

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MASSACHUSETTS**

Maria Alejandra Celimen Savino, *et al.*,

Petitioners-Plaintiffs,

v.

Steven J. Souza,

Respondent-Defendant.

Civil Action No. 1:20-cv-10617-  
WGY

**REPLY DECLARATION OF GREGG GONSALVES**

I, Gregg S. Gonsalves, upon my personal knowledge, and in accordance with 28 U.S.C. § 1746, declare as follows:

1. I am an epidemiologist at the Yale School of Medicine and School of Public Health. I have worked at the schools of medicine and public health since 2017. I submit this to respond to the information provided by the Defendant in his opposition to the motion for temporary restraining order and as a supplement to my prior declaration in this case. *See* ECF No. 12-2. I understand that my CV was inadvertently not filed with my first declaration and so I attach it here as Exhibit A.
2. I have reviewed the relevant filings in this matter, *Savino v. Souza*, including the statements and declarations of Plaintiffs, putative Plaintiffs' class members and their families, lawyers with familiarity with the Bristol County House of Correction and immigration facilities ("BCHOC"), as well as arguments and declarations filed by Defendant. Dkt. Nos. 1-4, 1-5, 12-2, 12-3, 12-4, 12-5, 12-6, 12-7, 12-8, 12-9, 20-3, 20-4, 26, 26-1, 26-2, 26-3.
3. The following represents my expert opinion as to several of Defendant's claims based on my review of these filings and drawing on my knowledge and experience.
4. Defendant presents the claim that releasing Plaintiffs will "place themselves and their communities at great risk of contracting COVID-19[.]" Dkt. No. 26-1, at 5.
5. On the contrary, allowing ICE facilities to act as "institutional amplifiers"<sup>1</sup> could easily enhance community risk, as outbreaks inside congregate facilities often spill over to

---

<sup>1</sup> Basu, S., Stuckler, D. & McKee, M., *Addressing institutional amplifiers in the dynamics and control of tuberculosis epidemics*, *The American Journal of Tropical Medicine and Hygiene*, 84(1), 30-37 (2011).

communities through transmission to facility staff and officials, as has been seen with tuberculosis.<sup>2</sup>

6. Social distancing is meant to reduce the number of people one interacts with on a daily basis. The number of people inside BCHOC and the number of daily contacts between these individuals in detention are far greater than what would be experienced in a host setting. Thus, placing Plaintiffs into homes of family, friends, or sponsors is far safer than leaving them in custody of ICE.
7. Defendant claims that “in conjunction and consultation with the Massachusetts Department of Public Health, the CDC and other public health agencies and correctional institutions, CPS and the BCHOC have instituted strict protocols to keep inmates, detainees, and staff safe, and take all prudent measures to prevent exposure to the COVID-19 virus.” Dkt. No. 26, at 4.
8. Some of these “strict protocols to keep inmates, detainees, and staff safe, and . . . prevent exposure to the COVID-19 virus” do not cohere with public health guidelines. Specifically, the screening procedures being used by BCHOC are not going to prevent exposure to the virus. The CDC notes that symptoms generally start two to *fourteen* days after exposure.<sup>3</sup> As such, while checking for symptoms is important, individuals (detainees and employees alike) could easily be infected and spreading the virus to others before showing the symptoms that BCHOC is testing for.
9. Notably, up to 60% of infections may be “covert” and not amenable to the screening measures described in the ICE memo.<sup>4</sup> Dkt. No. 26-2, at 4. In fact, other congregate facilities such as state prisons across the United States have similar procedures in place and have not been able to prevent outbreaks of COVID-19, which can be transmitted through asymptomatic or mild infections not detected through syndromic surveillance.<sup>5</sup>
10. Furthermore, it is not just influenza-like symptoms that BCHOC needs to be screening for. Some studies have shown that the initial symptoms can be gastrointestinal in nature, such as diarrhea or abdominal pain, rather than cough or fever.<sup>6</sup> If this is missed, there is the potential for spread of infection before it is recognized as COVID-19.

---

<sup>2</sup> PLoS Medicine Editors, *The health crisis of tuberculosis in prisons extends beyond the prison walls*, PLoS medicine, 7(12) (2010); Stead, W.W., *Undetected tuberculosis in prison: source of infection for community at large*, JAMA, 240(23), 2544-2547 (1978).

<sup>3</sup> Centers for Disease Control and Prevention, *Coronavirus Disease 2019 (COVID-19): Watch for symptoms*, <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html> (last accessed Apr. 1, 2020).

<sup>4</sup> Jane Qiu, *Covert coronavirus infections could be seeding new outbreaks*, Nature (Mar. 20, 2020), <https://www.nature.com/articles/d41586-020-00822-x>

<sup>5</sup> Emma Grey Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*, Wired (Mar. 24, 2020), <https://www.wired.com/story/coronavirus-covid-19-jails-prisons/>

<sup>6</sup> Xu, XW et al., *Clinical findings in a group of patients infected with the 2019 novel coronavirus (SARS-Cov-2) outside of Wuhan, China: retrospective case series.*, BMJ, 368(606) (2020); Wong, SH et al., *Covid-19 and the Digestive System.*, Journal of Gastroenterology and Hepatology (2020); Jin, X et al., *Epidemiological, clinical and virological characteristics of 74 cases of coronavirus-infected disease 2019 (COVID-19) with gastrointestinal symptoms.*, BMJ (2020).

11. BCHOC's cleaning and logistics protocols are also inadequate to prevent the spread of the virus. Dkt. No. 26-2, at 2. Dkt. No. 26-1, at 2-4.
12. Those protocols are inadequate to prevent transmission of COVID-19 unless *all* detainees and staff have universal access to Personal Protective Equipment, including N-95 respirators, face shields, and gloves. The mere availability of hand sanitizer and daily cleaning of high-touch surfaces are unlikely to reduce the droplet-borne transmission of 2019-nCoV, as high-traffic areas are constantly exposed to new contamination. While instructing individuals to use sanitizer and refrain from touching their eyes, nose, or mouth is helpful for those only occasionally exposing themselves to infection (such as an individual who only leaves home to go to the grocery store), these prevention techniques are less effective when there is constant exposure, as in BCHOC.
13. BCHOC claims that it is preventing potential spread of the virus by having meals "inside the housing or cells" so that "inmates do not congregate for meals in the main dining hall." Dkt. No. 26-1, at 2. For male ICE detainees, who are held in one large room (as opposed to cells), holding meals in these large rooms are not any better for social distancing than holding meals in dining halls.
14. Defendant claims that detainees are best kept at BCHOC because "at present no inmate, detainee or staff member has tested positive for COVID-19." Dkt. No. 26, at 1.
15. Yet this assertion says nothing about whether BCHOC has been exposed to the virus unless every individual who enters the facility has tested negative. Moreover, for this claim to be meaningful, those who have exited and re-entered the facility would need to be re-tested and confirmed to be negative after each exit.
16. Defendant claims that the health of Plaintiffs are adequately and continually monitored by experienced administration by Correctional Psychiatric Services, Inc. ("CPS"). Dkt. No. 26, at 3.
17. However, investigative reporting has revealed that CPS has a track record of failing to maintain the health of individuals in its care at BCHOC, as it has presided over 31 deaths as the facility's medical provider in the last decade—the same number of deaths as at the larger Suffolk County jail and more than that at any other jail in the state.<sup>7</sup>
18. Defendant argues that, "Plaintiffs do not explain how release from BCHOC, a facility without a single confirmed case of COVID-19, into the greater Boston area, one of the 'hot spots' of America's COVID-19 crisis, will reduce their risk of injury or death." Dkt. No. 26, at 25.
19. In fact, release of detainees is an appropriate intervention to prevent COVID-19. A key way to reduce incidence, prevalence, and mortality in a community is to limit the number

---

<sup>7</sup> Christine Willmsen & Beth Healy, *Pain And Profits: Sheriffs Hand Off Inmate Care To Private Health Companies*, WBUR (Mar. 24, 2020), <https://www.wbur.org/investigations/2020/03/24/jail-health-companies-profit-sheriffs-watch>

of persons that enter institutional amplifiers, such as detention centers. Social distancing is the foundation of COVID-19 transmission control, which is impossible in a congregate facility like BCHOC.

20. Vast, uncontrolled COVID-19 outbreaks have been reported at congregate settings like jails across the country, reflecting the “institutional amplifier” effect in action. Cook County Jail in Illinois has 134 cases, just one week after its first two cases were announced on March 23.<sup>8</sup> The Riker’s Island Complex in New York reports at least 139 cases.<sup>9</sup>
21. There is strong, recent evidence regarding the presence of the “institutional amplifier” effect at Customs and Border Patrol and ICE facilities.
22. In 2019, there were multiple outbreaks of infectious disease at ICE and CBP facilities, including outbreaks of scabies, shingles, and chickenpox in a CBP facility in Clint, Texas,<sup>10</sup> and an influenza outbreak in a CBP facility in McAllen, Texas, which involved 32 detainees.<sup>11</sup> This is particularly noteworthy because the new COVID-19 virus is *twice as infectious* as seasonal influenza.<sup>12</sup>
23. ICE facilities have reported 423 cases of influenza, 461 cases of chickenpox, and 236 probable cases of mumps between March 2018 and March 2019.<sup>13</sup>
24. Both CBP and ICE facilities have been cited by the Office of the Inspector General for poor conditions including overcrowding, poor access to healthcare and sanitation, and improper use of isolation/quarantine.<sup>14</sup>

---

<sup>8</sup> Sam Kelly, *134 inmates at Cook County Jail confirmed positive for COVID-19*, Chicago Sun-Times (Mar. 30, 2020), <https://chicago.suntimes.com/coronavirus/2020/3/29/21199171/cook-county-jail-coronavirus-positive-134-cases-covid-19>

<sup>9</sup> Timothy Williams, Benjamin Weiser & William K. Rashbaum, *‘Jails are petri dishes’: Inmates freed as the virus spreads behind bars*, Chicago Tribune (Mar. 31, 2020), <https://www.chicagotribune.com/coronavirus/sns-nyt-jails-petri-dishes-inmates-freed-coronavirus-20200331-hyer54pfvracbk4vyurhceyjbe-story.html>

<sup>10</sup> Simon Romero et al., *Hungry, Scared and Sick: Inside the Migrant Detention Center in Clint, Tex.*, New York Times (Jul. 9, 2019), <https://www.nytimes.com/interactive/2019/07/06/us/migrants-border-patrol-clint.html>

<sup>11</sup> Meagan Flynn, *Three dozen migrants with flu virus quarantined at Texas processing facility*, Washington Post (May 22, 2019), <https://www.washingtonpost.com/nation/2019/05/22/mcallen-detention-center-flu-outbreak-teenage-migrant-died-custody/>

<sup>12</sup> Brian Resnick & Christina Animashaun, *Why Covid-19 is worse than the flu, in one chart*, Vox (Mar. 18, 2020), <https://www.vox.com/science-and-health/2020/3/18/21184992/coronavirus-covid-19-flu-comparison-chart>

<sup>13</sup> Mica Rosenberg & Kristina Cooke, *Mumps, other outbreaks force U.S. detention centers to quarantine over 2,000 migrants*, Reuters (Mar. 10, 2019), <https://www.reuters.com/article/us-usa-immigration-outbreaks/mumps-other-outbreaks-force-us-detention-centers-to-quarantine-over-2000-migrants-idUSKBN1QR0EW>

<sup>14</sup> Office of Inspector General, *Management Alert – DHS Needs to Address Dangerous Overcrowding and Prolonged Detention of Children and Adults in the Rio Grande Valley (Redacted)* (Jul. 2, 2019), [https://www.oig.dhs.gov/sites/default/files/assets/2019-07/OIG-19-51-Jul19\\_.pdf](https://www.oig.dhs.gov/sites/default/files/assets/2019-07/OIG-19-51-Jul19_.pdf); Office of Inspector General, *Concerns about ICE Detainee Treatment and Care at Four Detention Facilities* (Jun. 3, 2019), <https://www.oig.dhs.gov/sites/default/files/assets/2019-06/OIG-19-47-Jun19.pdf>

25. In fact, in the context of another type of congregate setting, Attorney General William Barr has recommended releasing at-risk federal prisoners to limit the spread of the deadly novel coronavirus.<sup>15</sup>
26. At the state and local level, thousands of incarcerated individuals have already been released to prevent transmission of COVID-19.<sup>16</sup>
27. Given the research on the epidemiology of infectious diseases, which suggests congregate facilities such as immigration detention facilities like BCHOC can act as “institutional amplifiers,” the poor track record of ICE in controlling infectious disease outbreaks, and the recent statements and actions of federal, state, and local officials with jurisdiction over other detention settings (i.e. prisons and jails), in my opinion, release from BCHOC is the appropriate remedy to maintain the safety of Plaintiffs during this pandemic.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct to the best of my information and belief.



Assistant Professor of Epidemiology (Microbial Diseases)  
Yale School of Public Health  
350 George Street  
New Haven, CT 06511  
gregg.gonsalves@yale.edu

Date: April 1, 2020

---

<sup>15</sup> Creede Newton, *Coronavirus in US prisons: Releases positive, but 'more needed'*, Aljazeera (Mar. 27, 2020), <https://www.aljazeera.com/news/2020/03/coronavirus-prisons-releases-positive-needed-200327193626781.html>

<sup>16</sup> Alene Tchekmedyan et al., *L.A. County releasing some inmates from jail to combat coronavirus*, Los Angeles Times (Mar. 16, 2020), <https://www.latimes.com/california/story/2020-03-16/la-jail-population-arrests-down-amid-coronavirus>; Adrienne Mayfield & Aesia Toliver, *Virginia Beach sheriff releasing nonviolent inmates from city jail amid coronavirus outbreak*, WAVY (Mar. 17, 2020), <https://www.wavy.com/news/local-news/virginia-beach/virginia-beach-sheriff-releasing-nonviolent-inmates-from-city-jail-amid-coronavirus-outbreak/>; David Struett, *Cook County Jail releases several detainees 'highly vulnerable' to coronavirus*, Chicago Sun-Times (Mar. 17, 2020), <https://chicago.suntimes.com/coronavirus/2020/3/17/21183289/cook-county-jail-coronavirus-vulnerable-detainees-released-covid-19>; Melissa Klaric, *County jail to free 40 to 50 inmates*, Sharon Herald (Mar. 18, 2020), [https://www.sharonherald.com/covid-19/local/county-jail-to-free-to-inmates/article\\_ed01f652-68cd-11ea-a206-5b284e641dde.html](https://www.sharonherald.com/covid-19/local/county-jail-to-free-to-inmates/article_ed01f652-68cd-11ea-a206-5b284e641dde.html); *Ohio jail releases hundreds of inmates due to concern of coronavirus spread*, FOX 59 (Mar. 16, 2020), <https://fox59.com/news/ohio-jail-releases-hundreds-of-inmates-due-to-concern-of-coronavirus-spread/>; Yami Virgin, *Bexar County to release prisoners in effort to lessen COVID-19 chances at jail*, NEWS4SA (Mar. 17, 2020), <https://news4sanantonio.com/news/local/bexar-county-to-release-prisoners-in-effort-to-lessen-covid-19-chances-at-jail>

# **EXHIBIT**

# **A**

Gregg S. Gonsalves, Ph.D.

**Date of Revision:** 20 November 2019

**Name:** Gregg S. Gonsalves, Ph.D.

**Proposed for:** Re-appointment to Assistant Professor with Term in the Department of Epidemiology of Microbial Diseases, Traditional Track

**Term:** Primary Appointment: July 1, 2017 to June 30, 2020

**School:** Yale University School of Medicine and the Graduate School

**Reason for Reappointment:** (to be written by department chair or section chief; inserted after candidate submits materials to Department)

**Education:**

B.S. (with distinction) Yale College (Biology) 2011  
M.Phil. Yale School of Public Health 2015  
Ph.D. Yale School of Public Health 2017

**Career/Academic Appointments:**

2018- Affiliated Faculty, Yale Program in Addiction Medicine, Yale School of Medicine, New Haven, CT

2017- Affiliated Faculty, Public Health Modeling Concentration, Yale School of Public Health New Haven, CT

2017- Assistant Professor, Department of the Epidemiology of Microbial Diseases, Yale School of Public Health, New Haven, CT

2017- Associate Professor (Adjunct) of Law, Yale Law School, New Haven, CT

2017- Affiliated Faculty, Women's, Gender, & Sexuality Studies, Yale University, New Haven, CT

2017- Affiliated Faculty, Jackson Institute for Global Affairs, Yale University, New Haven, CT

2012- Research Scholar in Law, Yale Law School, New Haven, CT

2012-2017 Lecturer in Law, Yale Law School, New Haven, CT

2011-2012 Post-Graduate Research Fellow, Department of the Epidemiology of Microbial Diseases, Yale School of Public Health, New Haven, CT

2011-2012 Research Scholar, University of Cape Town, Centre for Social Science Research, Cape Town, South Africa

2011-2012 Fellow, Harvard Medical School, Department of Global Health and Social Medicine, Boston, MA

2010 Summer Research Associate, l'unité Régulation des infections rétrovirales, Institut Pasteur, Paris, France

**Administrative Positions:**

2017- Co-Faculty Director, Global Health Studies, Yale College, New Haven, CT

2016- Co-Director, Collaboration for Research Integrity and Transparency, Yale Law School Yale School of Public Health and Yale Medical School, New Haven, CT

Gregg S. Gonsalves, Ph.D.

2012- Co-Director, Global Health Justice Partnership, Yale Law School and Yale School of Public Health, New Haven, CT  
 2006-2008 Coordinator, AIDS and Rights Alliance for Southern Africa, Cape Town, South Africa  
 2000-2006 Director of Treatment and Prevention Advocacy, Public Policy Department, Gay Men's Health Crisis, New York, NY  
 1991-2000 Co-Founder and Policy Director, Treatment Action Group, New York, NY

**Professional Honors & Recognition:****International/National/Regional**

2018: MacArthur Fellow, MacArthur Foundation  
 2014: Albert and Mary Lasker Foundation Essay Contest  
 2011: William R. Belknap Prize for Excellence in Biology (the highest honor bestowed on undergraduates in the department and awarded to one student each year), Yale College  
 2011: Open Society Foundations Fellowship  
 2010: Alan S. Tetelman 1958 Fellowship for International Research in the Sciences, Yale College  
 2008: John M. Lloyd Foundation Leadership Award  
 2001: Treatment Action Group Research in Action Award

**Grant History:****Current Grants**

Agency: MacArthur Foundation  
 I.D.# N/A  
 Title: MacArthur Fellowship  
 P.I.: Gregg S. Gonsalves  
 Percent effort: N/A (unrestricted award for personal use)  
 Direct costs for project period: \$625,000  
 Project period: 1/1/2019-12/31/2023

Agency: National Institute on Drug Abuse  
 I.D.# DP2DA49282-01  
 Title: *Avenir Award Program for Research on Substance Abuse and HIV/AIDS*  
 “Novel Adaptive Approaches to Predicting and Responding to Outbreaks of Overdose, HIV and HCV Among People Who Use Drugs”  
 P.I.: Gregg S. Gonsalves  
 Percent effort: 25% (*DP2 awards have no pre-specified budget, but require at least 25% effort*)  
 Direct costs for project period: \$1,500,000  
 Total costs for project period: \$2,512,500  
 Project period: 07/01/2019-05/31/2024

Agency: National Institute on Drug Abuse  
 I.D.# R37DA15612-16  
 Title: “Making Better Decisions: Policy Modeling for AIDS & Drug Abuse”



Gregg S. Gonsalves, Ph.D.

P.I.: Douglas Owens, Stanford; Yale Subaward PI: David Paltiel  
 Percent effort: 20%  
 Direct costs per year: \$60,141 (Yale Subaward Only; Current Year Direct)  
 Total costs for project period: \$3,942,000  
 Project period: 09/25/2002 – 01/31/2023

Agency: National Institute of Allergy and Infectious Diseases  
 I.D.# 5R01AI042006-22  
 Title: “Cost-Effectiveness of Preventing HIV Complications” (CEPAC-US)  
 P.I.: Kenneth Freedberg, Massachusetts General Hospital; Yale Subaward PI: David Paltiel  
 Percent effort: 20%  
 Direct costs per year: \$28,198 (Yale Subaward Only; Current Year Direct)  
 Project Period: 04/01/1998 – 07/31/2020

Agency: National Institute of Mental Health  
 I.D.# 5R01MH105203-04  
 Title: “Novel Approaches to the Design and Evaluation of Combination HIV Prevention”  
 P.I.: David Paltiel  
 Percent effort: 5%  
 Direct costs per year: \$564,682  
 Total costs for project period: \$3,309,826  
 Project period: 06/25/2014 – 02/28/2020

### Past Grants

Agency: Laura and John Arnold Foundation  
 I.D.# Research Integrity Initiative Grant  
 Title: “Yale Collaboration for Research Integrity and Transparency”  
 P.I.: Gregg S. Gonsalves (co-P.I. with Amy Kapczynski, J.D. and Joseph Ross, M.D.)  
 Percent effort: 5%  
 Direct costs per year: \$841,619  
 Total costs for project period: \$3,023,059  
 Project period: 07/01/2016 – 07/1/2019

Agency: Levi-Strauss Foundation  
 I.D. # R13002  
 Title: “Yale Global Health Justice Partnership Summer Fellowship Program  
 P.I.: Alice Miller, JD  
 Percent effort: 1.54%  
 Direct costs per year: \$50,000  
 Total costs for project period: \$100,000  
 Project Period: 05/1/2015-4/30/2017

Agency: Public Health Services and Systems Research (PHSSR)/University of Kentucky Research Foundation

Gregg S. Gonsalves, Ph.D.

I.D.# Fellowship  
 Title: “PHSSR Pre-doctoral Scholar in Public Health Delivery”  
 P.I.: Gregg S. Gonsalves  
 Percent effort: 100%  
 Total costs for project period: \$24,472  
 Project period: 10/1/2014 – 9/1/2015

Agency: Open Society Foundations  
 I.D.# Fellowship  
 Title: “Open Society Fellowship”  
 P.I.: Gregg S. Gonsalves  
 Percent effort: 100%  
 Total costs for project period: \$150,000  
 Project period: 07/1/2011 – 07/1/2012

Agency: John M. Lloyd Foundation  
 I.D.# Fellowship  
 Title: “AIDS Leadership Award”  
 P.I.: Gregg S. Gonsalves  
 Percent effort: 100%  
 Total costs for project period: \$100,000  
 Project period: 09/1/2008 – 09/1/2009

**Other Grant History** (*aggregate figures for programs that I managed and grant funding when working for non-governmental organizations outside of academia*):

Agency: The Joint United Nations Programme on AIDS; Public Welfare Foundation; John M. Lloyd Foundation; Swedish International Development Agency; UK Department for International Development; Royal Dutch Netherlands Embassy; IrishAID; HIVOS Foundation; Stephen Lewis Foundation

I.D. # Program Budget  
 Title: “AIDS and Rights Alliance for Southern Africa Treatment Literacy and Advocacy Program”  
 P.I.: Gregg S. Gonsalves  
 Percent effort: 100%  
 Total costs for project period: \$1,150,000  
 Project period: 06/1/2006 – 06/1/2008

Agency: Bill and Melinda Gates Foundation; Doris Duke Charitable Trust; Sainsbury Family Trusts/Monument Trust

I.D. # Program Budget  
 Title: “The CD4 Initiative at Imperial College (UK)”  
 P.I. Gregg S. Gonsalves (founder/board chair) Hans-Georg Batz, Ph.D. (project director)  
 Percent effort: 25%  
 Total costs for project period: \$9,000,000  
 Project period: 06/1/2005 – 03/1/2010

Agency: John M. Lloyd Foundation; Overbrook Foundation; New York Community Trust; Rockefeller Foundation; Bill and Melinda Gates Foundation; Open Society Foundations; Bristol-Myers Squibb; Boehringer-Ingelheim; Merck; Broadway Cares--Equity Fights AIDS; National

Gregg S. Gonsalves, Ph.D.

Institutes of Health; American Foundation for AIDS Research; Doris Duke Charitable Foundation

I.D. # Program Budget  
Title: "Gay Men's Health Crisis Treatment and Prevention Advocacy Program"  
P.I. Gregg S. Gonsalves  
Percent effort: 100%  
Total costs for project period: \$1,150,000  
Project Period: 6/1/2000-6/1/2006

Agency: John M. Lloyd Foundation; Overbrook Foundation; New York Community Trust; Aaron Diamond Foundation; Royal S. Marks Foundation, Michael Palm Foundation, American Foundation for AIDS Research

I.D. # Program Budget  
Title: "Treatment Action Group Program Budget"  
P.I. Gregg S. Gonsalves (co P.I. with Mark Harrington)  
Percent effort: 100%  
Total costs for project period: \$3,120,000  
Project Period: 1/1/1993-6/1/2000

**Invited Speaking Engagements, Presentations, Symposia & Workshops:**

**International/National**

2019 New England AIDS Education and Training Center, Boston, MA, "Applying 35 Years of HIV Work to the Substance Use Epidemic"

HIV Center for Clinical and Behavioral Studies at the New York State Psychiatric Institute and Columbia University, New York, NY, "Causal Inference and Structural Interventions for HIV Prevention" as part of symposium on "Staying at Zero: The Role of Social Science in Ending the HIV Epidemic"

Northeastern University School of Law, Boston, MA, "Annual Lecture in Health Policy and Law"

Kaiser Permanente School of Medicine, Pasadena, CA, "We Will Be Citizens: From AIDS Activism to Mobilizing for Global Health Justice"

Providence/Boston Center for AIDS Research Annual Research Forum, Brown University, Providence RI, "Closing Plenary: We Will Be Citizens: From AIDS Activism to Mobilizing for Global Health Justice"

Decolonizing Global Health Conference, Harvard School of Public Health, Boston, MA, "Closing Plenary - Solidarity-oriented approaches: subverting the status quo of global health"

Special Lecture Series on Global Public Health, "We Will Be Citizens: From AIDS Activism to Mobilizing for Global Health Justice," University of South Alabama, Mobile, AL

2018 Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, Panel Presentation and Discussion, "30th Anniversary of Seize Control of the FDA: Protest, Crisis, and Public

Gregg S. Gonsalves, Ph.D.

Health”

- 2016 Department of Health Policy, Management, and Behavior, University at Albany, School of Public Health, Albany, NY, “Sanitation and Sexual Violence in an Urban Township in Cape Town, South Africa: A Modeling Study”
- Academy Health Annual Research Meeting, Boston, MA, Panel Presentation and Discussion, “Entrepreneurship in Bridging Evidence, Policy and Practice: A Conversation”
- European Public Health Alliance, Brussels, Belgium, The push towards accelerated market approvals: What does it mean for drug development, patient safety and access to medicines in Europe?, Panel Presentation and Discussion, “Our agenda - What kind of market access system do we want in Europe?”
- Northeastern University School of Law, Boston, MA, Individual Choice v. Collective Destiny: the Future of Public Health, Panel Presentation and Discussion, "We Will Be Citizens: On Global Health Justice”
- 2015 Yale Law School, Gruber Program for Global Justice and Women’s Rights, “In and out of the ivory tower: How can Northern Universities Advance Global Health Justice”
- Food and Drug Administration (FDA), National Institute of Allergy and Infectious Diseases (NIAID), Assistant Secretary for Preparedness and Response and the Centers for Disease Control and Prevention, Bethesda, MD, Clinical Trial Designs for Emerging Infectious Diseases, Panel Presentation and Discussion, “The Challenges of Developing New Treatments for Life-Threatening Diseases: From HIV-AIDS to EVD”
- National Physicians Alliance, Washington, DC, Truth to Power: Alliance for the Public Good, Panel Presentation and Discussion, “Incentivizing Innovation: How Do We Ensure Safe, Effective Drugs and Devices?”
- Keeneland Public Health Services and Systems Research Conference, Lexington, KY, Poster Presentation, “Go With the Flow: Understanding the Temporal Dynamics of the HIV Continuum of Care or the HIV Treatment Cascade”
- 2008 The XVII International AIDS Conference, Mexico City, Mexico, Plenary Session, “Scaling Up Antiretroviral Therapy and the Struggle for Comprehensive Primary Care”
- 2007 The 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, Plenary Session, “A Report from the Ghost of Christmas Past”
- 2006 The XVI International AIDS Conference, Toronto, Canada, Plenary Session, “25 years of AIDS: Looking Back, Looking Forward”
- Priorities in AIDS Care and Treatment Conference, Cape Town, South Africa, Plenary Session, “Reason, Rationality and Madness and the AIDS Epidemic”
- 2004 The XV International AIDS Conference, Bangkok, Thailand, Panel Presentation and Discussion, “How to Lose the War on AIDS”

Gregg S. Gonsalves, Ph.D.

The XV International AIDS Conference, Bangkok, Thailand, Panel Presentation and Discussion, “The Mysteries of Community Capital”

Oral presentations on AIDS research and treatment at meetings, including the International Congress on Drug Therapy for HIV Infection; International Conference on AIDS; the Keystone Symposium on HIV Pathogenesis; The White House Conference on AIDS; National Task Force on AIDS Drug Development; European AIDS Treatment Group Eastern States Conference; Médecins Sans Frontières’ meeting on How to Simplify and Adapt ARV Combination Therapies and Monitoring for Use in Low and Middle Income Countries; WHO International Consultative Meeting on HIV/AIDS Antiretroviral Therapy; WHO Informal Consultation on Harmonization of Strategies for HIV/AIDS Diagnostic Support.

Other presentations: Harvard College, Yale College, Mt. Sinai School of Medicine, Institut Pasteur, Phillips Andover Academy, Columbia University, Stetson University, Eurasia Foundation, Open Society Foundations, Central European University.

### Professional Service:

#### Peer Review Groups/Grant Study Sections

- 2000-2004 Member, American Foundation for AIDS Research, Basic Research Peer Review Committee
- 2003 Member, Expert Review Panel, Doris Duke Charitable Foundation’s Innovation in Clinical Research Award on Point-of-Care Diagnostics and Therapeutic Monitoring of AIDS in Resource-Poor Countries
- 1998 Member, Ad-Hoc Peer Review Panel for the Centers for AIDS Research, NIH/NIAID
- 1996 Member, Ad-Hoc Peer Review Panel for the AIDS Clinical Trials Group, NIH/NIAID
- 1996 Member, Ad-Hoc Peer Review Panel for the California Centers for AIDS Research, California State AIDS Research Program

#### Journal Service

Reviewer: *British Medical Journal*; *PLoS Medicine*; *Journal of Urban Health*; *Globalization and Health*; *Health Affairs*; *Milbank Quarterly*; *JAMA Internal Medicine*.

#### Advisory Bodies for Federal and International Agencies and Foundations

- 2019-2020 Scientific Programme Committee, Track C: Epidemiology and Prevention Research, 23<sup>rd</sup> International AIDS Conference
- 2019 Member, NIH Workshop on HIV-Associated Comorbidities, Syndemics Working Group
- 2017-2018 Member, Office of AIDS Research Ad Hoc Cost-Sharing Task Force, NIH
- 2017-2018 Member, Committee on Return of Individual-Specific Research Results Generated in Research Laboratories, National Academy of Sciences, Engineering, and Medicine
- 2001-2006 Member, Panel on Clinical Practices for the Treatment of HIV (convened by the Department of Health and Human Services and the Henry J. Kaiser Family Foundation)
- 2005-2006 Member, UNAIDS/UK Department for International Development Global Steering Committee on Universal Access to HIV Treatment, Care and Prevention

Gregg S. Gonsalves, Ph.D.

2000-2002 Member, Office of AIDS Research International Research Planning Group, NIH  
 1998-2002 Member, Office of AIDS Research Advisory Council, NIH  
 2002 Member, World Health Organization Planning Committee for Development of an International Plan of Action for Scale-Up of Antiretroviral Therapy  
 2001 Member, World Health Organization Antiretroviral Treatment Working Group  
 2000 Member, Search Committee for the Director of the Office of AIDS Research, NIH  
 1998 Member, Search Committee for the Director of the Office of AIDS Research, NIH  
 1995-1996 Member, Food and Drug Administration, Antiviral Drugs Advisory Committee  
 1995-1996 Member, NIH AIDS Research Program Evaluation Working Group  
 1995-1996 Member, NIH Etiology and Pathogenesis Area Review Panel

**Meeting Planning/Participation**

2017 Chair, Yale Collaboration for Research Integrity and Transparency and European Public Health Alliance, Conference on Ensuring Safety, Efficacy and Access to Medical Products in the Age of Global Deregulation  
 2012 Co-Chair, Yale Global Health Justice Partnership Meeting on Mining, Tuberculosis and Silicosis in Southern Africa  
 2008 Co-Chair, Médecins Sans Frontières, Treatment Action Group, AIDS & Rights Alliance for Southern Africa Meeting on Development of Point-of-Care Assays for the Diagnosis of Tuberculosis  
 2008 Co-Chair, Treatment Action Campaign and AIDS & Rights Alliance for Southern Africa Meeting on Mines, Tuberculosis and Southern Africa  
 2007 Co-Chair, Treatment Action Campaign and AIDS & Rights Alliance for Southern Africa Meeting on Emergency Southern African Advocacy Summit on TB and HIV  
 2006 Chair, GMHC Forum on Structural Factors Driving Risk of HIV Transmission Among Gay Men and Communities of Color: Drug Use, Depression, Violence, Incarceration  
 2006 Chair, GMHC Conference on Moving towards Universal Access: Identifying Public Policies for Scaling Up AIDS Treatment and Strengthening Health Systems in Developing Countries  
 2005 Chair, GHMC and Human Rights Watch Symposium on HIV Testing and Human Rights  
 2001 Co-Chair, GMHC/Project Inform Workshop on Diagnostic and Monitoring Tools for the Management of Antiretroviral Therapy in Resource-Poor Settings  
 2000 Co-Chair, Treatment Action Group American Foundation for AIDS Research Workshop on New Viral and Cellular Targets for Antiretroviral Therapy  
 1997-1998 Member, Scientific Planning Committee, XII International Conference on AIDS  
 1996 Co-Chair, Treatment Action Group American Foundation for AIDS Research Workshop on Cellular and Systemic Reservoirs for HIV in Patients on Highly Active Antiretroviral Therapy  
 1993 Member, Planning Committee, NIH Conference on Immunologic and Host Genetic Resistance to HIV Infection and Disease

**Yale School of Public Health Service**

2018- Co-Chair, Epidemiology of Microbial Disease Seminar Committee, Yale School of Public Health  
 2018- Member, Wilbur Downs Fellowship Committee, Yale School of Public Health  
 2017 Member, Faculty Search Committee, Social and Behavioral Sciences, Yale School of

## Public Health

**Public Service**

2017-	Member, Board of Directors, CitySeed, New Haven, CT
2007-	Chair, Board of Directors, International Treatment Preparedness Coalition
2007-2013	Member, Bill & Melinda Gates Foundation/Henry J. Kaiser Family Foundation Global HIV Prevention Working Group
2000-2010	Chair, The CD4 Initiative at Imperial College, UK
2000-2005	Member, Board of Directors, Alliance for Microbicide Development
1989-1992	Member, AIDS Coalition to Unleash Power

**Bibliography:****Peer Reviewed Original Research**

1. Li ZR, Xie E, Crawford FW, Warren JL, McConnell K, Copple JT, Johnson T, **Gonsalves GS**, Suspected Heroin-Related Overdose Incidents in Cincinnati, Ohio: A Spatiotemporal Analysis, *PLoS Med* 2019; 16(11): e1002956. <https://doi.org/10.1371/journal.pmed.1002956>
2. Egilman AC, Wallach JD, Dhruva SS, **Gonsalves GS**, Ross JS. Medicare Spending on Drugs and Biologics Not Recommended for Coverage by International Health Technology Assessment Agencies. *Journal of General Internal Medicine*. 2019;1-3.
3. **Gonsalves GS**, Crawford FW, Dynamics of the HIV Outbreak and Response in Scott County, Indiana, 2011-2015. *Lancet HIV*. 2018.
4. Wallach JD, Ciani O, Pease AM, **Gonsalves GS**, Krumholz HM, Taylor RS, Ross JS. Comparison of Treatment Effect Sizes from Pivotal and Post-Approval Trials of Novel Therapeutics Approved by the FDA on the Basis of Surrogate Markers of Disease: a Meta-epidemiological study. *BMC Medicine*. 2018 Mar;16(1):45.
5. **Gonsalves GS**, Copple JT, Johnson T, Paltiel AD, Warren JL. Bayesian Adaptive Algorithms for Locating HIV Mobile Testing Services. *BMC Medicine*. 2018; 16(1):155.
6. **Gonsalves GS**, Crawford FW, Cleary PD, Kaplan EH, Paltiel AD. An Adaptive Approach to Locating Mobile HIV Testing Services. *Medical Decision Making*. 2018; 38(2): 262-272.
7. Ehrlich R, Montgomery A, Akugizibwe P, **Gonsalves G**. Public health implications of changing patterns of recruitment into the South African mining industry, 1973–2012: a database analysis. *BMC Public Health*. 2018 Jan; 18(1): 93.
8. Wallach JD, **Gonsalves GS**, Ross JS, Research, Regulatory and Clinical Decision-Making: The Importance of Scientific Integrity, *Journal of Clinical Epidemiology*. 2018 Jan 1;93: 88-93.
9. **Gonsalves GS**, Paltiel AD, Cleary PD, Gill MJ, Kitahata MM, Rebeiro PF, Silverberg MJ, Horberg MA, Irene Hall HI, Abraham AG, Kaplan EH, A Flow-Based Model of the HIV Care Continuum in the United States. *JAIDS Journal of Acquired Immune Deficiency Syndromes* 2017;75(5):548-53.

10. Gopal A, Wallach J, Aminawung J, **Gonsalves G**, Dal-Re R, Miller J, Ross J. Adherence to ICMJE Prospective Registration Policy and Implications for Endpoint Integrity: A Cross Sectional Analysis of Trials Published in High-Impact Specialty Society Journals, PLOS Medicine. 2017; 19(1): 448.
11. Walensky RP, Borre ED, Bekker LG, Hyle EP, **Gonsalves GS**, Wood R, Eholie SP, Weinstein MC, Freedberg KA, Paltiel AD. Do Less Harm: Evaluating HIV Programmatic Alternatives in Response to Cutbacks in Foreign Aid. *Annals Internal Med.* 2017 Aug 29.
12. Lewnard JA, Antillón M, **Gonsalves G**, Miller AM, Ko AI, Pitzer VE. Strategies to prevent cholera introduction during international personnel deployments: a computational modeling analysis based on the 2010 Haiti outbreak. *PLoS Med.* 2016;13(1):e1001947.
13. Beckman AL, Bilinski A, Boyko R, Camp GM, Wall AT, Lim JK, Wang E, Bruce RD, **Gonsalves GS**. Treatment of hepatitis C virus infections in state correctional facilities in the United States: A national survey of prison commissioners. *Health Affairs.* 2016 Oct 1;35(10):1893-901.
14. Lewnard JA, **Gonsalves G**, Ko AI. Low risk for international Zika virus spread due to the 2016 Olympics in Brazil. *Ann Intern Med* 2016; published online July 26. doi:10.7326/M16-1628.
15. **Gonsalves GS**, Kaplan EH, Paltiel AD. Reducing sexual violence by increasing the supply of toilets in Khayelitsha, South Africa: a mathematical model. *PLoS one.* 2015;10(4):e0122244.
16. Peluso MJ, Seavey B, **Gonsalves G**, Friedland G. An inter-professional “advocacy and activism in global health”: module for the training of physician-advocates. *Global Health Promotion.* 2013;20(2):70–3.
17. Basu S, Stuckler D, **Gonsalves G**, Lurie M. The production of consumption: addressing the impact of mineral mining on tuberculosis in southern Africa. *Globalization and Health.* 2009;5(1):1.

#### Invited Editorials and Commentaries

18. Luo J, **Gonsalves G**, Greene J. Insulin for all: treatment activism and the global diabetes crisis. *Lancet (London, England).* 2019 May 25;393(10186):2116.
19. **Gonsalves G**, Zuckerman D. Commentary: Will 20th century patient safeguards be reversed in the 21st century? *BMJ.* 2015;350:h1500.
20. **Gonsalves G**, Staley P. Panic, paranoia, and public health—the AIDS epidemic’s lessons for Ebola. *New England Journal of Medicine.* 2014;371(25):2348–9.
21. El-Sadr WM, **Gonsalves G**, Mugenyi P. No Need for Apologies. *JAIDS Journal of Acquired Immune Deficiency Syndromes.* 2011; 57: S68–71.
22. Keshavjee S, Harrington M, **Gonsalves G**, Chesire L, Farmer PE. Time for zero deaths from tuberculosis. *The Lancet.* 2011;378(9801):1449–50.



23. Collins S, Baker BK, **Gonsalves G**, Gomes M. The dangers of attacking disease specific programmes for developing countries. *British Medical Journal.*; 2007 Sep 29;335(7621):646.

### Chapters, Books, and Reviews

24. Ooms G, Hammonds R, **Gonsalves G**. The struggle against HIV/AIDS: rights, economics, and global responsibilities. *The Millennium Development Goals and human rights: past, present and future.* 2013
25. Bass E, **Gonsalves G**, Katana M. Advocacy, activism, community and the AIDS response in Africa. In: *Public Health Aspects of HIV/AIDS in Low- and Middle-Income Countries.* Springer; 2008, p. 151–70.

### Case Reports, Technical Notes, Letters

26. Broach S, Petrone M, Ryan J, Sivaram A, **Gonsalves, G**. Reservoirs of Injustice: How Incarceration for Drug-Related Offenses Fuels the Spread of Tuberculosis in Brazil, *Global Health Justice Partnership Report, Yale Law School/Yale School of Public Health.* 2019.
27. Heydari S, Kembabazi A, Monahan C, Ragins K, **Gonsalves G**. Ending an Epidemic: Overcoming the Barriers to an HCV-Free Future, *Global Health Justice Partnership Report, Yale Law School/Yale School of Public Health.* 2015.
28. Batman S, Boyko R, Kalu E, Roth E, Goldberg RC, Gonzalez DJX, **Gonsalves G**. Fear, Politics, and Ebola: How Quarantines Hurt the Fight Against Ebola and Violate the Constitution. *Global Health Justice Partnership Report, Yale Law School/Yale School of Public Health.* 2015.
29. Boyko R, Goldberg RC, Darby S, Milin Z, **Gonsalves G**. Fulfilling Broken Promises: Reforming the Century-Old Compensation System for Occupational Lung Disease in the South African Mining Sector. *Global Health Justice Partnership Report, Yale Law School/Yale School of Public Health.* 2013.
30. Natrass N, **Gonsalves G**. AIDS funds: undervalued. *Science.* 2010;330(6001):174–5.
31. Natrass N, **Gonsalves G**. Economics and the backlash against AIDS-specific funding. Working Paper of the Centre for Social Science Research, University of Cape Town; 2009.
32. **Gonsalves G**. Misreading the Writing on the Wall, *British Medical Journal.* 2008 May; 9.
33. **Gonsalves G**. Next steps on ART. *Nature Medicine.* 2002;8(7):644–644.
34. Batz H-G, Guillerm M, **Gonsalves G**. Scaling up antiretroviral treatment in resource-poor settings. *The Lancet.* 2006;368(9534):445.

### Editorials and Publications for the General Public

35. **Gonsalves G**. Gregg Gonsalves Blends Activism and Science (an interview with Claudia Dreifus), *New York Times*, April 8, 2019.

**Gregg S. Gonsalves, Ph.D.**

36. **Gonsalves G.** The U.S. really could end AIDS — if the Trump administration gets out of the way. Washington Post, February 8, 2019.
37. **Gonsalves G.** This is not a cure for my HIV. New York Times, March 9, 2019.
38. **Gonsalves G, Harrington M, Kessler DA.** Don't Weaken the FDA Drug Approval Process. New York Times. June 11, 2015.
39. **Gonsalves G.** Stop Playing Cowboy on Ebola. Foreign Policy. October 28, 2014.
40. **Gonsalves G.** "Am I Safe?" is the Wrong Ebola Question to Ask. Quartz. October 4, 2014.