TAKING A STAND
A TRIBUTE TO ALLAN ROSENFIELD
A LEGACY OF LEADERSHIP IN PUBLIC HEALTH
Allan’s impact on people’s lives is so deep and so vast that even for those close to him, expressing it in a fitting word or phrase is a challenge. Everyone who knows him has a different Allan Rosenfield “story”—a distinct moment or event that represents who Allan is to them and defines the tremendous influence he has had on so many lives.

But the Thai expression “duong jai,” or “one who climbs inside the hearts of others,” offers some insight to the way in which Allan has touched people throughout his life.

DUONG JAI: ONE WHO CLIMBS INSIDE THE HEART

From his early commitment to women’s reproductive health in Nigeria and Thailand, to addressing the care and treatment of millions suffering from the scourge of HIV/AIDS in Africa and countries beyond, to responding to the healthcare needs of adolescents and young adults in Washington Heights and Harlem, Allan Rosenfield brings his considerable intellect and drive for solutions to each and every type of local, national, and global public health concern.

As important as his many accomplishments and leadership as Dean of the Mailman School of Public Health for 20 years, are the profound connections he has formed with those who have been a part of his life and vision. He has truly climbed inside the hearts of many.

With this tribute, Allan’s colleagues, family, and friends celebrate the passion, courage, and persistence of Dr. Allan Rosenfield, a true hero of our times and, as is so often and aptly repeated, a “doctor to millions.”

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Allan and I bonded early during our medical school days. The passion and energy associated with Allan today was very much in evidence at that time. For 50-plus years, I have watched as my dear friend and colleague’s passion for life and concern for the public’s health has had far-reaching, positive effects on the lives of many, locally and internationally.

KENNETH A. FORDE, MD, P&S ’59
JOSÉ M. FERRER
PROFESSOR EMERITUS OF CLINICAL SURGERY
COLUMBIA UNIVERSITY COLLEGE OF PHYSICIANS & SURGEONS

Growing up in Brookline, Massachusetts in the 1930s and 40s, Allan Rosenfield got his initial taste of the medical profession from his father, Dr. Harold Rosenfield, a successful Boston obstetrician-gynecologist. He enjoyed accompanying his father on weekends when he visited patients in hospitals on the outskirts of Boston. His dream to follow in his father’s footsteps was recorded early on—he wrote in a diary at just ten-years-old that he knew he wanted to become a doctor.

Fortunately for Allan, he excelled in science. He earned his B.A. in biochemistry from Harvard College in 1955 and graduated from the College of Physicians & Surgeons at Columbia University in 1959. After medical school he completed an internship and one year of surgical residency at Beth Israel Hospital in Boston. His final step was to complete a residency in obstetrics and gynecology at Harvard’s Boston Lying-In Hospital (now the Brigham and Women’s Hospital).

The year was 1962, a time when the U.S. military draft was in effect. Rather than risk being called into service during the middle of his obstetrics and gynecology residency, Dr. Rosenfield entered the Air Force as a part of the doctors’ draft.

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After his initial training, Dr. Rosenfield was stationed in South Korea, a country ravaged by years of war. In addition to his military responsibilities, he volunteered at a local hospital. It was here that he began to recognize the tremendous health needs of large populations in resource-poor settings. “South Korea gave me my first glimpse of the hard realities faced by health providers in impoverished, remote villages,” said Dr. Rosenfield. “The conditions affected everyone, the patients and those treating them.”

After a year in South Korea, he was re-stationed to Thailand where he completed one more year of service. Upon his discharge, he returned to Boston to begin his residency in obstetrics and gynecology.

His experience in South Korea had sparked an interest in underserved populations. Toward the end of his residency, Dr. Rosenfield began exploring options for working abroad. When his chairman of OB/GYN told him about a teaching position available at a new medical school in Nigeria, Dr. Rosenfield’s interest was piqued.

At the time, Dr. Rosenfield was single. Although he usually avoided blind dates, he agreed to go out with a friend-of-a-friend named Clare—a date that has continued for 40 years. Following a ten-week courtship, he married Clare, and swept her away to a “honeymoon” in Nigeria.

“Within weeks of meeting Allan, he said, ‘What if I asked you to go to Nigeria with me?’ I smiled and said, ‘I think I’d say Yes!’ We married six weeks later and were off to Lagos for a year and to Bangkok for six years, working with beautiful people in wondrous cultures. I am ever grateful for the rich opportunities Allan’s adventurous spirit opened up for me.”

CLARE ROSENFIELD

Dr. Rosenfield’s work with the Thai Ministry of Public Health evolved into a large-scale project to develop a national family planning program. In the 1960s, Thailand had approximately 3,000 auxiliary midwives trained in public health nursing and midwifery who could provide prenatal and intrapartum care. Because there was greater trust in the traditional birth attendants, or granny midwives, the auxiliary midwives were underutilized.

At this time, oral contraceptives were available only through a prescription from a physician, and there were far too few physicians to serve the millions of women in Thailand’s rural villages and towns. Dr. Rosenfield wanted to address women’s limited access to contraception—and the shortage of physicians—by training auxiliary midwives to prescribe birth control pills.

He worked with the Ministry of Public Health to conduct a small study testing the safety and efficacy of midwives prescribing oral contraceptives. To help him, he developed a checklist of questions they could use for screening female patients about their reproductive health. Depending on a patient’s answers, midwives would either prescribe contraceptives or refer her to a physician. Following the decisively successful study, Thailand’s Ministry of Public Health began training all auxiliary midwives to prescribe the pill. This increased access to contraception from less than 150 sites to over 3,000 sites, dramatically changing Thailand’s Family Planning Program. Later, nurses and nurse midwives were trained to insert IUDs.

The small act of allowing health personnel other than physicians to perform these tasks for Thai women revolutionized the delivery of family planning services in Thailand, as well as for countries with similar health and population issues.

It is an understatement to say that Dr. Rosenfield’s early international work on maternal and reproductive health was a transformative experience. According to him, his experiences in Nigeria and Thailand literally changed his life’s trajectory. “During that period in my life, I realized that I could have a greater impact on the health of individuals by addressing the large-scale health needs of populations.”

This realization set the course for his path—a path that has led Allan Rosenfield to address some of the world’s greatest public health challenges.

“When Allan arrived in Thailand in the 1960s, the average family had 7 children and the country had an annual population growth rate of 3.3 percent. By the year 2000, thanks to his pioneering efforts, these figures had dropped to 1.6 children and 0.8 percent. Allan’s forward thinking has had an astounding influence on Thailand’s present-day landscape.”

MEHAY UPANANDA
FOUNDER AND CHAIRMAN, POPULATION AND COMMUNITY DEVELOPMENT ASSOCIATION (POC), BANGKOK, THAILAND
Dr. Rosenfield’s pioneering work in Thailand laid the groundwork for what would become a hallmark of his career—he focused on women’s health and human rights at both the local and global levels.

**BRINGING GOOD HEALTH TO MILLIONS**

In 1975, Columbia University recruited Dr. Rosenfield from the Population Council as a professor of Public Health and to head the newly named Center for Population and Family Health at the University’s School of Public Health. He also had an appointment in the Department of Obstetrics and Gynecology, where he was responsible for ambulatory services.

Dr. Rosenfield’s mission was to expand the Center’s existing international reproductive health initiatives into additional developing countries. Armed with his early experiences in Thailand and Nigeria, Dr. Rosenfield felt deeply committed to providing women in developing nations with appropriate family planning tools and care. With existing funds from The Ford Foundation and additional seed money from the Rockefeller Foundation, Dr. Rosenfield worked with colleagues at the Center to develop several outreach, training, and research programs targeting women’s reproductive health.
Dr. Rosenfield’s vision to provide good healthcare was not limited to distant communities around the world. Located in the Northern Manhattan neighborhood of Washington Heights, the School bordered mostly low-income Latino and African-American communities. From the beginning, Dr. Rosenfield felt strongly that a school of public health could and should be directly involved with the health and well-being of its community.

As Dr. Rosenfield took steps to strengthen the Center’s global programs, he noticed gaps in the local healthcare delivery system similar to those in other countries. In particular, local maternal and child health programs and reproductive and sexual health services for adolescents were severely lacking.

With the determination of the Center’s growing faculty and staff, Dr. Rosenfield and his colleague Judith Jones began to implement family planning and reproductive health service programs in the School’s own backyard. The Center’s programs were among the country’s most comprehensive community-based initiatives to have been developed by any academic institution, and, rarer still, to be under a school of public health.

Under the direction of Dr. Rosenfield and Jones, the Center for Population and Family Health created the Young Adult Clinic, an evening clinic for adolescent women; the pioneering and award-winning Young Men’s Clinic; and the innovative school-based clinics located in intermediate and high schools throughout Upper Manhattan. All of the original programs thrive to this day and have had a significant impact on similar programs throughout New York State.

In the mid-1980s, the School embarked on a search for a new dean. The field of public health had gained broader visibility and importance at this time, and the University wanted a leader who could capitalize on emerging opportunities and add intellectual luster to the academic divisions of the School.

Having observed Dr. Rosenfield over the last decade as he successfully reached out to the Washington Heights community, identified new service niches, and found important resources to support the Center’s local and international efforts, the search committee unanimously agreed that Dr. Rosenfield’s vision and unwavering commitment to the field could elevate the School to new heights. In 1986, Allan Rosenfield was appointed Dean of Columbia’s School of Public Health and named the Joseph R. DeLamar Professor of Public Health.

Prior to his appointment, Dr. Rosenfield had devoted considerable time and energy to identifying a neglected tragedy in developing countries—the deaths each year of an estimated 500,000-plus women from pregnancy-related complications. According to Dr. Rosenfield, these deaths could have been prevented if women had access to appropriate maternity care services.

In 1986, Dr. Rosenfield and a colleague, epidemiologist Dr. Deborah Maine, co-authored a paper on maternal mortality that posed the question, “Where is the ‘M’ in MCH (Maternal and Child Health)?” Published in The Lancet, it called attention to the crisis in women’s health where providers focused on the health of children at the expense of the health, and too often, lives of women.
The seminar paper spawned a movement that galvanized the attention of international health groups and policy makers to focus on poor maternal health. In 1987, several international organizations came together at a conference in Nairobi, Kenya to mobilize action to address high rates of maternal death and illness. The meeting resulted in the creation of the Safe Motherhood Initiative, a global advocacy effort seeking to ensure that all women receive the care they need to be safe and healthy throughout and beyond pregnancy.

“ALLAN’S NUMEROUS GLOBAL CONTRIBUTIONS AND INNOVATIVE INITIATIVES HAVE TRULY ADVANCED THE FIELD OF REPRODUCTIVE AND MATERNAL HEALTH. IF ONE MUST PINPOINT THE SINGLE SEMINAL ACTIVITY THAT CATAPULTED HIM INTO THE GLOBAL ARENA, HOWEVER, IT WAS HIS ROLE IN IDENTIFYING THE CRISIS OF MATERNITY IN DEVELOPING COUNTRIES.”

ALFRED SOMMER, MD, DEAN EMERITUS AND PROFESSOR, JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH

Leveraging his future work from this monumental paper, Dr. Rosenfield worked with Deborah Marie and colleagues at the Center to create an initiative to save women’s lives. In 1987, with support from Carnegie Corporation of New York, they established the Prevention of Maternal Mortality Program, a collaboration with several West African countries that utilized interdisciplinary teams of local health providers to improve women’s use of and access to emergency obstetric care.

“For millions of women, their efforts put safe motherhood on the map. As Dr. Rosenfield worked to transform the School into a major local, national, and international presence, he was determined to use his experience and increasing influence to keep it there.”

The only global effort of its kind to develop and support more than 85 safe motherhood initiatives in over 50 countries around the world, the multi-faceted AMDD program improves the availability, quality, and utilization of emergency obstetric care for pregnant women in sub-Saharan Africa and Asia. Never one to rest when more victories or innovations can be realized, Dr. Rosenfield continues his advocacy and research into new ways to alleviate and solve this tragic problem.

“Among all the initiatives that have been taken in the struggle against HIV/AIDS, none has done more than MTCT-Plus to focus attention on the situation faced by women in this pandemic.”

KOFI ANNAN, SECRETARY-GENERAL, UNITED NATIONS

FACING THE HIV/AIDS PANDEMIC

Of all the critical health threats to arise in the 20th century, the identification and spread of HIV/AIDS ushered in an epidemic of global proportions never before seen. Particularly hard hit were women and children living in underprivileged villages and cities around the world.

As public health researchers worked to stem the spread of the virus from a mother to her unborn child, a new tragedy in women’s health came to light. In the late 1990s, efforts to prevent mother-to-child transmission were focused on administering drugs to babies through the mother before birth, but treatment was not provided to the mother. Said Dr. Rosenfield, “Because there were no funds to treat both the child and the mother, the woman did not receive further care. She would proceed to get sick and die, and the baby would become an orphan.”

Dr. Rosenfield was one of the first leaders in the field to speak out about this critical problem, and in 2000, he presented another seminal paper, “Where is the M in pMTCT (Prevention of Mother-to-Child Transmission)?” at the World AIDS Conference in Durban, South Africa.

Once again, Dr. Rosenfield energized the international community to action. With support from nine private foundations, he and colleagues created the MTCT-Plus Initiative, a global, family-based program focused on care and treatment for mothers and children beyond essential prevention efforts. In 2004, under the leadership of Dr. Wafa El-Sadr, a distinguished AIDS expert at the Malhman School and Harlem Hospital, the School was able to expand its involvement in AIDS care and treatment programs into a number of countries in sub-Saharan Africa. With an additional $125 million grant from the President’s Emergency Plan for AIDS Relief, the School created its International Center for AIDS Care and Treatment Programs (ICAP).

To date, the programs developed under this innovative model have enrolled more than 100,000 people in ongoing care and treatment.
Allan Rosenfield’s appointment as Dean marked the beginning of an unprecedented period of growth and recognition for Columbia’s School of Public Health. With steady determination, he harnessed the School’s potential and transformed what was once a small department embedded within Columbia University’s College of Physicians & Surgeons into one of the preeminent schools of public health in the country.

Over time, with its tremendous growth, the School broadened the depth and breadth of its reach to encompass all facets of public health, including: concerns about healthcare finance and the millions of working poor in the U.S. with no health insurance; environmental issues locally, nationally, and globally; epidemiological and biostatistical assessments in areas such as infectious disease, cardiovascular disease, and neurological and psychiatric disorders; social and behavioral issues and their impact on health; and, reproductive and maternal and child health issues.

During his tenure, the School’s budget increased from $12 million in 1986 to $161 million today, and the endowment soared from $2 million to $86 million. Sponsored research, another reflection of the School’s strong standing, is at a record level of $136 million.

“A legacy of knowledge and leadership

Vision

“Few people have meant more to Columbia University and to the field of public health than Allan Rosenfield. His vision and energy have transformed our own Mailman School into one of the world’s finest institutions. Through his courage, leadership, and dedication to making life better—in our own community and across the globe—Allan represents the very best of what Columbia aspires to be.”

LEE C. BOLLINGER
PRESIDENT, COLUMBIA UNIVERSITY
A DEAN FOR A NEW ERA

Upon becoming Dean in 1986, Dr. Rosenfield laid out his priorities for the School. For Dr. Rosenfield, a crucial first goal was to strengthen the School’s independence and enhance its budget through increased fundraising. These efforts resulted in the School becoming an independent faculty with six departments.

As he sought to establish the School’s identity, Dr. Rosenfield cultivated the institution in the same way he had built up the Center for Population and Family Health. He began to define the School through his philosophy of inclusiveness and collaboration, of building bridges and breaking down boundaries, and of generating the vital synergies that spark great ideas. As Dr. Rosenfield began recruiting top faculty members to lead the School’s six divisions (now departments) and bolster its academic and research programs, he laid the foundation for the School’s tremendous success.

THE SUM OF ITS PARTS

When discussing the School’s upward trajectory, Dr. Rosenfield credits an interdisciplinary, enterprising faculty for pushing the School to new heights. According to him, the faculty’s work in the field, laboratory, and classroom has led to the creation of knowledge that has advanced both the theory and practice of public health, and helped to train the next generation of public health leaders. “Over the past 20 years,” said Dr. Rosenfield, “we have recruited some of the best in the field—world-class scholars and students from diverse backgrounds and disciplines who have helped to create and guide our most innovative local, national, and global programs.”

The extraordinary diversity of academic and professional training among the School’s current faculty—physicians, nurses, anthropologists, sociologists, psychologists, economists, political scientists, historians, lawyers, and many more—creates a unique environment that fosters innovation and collaboration. Under Dr. Rosenfield’s direction, faculty members have forged broad partnerships to shape health policy, create innovative service initiatives, and undertake cutting-edge research and education programs.

As important as the School’s dedicated faculty are the talented students that fill their classrooms. From the beginning, Dr. Rosenfield’s vision included the development of a dynamic learning environment that attracts the best and brightest.

During Dr. Rosenfield’s tenure, applications to the School have more than doubled and the student body has grown from slightly more than 400 students in 1986 to 915 today. The School attracts a widely diverse population from 35 of the 50 states, and from 53 countries around the world. “Our students bring intense curiosity, an unwavering commitment to learning, diverse backgrounds and experience, and a shared passion to improve the public’s health,” said Rosenfield. “Together, faculty and students craft an intricate give-and-take process that is the challenging academic environment at the School.”

“Allan has been a source of inspiration for an entire generation of faculty and students at the Mailman School. With his warmth and caring, and openness to new ideas, he has illustrated that these qualities need not, and should not, be sacrificed as we strive for scientific rigor. It has been a privilege to work with such a humane, modest, and charismatic figure.”

EZRA SASSER, MD, ORPH, ANNA CHEKSIE GELMAN & MURRAY CHARLES GELMAN PROFESSOR OF EPIDEMIOLOGY; PROFESSOR OF PSYCHIATRY; CHAIR OF THE DEPARTMENT OF EPIDEMIOLOGY; DIRECTOR OF THE IMPRINTS CENTER FOR GENETIC AND ENVIRONMENTAL STUDIES

A FOUNDATION FOR THE FUTURE

With Dr. Rosenfield at the helm, individuals, corporations, and foundations have recognized the School’s leadership in addressing today’s public health challenges. In doing so, they have invested in the School by sponsoring the work of researchers, funding students through scholarships, underwriting the School’s facilities, and establishing endowments. A true cornerstone to the School’s growth was the unprecedented $33 million gift from the Joseph L. Mailman Foundation in 1998.

Upon learning of the Foundation’s interests in health and education, Dr. Rosenfield met with the Mailman family to discuss the important work of the School, and opportunities for support in line with their goals. The Mailmans felt particularly inspired by the School’s commitment to the health of communities, both locally and globally. Mrs. Phyllis Mailman’s dedication to the memory of her husband, philanthropist Joseph L. Mailman, came through in each conversation they shared.
“Many will attest to Allan’s role as a visionary in public health. To my family, he is a visionary of another sort. He inspired me, my daughter Jody, and my son Josh to recognize the importance of public health and to make a naming gift for the School far in excess of what we ever dreamed our small foundation could consider. For us, it is the inspiration of a lifetime.”

PHYLLIS MAILMAN, PRESIDENT, THE JOSEPH L. MAILMAN FOUNDATION

“The incredible gift altered the School’s path in a way that was previously unimaginable,” said Dr. Rosenfield. “The newly-fortified endowment has helped to support faculty, increase aid to students in need, and to develop and expand the School’s public health initiatives and research. The Mailman’s gift marked a true milestone for the School.”

To recognize this milestone, the largest gift bestowed to a school of public health at that time, and in honor of the late Joseph L. Mailman, Columbia trustees proudly renamed the School the Joseph L. Mailman School of Public Health.

“The success of the Mailman School is a reflection of Allan’s entire career in medicine and public health. He molded the School in his image and we have all benefited as a result.”

GERALD D. FISCHBACH, MD, EXECUTIVE VICE PRESIDENT FOR HEALTH AND BIOMEDICAL SCIENCES; DEAN, FACULTY OF MEDICINE COLUMBIA UNIVERSITY MEDICAL CENTER

With its new name firmly established, Dr. Rosenfield turned his attention to an age-old conundrum. For years, the School’s faculty, staff, and students had been scattered throughout Columbia’s Washington Heights health sciences campus. Frustrated by this, Dr. Rosenfield wanted to centralize the School as much as possible.

In 2000, Dr. Rosenfield capitalized on an opportunity to take over the beautiful, 19-story Beaux Arts building on 168th Street that formerly housed the New York State Psychiatric Institute. In doing so, the School began to unify its departments, research programs, and interdisciplinary centers under one roof.

“It was always my dream to bring our students, faculty, and staff together in an environment that fosters interdisciplinary collaboration and the exploration of new and bigger ideas,” said Dr. Rosenfield. “Our home at 722 W. 168th Street allows for future generations of public health leaders to boldly face the challenges that lay before us.”

In his 20th year as Dean of the Mailman School of Public Health, Dr. Rosenfield continues to energize the field and inspire the action that brings about life-saving discoveries, solutions, and knowledge. For the legacy of leadership and knowledge he has given the world; for his integrity, courage, and unwavering optimism; and for his special gift of “duong jai,” we are proud to honor Dr. Allan Rosenfield.
"ALLAN ROSENFIELD IS, QUITE SIMPLY, ONE OF THE MOST INTELLIGENT, DECENT, PRINCIPLED INDIVIDUALS THAT I KNOW. HIS UNFLAGGING EFFORTS TO HELP STEM THE SPREAD OF THE HIV/AIDS PANDEMIC ARE WITHOUT PARALLEL."

STEPHEN LEWIS, UN SPECIAL ENVOY FOR HIV/AIDS IN AFRICA

ALLAN ROSENFIELD'S LEADERSHIP SPANS THE WORLDS OF PUBLIC HEALTH, ACADEMIA, PHILANTHROPY, AND INTERNATIONAL POLICY DEVELOPMENT. AS DEAN OF THE MAILMAN SCHOOL, HE HAS PLAYED AN ENORMOUS ROLE IN MENTORING SOME OF THE MOST POWERFUL AND EFFECTIVE LEADERS IN PUBLIC HEALTH, DEVELOPING A GENERATION OF BOTH PIONEERS AND SOLDIERS. HE HAS TRULY CHANGED AND IMPROVED THE WORLD, ESPECIALLY FOR WOMEN AND THEIR FAMILIES.

THOMAS R. FRIEDEN, MD
HEALTH COMMISSIONER, NEW YORK CITY DEPARTMENT OF MENTAL HEALTH AND HYGIENE

"For countless women and children, Allan Rosenfield is truly a lifesaver. His longstanding commitment to reproductive rights and maternal health issues inspired action and facilitated change around the world, drawing much needed attention to the health and human rights of women everywhere."

HELENE GAYLE, MD, PRESIDENT AND CHIEF EXECUTIVE OFFICER, CARE

"I can think of no other individual who has done more for women's reproductive health over the last 40 years than Allan Rosenfield."

STEVE SINDING, MD
DIRECTOR-GENERAL, INTERNATIONAL PLANNED PARENTHOOD FEDERATION

"ALLAN IS A CONSUMMATE PUBLIC HEALTH PROFESSIONAL, A WARM HUMAN BEING, AND A DEAR, DEAR FRIEND. HIS CONTRIBUTIONS TO THE WORLD ARE FAR TOO MANY TO ENUMERATE."

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"Allen has been a wonderful colleague in our shared endeavors, a wise counselor when I've sought advice, a great comfort when I've been ill, and a staunch friend at all times."

NAPRI SADIK, MD
SPECIAL ADVISER, UN SPECIAL ENVOY FOR HIV/AIDS IN AFRICA

"A hallmark of Allan’s leadership is his bias for action; once a good idea is on the table, Allan is persistent and determined in overcoming the barriers between the idea and the development of a new program."

ANDREW R. DAVIDSON, PHD
SENIOR VICE DEAN AND PROFESSOR OF POPULATION AND FAMILY HEALTH MAILMAN SCHOOL OF PUBLIC HEALTH

"ALLAN IS A HIGHLY REGARDED CHAMPION FOR WOMEN’S HEALTH AND RIGHTS. HIS EXTRAORDINARY ENERGY AND ENTHUSIASM IN WORKING ON THE OFTEN INTRACTABLE PROBLEMS IN THE FIELD OF GLOBAL HEALTH HAS GIVEN US ALL HOPE AND TAUGHT US TO NEVER GIVE UP."

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JOHN W. ROWE, MD
EXECUTIVE CHAIRMAN, AETNA INC.

"With the mind of a public health expert and the heart of a humanitarian, my friend Allan Rosenfield has been instrumental in amfAR’s mission to identify and fund important and innovative AIDS research for well over a decade."

KENNETH COLE, CHAIRMAN, BOARD OF TRUSTEES, AMFAR

"Allan is a highly regarded champion for women’s health and rights. His extraordinary energy and enthusiasm in working on the often intractable problems in the field of global health has given us all hope and taught us to never give up."

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