these efforts (see www.faculty. harvard.edu). She succeeds **Evelynn Hammonds**, who became dean of Harvard College in June.

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**Judith D. Singer**

### Communications Chief

**Christine Heenan**, founder and president of Clarendon Group, a Providence, Rhode Island-based public and government relations firm, will become Harvard's new vice president for government, community, and public affairs, effective October 1. She succeeds **Alan J. Stone**.

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**Christine Heenan**

Heenan, who holds a B.S. in journalism from Boston University, was a business strategy consultant. She then entered government, serving on the Domestic Policy Council staff during the first term of the Clinton administration, focusing on health and women's issues and writing speeches. She had communications roles at the 1996 and 2000 Democratic national conventions, and was subsequently director of community and government relations at Brown University and Brown Medical School. She founded Clarendon Group in 2000. Her Harvard portfolio extends from Boston's review of Allston plans and congressional concern over university endowments to news-media matters.

lowing up with social workers to make sure patients don't fall through the cracks."

This level of patient involvement provides the basis for CHA's brand of academic activism. As director of the alliance's division of healthcare policy and research, McCormick is part of a working group of CHA internists and psychiatrists committed to investigating and publicizing a range of inequalities in the country's healthcare system. Many of the group's papers have been widely publicized and have helped shape health-policy debates. A 2007 study led by associate professors of medicine Stephanie Woolhandler and David Himmelstein, for example, revealed the rising numbers of uninsured veterans in the United States and led to Woolhandler's testifying before Congress on the issue.

A simple clinical observation prompted the study. "We noticed that a lot of uninsured vets were showing up at our clinics," McCormick explains, "so we decided to look at the actual data." The numbers were astounding: 1.8 million non-elderly veterans were uninsured in 2004—an increase of 290,000 since 2000. The researchers found that most uninsured veterans have middle-class incomes that disqualify them for Veterans Administration (VA) care, while others can't afford the co-payments or don't have access to VA facilities in their communities. (The CHA group has produced similarly high-impact studies addressing the steep rise in emergency-room wait times, the distribution of free drug samples to affluent rather than needy patients, and the lack of knowledge among U.S. medical students about military medical ethics; see www.challiance.org/news/news.shtml).

"Plenty of other places conduct research on these kinds of public-health issues," McCormick says. "The difference is that we don't stop at getting our studies into peer-reviewed journals. We get on the phone, start talking to reporters, hold press conferences, and write editorials. Our view is: What's the point of doing research if you're not going to do anything with it?" McCormick himself teaches an annual month-long seminar to medical students on evidence-based healthcare advocacy, providing some background in biostatistics and epidemiology and requiring students to design a research study addressing a current medical-care problem. Jane Lowe focused on the shortage of primary-care physicians in Massachusetts: "The elective taught me the concrete steps to take," she explains, "from recognizing a problem, to collecting data, to formulating solutions, and then reaching the audience that can make a difference in healthcare policy."

At a time when community-focused, public hospitals are in short supply (there are 300 fewer today than 15 years ago), CHA provides a valuable training ground for HMS students. "Municipal hospitals



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