



ARIADNE LABS

OUR STORY AT YEAR 6



On the cover: Ariadne's TeamBirth Project provides clinicians and families with tools to improve childbirth care in the United States. Pictured here is the team at South Shore Hospital outside Boston, one of four pilot sites testing the program.

From left are Janet Skov, RN-C Inpatient OB, BSN; Jaime Kullak, CNM, CNP; parents Kelly and Michael Davoli with son, Michael, who was delivered at South Shore during the TeamBirth Project; and Kimberly Dever, MD. They are in front of the Labor and Birth Planning Board at South Shore Hospital's McKim Family Birthing Center.

The planning board is a patient-facing whiteboard located in labor and delivery rooms to capture shared information from the birthing team and the birthing person's preferences. The board facilitates better communication and acts as a shared reference for all team members.



A BANNER TRANSITION YEAR

This spring, after a nationwide search for the next executive director of Ariadne Labs, I passed the baton to Dr. Asaf Bitton, a brilliant and accomplished

health system innovator. As I meet with Asaf regularly in my new role as chairman of the Ariadne Labs Governance Council, I am continually reminded of why he is the right leader for the next era of our future.

Today, Asaf is positioning Ariadne Labs to take on the biggest opportunity we see in every corner of the world: To speed development and uptake of systems solutions that improve health care delivery, reduce suffering, and save lives. He is leveraging his considerable experience at the national and international levels to build the new partnerships that will be needed to advance this vision. And he is focusing our research on innovations that will make it possible for health systems to understand, target and close the gaps in care, at scale.

This new direction for Ariadne Labs builds on more than six years of learning from the field implementing solutions

to improve childbirth, surgery and end-of-life care. This past year alone, we accomplished banner results in each of these areas:

- » showing a sustained, country-wide 37 percent decrease in post-surgical deaths in Scotland following implementation of the Surgical Safety Checklist;
- » demonstrating in a large study at Dana Farber Cancer Institute that serious illness conversations reduce moderate to severe anxiety and depression by half in cancer patients;
- » and delivering to the global maternal health community a comprehensive set of strategies and recommendations for how to improve the quality of childbirth care and reduce maternal-newborn mortality globally.

In this report, you will see why I am as optimistic and energized as ever about Ariadne Labs. I invite you to join Asaf and the entire Ariadne Labs team in this next era.

Yours,
Atul Gawande, MD, MPH
Chairman, Governance Council



MOMENTUM FOR THE NEXT ERA OF IMPACT

I am delighted to share with you *Our Story at Year 6*, capping what has been a transformational period in every way for Ariadne Labs. We saw our founder Atul Gawande transition in June 2018 to the role of chair of our Governance Council, a new, five-person oversight and thought leadership body that includes Brigham Health President Elizabeth Nabel and Harvard T.H. Chan School of Public Health Dean Michelle A. Williams. In April 2019, I was honored to be selected by the Governance Council as Ariadne's new Executive Director. I am excited to propel our core systems innovation efforts forward and to develop new ways to more quickly and effectively achieve lasting impact on health-care delivery nationally and globally.

While Ariadne Labs was undergoing significant leadership change this past year, our teams were busy with historic wins that we summarize throughout this report. This pivotal year has positioned us for the next era of success. Many core supporters who have made the work possible to date have recognized the scale of our impact and increased financial support for our work throughout our leadership transition.

I came to Ariadne Labs six years ago as one of the first faculty hired during our formative years, aiming to build a global primary health-care initiative with the World Bank, the World Health Organization, and the Bill & Melinda Gates Foundation. I have seen the success of the Ariadne Labs' design-test-spread approach in my work here since then. Over the last six years, we learned that we can make an impact at critical moments in care with targeted solutions like the Surgical Safety Checklist and the Serious Illness Conversation Guide. In our childbirth and primary health care work, we also learned we need to apply a systems lens to understand and identify the hidden, under-recognized systemic gaps that lead to poor health outcomes.

As a primary care physician who has spent decades focused on health systems strengthening around the world, it is clear to me that systems-level solutions are needed to drive the outcomes we all want to see. These include building, testing, and implementing proven tools at the interface between patient and providers. It also means targeting areas like workforce capacity, payment models, management competencies, and local readiness for change — all system factors that are crucial to the success or failure of our best tools. Using these insights, we are poised to transform the delivery of health care at scale with the insights and learnings from our existing programs and the new innovations under development. We will do so with the same scientific excellence we have become known for from Boston to Seattle, India to Estonia, and Ghana to Scotland.

You will read about our many accomplishments in these pages. I am most proud of the impact we are demonstrating around the world. On pages 2-3, you will see our estimates for the millions of patient lives touched, and improved, using an Ariadne Labs solution or tool in a clinical setting. In just six years, we have impacted the lives of hundreds of millions of people. But there is so much more to do. The way forward will take collaboration, partnerships and a shared vision for better care for every patient, every time. The investment and encouragement of our Ariadne Labs community of supporters has made our progress possible. We are grateful for your continuing partnership with us, and look forward, with you, to all the achievements to come.

Warm regards,
Asaf Bitton, MD, MPH
Executive Director

Our Impact

Every patient, every time. It is a lofty goal—and one we take seriously.

This past year Ariadne Labs scientists undertook an effort to assess, with the best data available, the impact of our work around the world. These figures represent our estimates of the number of patients who were cared for in a clinical setting with our tools or our programs.

LIVES TOUCHED:
361,600,000

SAFE SURGERY (2008-2018)

Our Safe Surgery team worked closely with our sister organization, Lifebox, to mark the 10-year anniversary of the WHO Surgical Safety Checklist. A new study underscoring the checklist's impact details how Scotland saw a 36.6 percent reduction in post-surgical deaths since implementing the checklist as part of a national health safety program. With our partner CRICO/Risk Management Foundation, we released a new set of tools that guide health system leaders through a joint planning process to uncover and address patient safety risks before hospital mergers occur.

945,700

BETTER EVIDENCE (2009-2018)

Better Evidence has joined the Ariadne Labs portfolio of projects in a partnership that seeks to ensure clinicians can access and use the informational tools they need to provide better care. A component of the project is linking clinicians in resource-limited settings with evidence-based clinical resources, including UpToDate, a smartphone app with reliably researched data distilled into clinically relevant knowledge. Better Evidence also studies use of such tools to increase its impact. In the year ahead, the project will expand to reach medical school faculty and trainees in sub-Saharan Africa.

693,800

BETTERBIRTH (2010-2018)

Following a study in the *New England Journal of Medicine* that published main outcomes from the BetterBirth study, we created a comprehensive report with recommendations to improve childbirth globally at betterbirth.ariadnelabs.org. We also launched our newest project, the Low Birthweight Infant Feeding Exploration, which aims to understand how to improve nutrition options for the 20 million low birthweight infants born yearly.

1,200,000

OR CRISIS CHECKLISTS (2013-2018)

Since 2009, Ariadne Labs has been the steward of the Emergency Manuals Implementation Collaborative building partnerships globally to increase use of OR Crisis Checklists. The material has been translated into multiple languages and promoted around the world, magnifying the impact of more than 10,000 downloads.

575,500

PRIMARY HEALTH CARE (2014-2018)

The Primary Health Care team played an integral role in the launch of new tools designed to help country leaders measure and identify gaps in their health systems. Unveiled at the Global Conference on Primary Health Care in Kazakhstan, the Vital Signs Profiles were developed by the Primary Health Care Performance Initiative. The meeting also served as an opportunity to launch our first four Improvement Strategies to address identified gaps.

114,300

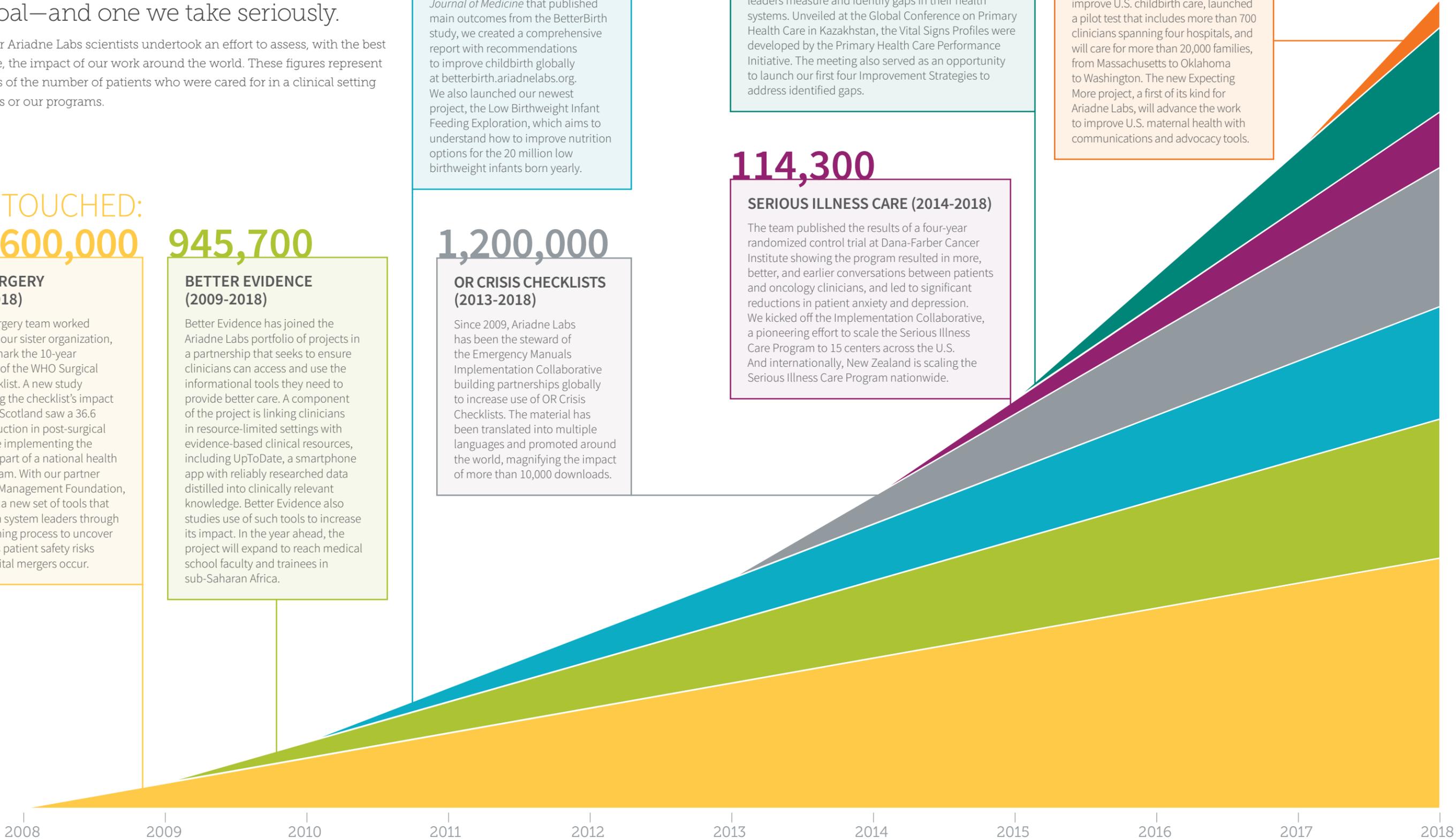
SERIOUS ILLNESS CARE (2014-2018)

The team published the results of a four-year randomized control trial at Dana-Farber Cancer Institute showing the program resulted in more, better, and earlier conversations between patients and oncology clinicians, and led to significant reductions in patient anxiety and depression. We kicked off the Implementation Collaborative, a pioneering effort to scale the Serious Illness Care Program to 15 centers across the U.S. And internationally, New Zealand is scaling the Serious Illness Care Program nationwide.

9,600

DELIVERY DECISIONS INITIATIVE (2018)

Our TeamBirth Project, which aims to improve U.S. childbirth care, launched a pilot test that includes more than 700 clinicians spanning four hospitals, and will care for more than 20,000 families, from Massachusetts to Oklahoma to Washington. The new Expecting More project, a first of its kind for Ariadne Labs, will advance the work to improve U.S. maternal health with communications and advocacy tools.



Better Care at Every Stage of Life

From birth to end-of-life care, Ariadne Labs has developed innovative strategies and solutions that improve the delivery of care throughout a person's life. Prompted by need and solidified by research, our programs and projects are making meaningful improvements to patients during their most critical moments.



Divya was born on April 17, 2016, one of more than 150,000 babies delivered during the BetterBirth study in Uttar Pradesh, India.

DELIVERY DECISIONS INITIATIVE

Our Delivery Decisions Initiative seeks to ensure that all women and their families access care that is safe, supportive, and empowering. Our tools, trainings, and implementation strategies aim to make clinicians more aware of a woman's preferences during childbirth while reducing overtreatment, such as C-sections, when possible. Via our TeamBirth Project, more than 700 clinicians in four U.S. hospitals are testing our strategies. Ariadne Labs has also collaborated with MASS Design Group to research the impact of childbirth facility design on care.

The team also launched a national campaign, Expecting More. The project will use narratives and interviews to explore the historical, political, and clinical foundations of the problems we see today in childbirth and clarify the role that every individual and institution has in supporting growing families. Learn more at expectingmore.org.

MATERNAL AND NEONATAL HEALTH

THE CHALLENGE

Childbirth-associated deaths are the number two killer of women of childbearing age globally. Poor quality of facility-based care has been recognized as a major contributor to maternal and neonatal deaths. Moreover, systemic barriers in how childbirth care is delivered prevent clinicians from making reliable, consistent decisions that support women's preferences. As a result, women and their families suffer.

OUR SOLUTIONS

Through the BetterBirth Program and the Delivery Decisions Initiative, Ariadne Labs aims to improve the childbirth quality of care, experience, and health outcomes around the world. Our goal is to transform childbirth care by highlighting solutions that promote quality, dignity, and respect.

BETTERBIRTH PROGRAM

Our BetterBirth Program focuses on addressing facility-based care at the highest risk period for women and babies globally. The program utilizes the World Health Organization's Safe Childbirth Checklist paired with frontline coaching and data collection for continual improvement. The checklist's essential birth practices—monitoring blood pressure and using clean, surgical gloves, for example—target the biggest killers of women and babies during childbirth. Our BetterBirth study in India, one of the largest studies ever conducted on maternal and newborn health, yielded substantial insights on

providing high-quality, childbirth care globally. In 2019 we completed the comprehensive BetterBirth Report with a set of global recommendations for improvement across four key levels of the childbirth ecosystem: women and community, birth attendants, frontline facilities, and health systems.

In 2018, the BetterBirth Program expanded its portfolio with a new project aiming to improve the health of vulnerable newborns. The Low Birthweight Infant Feeding Exploration Project, funded by the Bill & Melinda Gates Foundation, aims to understand how to improve nutrition options for the 20 million low birthweight infants born yearly who are at high risk for stunting, severe weight loss, or death, in order to inform global feeding approaches and policies.

"When I first saw the BetterBirth Report, I cried tears of joy. The report represents a culmination of almost 10 years of research, insights, and learnings on how we can improve the quality of care and health outcomes for women and newborns everywhere. The big message of Betterbirth is that change truly is possible."

Katherine Semrau, PhD
Director, BetterBirth Program
[Read the report at betterbirth.ariadnelabs.org](http://betterbirth.ariadnelabs.org)



"Childbirth has always been a team effort. The TeamBirth Project aims to ensure this team, including the mother and her family, the nurses, the doctors, or midwife are all working together for one of the most important moments of our lives."

Neel Shah, MD
Director, Delivery Decisions Initiative

Nannette Landry, CNM, discusses the Labor and Birth Planning Board with Shawn and Patricia Williams at South Shore Hospital in South Weymouth, MA, as part of a pilot for the TeamBirth Project.

PHOTO: ANA M. REYES

PRIMARY HEALTH CARE

THE CHALLENGE

- » Primary health care is the foundation for healthy populations and can ensure more resilient and responsive health systems, but nearly all countries have gaps in delivery
- » Primary care is typically fragmented, of poor quality, and underfunded
- » Health systems tend to treat diseases rather than offer holistic care to patients

OUR SOLUTIONS

The Primary Health Care Program aims to strengthen primary health care globally so every person and community can obtain the care they deserve. Our team has initiated groundbreaking research and has developed partnerships in more than 20 countries that influence delivery of frontline, primary health care services and produce better outcomes for patients. Ariadne Labs is a founding member of the Primary Health Care Performance Initiative, which includes the Bill & Melinda Gates Foundation, World Bank Group, World Health Organization, and Results for Development. The initiative has developed new tools to understand and improve primary health care systems globally. The Vital Signs Profiles, for example, offer snapshots of primary health care systems in specific countries. Over the last year, Ariadne Labs led the development of the Primary Health Care Progression Model, a tool which generates standardized, actionable data that integrates with the Vital Signs Profiles, and the Improvement Strategies, or interactive modules guiding users through options for improving primary health care also based on discoveries in the Vital Signs Profiles. ■

"I've sat with government leaders and families in places as disparate as Oman, Uganda, India, Argentina, and Boston, and while there are many important differences, they all share a common need for high-quality, equitable health care. Our team is committed to supporting efforts that advance health care in their countries and for all people all over the world."

*Dan Schwarz, MD
Director, Primary Health Care Program*



From left: Lilian Chavarria, Matias Mesa, Valery Mesa, Andrea Montero, Antonio Guterrez, and Constantino Birones wait for care at the EBAIS Horquetas, a community-based primary health care clinic, in Sarapiquí, Costa Rica.

**Every Patient,
Everywhere, Every Time**

PHOTO: TIM LLEWELLYN

SURGERY

THE CHALLENGE

- » Despite safety advancements, surgery still presents significant risks to patients due to surgical complications
- » Surgical teams are more likely to forget important steps during an OR emergency or under stress

OUR SOLUTIONS

The Safe Surgery Program is a global leader in the effort to make surgery safer by emphasizing the importance of preparation, communication, and teamwork in reducing surgical errors. Our program relies on the use of the World Health Organization Surgical Safety Checklist and Operating Room Crisis Checklists. The Surgical Safety Checklist celebrated its 10th anniversary in 2018. Research confirms that the tool can cut death and complications by as much as 47 percent. Additional research has shown that surgical teams complete significantly more of the life-saving steps needed during an emergency if they use the OR Crisis Checklists rather than rely on memory alone. We've come to understand that checklists achieve results by improving teamwork among providers and shifting team cultures from valuing individualistic action to valuing high-functioning systems in which everyone offers their expertise. These changes are having profound impacts on patient safety worldwide. ■

SERIOUS ILLNESS CARE

THE CHALLENGE

- » Only a third of patients in their last year of life discuss their personal goals and preferences with their clinicians
- » Too few clinicians are trained or feel prepared to have emotionally complex conversations
- » Health systems are not prepared to reliably support serious illness conversations

OUR SOLUTIONS

The Serious Illness Care Program was created to ensure every seriously ill patient has meaningful conversations with their clinicians about their goals, values, and priorities to ensure that they receive the care they want. The program's centerpiece is the Serious Illness Conversation Guide, which helps health professionals who care for seriously ill patients have meaningful conversations about what matters most to patients.

New research confirms the impact of the program. A four-year study developed by Ariadne Labs and conducted at the Dana-Farber Cancer Institute shows that the program leads to more, better, and earlier conversations between clinicians and patients and reduced patient anxiety and depression by half.

Efforts are underway to expand the program. In 2018, seven leading health systems joined Ariadne Labs, the Center to Advance Palliative Care, and VitalTalk in an 18-month Implementation Collaborative, and 15 more are joining in 2019. Supported by the Gordon and Betty Moore Foundation, this pioneering effort provides health systems with the training, tools, and implementation support to bring the Serious Illness Care Program to patients across the U.S. ■

"The Serious Illness Care study results are exciting because they show us that more, better, and earlier conversations are possible and can reduce symptoms of depression and anxiety in our most vulnerable patients."

*Joanna Paladino, MD
Assistant Director
of Implementation,
Serious Illness Care Program*

Strengthening Health Systems for Better Care

At Ariadne Labs, we are expanding the focus of our work. We have learned that we can act successfully at critical moments in health care with tools like the Surgical Safety Checklist and the Serious Illness Conversation Guide. We have also learned that the cohesiveness, integration, and performance of the larger health system is equally important to driving impact.



Surgeon Joaquim Havens, MD, and Janaka Lagoo, MD, MPH perform a simulated exercise with the WHO Surgical Safety Checklist and its supplemental Device Briefing Tool.

PHOTO: COURTNEY STAPLES

“In medicine, we always strive to deliver the best possible care and minimize risk to patients. However, when medical errors occur, transparency, communication, apology, and proactive compensation with patients should be the policy of every hospital in the United States. In order to scale this approach, we need better measures and implementation strategies. We’re excited to be leading the effort to make communication and apology the standard of care in the United States.”

*Evan Benjamin, MD
Chief Medical Officer*

Addressing system-wide issues requires buy-in from leadership, new ways of communicating, and a shift in culture toward patient safety, transparency, and collaboration. Our new innovations are designed to strengthen health systems by minimizing patient safety risks and ensuring the best possible care when errors do occur.

THE CHALLENGE

- » Our research underscores safety risks that accompany health care system expansion, including mergers and acquisitions. Expansions can lead to substantial changes in patient populations and volume—changes that may not be anticipated and may leave staff ill-equipped to handle the influx
- » Following these expansions, clinicians may need to visit other institutions in their network but may receive little systemic orientation about the new settings
- » If an error or patient harm occurs, systems can be reluctant to take responsibility, potentially prompting litigation and malpractice lawsuits

OUR SOLUTIONS

PATIENT SAFETY

Our research shows that system expansion is tied to unintended, patient safety risks that have largely gone unrecognized. In response, Ariadne Labs and the CRICO/Risk Management Foundation have partnered to develop a set of tools to guide health system leaders through a communication process that uncovers important patient safety considerations. One of the tools is the Joint Clinical Integration Guide for health systems leaders that includes guiding principles for promoting transparency and patient safety.

“I love our patient safety and health system expansion work because every area we work in inevitably leads to insights about other opportunities that can improve safety for physicians and patients.”

*Susan Haas, MD, MSc
Principal Investigator,
System Expansion Risks to Patient Safety*

COMMUNICATION, APOLOGY, AND RESOLUTION

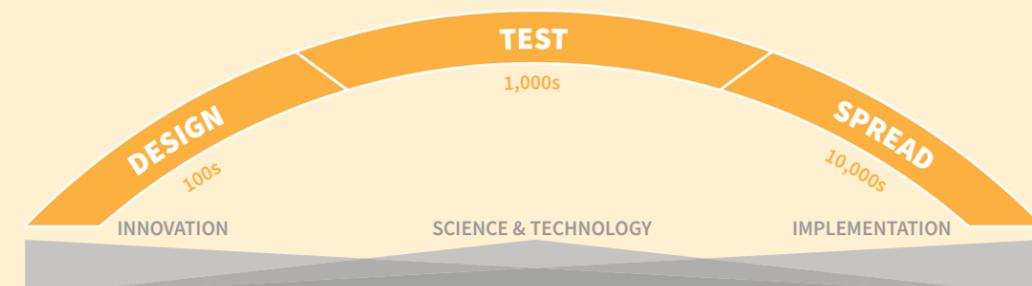
When hospitals make mistakes in clinical care, taking responsibility quickly and communicating proactively with patients can significantly improve patient and family health and well-being. Research also shows that apologies from hospitals following errors can lead to fewer claims and lower defense costs. Medical centers have started adopting a Communication, Apology, and Resolution Program, leading to more open communication with patients after

adverse events and, when necessary, taking responsibility and proactively offering compensation.

Ariadne Labs has partnered with national experts to develop a set of measurements that can help organizations track the success of this program. We are committed to refining the program, developing additional tools for addressing medical error, and spreading these practices across the country. The goal is to make transparency, communication, apology, and proactive compensation the policy of every U.S. hospital. ■

THE ARIADNE LABS ARC

The Ariadne Labs innovation pathway produces transformative, scalable solutions and ensures our solutions are real-world tested and designed for global spread. As our solutions advance through the Arc, we collaborate with partners worldwide, iterate as new knowledge is discovered, and refine our approaches.



Data Solutions, Technology, and Implementation Strategies to Drive Impact

Data informs all of our projects, programs, and global implementation efforts. By capturing and interpreting purposeful data, we have the power to drive critical changes in health care.

PHOTO: COURTNEY STAPLES

“We live in a data-driven world. The leading organizations are the ones that are most adapted to making data-driven decisions. Our goal at Ariadne Labs is to account for the human, systems, and data factors as they are applied to making smart, real-world, health care interventions.”

*Nic Encina, MS, MBA
Chief Science and
Technology Officer*

Our data scientists, computer scientists, and information systems specialists transform raw research results into solutions that improve patient care. Our innovative, technological advancements help spread data-based solutions to more places and people.

Data and technology also support our implementation efforts to help spread our solutions globally. We provide a pathway for standardizing implementation efforts in the field, provide coaching tools and tactics, and develop measurement strategies that analyze efforts.

Every year, Ariadne Labs sparks new projects in health systems innovation that amplify our global impact by marrying data with technology.

THE CHALLENGE

- » Practitioners may lack access to useful data or know-how to implement health care solutions
- » Data-driven solutions may work in one country or site but not others
- » Spreading safety interventions remains a relatively slow and piecemeal effort, especially in fragmented health care systems

OUR SOLUTIONS

BETTER EVIDENCE

Accessing evidence-based clinical resources (EBCRs) in low- and middle-income countries can be challenging. The Better Evidence Project seeks to understand the barriers and facilitators to using these resources, such as a smartphone app with access to medical research. Better Evidence will gain insight on how EBCRs impact clinical decision making, care delivery, and patient outcomes to help spread these resources and other evidence-based interventions in these settings.

HEALTHPRISM

Surgical patients want to know how quickly they will get back to feeling like themselves after an operation. HealthPrism's intent is to use a methodology known as digital phenotyping, where patient-generated health data and patient-reported outcomes are collected using a smartphone. The intent is to provide this data to patients and surgeons and promote shared decision-making around treatment options, align expectations for recovery, and prepare for surgery. Patients will be more engaged in their health and recovery, while surgeons can also monitor their patients' recovery to determine if intervention is necessary.

THE ATLAS INITIATIVE

Health systems everywhere are continually looking for ways to improve the delivery of care for their patients. But when it comes to spreading solutions for health care's biggest challenges, one size does not fit all. A solution that drives dazzling outcomes in one location can fail in a different setting. The reasons for this variability are contextual factors that can either strengthen or impede implementation. Through the Atlas Initiative, Ariadne Labs is developing a suite of evidence-informed tools that aims to enable hospitals and health systems to assess context-specific implementation factors. Another component of Atlas is the development of a shared data repository for collecting and analyzing information that will help determine factors for predicting implementation success. The tools will enable more informed decision making about whether to move forward with implementing a potential health care solution at a specific site.

“Ariadne Labs lends its expertise to the global community. Our team continues to learn from those in the field what it takes to do the right thing and provide a pathway for anyone interested in using, adapting, and spreading our solutions.”

*Sue Gullo, RN, BSN, MS
Director of Implementation*

ARIA

Ariadne Labs offers its partners online resources that support and advance their implementation efforts. Aria, our dynamic and engaging digital implementation platform, creates a common space for relevant content, how-to guides, coaching, and other learning opportunities. Additionally, Aria hosts data collection and reporting mechanisms such as survey tools, a data upload portal, and web-user behavior tracking to enable reporting and analytics on implementation progress. The platform's aim is to accelerate the spread of Ariadne's programs by creating a one-stop shop that enhances implementation efforts and supports partners in context to their unique needs. ■

BUILDING COMMUNITIES, LOCALLY & GLOBALLY

Building and cultivating a community of changemakers is one of Ariadne Labs' core objectives. We are a Boston-based organization with a local network of researchers and innovators. Empowering more than 150 associate faculty and affiliate members, we foster the sharing and development of research and solutions to strengthen health care. Throughout the year, we offer these innovators various opportunities for collaboration and information sharing. Our Spark Grant Program offers seed money that can help germinate the ideas they and others have into solutions with global impact.

Globally, we have also made strides in building networks that spark innovation and challenge the status quo. Ariadne Labs co-sponsors the Harvard International Leadership Development Program for Physicians. This robust program offers physician leaders the technical, management, and leadership skills that drive improvement at health systems throughout the world. Moreover, Ariadne has developed a growing, online community that promotes discussion and information-sharing on our resources, research, and implementation efforts.

By the Numbers

Ariadne ended the year in a strong financial position. We saw continued growth in FY18, with revenue increasing by 25% year over year to a total of \$20 million. Expenses edged up only slightly, leaving us with a net income of \$1 million. Our reserve balances were also slightly above our target goal.

As in prior years, about half of revenue came from non-federal grants and contracts with the other half coming from a combination of philanthropic gifts and fees. Gifts and grants were received roughly equally between the two parent institutions for the year.

Organizational growth also continued this year with increases in both the total number of staff and associate & affiliate faculty. ■



FY18 REVENUE BY SOURCE (\$20.1M)



FY18 EXPENDITURE BY TYPE (\$19M)



ADVISORY BOARD

Our Advisory Board includes world-class leaders in science, education, and business. They support Ariadne Labs by contributing expertise on research priorities, scientific plans, implementation approaches, and collaborations.

DON BERWICK, MD, MPP
President Emeritus and Senior Fellow
Institute for Healthcare Improvement
Former Director of Medicaid and Medicare

TROYEN A. BRENNAN, MD, MPH
Executive Vice President and CMO
CVS Health

ANDREW DREYFUS
President and CEO
Blue Cross Blue Shield of Massachusetts

DAVID EBERSMAN
CEO, Lyra Health
Former CFO, Facebook

MALA GAONKAR, MBA
Managing Director
Lone Pine Capital

PETER HECHT, PHD
CEO
Cyclerion Therapeutics

ERIC LANDER, PHD
Founding Director
Broad Institute

ELIZABETH NABEL, MD
President
Brigham Health

MICHELLE A. WILLIAMS, SCD
Dean of the Faculty
Harvard T.H. Chan School of Public Health

JASON YEUNG, MPHIL
Managing Director and Portfolio Manager
Morgan Stanley

GWILL E. YORK, MBA
Co-Founder
Lighthouse Capital Partners

OUR SUPPORTERS

The Paul G. Allen Family Foundation
Anonymous (multiple)
Blue Cross Blue Shield of Massachusetts
Blue Shield of California
Brigham and Women's Hospital
Jonathan S. Bush
The Cathedral Fund
The Charina Endowment Fund
CRICO/Risk Management Foundation
Ann and John Doerr
The Duke Endowment
The Bill & Melinda Gates Foundation
Horace W. Goldsmith Foundation

The Harvard T.H. Chan School of Public Health
William W. Helman
Reid Hoffman
Wendy Holcombe and Carl Kawaja
Johnson & Johnson
Barbara Jones
Kristina Jones and Peter Hecht
Michele and Howard Kessler
The Klarman Family Foundation
Legacy Venture V LLC
Karin Swartz Leschly, MD, and Nick Leschly
Becky R. and Mark J. Levin
Esther and Dan Levy

Li Lu Humanitarian Foundation
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Laura and Scott Malkin
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Noora Health
One8 Foundation
Peterson Center on Healthcare
Sangeeta K. and Anoop Prasad, PhD
Rx Foundation
Laura and Greg Spivy
Surgo Foundation
Gwill E. York and Paul A. Maeder

Our mission is to
save lives and reduce suffering
by creating scalable solutions
that improve health care delivery
at the most critical moments
for people everywhere.



HARVARD T.H. CHAN
SCHOOL OF PUBLIC HEALTH

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