The Project Behind the Projects

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From 2008 to 2011 the pharmaceutical giant Pfizer, in partnership with the Johns Hopkins Bloomberg School of Public Health's Institute for Global Tobacco Control, created the Global Health Partnerships Program with the goal of funding projects to combat the noncommunicable diseases associated with tobacco use. The project spent \$47 million over four years funding "promising cancer and tobacco control partner organizations operating in 46 countries" (Pfizer Inc., 2011). A post on the Health Affairs blog site a few years later titled "Improving successful project completion: Lessons learned from the global health partnerships program" takes a brief look at the results of this program (Stillman & Spires, 2014).

According to the post, the original goals of the program were to support the successful implementation of funded programs, build evaluation capacity, and establish a network to foster a global community of practitioners to fight cancer. Grantees were provided both in-person and remote planning sessions, training through workshops, conferences, webinars and specially developed educational materials and training, and opportunities to share information with peer grantee organizations through online networking. Program success was measured using a program index whose criteria included achievement of stated goals, quality of plans and indicators, ability to disseminate outcomes and findings, formation of partnerships developed through the Global Health Partnerships program to advance project goals, degree to which projects scaled or expanded, and the ability to achieve sustainable funding (Stillman & Spires, 2014).

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Data on meeting these criteria was gathered through "a systematic review of grantee progress reports and anecdotal input from program managers and mentors" together with additional information gathered directly from grantees on how provided technical assistance impacted their programs. Despite the technical assistance data being too small to be statistically significant, grantees did report gaining knowledge on developing action plans and measurable indicators, improving data collection, and understanding how effective evaluation can improve program sustainability. The authors found that grantees who improved evaluation plans and data collection were twice as likely to be in the highest success category, and those who understood the role of evaluation in sustaining their efforts were three times as likely to be in the highest success category. They report several other positive outcomes, including how projects expanded to integrate with existing health care systems and reach broader communities, that forty percent of grantees had either secured or were in the process of securing additional funding, that half had confirmed plans to continue their projects, and that nearly eighty percent had formed collaborations. They finish by stating that "The Pfizer Foundation, by providing funding for this technical assistance, helped contribute to the effective completion of its grantees' projects. Based on these findings, we would strongly encourage other funders to adopt a similar approach" (Stillman & Spires, 2014).

For this week's blog post, we were asked to address several questions related to this project evaluation, including: What are the keys to evaluating a project like this and did this particular evaluation do an effective job? How does a qualitative tool like the program index with its inherent subjectivity factor impact evaluation? Is this really, as the authors conclude, an example of a program model that should be adopted more widely? I attempted to find more information on this project, looking for what I hoped would be more quantitative information on things like the particular projects funded and how many of them were still functioning today. I was not able to find that information. Even the link from the blog post to documentation on the Pfizer website about the project is no longer available, and I had to find it using the Internet Archive. Finding the mid-term program report was not very helpful in any case, since it has much more the appearance of corporate promotional material than something designed to share truly useful information about the program (Pfizer Inc., 2010).

Both the stated project goals and the list of criteria for measuring success seem reasonable to me. To effectively evaluate the program, however, much more transparent data, with a healthy mix of quantitative and qualitative information, would need to be available. Without that, it is not possible to draw any further conclusions.

What I suspect is that what really underlies this whole endeavor is that it is an example of a so-called corporate social responsibility (CSR) initiative effectively described as both a sham and a contradiction in terms by Joel Bakan in his book, *The new corporation: How "good" corporations are bad for democracy* (2020). My suspicion that this was really a CSR project was supported by finding articles like, Corporate social responsibility in global health: The Pfizer Global Health Fellows international volunteering program, which closely predate this program (Vian et. al., 2007), and the current webpage on the Pfizer website titled "Global health fellows" (Pfizer Inc., 2025). Despite the corporate clap trap in the mid-term report that "As the world's largest pharmaceutical company, Pfizer has a responsibility to direct our resources and expertise

to address the world's most enduring health challenges" (Pfizer Inc., 2010, p. 1), the only responsibility Pfizer actually has is to maximize the wealth and power of its shareholders.

The only answer I can honestly give to the question as to whether programs like this one from Pfizer can serve as useful models for other projects is no. Anti-democratic mega corporations under our global neoliberal economic system will never be able to serve the real needs of the world's people. The power to address people's real needs has to be given to the people themselves if goals such as improving people's health are to be sincerely addressed. If Pfizer's corporate profits could be improved by worsening global health I have no doubt they would do it, as ample evidence from tobacco companies and the promotion of opioid use by pharmaceutical companies themselves clearly demonstrates.

Another example of how this is so was provided to us this week by the TED talk on our viewing list with Bill Gates discussing confronting climate change. Mr. Gates, so hopelessly mired in the muck of neoliberalism that he can not see his way out of it, asks rhetorically if we need a Manhattan project to address our urgent need to confront climate change, but quickly shifts back to his place of comfort saying "Well, we need lots of companies working on this, hundreds" (Gates, 2010, 12:37). I guess he did not get the memo that neoliberalism died back in 2008 and that all of us here on planet earth are still suffering under the stench of its rotting, unburied corpse.

After his talk ends, the moderator asks Mr. Gates a question about TerraPower (Gates, 2010, 18:47). I had not previously heard of TerraPower, but now I see that it is one of Mr. Gates' current business projects (American Nuclear Society, 2025). Bill Gates is a parent, a husband, and a human being, and I do not doubt that he would like to

live in and leave a world to his children that is not suffering the ills of what he knows to be the coming climate catastrophe. Yet despite this, because he is an oligarch, he can not help but see the world through the lens of his never ending need to accumulate ever more wealth and power. For him and all the billionaires and mega corporations designing and building our world, that is the real project behind the projects, everything else be damned.

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