Greater Milwaukee Global Health Landscape Study
This study was published in April 2020. The base year for the analysis was 2019.

Photo credit: Engineers Without Borders, University of Wisconsin-Milwaukee, http://www.ewbatum.blogspot.com
LETTER FROM THE MILWAUKEE GLOBAL HEALTH CONSORTIUM PRESIDENT
April 13, 2020

Dear Milwaukee Global Health Consortium and community members:

I am excited to share with you our recently completed “Global Health Landscape” study, which the Milwaukee Global Health Consortium (MGHC) Board commissioned in the fall of 2019. This historic and groundbreaking study is the first of its kind for greater Milwaukee, and, in a limited way, for the State of Wisconsin.

Today, we see, more than ever, that proactive investment in global health can help prevent disease and make our communities and neighborhoods safer and healthier. Additionally, global health-related activities contribute significantly to the local economy through employment and commerce. We are also acutely aware that the inability to predict, prevent, and effectively control a pandemic has significant health, social, and economic ripple effects. No one is unaffected. The world is a patchwork of interconnected neighborhoods, and we need to do more to protect our global population’s collective health and safety.

This study is a starting point for informed discussions about greater Milwaukee’s future global health strategy and investments. It provides a solid foundation from which to monitor and analyze greater Milwaukee’s global health landscape and improve the sector’s performance over the next three to five years. Although it is recognized that this report underestimates the totality of global health activity occurring across the state, it is an important first step in capturing and measuring the scope of global health–related activities across academic institutions, companies, nonprofit, and other civil service organizations.

Many Wisconsin organizations are committed to making greater Milwaukee a destination for global health research, education, clinical care, and technology development activities. We recognize that a consortium’s value is a function of the strengths and diversity of its membership and its use as a vehicle to connect and respond to challenges.

Collectively, we are committed to developing our future health professionals, engineers, scientists, and leaders who are needed to address health inequities; serve diverse populations; and make Wisconsin communities, and all communities around the globe, healthier and safer.

I want to thank all the participants who took time to discuss their global health activities and help with data collection, RTI International for the team’s professional conduct of this study, and the MGHC Board of Directors for their support of this important and inaugural study.

Stephen W. Hargarten, MD, MPH
President
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BACKGROUND AND PURPOSE
For the past three decades, the greater Milwaukee metropolitan area has been an advocate for and leader in global health research, education, training, and technology commercialization. Companies, universities, nonprofits, civil society organizations, and government agencies have worked together to strengthen health and safety locally and globally, with the goal of reducing disparities and inequities, for the world’s diverse populations.

To measure the breadth and depth of greater Milwaukee’s global health activities and to communicate the sector’s impacts on the regional economy, the Milwaukee Global Health Consortium (MGHC) commissioned this study. MGHC members include Advocate Aurora Health, Carroll University, Children’s Wisconsin, the City of Milwaukee Health Department, Concordia University, Froedtert Hospital, the International Institute of Wisconsin, Marquette University, the Medical College of Wisconsin, Milwaukee County Government, the Rotary Club of Milwaukee, Sixteenth Street Community Health Center, and the University of Wisconsin-Milwaukee.

RESEARCH METHODS
This study represents the first known global health landscape analysis and estimation of economic impact undertaken for the greater Milwaukee metropolitan area. A major emphasis of the study was to develop the framework for organizing and presenting greater Milwaukee’s global health landscape and to work with stakeholders to develop the data collection process.

The study draws on economic, educational, and other data provided by MGHC members and a few of Milwaukee’s largest, global biohealth companies. RTI International collected economic data on employment, operating expenditures, exports, and research activity that are related to global health. The study team also collected data and perspectives on the type of global health experiences offered by Wisconsin institutions of higher education and medical residency programs and the impact of these experiences on the quality, preparedness, and career focus of graduates. In total, RTI interviewed over 35 individuals representing Wisconsin organizations to understand the role they play in the global health ecosystem of the greater Milwaukee metro area, and, to a limited extent, the state of Wisconsin.

Because of the scope and time constraints of this study, there are limitations. For example, RTI and MGHC were not able to capture all the local faith-based and other community-based efforts focused on addressing local and global health disparities. We were also not able to include all the greater Milwaukee biohealth companies and companies in other industry sectors that are involved in global health
activities. Two examples of non-biohealth companies that are engaged in global health activities are A.O. Smith, a manufacturer of water heaters and boilers which also supplies water filtration technology overseas, and SC Johnson, which is engaged in philanthropic technology commercialization activities with international partners to reduce the impact of mosquito-borne diseases.

RTI and the MGHC took a conservative approach to estimating the direct economic impact of global health activities by focusing on those research, education, and industrial activities that involved a bilateral, mutually beneficial linkage with another country or engagement with local, diverse populations representative of the global community. Many greater Milwaukee organizations that engage in global health activities are also actively engaged in public health, international health, planetary health, and life sciences research and technology commercialization activities. The unifying thread across these varied companies and organizations is the ambition to improve health and reduce disparities for all people, from the neighborhoods of greater Milwaukee to those in other countries.

RTI used the IMPLAN economic impact modeling platform to estimate the indirect and induced impacts of the direct employment and expenditures by greater Milwaukee global health organizations in 2019. IMPLAN draws on U.S. government, state, and local economic data to estimate how economic activity in one industry sector reverberates across other industry sectors in a regional economy through business establishment and personal spending.

LIFE EXPECTANCY AT BIRTH (LEB) BY ZIP CODES

6.3 years
largest gap in LEB between two U.S. States

71.3 vs. 83.2 years
LEB for two zip codes within Milwaukee County

67%
variation attributable to combined income and education index

WHY GREATER MILWAUKEE CARES ABOUT GLOBAL HEALTH

What is global health? This study defines global health as collaborative research, education, training, and technology commercialization that strengthen health and safety, locally and globally, by reducing disparities and inequities for the world’s diverse populations.

An important aspect of global health is awareness of how culture and language shape our understanding of “health” and “disease,” as well as our response. A global health perspective recognizes that socioeconomic, environmental, and cultural factors play a role in the very different health outcomes experienced by populations within the same cities and same countries, as well as across countries.

Consider a Milwaukee County statistic that makes this point: Life expectancy at birth varies by 12 years for two zip codes within Milwaukee County: 71.3 years versus 83.2 years. Similar statistics that highlight health disparities can be found across U.S. states and across countries.

As Dr. Stephen Hargarten noted in his letter, “Today we see that when we proactively invest in global health, we can prevent disease and make our communities and neighborhoods safer and healthier. Additionally, our global health-related activities support local employment and commerce. We are also acutely aware that the inability to prevent or effectively control a pandemic has significant health, social, and economic ripple effects. No one is unaffected.”

Greater Milwaukee’s 30 years of leadership in global health aims to prepare future health professional leaders to serve Wisconsin residents; partner across local and global institutions to solve important global health problems; and leverage its global health expertise to generate more research, innovation, and economic activity for the state of Wisconsin that contribute to good health and well-being.

ECONOMIC IMPACT RESULTS

In 2019, greater Milwaukee’s global health sector generated direct employment of 6,132 people and $2.901 billion of economic activity. When the secondary and tertiary impacts of spending by greater Milwaukee global health organizations and employees are included, the greater Milwaukee global health sector supported 16,961 total jobs, $1.308 billion in labor income, $4.671 billion in economic output, and $143.8 million in state and local taxes for the state of Wisconsin. For comparison, the Milwaukee-Waukesha-West Allis metropolitan statistical area gross domestic product is $103.7 billion.

ECONOMIC IMPACT

16,961
Total Jobs

$4.7B
in Economic Output

$143.8M
in State and Local taxes

Source: RTI International
Nationally, the MGHC is one of five regional global health alliances playing a leadership role in global health education, research, and technology commercialization activity. The others are the Washington Global Health Alliance (anchored by Seattle), the Bay Area Global Health Alliance of California (anchored by San Francisco), the Georgia Global Health Alliance (anchored by Atlanta), and the Triangle Global Health Consortium of North Carolina (anchored by Raleigh-Durham-Chapel Hill).

Greater Milwaukee’s global health ecosystem comprises institutions of higher education, hospitals and community health centers, global biohealth companies, nonprofit research institutes, philanthropic and civic organizations, and local government agencies (see Figure 1).

Representatives of greater Milwaukee global health organizations are engaged in several global health disciplines or focus areas. Figure 2 ranks these global health disciplines by the number of organizations that identified working in that discipline. “Infectious diseases” (55%) and “chronic diseases” (50%) were the top two disciplines, followed by “maternal, child, and newborn health” (40%) and “injury and violence” (30%). Work in the areas of “injury and violence;” “mental and behavioral health;” and “water, food, and planetary health and sustainability” highlights Milwaukee’s understanding of how social, environmental, and health issues are interrelated.

In terms of specific activities, greater Milwaukee global health organizations are participating in a di-
Figure 2. Global Health Disciplines Represented by Greater Milwaukee Global Health Organizations, 2019

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Diseases</td>
<td>55%</td>
</tr>
<tr>
<td>Chronic Diseases</td>
<td>55%</td>
</tr>
<tr>
<td>Maternal, Child and Newborn Health</td>
<td>40%</td>
</tr>
<tr>
<td>Injury and Violence</td>
<td>30%</td>
</tr>
<tr>
<td>Mental and Behavioral Health</td>
<td>30%</td>
</tr>
<tr>
<td>Health Systems Strengthening</td>
<td>30%</td>
</tr>
<tr>
<td>Water, Food, and Planet Health and Sustainability</td>
<td>25%</td>
</tr>
<tr>
<td>Therapeutic and Diagnostic Devices</td>
<td>10%</td>
</tr>
<tr>
<td>Surgical Interventions</td>
<td>10%</td>
</tr>
<tr>
<td>Digital and Mobile Technologies</td>
<td>5%</td>
</tr>
</tbody>
</table>

Note: Global health organizations could select more than one global health discipline in which they are active.
Source: RTI International

Global health curriculum helps our pediatric residents see that the world is much smaller, and people are more similar than they realize. It helps them appreciate that the physician's role is to serve, not to help. The nuance is important.”

*Michael Gutzeit, MD, Chief Medical Officer, Children’s Wisconsin*
verse set of global health activities, as shown in Table 3. The greatest share (55%) of greater Milwaukee global health organizations are engaged in “education, outreach, and training” for students, healthcare workers, and refugees and recent immigrants. “Clinical or professional services” is second (40%), followed by “research and feasibility studies” (30%), and “data collection and evaluation” (15%).

Engagement in global health is also local. Milwaukee is home to the largest population of Rohingya refugees (from Burma) in the U.S. Other refugees resettled in Milwaukee include Hmong (from Laos), Congolese, Liberians, Russians, Iraqis, Somalis, Sudanese, Eritreans, Ethiopians, and Afghans, among many others. Milwaukee global health organizations provide a variety of services, education, health screenings, and clinical care for newly arrived immigrants. Collaborative partnerships that support refugee health and assimilation span the State of Wisconsin Department of Children and Families, the Milwaukee Area Refugee Consortium, the African and Asian Refugee Consortium, academic institutions, nonprofit organizations, and health clinics. Since 2015, the “Our City of Nations” conference, has been hosted by three MGHC academic members (Concordia University, UW-Milwaukee, MCW) to promote refugee health and wellness. The Our City of Nations conference brings together these diverse partnerships to discuss best practices in refugee resettlement and ensure that greater Milwaukee is a more welcoming community to these newcomers.

Shola Vaughn, MD, Medical College of Wisconsin Dermatology Resident, Vietnam

My month in Vietnam will have a drastic impact on my care of patients here at MCW. I feel more competent, more independent, more confident, and more creative when thinking about how to care for patients.”
IMPACT ON WORKFORCE

Global health programs (e.g., global health tracks, certificates, and degrees) offered by Wisconsin institutions of higher education aim to provide undergraduate and graduate students and medical residents with the knowledge, skills, and hands-on experiences to treat diverse patient populations and to engage communities in prevention and care. Figure 4 provides a sample of topics covered by Children’s Wisconsin and the Medical College of Wisconsin Department of Pediatrics’ Global Health Noon Conference Series for pediatric residents.

Studies of the impact of a global health curriculum and field experiences on medical students have identified the following changes in students’ knowledge, attitudes, and skills:

- Changes in worldviews
- Increased cultural sensitivity
- Enhanced community, social, and public health awareness
- Enhanced clinical and communication skills
- More appropriate resource utilization
- Change in career plans (e.g., more likely to practice primary care, strong preference to work with underserved populations and engage in community service activities)
- A greater understanding of the challenges of working in areas with scarce resources

Our students gain a real recognition of health care disparities in underserved areas, and they learn the “grit” skills that are important to providing good healthcare.”

Chris Olsen, Director, Graduate/Professional and Capstone Certificates in Global Health, Global Health Institute, University of Wisconsin-Madison

Figure 4. Global Health Disciplines

- Infectious Disease
- Maternal, Child, and Newborn Health
- Injury and Violence
- Chronic Disease
- Mental and Behavioral Health
- Health Systems Strengthening
- Water, Food, and Planetary Health
- Therapeutic and Diagnostic Devices
- Surgical Interventions
These are positive workforce impacts for the state of Wisconsin, especially in those parts of the state that need more primary care physicians or more health-care professionals interested in working with diverse or underserved communities.

In the past year, approximately 413 greater Milwaukee university students and residents studied or participated in global health experiences in 30 countries. The top five countries represented were Panama (107 students), Guatemala (45 students), Ecuador (38 students), Malawi (37 students), and Peru (23 students), as shown in Figure 5.

Greater Milwaukee’s and the state of Wisconsin’s leadership in creating global health tracks, certificates, and degrees has enhanced the attractiveness of Wisconsin’s undergraduate and graduate degree programs in engineering, medicine, nursing, allied health professions, peacebuilding, and public health nationally and internationally.

**IMPACT ON INDUSTRY**

Wisconsin is home to 367 biohealth companies spanning drugs and pharmaceuticals; medical devices and diagnostics; and molecules, cells, and tissue. These companies are engaged in global health research, manufacturing, and export activities that generate significant economic activity and employment for the state of Wisconsin. In 2019, Wisconsin biohealth companies exported $2.9 billion of Wisconsin-manufactured products to clinics, hospitals, and academic medical centers worldwide. \(^{10}\)

Greater Milwaukee is home to major biohealth companies, such as GE Healthcare (imaging technology) and Alcami (contract development and manufacturing organization in the pharmaceutical industry), as well as global companies in other industry sectors that are engaged in global health, such as A.O. Smith (water filtration) and SC Johnson (philanthropic work to reduce mosquito-borne disease).
Outside of Milwaukee, and concentrated around the Madison area, are companies such as Exact Sciences, Promega, Covance, Catalent Pharma Solutions, Thermo Fisher Scientific (Madison and Milwaukee locations), Illumina, Epic Systems, Gilson, and MilliporeSigma (Madison, Milwaukee, and Sheboygan Falls locations).

In 2019 alone, greater Milwaukee companies, institutions of higher education, and other global health organizations worked in, partnered with, and studied in 62 countries (out of a total of the world’s 195 countries), as shown in Figure 6.

Greater Milwaukee global health companies and organizations worked in 37 countries. The top countries represented in 2019 were China, Japan, India, Nepal, Belize, Peru, and Uganda. Figure 7 presents the list of top countries where greater Milwaukee companies have major operations and greater Milwaukee hospitals and MCW have partnerships for medical residents. This is a distinct count from the 30 countries in which Milwaukee institutions of higher education offered global health experiences for students. In total, greater Milwaukee global health organizations worked, partners, and studied in 62 unique countries (Figure 6).

SC Johnson is committed to improving the lives and health of the people at the Base of the Pyramid—those who earn less than a few U.S. dollars per day. We work with global health partners, including Ministries of Health, to protect people living in vulnerable, difficult-to-reach communities from mosquito-borne diseases.”

Thomas Putzer, Director, Base of the Pyramid Group, Office of the Chairman and CEO, SC Johnson
Figure 6. Sixty-two Countries Where Greater Milwaukee Global Health Organizations Worked, Partnered, and Studied, 2019

Source: RTI International

Figure 7. Countries Where Greater Milwaukee Global Health Organizations Worked in 2019

Source: RTI International
GE Healthcare: Local Commitment, Global Engagement

Question: How does GE Healthcare view its global health role?
“At GE Healthcare, we work to provide cutting-edge medical solutions that develop and strengthen healthcare systems and enhance the capabilities of our global medical community,” says Jay Hill, CTO and COO, Imaging at GE Healthcare and Board Chair at BioForward Wisconsin. “With more than four million GE Healthcare devices installed in more than 160 countries around the world, our company works closely with government agencies and hospital systems to train more than 10,000 global customers each year on ways to optimize equipment and improve patient care.”

“Improving global health is a three-part challenge: developing high-quality medical technologies and solutions; making these innovations as affordable as possible; and increasing access to these innovative solutions in every country, community and healthcare setting worldwide to empower clinicians and impact patients’ lives,” continues Hill. “GE Healthcare is tackling this three-part challenge head on. For example, GE Healthcare was the first medical device company to establish direct operations in Algeria. We train Algerian engineers and technicians to service and maintain medical equipment in country. This is critical, since when medical equipment isn’t working, patients can’t be screened, treatments can’t be developed, and healthcare facilities can’t operate efficiently. Our center in Algeria represents our commitment to developing human capital worldwide.”

Hill adds: “Our global impact starts with local commitment. Since we moved to Wisconsin in 1947, the state has become a global hub for biohealth research, innovation and commercial activity. At GE Healthcare, we’re proud to be a part of this community. Our partnerships with local universities and medical institutions have contributed to the development of numerous medical technologies and industry leading healthcare solutions that benefit patients throughout the world.”
ENABLING RESEARCH ACTIVITY

What constitutes global health research is difficult to define and developing a framework that enables companies and research institutions to measure this activity remains a longer-term goal of the MGHC. What is clear is that biohealth research and federal funding of this research is important to greater Milwaukee institutions of higher education. Biohealth research—specifically, research supported by the U.S. Department of Health & Human Services (HHS), which includes the National Institutes of Health—represented $113 million (or 76.7%) of the total research and development (R&D) expenditures ($147.2 million) by greater Milwaukee institutions of higher education in FY18, the most recent year for which data were available. Figure 8 shows total HHS-supported biohealth R&D expenditures by Wisconsin’s major universities.

Wisconsin foundations and civic organizations are also important funders of global health research activity and global health educational experiences. The J.M. Kohler Foundation Sustainability and Peacebuilding Fund provides a scholarship to support six 8-week immersive fieldwork experiences for students pursuing a UW-Milwaukee Masters in Sustainable Peacebuilding. The William Collins Kohler Foundation supports the Dr. Elaine Kohler Summer Academy of Global Health Research at the Medical College of Wisconsin, which provides medical students with a stipend for a 10-week, hands-on research experience mentored by a faculty member and global partner to address global health disparities in Milwaukee and overseas (see Figure 9).

At Marquette, global health is at the core of our mission. We care for those who need the most help throughout the world. We tend to the needs of the sick and the poor both through education and service.”

Lars Olson, PhD, Vice Chair of Academic Affairs, Biomedical Engineering, Marquette University

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**Figure 8. Health & Human Services-Supported R&D Expenditures at Greater Milwaukee Universities, FY18**

<table>
<thead>
<tr>
<th>Medical College of Wisconsin</th>
<th>$100.6M</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marquette University</td>
<td>$6.8M</td>
</tr>
<tr>
<td>University of Wisconsin-Milwaukee</td>
<td>$5.3M</td>
</tr>
<tr>
<td>Milwaukee School of Engineering</td>
<td>$0.3M</td>
</tr>
</tbody>
</table>

The Rotary Club of Milwaukee is another important funder of global health projects. Rotary’s motto is “service over self,” and the Rotary Club of Milwaukee and the Southeast District Rotary have funded a variety of health and disease prevention projects over the years. Each year, Rotary supports community water system and bridges projects in Guatemala conducted by Engineers Without Borders and engineering students at UW-Milwaukee and Marquette University (see photos on next page). As Mike Paddock, Engineering Service Corp Deputy Director at Engineers Without Borders, stated, “How do you ensure health without access to clean water and access to healthcare clinics during the rainy season? Engineers are key to prevention when it comes to health.”

LOOkinG FORWARD

For the past three decades, greater Milwaukee has been a leader in global health research, education, training, and technology commercialization. The work of Milwaukee global health organizations spans many different disciplines and type of activities. The unifying aim is to prepare future health professional leaders; partner locally and globally to solve important global health problems; and leverage Milwaukee’s collective global health expertise to support more research, training, and economic activity for the state of Wisconsin that contribute to good health and well-being.

MGHC recognizes the limitations and gaps of this first landscape study but looks forward to the interest and discussion that it will generate among stakeholders. The next study will improve upon this initial effort to describe and measure Milwaukee’s global health sector activity and impact. MGHC hopes this study speaks to the value and vision of greater Milwaukee’s global health sector work today and its potential in the years to come.
Each year, we welcome hundreds of newcomers to our community: refugees, asylum seekers, immigrants, and others. Access to healthcare and services is a unifying need that crosses all nationalities. The International Institute of Wisconsin and its partners continually try to bridge the chasm of culture and language that often separate people from healthcare and services.”

Alexander Durtka, Jr., President and CEO, International Institute of Wisconsin

There’s a lot we can learn from other countries when we travel. There’s a tendency to assume we have the best healthcare in the world having never experienced other systems. Our students learn that healthcare can be delivered without all the bells and whistles. They see good quality healthcare being delivered in low-income countries, like Malawi and Thailand.”

Anne Dressel, PhD, Director, Center for Global Health Equity, University of Wisconsin-Milwaukee

The greater Milwaukee metropolitan area is a hub for global activity that strengthens the economy, advances research to tackle complex global health concerns, and enriches the culture of Southeastern Wisconsin. It is an honor to be part of MGHC’s global landscape study.”

Thomas Pahnke, MS, PT, ATC, Dean, College of Health Sciences, Carroll University

Photo credit: Engineers Without Borders, University of Wisconsin-Milwaukee, http://www.ewbatum.blogspot.com
RTI and the MGHC took a conservative approach to estimating the direct economic impact of global health activities focusing on those research, education, and industrial activities that involved a bilateral, mutually beneficial linkage with another country or engagement with local, diverse populations representative of the global community.

RTI collected economic data on employment, operating expenditures, exports, and research activity from 18 Milwaukee global health organizations spanning nonprofit organizations (e.g., research institutes, philanthropic organizations, civil service organizations, community health centers, and hospitals), institutions of higher education, and companies. The base year for the analysis was 2019.

RTI used the IMPLAN Wisconsin model to estimate the indirect and induced impacts of Milwaukee global health organizations’ direct global health–related employment and other operating expenditures in 2019. IMPLAN is an economic input-output modeling software used to estimate how economic activity in one industry sector reverberates across other industry sectors in a regional economy through establishment and personal spending.

Estimates generated by RTI’s economic impact analysis are presented in Table A-1. In 2019, Milwaukee’s global health sector directly employed 6,132 people and generated $2.901 billion of economic output, or activity, through the sector’s operations and exports. When the secondary and tertiary impacts of spending by Milwaukee global health organizations and employees are included, the greater Milwaukee global health sector supported 16,961 total jobs, $1.308 billion in labor income, $4.671 billion in economic output, and $143.8 million in state and local taxes for the state of Wisconsin.

<table>
<thead>
<tr>
<th>Impact Type</th>
<th>Employment</th>
<th>Labor Income</th>
<th>Total Value Added</th>
<th>Output</th>
<th>State and Local Tax Revenue</th>
<th>Federal Tax Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Effect</td>
<td>6,132</td>
<td>$722,043,457</td>
<td>$1,325,595,134</td>
<td>$2,900,896,577</td>
<td>$46,390,811</td>
<td>$180,210,425</td>
</tr>
<tr>
<td>Indirect Effect</td>
<td>4,693</td>
<td>$307,426,048</td>
<td>$480,317,686</td>
<td>$910,345,326</td>
<td>$46,784,820</td>
<td>$68,421,448</td>
</tr>
<tr>
<td>Induced Effect</td>
<td>6,136</td>
<td>$278,886,797</td>
<td>$489,884,155</td>
<td>$859,901,798</td>
<td>$50,596,545</td>
<td>$66,091,373</td>
</tr>
<tr>
<td>Total Effect</td>
<td>16,961</td>
<td>$1,308,356,302</td>
<td>$2,295,796,975</td>
<td>$4,671,143,700</td>
<td>$143,772,176</td>
<td>$314,723,246</td>
</tr>
</tbody>
</table>

Source: RTI analysis using IMPLAN Wisconsin model.
APPENDIX 2: LIST OF INDIVIDUALS INTERVIEWED

ALPHABETIZED BY ORGANIZATION

Kurt Waldhuetter, MS, Vice President of Research, Development, and Business Services, Aurora Research Institute, Advocate Aurora Health
Carolyn McCarthy, NP, Aurora Walker’s Point Community Clinic
Michael Harrison, MD, PhD, Business Development Manager, SE Wisconsin, BioForward Wisconsin
Mike Gutzeit, MD, Chief Medical Officer and Chief Safety Officer, Children’s Wisconsin
Sanjib Bhattacharyya, PhD, Laboratory Director and Special Deputy Health Commissioner, City of Milwaukee Health Department
Lilliann Paine, MPH, Chief of Staff, City of Milwaukee Health Department
Griselle Torres, MPH, Deputy Commissioner of Policy, Innovation and Engagement, City of Milwaukee Health Department
William Cario, PhD, Provost/Chief Academic Officer, Concordia University Wisconsin
Mike Paddock, PE, Chief Engineer and Engineering Service Corp Deputy Director, Engineers Without Borders
Marissa Jablonski, PhD, Mentor and Advisor, Engineers Without Borders, University of Wisconsin-Milwaukee
Cathy Buck, MSN, RN, President, Froedtert Hospital
Balaji Narayanan, MS IE, Process Improvement Specialist, Froedtert Hospital
Manuela Govin, Account Executive, GE Healthcare
Orrin Marcella, Head of U.S. Government Affairs, GE Healthcare
Annamarie Carlson, Special Programs Coordinator, International Institute of Wisconsin
Alexander Durtka, Jr., President and CEO, International Institute of Wisconsin
Jean Dole, Chief of Staff, Office of the Senior Vice President and Chief Operating Officer, Marquette University
Jay Kutka, Senior University Budget Director, Office of Finance, Marquette University
Mary McCormick, Executive Director, Rotary Club of Wisconsin
Jerry Stepaniak, Chair, Rotary Club of Wisconsin
Tiffany Frazer, MPH, Manager, Office of Global Health, Medical College of Wisconsin
Caitlin Kaeppler, MD, Director, Global and Community Health Track for Pediatric Residents, Medical College of Wisconsin
Stephen Hargarten, MD, Associate Dean, Office for Global Health, Medical College of Wisconsin; President, Milwaukee Global Health Consortium
Laura Mesenbrink, FNP, Medical Director, Ascension Family Health Center/Medical College of Wisconsin
Dave Eland, Senior Director, Research, Development and Engineering, SC Johnson
Thomas Putzer, Director, Base of the Pyramid Group, Office of the Chairman and CEO, SC Johnson
Christopher Rasch, Director of Government and Community Relations, Sixteenth Street Community Health Centers
Savitri Tsering, MSSW, Refugee Health Coordinator, State of Wisconsin Division of Public Health
Natasa Torbica, Refugee Program Coordinator, State of Wisconsin Division of Public Health
Anne Dressel, PhD, CFPH, Assistant Professor/Director, Center for Global Health Equity, College of Nursing, University of Wisconsin-Milwaukee
James Conway, MD, Director, School and Medicine and Public Health and Associate Director, Global Health Institute, University of Wisconsin-Madison
Monet Hutchins, Administrative Director, Global Health Institute, University of Wisconsin-Madison
Christopher Olsen, PhD, DVM, Director, Graduate, Professional, Capstone Certificate in Global Health Program, University of Wisconsin-Madison
Jonathan Patz, MD, MPH, Director, Global Health Institute, University of Wisconsin-Madison
Anthony Watkins, MBA, Executive Vice President and Chief Financial Officer, Versiti (Blood Research Institute)
Jason Kalmbach, PhD, Director of Research and Analysis, Wisconsin Association of Independent Colleges and Universities
Dean Amhaus, MBA, President and CEO, Water Council

ACKNOWLEDGEMENTS

RTI and MGHC would like to thank the study team for all their hard work to bring this study to fruition. Thanks to Sarah Ehlinger Affotey and the MCW Office of Global Health staff, Tifany Frazer and Amber Rios. We also thank Dr. Joyce Sanchez and Kwame Opoku for their work in preparing for this study.

The RTI team was led by Jennifer Ozawa, Senior Economist, with Naomi Taylor and Manuel Gozalez. The report design was created by Lisa Gardner.

ENDNOTES

4 See the appendix for a table with direct, indirect, and induced economic impact estimates.
6 Nationally, the Global Health Council is the member organization serving to raise awareness of and catalyze action on important global health issues.
12 To be conservative, RTI and MGHC only included in this study those R&D expenditures that involved at least one international partner.
13 The other HHS divisions which fund extramural R&D include the Administration for Children & Families (ACF), the Administration for Community Living (ACL), the Agency for Healthcare Research Quality (AHRQ), the Centers for Disease Control & Prevention (CDC), the Centers for Medicare & Medicaid Services (CMS), the Food & Drug Administration (FDA), the Health Resources & Services Administration (HRSA), the Indian Health Service (IHS), and the Substance Abuse and Mental Health Services Administration (SAMHSA).
14 For example, the Master of Sustainable Peacebuilding health focus area offers classes in global food security (nursing), program planning and implementation (public health), epidemiology (nursing), public health policy analysis (public health), community wellness programing (Silver Spring Wellness Center), and international peace initiatives (food security in Meru, Kenya).