



GHFP-II Annual Progress Report, PY4

OCTOBER 1, 2014-SEPTEMBER 30, 2015

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ACRONYMS

AAAS	American Association for the Advancement of Science
AFR/SD	Bureau for Africa, Office of Sustainable Development
AOR	Agreement Officer's Representative
APHA	American Public Health Association
APP	Annual Performance Plan
CP3	Crystal Plaza 3
CDC	Centers for Disease Control and Prevention
CUGH	Consortium of Universities for Global Health
DCHA	Bureau for Democracy, Conflict, and Humanitarian Assistance
EOP	End of project
FSN	Foreign Service National
FSO	Facility Security Officer
GH Corps	Global Health Corps
GH	Global Health
GH/AA	Bureau for Global Health, Office of the Assistant Administrator
GHFP-II	Global Health Fellows Program II
GH/P3	Office of Policy, Programs and Planning
GH/HIDN	Office of Health, Infectious Diseases and Nutrition
GH/OHA	Office of HIV/AIDS
GHPOD	Global Health Bureau, Professional and Organizational Development
GH/PRH	Office of Population and Reproductive Health
GH/OHS	Office of Health Systems
HBCU	Historically Black Colleges and University
HSI	Hispanic Serving Institution
IDP	Individual Development Plan
IMARS	Information Management and Reporting System
IR	Intermediate Result
MPH	Master of Public Health
MS/HMD	Headquarters Management Division
MSI	Management Systems International
MSI	Minority Serving Institution
NGO	Non-governmental Organization
OSM	On-site Managers
PCD	Performance and Career Development
PD	Professional Development
PDMS	Office of Professional Development and Management Support
PEPFAR	President's Emergency Plan for AIDS Relief
PHI	Public Health Institute
PMEP	Performance Monitoring and Evaluation Plan
PY	Program Year
RRB	Ronald Reagan Building
SES	Socioeconomic Status
SR	Sub-Result
TDY	Temporary Duty
UN	United Nations
USSTA	Uniquely Skilled Senior Technical Advisor

OVERVIEW & HIGHLIGHTS

In program year four (PY4), the Global Health Fellows Program II (GHFP-II) continued to implement activities that support two key mandates: (1) To meet USAID's immediate and emerging human capacity needs and; (2) To help build the next generation of diverse global health professionals. In PY4, internal improvements at GHFP-II included transitioning staff, streamlining organizational structure, strengthening systems, and clarifying and updating policies and procedures. Activities were evaluated while the PY5 workplan was designed and approved.

PY4 highlights include:

I. Meeting USAID's immediate and emerging human capacity needs

- 137 PHI Fellows and 74 PHI Interns were supported in PY4, along with 16 FSNs, and additional participants from GHFP-II partners. In particular, Global Health Corps (GHCORPS) hosted 10 Level One Fellows, GlobeMed hosted 85 Interns, and PYXERA Global supported 37 Global Health Champions (corporate volunteers) this year.
- For **outreach**, the end-of-program (EOP) targets have been exceeded, in both the number of events and the number of people reached. This applies also to the number of events targeted at talent from diverse backgrounds, which exceeded targets. The number of page views to the website remained at more than half a million in PY4.
- All EOP **recruiting** targets have been met. More than **93 percent of candidates were selected** as finalists during the first round and the number of days for recruiting and hiring candidates averaged 2-3 weeks, depending on location and level of position.
- **95 percent of hiring managers (USAID staff) rated their satisfaction with the recruitment process as high or very high.**
- **97 percent of the 137 Fellows described GHFP-II direct services positively.**
- Overall, there have been 393 supported participants since the start of the program, surpassing the EOP target of 270
- **100 percent of eligible Fellows who were invited for an extension of their Fellowship accepted.**
- Indicator results for **professional and career development (PCD)** remain mixed, with the greatest improvements in the percentage of new Fellows completing baseline job competency assessments, the percentage of new Fellows completing all the voluntary orientation modules offered by GHFP-II, and satisfaction with the PCD portion of Washington orientation. There also was improvement from PY3 in satisfaction with the quality of coaching.
- In addition, **90 percent of DC-based Onsite Managers (OSMs) were satisfied/very satisfied** with GHFP-II assistance.

II. Building the next generation of diverse global health professionals

- **100 percent** of Fellows rated their overall Fellowship experience as **contributing positively to their future career**, and 91 percent were continuing in the GH field, above the EOP target of 90 percent.
- In PY4, 159 **Interns participated** in the program, both through PHI and GlobeMed, and 87 percent were satisfied with the overall quality of the Internship – above the EOP target, as was the percentage who plan to pursue work or further education in the field.

- Increasing diversity in the GH field has always been a priority for GHFP-II. “**40 percent of GHFP-II participants represent diverse groups**, which highlights USAID’s commitment to inclusivity in GH.”
- For PY4, the EOP target was nearly met in the percentage of ethnic minorities and was met for those coming from a low socio-economic background.
- Another way of looking at diversity was through participation of partner organizations, including Global Health Champions, short-term private sector professionals who provided **more than 1,000 person days of technical assistance**, coordinated by partner PYXERA Global. GHFP-II also organized participation of FSNs. Also, **100 percent of the FSN respondents surveyed were satisfied with GHFP-II assistance**. USAID staff reported that they were satisfied with support regarding FSNs, exceeding the EOP target of 85 percent.
- GlobeMed, GHFP-II partner, created **nine undergraduate student-run Chapters in Minority Serving Institutions (MSIs)**, helping to build interest in and efficacy around potential careers in global health.
- GlobeMed also placed 85 Interns internationally in Africa, Latin America and Southwest Asia with **92 percent pursuing the GH field** through employment of a graduate program after their Internship.
- **37 Global Health Champions** (mid and senior-level corporate staff) provided 1,064 person days of technical assistance, through GHFP-II partner, PYXERA Global.
- GHCorps, GHFP-II partner, supported 10 Level One new Fellows spending one year in Africa with **78 percent continuing their careers or education in GH** after their Fellowship.
- **Reflecting USAID technical leadership in concerns regarding the future of the GH profession**, GHFP-II hosted events and interactive discussions on the opportunities and challenges facing academia, USAID and its implementing partners related to building a diverse workforce in GH. We also published a **survey of GH employers** regarding their hiring practices. (See Annex I for Infographic)

PROGRAM OPERATIONS AND INFRASTRUCTURE

- Technology continues to play a significant role with the utilization of IMARS, GHFP-II’s web-based **Information Management and Reporting System**, which allows USAID and program staff to create customized dashboards to track program activities and finances.
- Concerning **office space**, GHFP-II staff assisted the GH Bureau in **moving 63 Fellows to CP3 in Crystal City, VA** from the GHFP-II offices located at 1201 Pennsylvania Avenue. USAID continued to use the space for hoteling and to hold meetings. GHFP-II’s office hosted an average of **158 USAID meetings per month** in the GHFP space.

For a visual summary of Fellow’s attitudes about program, the word cloud below incorporates 15 comments about their overall satisfaction with GHFP-II services (1.2.2.2).¹ As can be seen throughout the report, as an indicator of results using survey responses from Fellows, Interns and USAID staff, GHFP-II is widely seen as providing a valuable entry-point and source for increased capacity for new and continuing GH professionals. This proof of GHFP-II’s value has been consistent as we continued to improve in PY4, supporting USAID’s need for immediate and emerging technical talent and helping to build the next generation of diverse GH professionals.

Word Cloud created using common words, phrases from GHFP-II Alumni Survey:



¹ The word cloud used the site www.jasondavies.com. Only descriptive words were included.

PROCESSES & ADMINISTRATIVE ACCOMPLISHMENTS

STAFFING

There were nine staff departures in PY4. GHFP-II also hired 10 new staff members and filled one vacancy with a promotion. Some of the turnover happened in leadership positions at the beginning of the program year, including Deputy Director Fred Mills leaving at the end of October 2014, to be replaced in January 2015 by David Godsted, and Angelina Gordon joining the directors' group as Director of Communications, Outreach and Diversity. Senior advisor Jeff Meer left in February of 2015 and was not replaced.

FINANCIAL STATUS

Financial reports have been shared regularly with USAID offices, bureaus and missions. They were continuously updated to accommodate specific requests from the Agreement Officer's Representative (AOR), the senior staff from GH bureaus, and country missions.

The AOR, Project Director and financial staff will continue to work closely to ensure that information and results are communicated in a timely manner, including any changes in the funding for Fellows and other participants, and any changes in activities that contribute to results. This information also will continue to be reflected in the quarterly financial reports. As PY5 is the final year of the program, GHFP-II will be working on the submission of the final financial report due within 90 days of the current end date of the cooperative agreement.

FACILITIES

In PY3, the GHFP-II office hosted an average 224 meetings per month. Due to the relocation of the Global Health Bureau to CP3, this average fell to 158 per month in PY4. Part of the drop in absolute numbers of meetings was attributable to a change in the type of meetings. Multiple short meetings were replaced by half-day or full-day trainings, retreats, and portfolio reviews, especially in the program's largest meeting rooms, which accommodate 20 to 50 people. GHFP-II admin and IT staff assisted meeting organizers by facilitating access with building security, providing flipcharts, white boards and audiovisual equipment when requested, and receiving catering deliveries. Program participants and USAID staff request meeting space at the GHFP-II offices by filling out an electronic request form at <http://www.reservations.ghfp.net/>.

Program participants and USAID staff requested eighty-two percent of meetings held at the GHFP-II offices, and the remainder consisted primarily of GHFP-II staff meetings and participant orientation activities.

Additional admin teamwork in PY4 included:

- Provided workspace for Interns on an “as needed” basis, using a web-based hoteling system. At the peak Internship period in summer, more than 40 Interns were using GHFP-II office space. Interns had the option of reserving cubicles, as well as shared offices. Admin staff played an active role in monitoring the reservations.
- Building management continued the elevator renovation project.
- A group of eight GHFP-II program staff participated in a CPR/AED certification class in October 2014 in support of GHFP-II’s Automated External Defibrillator Program, launched in PY3.
- The GHFP-II admin team created a hoteling policy and procedures in response to the Global Health Bureau’s move to CP3, offering cubicles and shared offices to anyone in the Bureau needing temporary workspace downtown, by online reservation. Nine workstations were designated as “touchdown stations,” available for use without a reservation for anyone needing space for periods shorter than one hour. GHFP-II accommodated 842 hoteling reservations over the course of PY4.

After the majority of Fellows moved to CP3 in early 2015, 14 Fellows remained based at 1201 Penn. Aside from hoteling; a few other uses of vacant GHFP-II offices were established at USAID’s request. GHFP-II provided dedicated workstations to:

- USAID’s Measurement Summit Team, led by Kathleen Handley (senior advisor, Global Health Bureau) through the end of June 2015. The team disbanded after the summit, but Kathleen remained at 1201 Penn for post-summit work.
- Four Foreign Service Nationals (FSNs) working with the nutrition team.
- American Association for the Advancement of Science (AAAS) Fellow Natalia Romero, working with GH/OHS (through August 2015).
- An employee of the Korean International Cooperation Agency awaiting clearance, working with GH/P3 (October 2014-March 2015).
- A group of nine AAAS Fellows working with USAID’s Global Development Lab, awaiting clearance, as of September 2015.

OPERATIONS

Key operations activities in PY4 included a focus on the move to CP3 and organized ergonomic assessments.

- **Assistance with the move to CP3:** After the initial announcement about the relocation to CP3, GHFP-II administrative staff began attending GH all-hands meetings. A few Fellows joined the space committee and kept GHFP-II updated, and staff posted news on the GHFP-II website's participants' portal. In fall 2014, the GHFP-II admin team connected with Susan Vogelsang (M/MS/HMD project manager for GH) and the GH Move Team, which included Office of Professional Development and Management Support (PDMS) staff. This allowed the admin team to facilitate contacts between the GH move team and building management at 1201 Penn to coordinate moving logistics. GHFP-II admin staff was able to ascertain that most Fellows based at 1201 Penn would be included in move waves 8 and 9. USAID moved all GH staff in nine waves, starting in November 2014 and ending in February 2015. Subsequently, the GH move team extended weekly move update meeting invitations to GHFP-II's office services supervisor, office coordinator and the building manager from 1201 Penn. Their active participation, as well as in the physical preparations and execution of the Fellows' move waves, was appreciated by the GH move team. Sixty-one Fellows moved from 1201 Penn to CP3 from January to mid-February. The GHFP-II admin team followed up with an installation visit to ensure all ergonomic equipment that moved from 1201 Penn to CP3 was properly set up for Fellows' use.

Fourteen Fellows remained based at 1201 Penn, four of whom were with the Africa Bureau. The remainder consisted of GH Fellows who obtained permission from their managers and PDMS to maintain permanent space at the GHFP-II offices.

- **Organized ergonomics assessments:** Assessments took place in November 2014, March and August 2015 to evaluate new Fellows and staff, and equipment was ordered and installed to meet recommendations. Twenty-two of 24 DC area-based Fellows who started in PY4 received ergonomic evaluations. Re-assessments also were popular, and 24 continuing Fellows had follow-up meetings with the ergonomist.

INFORMATION TECHNOLOGY

GHFP-II enhanced several IT systems in PY4:

- Improved the online **Information Management and Reporting System (IMARS)**, including new recruitment tools, performance management workflow and financial tracking module.
- Continued to provide **ZOOM, an online meeting and collaboration tool**, for staff and participants. The service allows users to conduct online video meetings with up to 100 participants who can join via various methods. The service allows participants to share content and easily work together.
- Installed new **hardware and software** to improve the GHFP-II network and ensure security.

SUBCONTRACTORS: PARTNERS, COLLABORATING ORGANIZATIONS, CONSULTANTS

Contracts were signed or amended for PY4 activities with all subcontractors, including key partners GlobeMed, Global Health Corps (GHCORPS), PYXERA Global and Management Systems International (MSI), as well as complementary partner FACES for the Future Coalition. In addition, several consultants (Alan Hurwitz, Vicky Markham, Joyce Prescott) provided technical and professional development support to individual staff and teams, and Natasha Wanchek continued as part-time monitoring and evaluation specialist. Consultant and subcontract summaries, including financials and specific PY4 activities and results, are noted in Annex G.

Founded by students in 2007, the **GlobeMed** network engages more than 2,000 undergraduates at university-based, student run chapters throughout the U.S. Each Chapter is partnered one-to-one with a grassroots health organization in one of 18 countries throughout Africa, Asia and Latin America. Fundraising and on-site efforts at each chapter contribute to greater capacity and health impact of their partner organization. Through their involvement, GlobeMed students and partners commit to a life of leadership for GH and social justice.

In PY4, GlobeMed had 85 participating Interns who were placed internationally in Africa, Latin America and Southeast Asia, and 92 percent were pursuing the GH field through employment or a graduate program after their Internship. Through GlobeMed's continued outreach at Minority Serving Institutions (MSIs), new university-led Chapters were established at Morehouse College, the University of Texas at San Antonio and Wilbur Wright City College in Chicago. GlobeMed Interns reported a strong satisfaction rating of 89 percent.

GHFP-II also supports **Global Health Corps (GHCORPS)**, an organization that offers opportunities for early-career U.S. GH professionals to work in the field for a year. These professionals, all college graduates, are teamed with a developing country professional and serve in tandem assignments in Africa on GH projects. The overwhelming majority of GHCORPS' Fellows return to begin graduate work, and many pursue careers in GH.

In PY4, GHCORPS supported 10 level one Fellows, all placed in Africa, for a cumulative total of 22. Seventy-eight percent of participants were continuing their careers or education in GH after their Fellowship.

GHFP-II maintains a strong relationship with subcontractor **PYXERA Global** (formerly known as CDC/CDS). Through this sub-award, GHFP-II is nurturing the continuation and growth of private sector pro bono involvement in global health. PYXERA Global has worked with more than a dozen major multinational corporations that offer opportunities for high-performing staff to work in the field for several months at a time, amplifying the reach of traditional global health programs. Many of these GH "champions" become, upon return, advocates for the work of USAID's GH programs in their own professional and social networks.

In PY4, 37 Global Health Champions provided 1,064 person days of technical assistance. They were based in seven countries, with the highest number in Ethiopia, India and Bangladesh. The main technical areas this year were health service delivery, water and sanitation, nutrition, and maternal and child health. Cumulatively, there have been 108 participants.

Management Systems International (MSI) is the GHFP-II partner tasked with supporting and enhancing GHFP-II performance and career development activities for Fellows. MSI coordinates the implementation of GHFP-II's professional coaching program, which supports Fellows in strengthening management and leadership skills, developing interpersonal and professional competencies, addressing specific organizational or performance challenges, and developing career planning and transition strategies. MSI supports GHFP-II with the development and maintenance of e-learning modules designed to support Fellows' orientation to USAID and GHFP-II program processes. MSI also provides the program a seconded staff to support the performance and career development (PCD) team.

FACES for the Future Coalition, GHFP-II complementary partner, offers underserved, minority students comprehensive programs covering four primary services: 1) career exposure and training, 2) academic support and college preparation, 3) life skills training and case management and 4) youth leadership development. FACES creates viable pathways into careers in health care, public health and behavioral health. Working with GHFP-II and an advisory committee of GH professionals, FACES is developing curriculum and program structures to create a pathway into GH careers. This is expected to contribute to meeting increasing demands in the field, as well as the challenge of diversifying the global health workforce with resilient, multi-lingual and culturally responsive students.

In PY4, FACES completed development of GH curriculum for the high school level. The team also continued its work to design program elements that leverage local Internship opportunities to develop relevant skill sets for youth interested in GH. The curriculum was developed in alignment with GHFP-II and Consortium of Universities for Global Health (CUGH) GH competencies, while utilizing pedagogical delivery models appropriate to youth in the early stages of training. Additionally, Internships were developed to offer students the opportunity to hone their skills while working with multi-lingual, multi-cultural, immigrant communities throughout San Francisco in clinics, hospital departments, and public health departments and in mental and behavioral health agencies.

RESULTS

HEALTH PROFESSIONALS RECRUITED AND SUPPORTED

KEY RESULT AREA I:

A pool of committed health sector professionals who will contribute to USAID's ongoing global health initiative is developed

Intermediate Result (IR) 1.1: Health professionals recruited and supported

OUTREACH

In PY4, GHFP-II's outreach strategy continued to incorporate a combination of planned and opportunistic events, both onsite and virtual. The strategies were driven by priorities developed with USAID and focused on results, including:

- Expanded outreach to attract more individuals underrepresented in the field of GH.
- Maintained ongoing relationships with faculty and staff at target institutions and strategized the most effective ways to reach interested students.
- Honed materials and delivery methods to meet the needs of various audiences.
- Collaborated with other organizations to extend outreach efficacy.

Implementation continued to focus on increasing the visibility and recognition of USAID as the greatest laboratory and technical leader in the field of GH, along with reaching interested individuals, especially those underrepresented in the field. This policy of inclusion has had multiple lenses:

- Awareness of opportunities available with USAID and GHFP-II.
- The “big picture” overview of GH and a first-person look from staff and participants, including current and former Fellows, and Interns.
- A variety of tools to help individuals be successful in the field, including how to develop and maintain a connection to the GH community, specific advice on resumes, cover letters and Internship essays.
- Insight into desired skills and competencies from an employer's perspective.
- Insight – often difficult to obtain – into what a successful career in GH looks like.
- Communicating to students the importance of being able to take what they have learned in the academic setting and transfer it successfully to the professional work environment.

Key messages of the strategy have included:

- Introduction to USAID and its partners.
- Highly regarded and competitive Fellowships and Internships.
- A demonstrated commitment to inclusion.
- Viability of a GH career for underrepresented groups.
- Specific information about how to start and maintain a successful GH career, including the competencies required to be successful in the field.
- Skills and competencies not always found in academic programs that are helpful for a successful GH career.

GHFP-II also created a video in PY4, “The Next Generation of Global Health Professionals.” The 10-minute video features leadership from USAID, GHFP-II staff and Fellows talking about their experience with the program, and the value it brings to USAID and to individual careers. The video was published on the GHFP-II YouTube channel (<https://www.youtube.com/watch?v=qmuUvmGL6NY>) and is featured on the home page of www.ghfp.net. As of Dec. 1, 2015, the video had been viewed 320 times. It also is used in new Fellow and intern orientation, and is shared with the public via social media promotion.

To contribute to outreach efforts, GHFP-II conducted a survey, starting in September 2015, which focused on alumni from GHFP-I and GHFP-II who had completed their Fellowship at least a year prior. The aim was to understand the impact of the Fellowship experience on Fellows’ careers and to increase alumni engagement across the program. There was a 60 percent response rate, with 138 alumni participating. Key findings are available in Annex J.

SUB-RESULT (SR) 1.1.1 EXPANDED OUTREACH FOR AND AWARENESS OF GHFP-II

INDICATOR	YEAR 1	YEAR 2	YEAR 3	YEAR 4	CUMULATIVE	TARGET
1.1.1.1.a Number of outreach events promoting awareness of GHFP-II	61	62	89	56	268	Y1: 40 EOP: 200
1.1.1.1.b Number of people reached via outreach events	5,999	5,523	8,638	5,480	25,640	Y1: 4,000 EOP: 25,000

(Note: This is also the indicator for 1.2.1.1).

GHFP-II held 56 outreach events in PY4. Overall, there have been 268 events since the start of the program, well over the end-of-project (EOP) target of 200. The program also has exceeded its EOP target of reaching 25,000 people, which includes more than 5,400 this year. GHFP-II outreach staff have worked hard to identify new venues that fit into the program’s outreach strategy, cost efficiencies that allowed additional reach, and increased staff involvement across program teams, including a new internal training initiative to engage staff in outreach and informational interview activities.

² Outreach data for PY4 (1.1.1.1) does not include GlobeMed.

In PY4, expanded outreach was particularly focused on populations underrepresented in the GH field, an effort spearheaded by GHFP-II's Director of Communications, Outreach and Diversity and executed by the Communications, Outreach and Diversity (COD) team. There also was substantial support from the recruitment and participant support teams. In addition, other staff members have become more proficient and adept at playing a participatory role in outreach, facilitated by an internal training initiative led by the program's special advisor for outreach and communications. As a result, the program was able to broaden its reach and take part in more events, both in-person and virtually. Outreach to diverse audiences is further described in Key Results Area 2 (indicator 2.1.1.1).

The majority of GHFP-II outreach events have been in-person, as this is often the best way to meet with people who are interested and to answer questions, especially in underrepresented communities with limited funds to participate at national events. This trend continued in PY4 with 47 in-person and nine virtual events. In addition to webinars and Google Hangouts on Air, GHFP-II participated in other types of virtual events, including the Bender Virtual Career Fair, which serves minorities and people living with disabilities.

As in prior years, outreach targets were determined by a combination of factors that aligned with the program's outreach strategy, including:

- School's commitment to both public health and GH.
- Ability to reach a combination of diverse students who may not have considered a GH career and students already on a GH career path.
- Geographic region.
- Past contact and cost-benefit analysis for USAID and the program.

Participation at national outreach activities was based on the program's previous attendance at a high-value conference or institution, such as the CUGH Annual Conference. Adding in nearby target schools to maximize travel and staff resources were a value-add for involvement. This was the case in PY4, for example, when partner GlobeMed added a new Chapter at North Carolina Central University (NCCU), a historically black college and university (HBCU), in Durham, North Carolina, and outreach staff arranged

information sessions at North Carolina Central University (NCCU), University of North Carolina at Pembroke (UNC Pembroke), University of North Carolina Chapel Hill (UNC Chapel Hill) and Duke University. On that trip, staff also participated in the Duke Student and Employer Diversity Symposium. The agenda for the pre-conference event is available in Annex D.

A central focus of GHFP-II's outreach strategy continues to be the comprehensive outreach program to universities – among them HBCUs, Hispanic Serving Institutions (HSIs), Minority Serving Institutions (MSIs), and other institutions with a large percentage of minority students. Included are both mature and emerging programs relevant to careers in global health.

GHFP-II Outreach, Audience Feedback, PY4

"I wanted to write a quick note to say thanks; what you said during the PYXERA Global webinar resonated with me as a young professional early in my global health career. GHFP-II will be an excellent opportunity to grow, and crystallize my vision for what I hope is a long career in this sector."

-- Virtual participant from, "Diversity and Global Health" on June 3, 2015

Outreach takes the form of in-person, on-campus information sessions, career fairs and faculty meetings, virtual career fairs, video conference events, and webinars. In addition, GHFP-II's annual calendar includes large and small professional conferences and one-on-one informational interviews. Select GHFP-II staff, current and former Fellows, and current and former Interns host these events.

In PY4, GHFP-II had a significant presence at the following events, among others:

- American Public Health Association Annual Meeting, Exhibitor and Presentations
- Annual Biomedical Research Conference for Minority Students, Exhibitor
- Consortium of Universities for Global Health, Presenter and Information Sessions
- Drexel University SPH Global Health Opportunities Day, Presenter
- Duke University Diversity Symposium, Exhibitor & Presentation
- Gallaudet University, Information Session
- Global Health & Innovation Conference (Unite for Sight), Exhibitor
- Hispanic Association of Colleges and Universities, Exhibitor and Presentation
- Masters and PhD Virtual Career Fair, Exhibitor
- Mississippi State University, Information Session
- Monterey Institute of International Studies Career Fair, Exhibitor
- National Black Graduate Student Conference, Attendance
- National HBCU Week Conference, Exhibitor
- North Carolina State University, Information Session
- Returned Peace Corps Volunteer Career Fair, Exhibitor
- Society for International Development Career Fair, Exhibitor
- University of North Carolina – Pembroke, Information Session

GHFP-II continued its series of webinars as part of the program's outreach strategy, providing an in-depth look at USAID, GHFP-II, and Fellowship and Internship opportunities. The webinars also provided insight into the field of GH from an employer's perspective. Since there are routinely many more questions asked during the Q&A portion of each webinar than time allows, a new aspect of these virtual events was to solicit questions in advance from registered attendees. This was done in order to group similar questions together, gauge the composition of the audience and construct thoughtful responses that were broadcast during the event.

Webinar Questions

A brief sample of questions asked and answered during GHFP-II- hosted webinars in PY4:

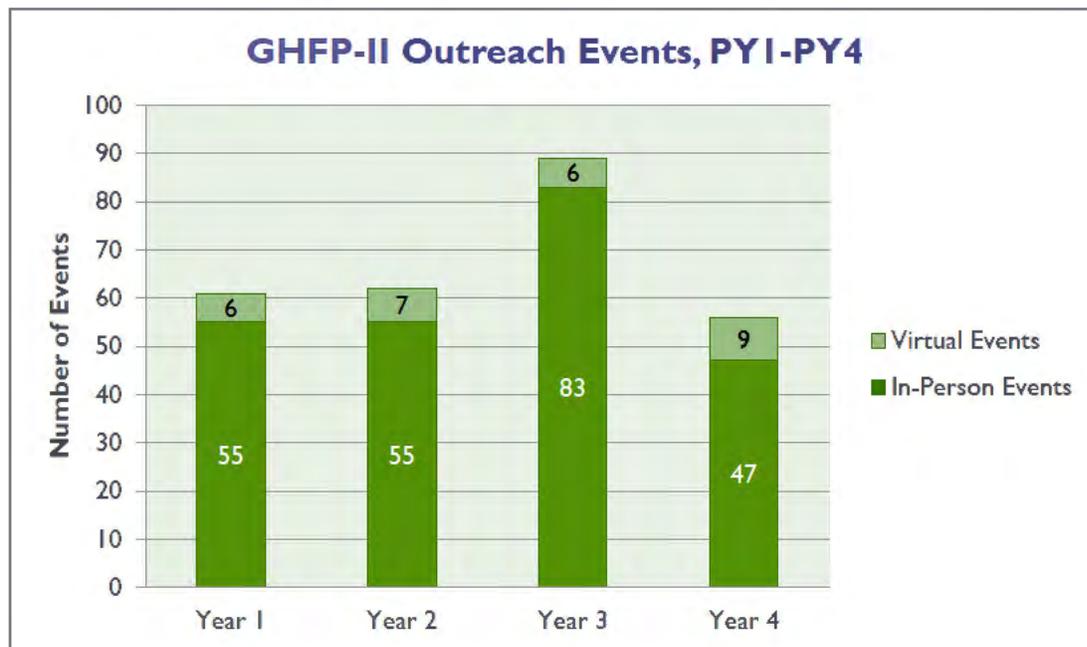
- Can the panelists give more specific tips on how to move into global health as a mid-career professional?
- I already have a master's degree in International Development, but have since decided to focus on global health. Should I pursue an MPH or PhD in public health if I want to get a stable, influential position with a global health organization?
- What are the job prospects after the Fellowship program? What do most people do after the 2 years?
- What should a college underclassmen be doing to best position themselves to work/intern abroad after graduation?
- What is the timeline for the student summer Internship program? Also, what tips do you have for making a strong application for those programs in particular? What do you look for?

GHFP-II continued to expand use of its social media platforms, including the program’s organizational Twitter, LinkedIn, and Facebook accounts and handles. In addition to publicizing GHFP-II opportunities and sharing summaries of outreach efforts for interested audiences, a greater effort was made in PY4 to pass along other GH related information, such as conferences, publications, data, studies and research, as well as news related to funding, careers and organizational changes. GHFP-II’s social media platforms also were seen as places for interested individuals to disseminate their own GH related thoughts and news, including during program-hosted Twitter chats.

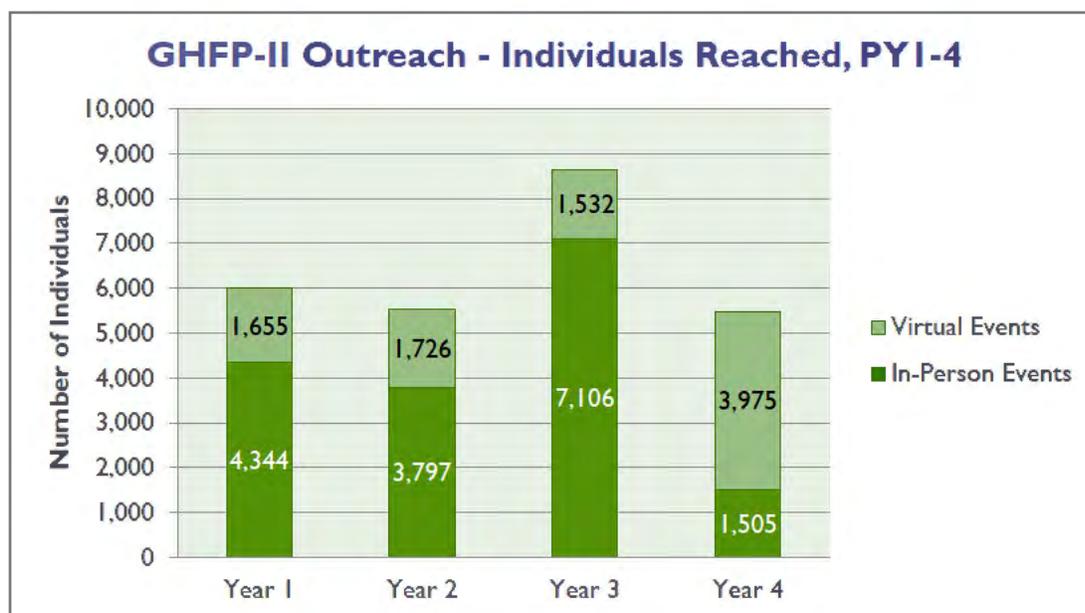
Programmatic challenges for outreach have included relatively competing demands on time and a small core team equipped to handle outreach responsibilities and capture of activities. Supported by a growing team of staff able to support outreach activities, more individuals have been exposed, in a meaningful way, to the possibilities of a career in GH, as evidenced by the outreach data.

A summary of the number of virtual and in-person events and people reached are below. Results have exceeded the PY1 target of 40 events and the EOP target of 200 events. Results also have exceeded the PY1 target of reaching 4,000 people and the EOP target of reaching 25,000.

Indicator 1.1.1.1 – Outreach events, PHI



Indicator 1.1.1.1 – Outreach to individuals, PY1-PY4



Indicator	Year 1	Year 2	Year 3	Year 4	Target
1.1.1.2 Number of unique page views to the website of visitors who are looking for information on GHFP-II	855,850	652,545	562,781	509,121	Y1: 6,000,000 Y2: 500,000 EOP: 6,000,000 ³
1.1.1.3 Two “Summit” meetings organized to discuss the future of professionals in the field of GH with key findings published	0	1	0	1	Year Two: One Year Four : One

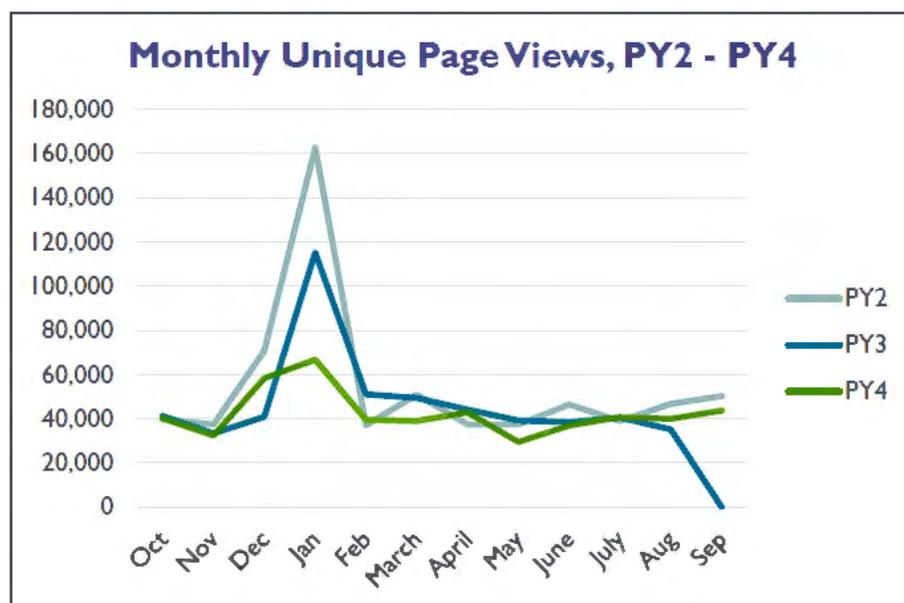
The GHFP-II website is a significant part of the outreach strategy, providing access to one-on-one informational interviews with staff, news about upcoming webinars, resources for job seekers, and programmatic information about Fellowships and Internships. In addition, it offers an opportunity to sign up for the GHFP-II listserv, so those interested in GH careers can be notified about upcoming openings and other program activities.

In PY4, the website had more than 500,000 page views, and cumulatively there were just over 2.5 million page views. These results are considered strong, meeting the PY2 target of 500,000 each year. The EOP target of 6 million is not considered feasible.

³ Outreach and technical staff estimate that a more accurate EOP target for 1.1.1.2 would be 3 million, rather than 6 million.

About half the visitors were new (52 percent) and the remaining half were returning viewers (48 percent). As it usually happens, the number of visitors increased in December and January, which is when the Internship positions are announced and the online application period is open. Many applicants visit the site when a job is announced, but do not apply until a few days before the position closes. In addition, applicants frequently complete their application in multiple visits and then return to check on the status of the position. Details on monthly page views, comparing PY2 to PY4, are below.

Indicator 1.1.1.2 – Monthly website pageviews, PY2-PY4



GHFP-II DIVERSITY SUMMIT

In spring PY4, GHFP-II hosted an interactive discussion on the opportunities and challenges facing USAID and its implementing partners to building a diverse workforce in GH. The Diversity Summit brought together senior leaders at USAID, US Government agencies, academia and diversity experts to discuss the impacts, best practices and lessons learned, challenges and opportunities afforded by a diverse workforce.

Tenants of the Summit included discussion of the components of GHFP-II’s diversity strategy:

- **Effectiveness:** A diverse workforce can lead to increased creativity, more open thinking and challenging of long held beliefs, resulting in fewer blind spots, improved decision making and, ultimately, the achievement of USAID’s mission, vision and results.
- **Adaptability:** In the GH field, the ability to adapt rapidly to new situations is crucial. This capacity can be measured by the range of talent, experience, knowledge, insight and imagination available in the workforce where conformity to the status quo is not an advantage. In addition to technical abilities, employees are increasingly valued for the unique qualities and perspectives that they can bring to the table.

- **Relevancy:** The Agency can be most effective when members of its workforce have direct exposure to the circumstances and dynamics experienced by the populations it serves. Individuals from families who recently immigrated to the US, for example, may be able to offer deeper insights into the health issues found in their countries of origin and increase credibility for the Agency with their interactions. Individuals from low incomes, ethnically and culturally diverse communities in the US also may be more attuned to the practical realities and motivations of people in urban and rural communities in the developing world. Ultimately, GH professionals who were exposed to academic and work environments with a critical mass of diversity will be more effective.
- **Appealing to the next generation:** Increasing diversity in the GH field in the US means that our academic institutions have a rich pool of potential talent among people from an array of backgrounds and life experiences. Realizing this potential requires training sites and workplaces that are open to varied cultures, personal attributes, ideas and identities. To retain its status as the premier development organization, USAID is well served by attracting the best available talent, communicating its priorities to academic institutions and developing strategies to cultivate and retain that talent over time.
- **Returns on global investment:** GH issues have consequences that not only affect the people of developing nations but also directly affect the interests of American citizens. The Agency can be a conduit for a broader cross-section of Americans to have input into issues that affect them.

Attendees of GHFP-II's Diversity Summit included:

- Dr. Ariel Pablos Mendez, Assistant Administrator, GH Bureau, USAID
- JuanCarlos Hunt, Director, Office of Civil Rights and Diversity, USAID
- Dr. Sharon Rudy, Project Director, GHFP-II
- Dr. Ivory Toldson, Deputy Director for the White House Initiative on HBCUs
- Dr. Mary Pittman, CEO, Public Health Institute
- Valerie McCann Woodson, Senior Director of HR, Public Health Institute
- David Godsted, GHFP-II Deputy Director
- Angelina Gordon, GHFP-II Director, Communications, Outreach, and Diversity
- Dr. Thomás Magaña, Project Director, FACES for the Future Coalition
- Alyssa Smaldino, Interim Executive Director, GlobeMed
- Brooke Briggance, Program Manager, FACES for Future Coalition
- Erica Teofilo, Minority Serving Institutions Program Manager, USAID
- Leek Deng, Special Assistant, GH Bureau, USAID
- Dr. Shannon Marquez, Associate Vice Provost for GH and International Development, Drexel University
- Tamara Henry, Assistant Professor, George Washington University
- Paris Prince, Inclusion Manager, GlobeMed
- Dalal Najjar, Program Manager, CUGH
- Jeff Meer, Executive Director, Handicap International
- Jennifer Gottesfeld, Senior Program Manager, Global Health Corps

The agenda for the Summit is available in Annex C.

ADDITIONAL OUTREACH

Additional outreach took place in March 2015 for the CUGH conference. Prior to the event, GHFP-II conducted a survey focused on topics that have been a part of an ongoing discussion in the GH field in the U.S., looking at the future of the American GH workforce, hiring practices of nearly 50 GH implementing partners, and how best to prepare professionals for this career path. The survey focused, in part, on the non-clinical competencies needed for success in the GH field, as well as possibilities for professionals with domestic health experience to transition to GH work. Nearly 50 project directors of USAID GH projects responded – from 32 organizations. Sharon Rudy, GHFP-II’s director, presented results at the event. Key findings and the Going Forward section of the survey report are available in Annex I.

RECRUITING

SR 1.1.2 FELLOWS RECRUITED AND SUPPORTED EFFICIENTLY

Indicator	Year 1	Year 2	Year 3	Year 4	Target
1.1.2.1: Percent of candidates selected as finalists by the hiring manager that were identified during the first round of GHFP-II recruitment	79%	82%	97%	94%	Y1: 75% EOP: 85%
1.1.2.2.a: Average number of days for recruiting appropriate candidates	33	26	27	26	EOP: 42 days
1.1.2.2.b: Average number of days for hiring	17	17	27	24	EOP: 28 days
1.1.2.3: Hiring managers’ satisfaction with GHFP-II’s recruitment process is ‘high’ or ‘very high’⁴	73%	95%	92%	95%	Y1: 75% EOP: 85%

Through its fourth year, GHFP-II has continued to maintain its strong record of accomplishment of recruiting and hiring highly qualified and diverse GH technical professionals. The program has continued to receive harder to fill Fellowship requests, resulting in the creation of more creative sourcing strategies, including social media (i.e. Twitter, Facebook and LinkedIn). GHFP-II anticipates hiring trends by staying abreast of the latest in GH programming, at USAID itself, and at the implementing partner organizations that work with the agency.

PY4 Fellow Highlight: Clive Mutunga
*Population, Environment and Development
 Technical Advisor
 GH/PRH/PEC*

Clive has worked to integrate family planning and environment into PRH. He developed a vision document to outline a vision for family planning and environment for PRH as a collaborative process grounded in his deep technical knowledge in his field. He has established himself as a technical expert and is routinely sought not only by his own office, but also by other offices and bureaus, and works to demonstrate the value and benefits of integrated programming.

⁴ Please see Annex F for information about PY4 surveys. For hiring managers, there was a 67 percent response rate (for 20 of 30 hiring processes; covering 31 Fellows).

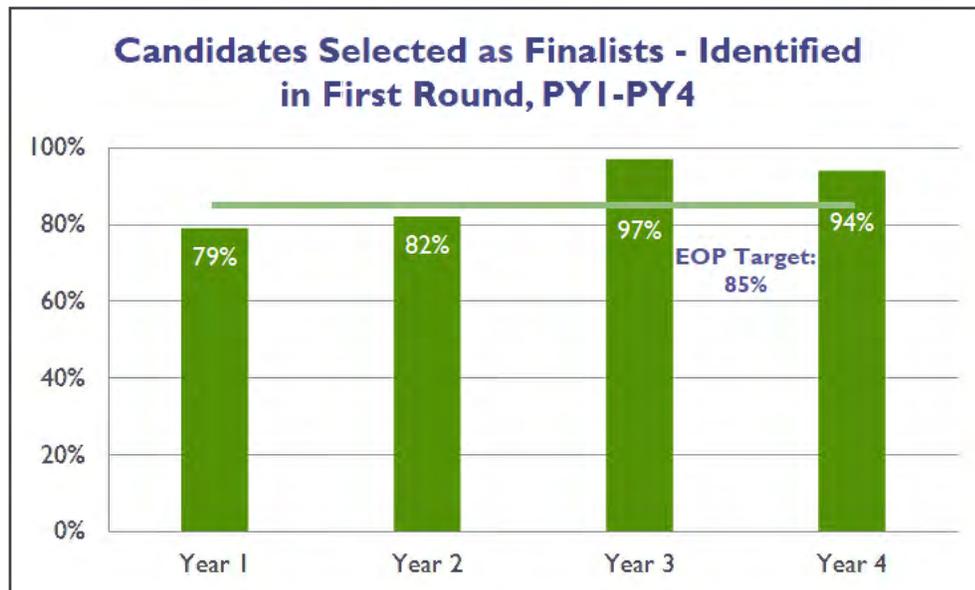
This has involved being present at an ever increasing number of networking events in order to build relationships towards creating a pipeline of very unique talent.

In addition, GHFP-II proactively fosters strong relationships with hiring managers by inquiring about their current work and what GH trends they predict in the coming years. This connection has also helped the recruitment team to create hiring manager profiles, noting the details of hiring managers' manpower fulfillment wants and needs, which are referred to starting with the profiling meeting and then frequently through the lifecycle of the recruitment phase.

In PY4, the program successfully recruited⁵ 31 Fellowships, compared to 32 in PY3, 33 in PY2 and 43 in PY1. Of those, 94 percent of the finalists were hired during the first round of recruitment – well above the end-of-project target of 85 percent (1.1.2.1). All candidates in levels I and IV were selected in the first round and results also were high for levels II and III. Details are in Annex E.

The high level of hiring in the first round of recruitment was a particular accomplishment that was due to increased awareness of the program. For example, 18,000 users were in the GHFP-II database and received position announcements directly to their inboxes. GHFP-II made an effort to build relationships, fostering a network of talent who might apply for more senior and unique positions. As the position level increases, the number of qualified applicants reduces, so establishing these networks ahead of time is beneficial to successfully filling the hard to find positions.

Indicator 1.1.2.1 – GHFP-II recruitment; Candidates identified during first round, PY1-PY4



⁵ GHFP-II defines recruitment as the number of days from the position announcement until the GHFP-II recruiter refers a short list of applicants to the hiring manager. GHFP-II typically posts the position for four weeks (28-31 calendar days) unless otherwise requested by the hiring manager. The GHFP-II recruiter performance standard is to refer qualified candidates within five business days of the position closing.

Both of the targets for hiring⁶ were met – 26 days for recruiting appropriate candidates (the EOP target is 42 days) and 24 days for hiring (the EOP target is 28 days). These have consistently been among the strengths of the program (1.1.2.2). The recruitment team continued to innovate in order to bring on Fellows in the fastest and most efficient manner. For example, the team reached out to candidates and scheduled interviews within 24 hours after hearing from the USAID hiring team on their final selection. The team also accommodated the hiring team by scheduling interviews in locations that were most convenient to them, namely at CP3 and GHPOD, while providing the necessary equipment in order to conduct video interviews.

PY4 Fellow Highlight: Joan Mayer
*Advisor for Program Integration for the Iringa Initiative and Evaluation in Tanzania
USAID/Tanzania*

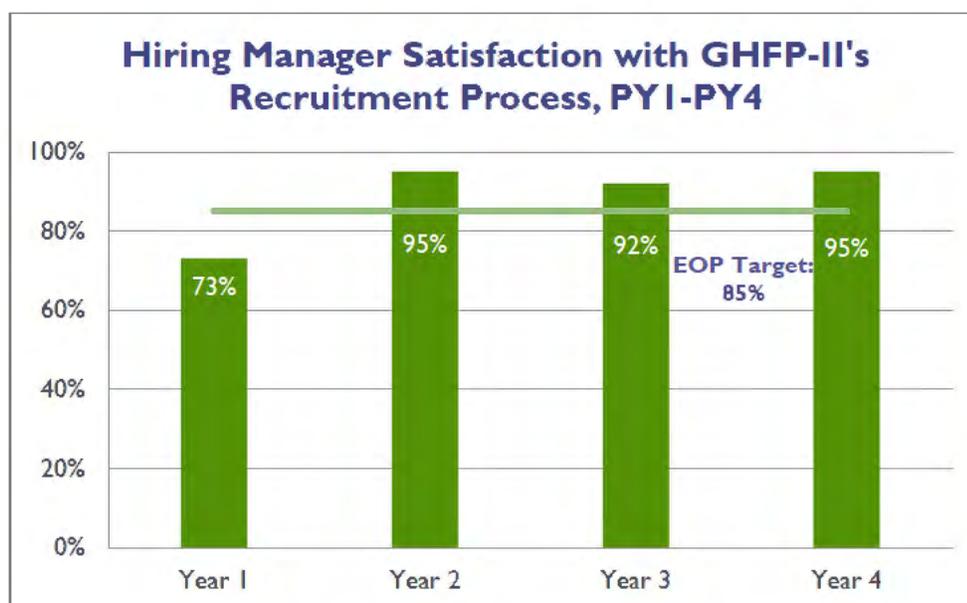
Joan has worked to strengthen relationships between implementing partners and the government, promoting smarter integration, better coordination efforts, collective impact, and gradually building the government's coordination capacity. Her work in Iringa and Njombe regions have guided USAID programming there to unprecedented results, including the development of the Iringa Regional Strategic Plan on HIV/AIDS.

The numbers of days for recruiting typically increases by level, with the fewest days for level I and the most for levels III and IV. For PY4, however, the least number of days was for level IV (12 days), primarily because it included a uniquely skilled senior technical advisor (USSTA) hire who was already known to the hiring manager, followed by level I (16 days). The number of days for recruiting was more typical by location, with overseas recruitments taking longer. Charts in Annex E show disaggregation by location and level of position.

In PY4, 95 percent of hiring managers responding to a survey indicated that they were satisfied or very satisfied with the GHFP-II recruitment process, from when they first contacted GHFP-II about the position through the time the candidate(s) signed the offer letter. Since the second programming year, this level of satisfaction has consistently stayed between 92 and 95 percent – well above the EOP target of 85 percent (1.1.2.3).

⁶ GHFP-II defines the number of days for hiring as the number of days from the time the hiring manager communicates the selection to the time that the selected candidate signs the letter of offer. Processes that take place during this timeframe include reference checking, background investigation, salary negotiation and preparation of the offer letter and human resources hiring paperwork.

Indicator 1.1.2.3 – Hiring Manager Satisfaction, PY1-PY4



With such a strong satisfaction rating, there was little to differentiate results by level and location. The one person who indicated neutral rather than satisfied or very satisfied was level II and based in DC. Details are available in Annex E.

An important part of the recruitment process is the experience for USAID hiring managers, and their feedback is regularly solicited and taken into consideration for improvements. Suggestions provided in the PY4 survey included:

- Conduct more frequent check-ins during the recruitment process.
- Improve vetting and remove ineligible applicants from the process before the interview phase if they are ineligible (such as dual nationality).
- Have a bigger discussion with USAID staff about GHFP's overall purpose and USAID staff expectations of GHFP and Fellows.

GHFP-II's goal is to continue to be as responsive as possible and to maintain the strong relationships and trust that the program has built over the years. This is best accomplished by having an in depth conversation during the profiling meeting to establish a relationship and expectations. This process allows the GHFP-II team to provide superior and customized service, recognizing that each hiring manager's needs are unique. Frequent updates continue to be part of the GHFP-II approach, and the team aims for exceptional customer service by anticipating needs, including potential issues, and addressing them immediately.

The recruitment team has been working more with the participant support and performance and career development teams to include them earlier in the recruitment process. By doing this, the program has been able to relay expectations more quickly and accurately directly to candidates before they start with the program. This includes a FAQ that covers the most common questions received from applicants, so that they get a much better understanding of the program.

The survey of hiring managers also asked about additional aspects of the recruitment process. Respondents were most satisfied with GHFP-II's understanding of requirements and responsiveness. They were less satisfied with the quality of candidates, but this area was still above the EOP target.

Recruiting Satisfaction	% Satisfied or very satisfied			
	PY1	PY2	PY3	PY4
GHFP-II understanding of requirements	64%	90%	93%	95%
GHFP-II responsiveness	73%	100%	92%	90%
Quality of candidates	64%	90%	92%	85%
Overall	73%	95%	92%	95%
Respondents	11	20	30	20

FELLOWS' EXPERIENCE IN THE PROGRAM

SR 1.1.3 USAID'S TECHNICAL AND WORKFORCE NEEDS ADDRESSED

Indicator	Year 1	Year 2	Year 3	Year 4	Cumulative	Target
1.1.3.1: Percent of Fellows who describe direct services provided by GHFP-II as good/excellent ⁷	94%	95%	90%	97% ⁸	n/a	Y1: 85% Y2: 88% EOP: 95%
1.1.3.2a: Total number of Fellows employed by PHI annually and cumulatively ⁹	149	162	158	137	393	Y1: 115 EOP: 270
1.1.3.2b: GHCorps level one Fellows		6	6 ¹⁰	10	22	
1.1.3.2c: TOTAL employed Fellows	149	168	164	157	287	
1.1.3.3.a Percent of Fellows : invited for extension	96%	112% ¹¹	97%	100%	n/a	EOP: 90%
1.1.3.3.b Percent of Fellows : accepting an extension of their Fellowships	93%	100%	94%	100%	n/a	EOP: 90%

⁷ Please see Annex F for information about PY3 surveys.

⁸ The Fellow survey in PY4 included 95 respondents (of 136) – a 70 percent response rate.

⁹ Data for 1.1.3.2a was updated in PY4 for two years – PY2 and PY3. Improved data was based on IMARS reporting tools that were not previously available. Overall, PHI has employed 393 Fellows in GHFP-II, from PY1-PY4. Of those, 135 started between Oct. 1, 2011 and Sept. 30, 2015 (under GHFP-II) and 258 started prior to Oct. 1, 2011 (GHFP-I).

¹⁰ GHCorps' 10 Fellows for PY4 also were supported partly in PY3, which would bring the total to 16. However, these Fellows will primarily be counted in the PY4 report. If also included in PY3, it would bring the total number of Fellows for the year to 168 and the cumulative for both PHI and GHCorps to 239.

¹¹ Thirty-four Fellows were eligible for an extension, however 38 were invited for the extension (four Fellows invited for 5th year extension), and all 38 Fellows accepted.

PY4 Fellow Satisfaction: 97 percent

Ninety-seven percent of Fellows responding to a survey described direct services provided by GHFP-II as good or excellent (1.1.3.1), which

exceeded the EOP target of 95 percent and was the highest rating since the program started. Fellow satisfaction was similar regardless of location of position. Of the three neutrals, two were overseas and one was in DC. Disaggregation details are in Annex E.

Direct services include facility management, IT support, travel coordination, operational support, and professional development and performance management activities. GHFP-II staff from different teams met regularly to coordinate support, identify areas for program improvement, and resolve issues.

To contribute to GHFP-II staff's understanding of Fellow concerns, participants are asked every year about specific aspects of services. Feedback improved in PY4 in two of four areas – operational support and work planning/performance. Lower ratings in two areas were expected – travel support and career development.

Fellow Feedback about Satisfaction with Direct Services, PY4

- “I have been extremely satisfied with the support and services provided by PHI and GHFP II. I consider myself very fortunate to work for such a professional, thoughtful, and innovative organization and project.”
- “I am always amazed with the patience and depth of support on the above described services provided by GHFP-II staff. I want to say thank you so much and please keep it up – as many new to the system need your unique support.”
- “I wish I could stay as a GHFP Fellow longer in my Global Health career with USAID! The benefits (health, retirement, etc.), support (travel, admin, etc.) enticed me to accept the offer when I received it, and the Fellowship has provided the opportunity that I have needed to learn how USAID works.”
- “I feel so lucky to be a GHFP Fellow. I would not have joined the agency under any other hiring mechanism. I cannot express my gratitude for their professionalism and courtesy - it is unparalleled.”

SUPPLEMENTARY FELLOW FEEDBACK, PY1-PY4

Fellow satisfaction	% satisfied or very satisfied			
	PY1	PY2	PY3	PY4
Travel support services	84%	91%	93%	80%
Operational support	80%	88%	91%	96%
Work planning/performance	60%	65%	62%	73%
Career development	50%	61%	62%	54%
Respondents:	89 (90 for career development)	115 (116 for work planning)	89 (88 for travel support)	94 (95 for work planning/performance planning support)

For travel support, GHFP-II contracted a new travel management agency, FROSCH, in November 2014. As with any new supplier, it has taken time for Fellows and the travel agency to become accustomed to the specific and sometimes complicated GHFP-II travel policy that ensures compliance with various USG and Cooperative Agreement rules and regulations. GHFP-II staff conducted a survey in August and started working with the provider on an action plan to improve customer service.

Regarding the decline in ratings for career development, there were major staff transitions on the PCD team in PY4, which resulted in less focus on career development than in years past. The PCD team is now fully staffed and trained and is dedicating extra time to ensuring Fellows have opportunities to access career development resources and support.

Seventy-three percent (69 Fellows) indicated that they had worked from the GHFP-II offices in Washington, DC or used the space for meetings or hoteling. Of those, 76 percent were satisfied or very satisfied with IT support, and 96 percent were satisfied or very satisfied with administrative support. The main suggestions in the survey were related to improving printing services for hoteling computers and periodic delayed responses from IT staff.

For printing, the offices have a dedicated desktop printer per workstation and a dedicated large copier/printer in the work area. GHFP-II has tried to respond to requests immediately, but sometimes there have been other issues IT staff have had to prioritize prior to assisting participants.

Fellow Feedback on Services Provided by GHFP-II Teams at 1201 Penn, PY4

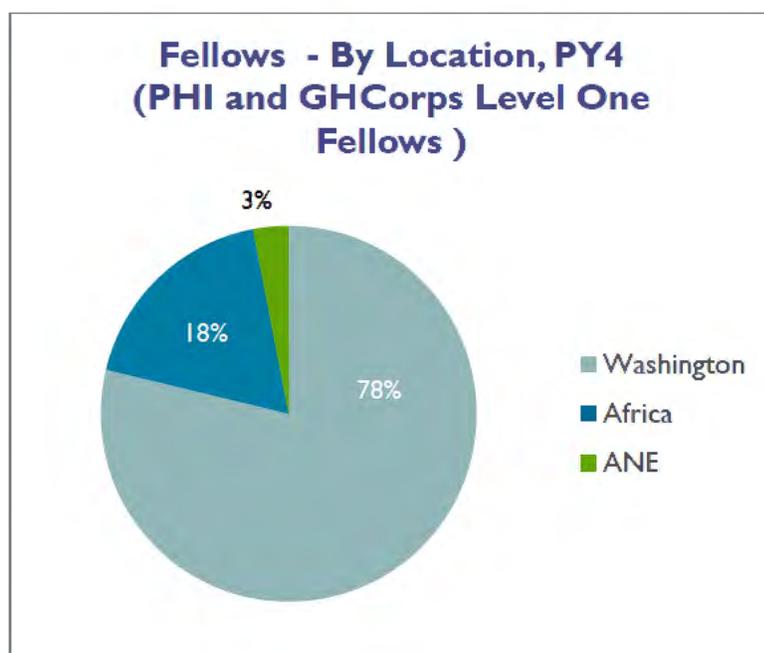
- “The Admin staff is always extremely responsive. And special thanks to the IT team for helping set up an early morning video conference in September. We appreciate all that you do!”
- “A cordial and friendly atmosphere prevailed and was glad to have been working at the 1201 Pennsylvania Avenue.”
- “Amazing, highly responsive, and very personable staff”
- “Very professional, readily available and friendly. I know all their names. Thank you.”
- “The location of the GHFP offices at 1201 Penn Ave is ideal for access to colleagues in the RRB, and the meeting space is extremely valuable. The support provided at this location has been exemplary and has allowed me to do my job in an efficient and productive manner.”

EMPLOYED FELLOWS

GHFP-II supported 147 Fellows in PY4, which included 137 participants from Public Health Institute (PHI) and 10 from GHCorps. Most were based in DC, and the overseas placements were in Africa and ANE. Cumulatively, there have been 415 participants in GHFP-II, which exceeds the EOP target of 270. This includes 393 from PHI and 22 from GHCorps. For PHI participants, 258 started in GHFP-I and continued to be supported under GHFP-II, while 135 started under GHFP-II.

In PY4, 78 percent of Fellows were based in DC, 18 percent in Africa and 3 percent in the ANE region. This is shown in the chart below.

Indicator 1.1.3.2 – Fellows employed in PY4, by location



A majority of PHI participants¹² in all years of the program – including PY4 – have been in levels II and III. PY4 was very similar to PY3, with a majority in level II. There continues to be a small number in level IV, which requires additional approval from the AOR and is an exception for very senior level Fellows. Details are below.

PHI FELLOWS EMPLOYED, BY LEVEL, PY1-PY4

Indicator 1.1.3.2: Level	Year 1	Year 2	Year 3	Year 4
I	11 (7%)	18 (12%)	19 (13%)	17 (12%)
II	51 (34%)	60 (38%)	68 (45%)	57 (42%)
III	69 (46%)	68 (44%)	55 (36%)	54 (39%)
IV	15 (10%)	9 (6%)	10 (7%)	8 (6%)
USSTA	3 (2%)	1 (1%)	0	1 (1%)
TOTAL:	149	156	152	137

EXTENSIONS

In PY4, 100 percent of 31 eligible Fellows were invited to extend their Fellowship, and all accepted the offer (1.1.3.3). This exceeded the annual and end-of-project (EOP) target of 90 percent. The high number of invitees is indicative of the level of satisfaction by USAID staff, while the number accepting shows the strength of the Fellows' experiences that they want to continue. As seen below, this was applicable both to overseas and domestic Fellows.

¹² GHCorps was not included in this disaggregation because they do not use the same system of levels.

I.1.3.3: Type of Assignment	Domestic	Overseas	Total
Eligible for Extension	27	4	31
Invited for Extension	27	4	31
Accepted Extension	27	4	31

SR 1.1.4 INCREASED AVAILABILITY OF EXPERIENCED PROFESSIONALS TO SUSTAIN GLOBAL HEALTH INITIATIVES

Indicator	Year 1	Year 2	Year 3	Year 4	Target
1.1.4.1: Percent of Fellows who rate their overall professional Fellowship experience as contributing 'positively' or 'very positively' to their future careers (PHI)	N/A	91%	100%	100% ¹³	Years 2-5: 80% EOP: 90%
1.1.4.2: Percent of Fellows who transition to another position or pursue further education in global health (PHI & GHCorps)	93%	97%	88%	91%	EOP: 80%

In the Fellow's survey, 100 percent of PHI Fellows who completed their work in PY4 rated the Fellowship as contributing positively or very positively to their future careers (1.1.4.1). This high rating came from all 18 who answered the question. Since the start of GHFP-II, ratings have consistently been above the EOP target of 80 percent.

Also telling is the 91 percent of Fellows (PHI and GHCorps) who have continued their careers or education in global health (1.1.4.2). This included 94 percent for PHI (36 Fellows) and 78 percent for GHCorps (seven Fellows). Results were higher than in PY4 and well over the EOP target, as they have been since the start of the program.

Contribution of Fellowship to Future Career, PY4

"My Fellowship experience was outstanding and would highly, highly recommend it for those looking to learn the USAID/USG world as part of their career goals."

In PY4, 56 percent of PHI's Fellows (20 of 36) continued work for USAID, while others took positions with other USG agencies, international NGOs and foundations, or were actively job searching in the GH field. One Fellow left the program to pursue personal international travel, one started her own small business, and a third left to pursue a PhD in public health. The remaining alumni are job searching or consulting in global health.

¹³ For 1.1.4.1, 18 of 76 respondents in the fellow survey indicated that they completed their Fellowship between Oct. 1, 2014 and Sept. 30, 2015 and then were asked the question rating the contribution to their future careers. In past years, this data has sometimes come from Final Activity Reports.

Examples of next steps for PHI Fellows included:

- USAID: 20
- Peace Corps: 2
- UN Foundation: 1
- PATH: 1
- Centers for Disease Control (CDC): 1
- Women's and Children's Health at Project HOPE: 1
- Global Alliance for Children: 1
- Mercy Corps: 1
- Pathfinder International: 1

For GHCorps' seven Fellows in PY4 that the organization considers to be continuing, alumni were going to the Population Media Center, the HEAL Initiative, Last Mile Health (Uganda) and the Ministry of Health (Zambia). Others were returning to school or working as independent consultants.

For PHI and GHCorps Fellows who continued in GH in PY4, 12 percent were from ethnically disadvantaged groups and 41 percent were non-white. Disaggregation details are available in Annex E.

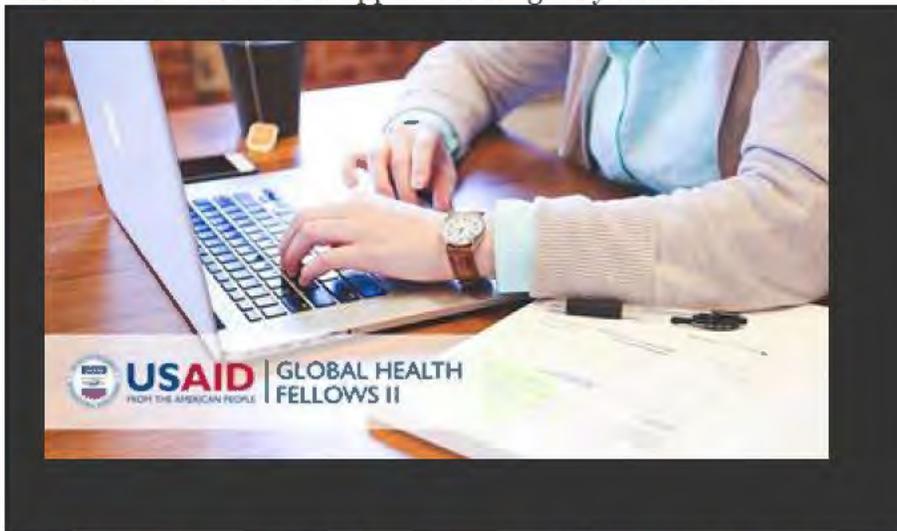
INTERN PROGRAM

Intermediate Result (IR) 1.2: GHFP-II Internships implemented

SR 1.2.1 AWARENESS OF GHFP-II INTERNSHIP OPPORTUNITIES INCREASED THROUGH OUTREACH INITIATIVES

Indicator	Year 1	Year 2	Year 3	Year 4	Cumulative	Target
1.2.1.1.a Total number of outreach events promoting awareness of GHFP-II ¹⁴	61	62	89	56	268	Y1: 40 EOP: 200
1.2.1.1.b Total number of people reached via outreach events	5,999	5,523	8,638	5,480	25,640	Y1: 4,000 EOP: 25,000

There were 56 PHI outreach events promoting awareness of GHFP-II in PY4, and all events included information about the Internship program. Depending on the audience, type of event and time of year, the focus varied. For example, there was more emphasis on Internship detail in the fall/winter application period, including sample scopes of work, bios of former Interns and discussion of the kinds of applicants sought by GHFP-II.



In addition to providing information about the Internships, the program had a live audience of more than 230 individuals who received resume advice from our GHFP-II recruitment and career development staff. More than 1,700 individuals accessed the recording on YouTube. The focus of the discussion featured questions from Drexel graduate student, Tami Hill, and from the audience. Staff addressed resume and career questions, including:

¹⁴ Indicator 1.2.1.1 is identical to indicator 1.1.1.1, as outreach activities for Fellows and interns are shared. This is described in more detail in section 3.1.

- Does my resume reflect skills necessary for a position in GH?
- Do I highlight my qualifications effectively?
- Which portions of my resume align with the expectations GHFP II and/or other GH employers? Which portions do not?
- How long should my resume be as a graduate student or as someone beginning my career?
- How can you use domestic public health and study abroad experience to build a GH resume?

Intermediate Result (IR) 1.2: GHFP-II Internships implemented

SR 1.2.2 INTERNS RECRUITED, AND SUPPORTED

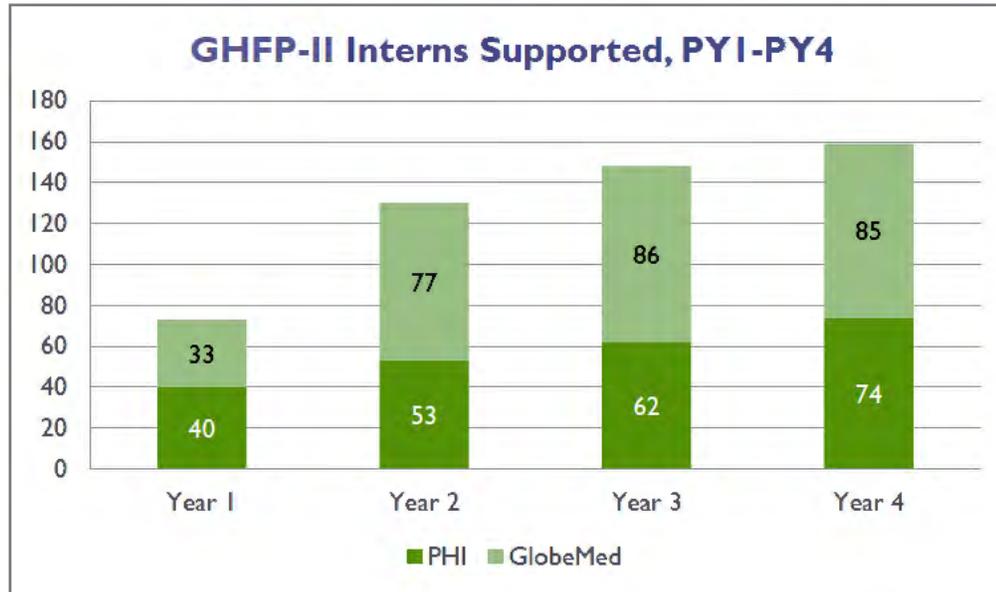
Indicator	Year 1	Year 2	Year 3	Year 4	Cumulative	Target
1.2.2.1a Total number of Interns placed annually and cumulatively – PHI & GlobeMed	63	111	137	134	445	Y1: 50 EOP: 275
1.2.2.1b Total number of Interns supported annually and cumulatively	73	130	148	159	455	Y1: 50 EOP: 275
1.2.2.2 Percent of Interns who describe the overall quality of the Internship experience as ‘good’ or ‘excellent’ ¹⁵	100% (PHI)	91% (PHI & GlobeMed)	87% (PHI & GlobeMed)	87% (PHI & GlobeMed)		EOP: 85%
1.2.2.3 Percent of Interns who pursue further education or obtain work in international public health-related areas (PHI)	68% PHI; 96% GlobeMed	74% PHI; 94% GlobeMed	83% PHI; 95% GlobeMed	85% PHI; 92% GlobeMed ¹⁶		EOP: 80%

¹⁵ The Internship survey was ongoing, sent shortly before completion of their Internship. For PY4, there was a response rate of 83 percent, with 38 of 46 Interns participating.

¹⁶ The response rate for GlobeMed Interns for 1.2.2.3 was 92 percent in PY4 (70 of 76 respondents). Data was also added for previous years.

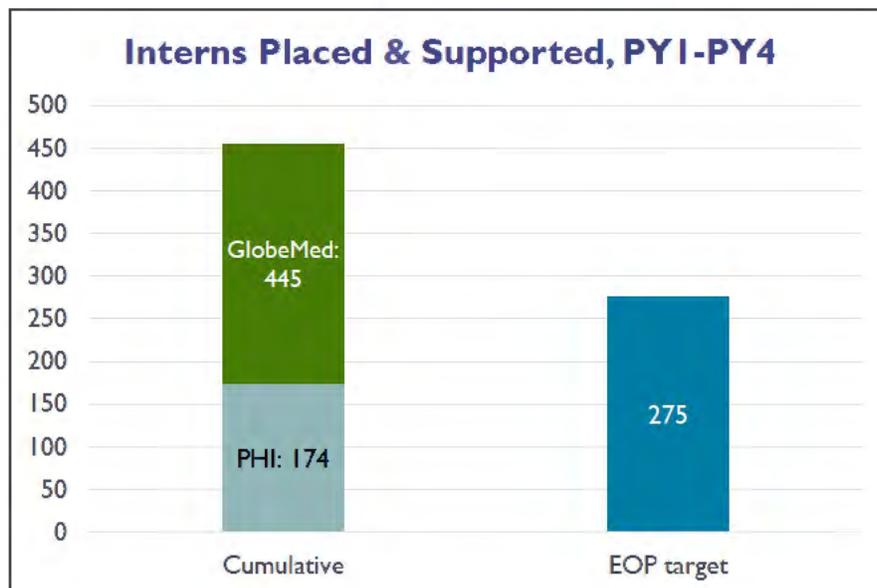
For PY4, GHFP-II supported 159 Interns, which included 49 new placements from PHI and 85 from GlobeMed, along with PHI's continuing Interns from PY3. The number of Interns supported has increased each year through PY4. Details for 1.2.2.1 are in Annex E.

Indicator 1.2.2.1 – GHFP-II Interns Supported, PHI & GlobeMed, PY1-PY4



Cumulatively, GHFP-II has placed and supported 445 PHI and GlobeMed Interns, which is well above the EOP target of 275. Disaggregation details are in Annex E.

Indicator 1.2.2.1 – GHFP-II Interns Cumulative Total and Target, PHI & GlobeMed, PY1-PY4



Highlights for the 74 PHI Interns supported in PY4 include:

- **Type:** Sixty-four percent were summer Interns and 36 percent were on-demand Interns. Increased interest in the program by USAID hiring managers has resulted in more requests for Interns outside of the summer cohort.
- **Location:** Forty-four percent of PY4 Interns were based in Washington, DC, 21 percent in Africa, 19 percent in Southeast Asia and 15 percent in Latin America. All but four of the 89 international placements were with GloheMed, and all U.S. Internships were with PHI.

The four GHFP-II Interns who were placed overseas were with the USAID/South Africa mission. They supported projects in a wide range of technical areas, including social and behavior change communication, monitoring and evaluation, and HIV/AIDS prevention. Due to visa requirements, the Internships were limited to 12 weeks. Feedback from both the mission and Interns was that the Internship was too short. GHFP-II will continue to explore options for securing visas that would allow Interns to stay in country longer.

- **Placements:** Eighty-one percent of Interns were placed in one of three GH offices – the Office of HIV/AIDS, Office of Population and Reproductive Health, and the Office of Health, Infectious Diseases and Nutrition. Details on placements are below.

PY4 PHI Intern Placements	
GH/OHA	34
GH/PRH	16
GH/HIDN	10
USAID/South Africa	4
AFR/SD	2
GH/P3	2
zDNU-GH/AA	2
CUGH	2
GH/OHS	1
DCHA	1
Total	74

- **Extensions:** To meet the need for increased technical support at USAID, GHFP-II Interns became eligible for employment beyond six months, not to exceed one year. In total, nine Interns from PY4 were selected to stay with the program longer than six months.
- **Intern Next Steps:** Several GHFP-II Interns transitioned to full-time roles within the GH Bureau upon completion of their Internship. Two former Interns received two-year Fellowship appointments and one accepted a program analyst position. Eighty-five percent of PHI Interns and 92 percent of GloheMed Interns received employment in GH or returned to a graduate program related to GH.

- **CUGH Collaboration:** GHFP-II established an Internship program with CUGH, and two Interns were placed at the CUGH office as global health engagement Interns. They worked to identify MSIs that have and do not have GH programs, and contribute to strengthening or developing such programs.
- **Diversity:** GHFP-II has continually aimed to increase the number of underrepresented groups in its Internship program. In PY4, 55 percent of PHI and GlobeMed Interns would be considered ethnic minorities and 21 percent ethnically underrepresented.¹⁷ In addition, GHFP-II seconded two Interns to CUGH to support their efforts to engage MSIs in GH. Details are in Annex E.
- **Education:** Nearly all PHI Interns were pursuing their master’s degree or already had completed master’s degrees, while GlobeMed Interns were undergraduates. Details are in Annex E.

PY4 Intern Satisfaction with the Internship Experience

- “I am so grateful for this experience and the opportunity to be a part of the summer 2015 cohort of Global Health Fellows. Throughout the Internship experience, I was very appreciative of all of the professional development opportunities afforded to us and truly felt that staff members were invested in our (the cohort’s) interests, goals, and development as future global health professionals.”
- “The Internship was a great experience. It was very structured and definitely enjoyed working in this field. Finally, I will add that this being a paid Internship is a great benefit for any Intern, since it values their time and effort during the experience.”
- “Thank you for the opportunity to work with such a diverse and amazing group of professionals. The support and lessons learned were unmatched. I am sincerely grateful for the experience and for the chance to show you, and myself, my true capabilities. I wish you all well in this program, and will continue to recommend it to my fellow classmates and friends.”
- “I spent most of my Internship teleworking from the Annex and had the pleasure of working alongside our GHFP-II staff most days. They are a very welcoming and professional group of individuals that I hope to remain in contact with in the future. They willingly went above and beyond to ensure that all questions were answered in a timely fashion, which was very appreciated considering our fast-paced working environment. I wanted to make sure to highlight their support and quality as individuals as well as a unit.”
- “My love for the field was increased as a result of my Internship.”

¹⁷ For the purposes of this report, as determined in PY1, ethnic minorities refers to non-White ethnicities, while the ethnically diverse, underrepresented category includes Black, Pacific Islander, American Indian, and two or more races.

There was also very positive feedback about the Internship program from Interns in PY4. Overall, 87 percent of PHI and GlobeMed Interns indicated that they were satisfied or very satisfied with their Internship.¹⁸ This exceeded the EOP target of 85 percent (1.2.2.2).

Specifically for PHI Interns, 83 percent were satisfied or very satisfied, 11 percent were neutral and six percent indicated that they were not satisfied. Summer Interns were more satisfied with their Internship than on-demand Interns (89 percent compared to 67 percent). Feedback from exiting on-demand Interns showed that they were concerned that they might not have had the same opportunities for professional development and networking that the summer cohort had. GHFP-II does provide on-demand Interns with individual performance and career development support. No PHI overseas Interns answered the survey, so location was not a factor in results (the South Africa Interns were scheduled to complete their Internships in PY5, so were not included). GlobeMed Interns reported a similar satisfaction rating of 89 percent.

In the end-of-Internship survey, PHI interns noted the highest satisfaction with administrative support and orientation, but also gave strong ratings of satisfied or very satisfied to other departments. This included:

- **Support from GHFP-II around administrative issues:** 86%
- **Orientation:** 86%
- **Relationship with on-site manager (OSM):** 82%
- **Performance and career development support:** 68%
- **Scheduled Internship activities:** 68%

OSMs were described as mentors who were energetic, engaged, supportive, open, with high expectations, reliable and interesting. Interns' main concern was that OSM sometimes have limited availability, particularly when traveling.

For Interns who worked at 1201 Pennsylvania Ave. (53 percent of respondents), satisfaction with office services included:

- **IT support (e.g. computers, phones):** 85%
- **Facilities support (e.g. workspaces, shared spaces):** 70%

Examples of Intern suggestions provided in the survey included:

- Provide more career development opportunities and panel discussions with USAID staff.
- Increase logistical support for summer Interns (housing, transportation).
- Find on-site managers who will not be traveling and can more consistently provide time for the Intern.
- Check that the on-site manager is clear on the intern's scope of work.
- Schedule Internship activities during early mornings to assist those who work at Crystal City, or provide conference line.
- Repeat early summer Internship activities for those who join later.

¹⁸ For 1.2.2.2, 38 of 46 completing PHI Interns did the survey, for a response rate of 83 percent. Survey details are in Annex F. GlobeMed reported 71 responses, with a response rate of 84 percent, for their similar survey of GlobeMed Interns.

Staff worked throughout the recruitment and onboarding processes to identify OSMs who would be traveling during parts of the Internship and helped to identify clear secondary points of contact (POCs) for their Interns. However, Intern concerns about wanting more time with their OSM continued in PY4, partly because limited space at CP3 resulted in Interns spending more time working from GHFP-II's offices.

PY4 Intern Lessons Learned

- “There are many lessons I have taken away from the Internship, including improved time management, critical thinking and analysis skills, and improved reporting and writing skills for various audiences, etc. I also learned about the importance of collaboration within the team and throughout the division; I will utilize all these schools as I complete my Masters studies and think about an ideal working environment when I begin searching for employment.”
- “I learned a lot about my existing skills and qualifications over the course of the Internship. I think this self-awareness will help me in moving forward with my studies but also in my future work endeavors. I also learned a lot about the field of family planning and had the chance to meet a lot of the major players in global advocacy for family planning, which was a fantastic networking experience for me that I hope to draw on when I am looking for jobs in a few months.”
- “The most valuable experience I had during my Internship was the opportunity to learn directly from people working within the Agency. To learn about International development and global public health from experts at the largest and most influential donor was an incredible experience.”

GHFP-II advised Interns and OSMs on best practices for setting expectations and managing performance during their respective orientations. GHFP-II continued to utilize an online Google community to facilitate information sharing among Interns and staff virtually. The community was used to help Interns prepare for their work at USAID and living in Washington, and staff and Interns used the group to network and share resources throughout summer.

The Internship program continued to successfully achieve its goal of providing a rewarding and meaningful entry to the field of GH. Overall, 89 percent of PHI and

Interns & Global Health

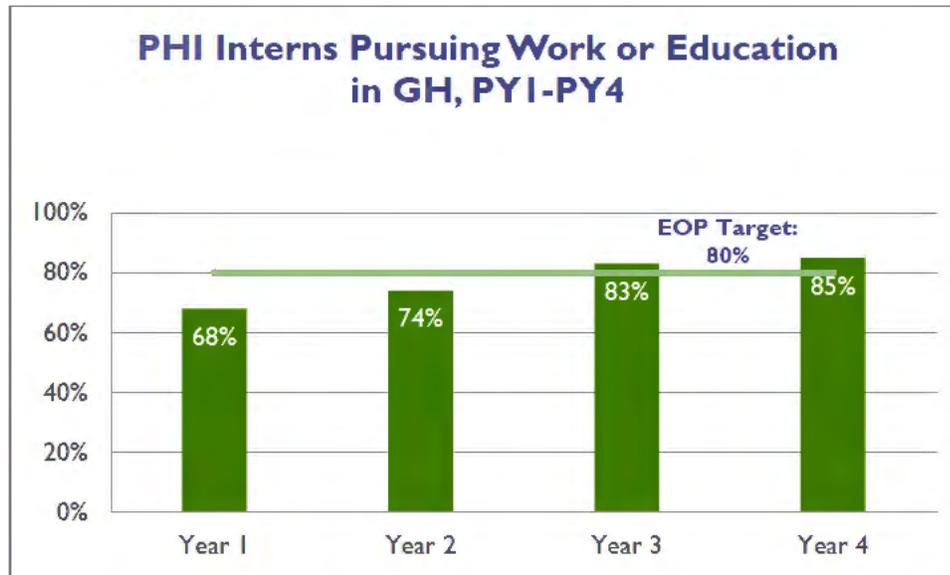
- * Intern Satisfaction: 87 percent
- * Interns likely to continue to work or seek employment in the GH & development field: 89 percent

GlobeMed Interns indicated that they were pursuing further education or have obtained work in international public health-related areas. This included 85 percent for PHI and 92 percent for GlobeMed¹⁹ – all well above the EOP target of 80 percent (1.2.2.3).

As seen in the chart below, the rate that PHI Interns have intended to pursue GH careers has consistently been above the target (as has also been the case for GlobeMed Interns).

¹⁹ The indicator for 1.2.2.3 included positive plans for global health careers from 67/73 GlobeMed Interns and 41/48 PHI Interns.

Indicator 1.2.2.3 – PHI Interns Pursuing GH, PY1-PY4



In addition to PHI tracking whether interns were continuing in the field, the online internship completion survey also asked about the likelihood that they would continue to work or seek employment opportunities in the GH and development field. For PY4, 78 percent indicated very likely, 19 percent indicated somewhat likely and only three percent indicated not likely.

Additional highlights for the 85 percent of PHI interns²⁰ continuing in the field included:

- **Female interns** continuing: 85 percent
- **Male interns** continuing: 86 percent
- For those continuing, 66 percent have **obtained work** in the field and 34 percent are **continuing their education**

Examples of internship activities are below and additional details about gender and organization are available in Annex E.

²⁰ Disaggregation for 1.2.2.3 for GlobeMed was not available for PY4.

PY4 PHI Intern Experiences – Examples

David Colon-Cabrera

Demographic and Health Surveys (DHS) Intern, Office of Population and Reproductive Health

David worked with the DHS management team to undertake a literature review and collect information to identify key quality of care indicators, especially in the area of family planning (FP). His research involved conducting key informant interviews with experts in FP and quality of care and reviewing an existing survey platform to identify quality of care data captured. At the end of his internship, he produced a synthesis paper detailing common definitions and key components of quality of care, measurement approaches and recommendations.

Kayla Stankevitz

Monitoring and Evaluation Intern, Office of HIV/AIDS

Kayla led the development of the analytics portion of a mobile application for use by countries to track progress in achieving goals related to community level HIV/AIDS programming. She served as liaison between software developers and research team to collect data needed for analytics and created an implementation guide for the application. The contract to develop the device was signed the last week of her internship.

DIVERSITY AND ADDITIONAL TYPES OF PARTICIPANTS

KEY RESULT AREA 2:

Diversity increased in the cadre of Global Health professionals

Intermediate Result (IR) 2.1: Talent from diverse backgrounds identified, recruited and supported

DIVERSITY

SR 2.1.1 OUTREACH AND AWARENESS OF GHFP-II OPPORTUNITIES FOR UNDERREPRESENTED GROUPS INTENSIFIED

Outreach to recruit talent from diverse backgrounds (Subset of 1.1.1.1)

Indicator	Year 1	Year 2	Year 3 ²¹	Year 4	Cumulative	Target
2.1.1.1.a Number of outreach events conducted to recruit talent from diverse backgrounds (PHI)	26	37	50	31	144	Annual: 15 EOP: 100
2.1.1.1.b Number of people reached through outreach events conducted to recruit talent from diverse backgrounds (PHI)	1,431	1,620	4,270	2,854	10,175	Annual: 1,000 EOP: 10,000

GHFP-II has prioritized the importance of increasing diversity in the GH workforce since the start of the program. More than half of PY4 outreach events were specifically aimed at recruiting talent from diverse backgrounds. Similarly, more than half of the people reached through outreach activities were from these events.

By the midpoint of PY4, the program was ahead of its EOP targets and began to shift its focus to communications activities and virtual engagement with key diversity stakeholders.

PY4 Fellow Highlight: Temi Ifafore *GH/PRH Health Workforce Technical Advisor*

Temi's expertise in capacity building, program planning, cross-cultural communication and program evaluation helps USAID address the quality and quantity of healthcare workers and policy makers in sub-Saharan Africa. Temi was instrumental in designing project evaluations for the Malawi Mission, collaborating with numerous activity managers and staff to determine the most efficient use of resources at the project's end.

²¹ Outreach data for PY3 (2.1.1.1) includes GlobeMed's two outreach events, which reached 35 people.

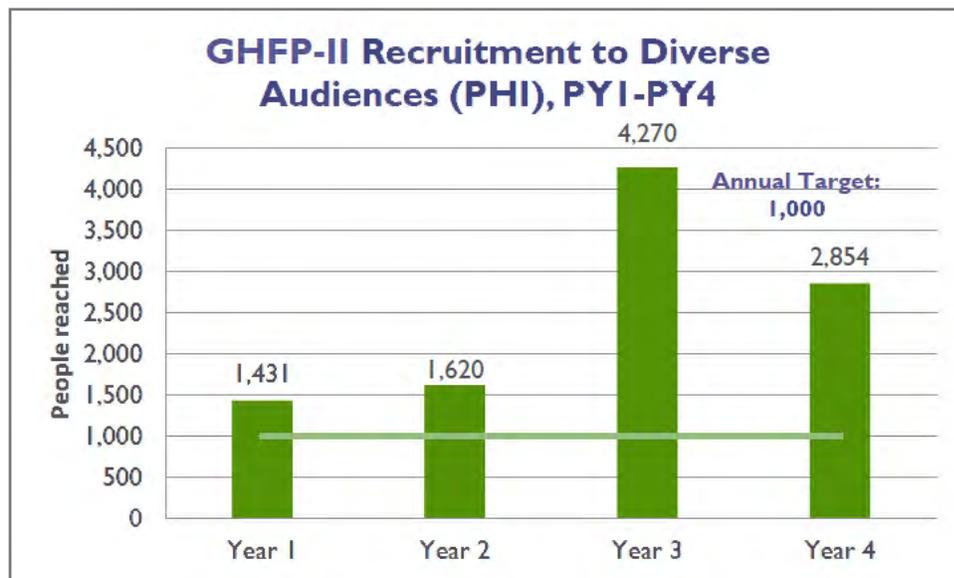
PHI staff initiated or participated in 31 events (as part of the 47 total events for this period) aimed at reaching diverse audiences, including students, faculty and university administrators. Staff visited Historically Black Colleges and Universities (HBCUs), Hispanic Serving Institutions (HSIs), Minority Serving Institutions (MSIs) and other institutions with at least 25 percent minority representation in DC and eight states – Florida, California, Texas, Louisiana, Virginia, Indiana, Illinois and North Carolina.

The program had a presence at a variety of events focusing on diverse populations (see list below). The program also advertised in the HBCU Career Guide (distributed to more than 120 HBCUs), as well as the Tribal College Journal of American Indian Higher Education (distributed to 38 institutions). A selection of events attended by the program:

- Annual Biomedical Research Conference for Minority Students, Exhibitor
- Bender Virtual Career Fair, Exhibitor
- Duke University Diversity Symposium, Exhibitor & Presentation
- Gallaudet University, Exhibitor
- Hispanic Association of Colleges and Universities Conference, Exhibitor
- National Black Graduate Student Conference, Attendance
- National HBCU Week Conference, Exhibitor
- North Carolina Central University, Information Session
- Notre Dame Diversity Career Fair and Diversity Reception, Exhibitor
- University of North Carolina – Pembroke, Information Session

Each year of the program has exceeded the annual target of 1,000 people from diverse backgrounds reached.

Indicator 2.1.1.1 – Recruiting diverse talent in PY1-PY4



GHFP-II also hosted four webinars (60–90 minutes each) that covered a range of topics specific to the GH career experience. These were marketed heavily to diverse audiences through the program’s listserv and through targeted advertising with the HBCU Career Guide and a variety of social media channels. In addition, personal on-campus contacts (faculty, staff and students) at HBCUs, HSI, MSIs and other institutions were invited to attend. One-on-one informational interviews were conducted throughout the year with many diverse candidates. These 25-30 minute meetings provided career and resume advice, from an employer’s perspective, customized to the individual’s needs.

GlobeMed worked with GHFP-II to increase its outreach to MSIs, offering undergraduates the means of gaining developing country experience through their university-based and student-led chapters. These chapters represent not only a short-term, on the ground health work experience in the developing world, but also foster a long-term relationship between students and their community-based organization through virtual assistance for the duration of the year. Through GlobeMed’s continued outreach at MSIs, three new chapters were established at the following institutions:

School	Location	Type
Morehouse College	GA	HBCU
University of Texas – San Antonio	TX	HSI
Wilbur Wright City College	IL	HSI

In addition, GloheMed conducted 11 outreach events in PY4, including five of which were targeted at diverse audiences.²²

SR 2.1.2 DIVERSITY SUSTAINED AMONG GHFP-II PARTICIPANTS

Indicator	Year 1	Year 2	Year 3	Year 4	Target	Disaggregation
2.1.2.1 Percent of interns and Fellows from backgrounds underrepresented (ethnic minorities, people with disabilities, low SES) in the GH workforce increases						Age; Sex; Ethnic background; Disabled; SES; Level (Intern/Fellow)
Ethnic minorities	28%	37%	48%	47%	EOP: 50%	
Ethnic underrepresented		23%	33%	19% ²³		
People with disabilities		1%	0%	0%		
Low SES		57%	55%	66%		

As part of its aim to increase diversity in the global health workforce, GHFP-II set an ambitious target of 50 percent for participation of Interns and Fellows from underrepresented backgrounds. In PY4, an estimated 47 percent of participants in the program were ethnic minorities (non-white), while 19 percent would be considered ethnically underrepresented.

²² In PY4, GlobeMed did not compile data about number of people reached through outreach events. More detail will be included in the PY5 report.

²³ For the purposes of this report, ethnic underrepresentation in 2.1.2.1 includes Black, two or more races, American Indian and Pacific Islander.

None reported disabilities. For PHI and GlobeMed participants, an estimated 66 percent were from low socio-economic backgrounds.²⁴ Disaggregation is available in Annex E. These strong results largely were due to the consistent, focused outreach and recruitment efforts, along with a sophisticated, targeted advertising network. The network is a key factor in ensuring that Fellowship and Internship opportunities are widely known to a diverse audience of qualified professionals and newly-emerging professionals.

Although Hispanics/Latinos continue to be underrepresented as PHI Fellows and Interns, a marked increase has occurred for GlobeMed participants. Hispanic Serving Institutions (HSIs), which serve more than half the country’s undergraduate Latinos, have seen sustained outreach from GlobeMed to increase the program’s Hispanic/Latino participants. In particular, as the number of first generation students increases, it is important for GHFP-II to increase first generation participants to enhance the next generation of GH professionals. First generation students often have skill-sets aligned with those needed for GH success, such as experience working in resource deficient environments, language skills, adaptability to changing contexts, and a high propensity for collaboration.

Indicator	Year 1	Year 2	Year 3	Year 4	Cumulative
2.1.2.2 Number of short term private sector Fellowships supported	8	14	49	37	108

PRIVATE SECTOR (GLOBAL HEALTH CHAMPIONS)

In addition to Fellowships and internships, GHFP-II supports short term, pro-bono corporate volunteers through its key partner, PYXERA Global (previously called CDC Development Solutions). These participants, called Global Health Champions, are middle to senior level staff of private sector companies that typically have interest in developing countries/emerging economies, but limited experience with USAID’s development philosophy and implementation approach. PYXERA Global works with GHFP-II to link these Global Health Champions to USAID’s current health strategies through short-term, skills-based pro bono assignments in local organizations or field offices of U.S.-based international NGOs.

The number of Global Health Champions increased each year until PY3, when there were 49 participants, followed by 37 participants in PY4. The scaling of the program was intentional and corresponded with the increasing interest and comfort of corporate clients working with PYXERA Global and GHFP-II. Cumulatively, there have been 108 participants. In the first year, all eight participants worked for the organization Bhoruka Charitable Trust (BCT) in India. In PY2, the placements were more geographically and topically diverse, with participants tackling challenges in the areas of clean water, improved maternal health and drug discovery in India, Switzerland, Brazil and Bangladesh, and in PY3 they were placed even more broadly in 10 countries, working on a range of issues. In PY4, participants were based in seven countries, working in four technical areas.

²⁴ For PHI participants, this data was self-identified in an anonymous survey, while GlobeMed used a formula that incorporated the level of financial aid received by participants. GlobeMed considers 75 percent or more of tuition coverage as low SES.

The nature of the Global Health Champion program has evolved since original program conception, from one where many individuals participate for short periods of time (less than three weeks) to one where fewer individuals participate, but for longer periods of time (two or more months). A more accurate measure of impact may be the number of person days contributed, which is summarized below. As the program has changed, the EOP target of 200 participants likely is not realistic. A more realistic internal target was determined in PY3 to be about 150 participants.

Examples of Global Health Champions, PY4

Client: IBM | **Organization:** Belen Hospital de Trujillo

Global Health Champions: 3

Three IBM employees worked at a public hospital in Trujillo, Peru for a one-month pro bono assignment with the objective of improving the efficiency of critical operational processes. After performing a thorough assessment, the IBM team identified priority areas of need including reducing invoicing errors, minimizing wait time for patients and improving patient care. Working jointly with the hospital team, the IBM employees developed and conducted a workshop explaining how the hospital can adopt a continuous process improvement methodology based on Lean and Agile management principles.

Client: Medtronic | **Organization:** Grameen Eye Hospital

Global Health Champions: 5

The Grameen Eye Hospital focuses on performing eye examinations and cataract operations in Bangladesh, using a model that charges its patients based on their ability to pay. Five Medtronic employees worked with hospital staff for one month to understand how to combat both physician morale and retention as well as increase the number of surgeries and patient flow. The team suggested new metrics to reflect the actual performance of the hospital, which allowed the hospital to see how they could change their patient flow pathway and free up constraints while increasing the number of patients they served. The team also left recommendations for improving patient surgery acceptance rates and financial sustainability.

2.1.2.2: Private Sector Assignments, disaggregated by number of person days of technical assistance (Proposed Indicator)

Indicator	Year 1	Year 2	Year 3	Year 4	Cumulative	Target
Number of person days of technical assistance provided by short term private sector professionals	176	638	2,287 ²⁵	1,064	4,165	Year Two: 360 EOP: 1,800

²⁵ In PY4, PXYERA updated data for the number of person days for PY3.

FOREIGN SERVICE NATIONALS

Intermediate Result (IR) 2.2: Opportunities for Foreign Service Nationals developed and supported

SR 2.2.1 OPPORTUNITIES FOR FSN EXCHANGES INCREASE²⁶

Indicator	Year 2 ²⁷	Year 3	Year 4	Target
2.2.1.1 Percentage of Foreign Service Nationals (FSNs) who rate their satisfaction with GHFP-II's assistance as 'satisfied' or 'very satisfied' ²⁸	100%	91%	100%	Year Two: 80% EOP: 85%
2.2.1.2 Percentage of Host Supervisors/Onsite Managers, staff in USAID/HR and GH/PDMS who rate their satisfaction with GHFP-II assistance related to Foreign Service Nationals (FSN) as 'satisfied' or 'very satisfied' ²⁹	100%	100%	89%	Year Two: 80% EOP: 85%

Foreign Service National (FSN) placements in Washington, DC are meant to enhance the FSNs' careers, while also providing DC-based staff the benefit of the FSN's experience. GHFP-II supports FSNs with pre-departure and arrival logistical support and serves as a resource for professional development and networking connections during their time in Washington. In PY4, GHFP-II supported 16 FSNs who were hosted by three technical offices in the Bureau for Global Health:

- GH/HIDN – 12
- GH/OHA – 1

FSN Feedback about Overall Satisfaction with GHFP-II Services, PY4

"GHFP was very active from the beginning in terms of logistics and getting me prepared for my trip.... It was so refreshing to have someone waiting to pick me up at the airport. Upon arrival GHFP was at the hotel to welcome me. The following day GHFP was there to make sure I also had all that I needed, bank etc. Throughout my stay they provided constant assistance with always a smile."

"The logistics (lodging, travels, welcome package) were very well organized."

"GHFP-II staff is very professional and highly efficient."

²⁶ Please see Annex F for information about PY4 surveys.

²⁷ There were no FSN exchanges/Fellowships implemented in PY1 or other professional development activities.

²⁸ The original indicator for 2.2.1.1 combined FSNs and OSM results. Instead, GHFP-II surveyed FSNs together, and USAID staff related to FSNs separately, including OSMs. This update should be made in the PMEP. In PY4, the survey was sent to 16 FSNs, and there was a response rate of 63 percent (10 respondents).

²⁹ The original indicator for 2.2.1.2 included only USAID/HR and GH/PDMS. For the purposes of the survey, GHFP-II added OSMs – rather than group them with FSNs as written in the PMEP. This is a change that should be made in the PMEP. In addition, the PMEP text should include "host supervisors" rather than "OSMs."

▪ GH/PRH – 3

FSNs were asked in a survey to rate their satisfaction with GHFP-II’s assistance, and all of the 10 respondents indicated that they were ‘satisfied’ (four) or ‘very satisfied’ (six). In a section requesting feedback and suggestions, FSNs had very specific ideas that GHFP-II staff will take into consideration, such as requests to arrange for a cell phone until the FSN receives his/her sim card, an apartment that would allow FSNs to bring their family and more coordination for capacity-building opportunities.

In addition, USAID host managers and support staff for FSNs also were surveyed for feedback. Nine of 11 respondents indicated that they have had direct communication with GHFP-II about Fellows. Of those, 89 percent were satisfied or very satisfied with GHFP-II assistance related to the FSN. Only one OSM was dissatisfied.

OSM comments included:

- “Interactions were prompt and helpful.”
- “The FSN Fellowship program is extremely well-run and the FSNs are well cared for. It's a good process.”
- “The GHFP FSN [program] is an outstanding example of its commitment to professional growth and development. GHFP staff have developed an excellent program in conjunction with USAID’s HR, that helps prepare FSNs who may be visiting the US for the very first time. The orientation and access to trainings and other activities going on at USAID HQ is superb.”
- “Please continue this important program for the long term!”

FSNs & USAID Staff: Rating of GHFP-II

* FSN satisfaction with GHFP-II assistance: 100%

* USAID staff satisfaction with GHFP-II staff assistance related to FSNs: 89%

Suggestions included better coordination of logistics with USAID, and improved onboarding related to badges and money accounts. In PY4, staff turnover and the move to CP3 presented new logistical challenges for supporting FSNs. GHFP-II sought to clarify roles and responsibilities between GHFP-II and USAID staff. In addition, GHFP-II identified additional resources to support FSNs during their Fellowship, including the use of FSN greeters contracted from a local international NGO to assist with greeting FSNs upon arrival and orienting them to their apartment and assisting with initial arrival needs. A list of FSNs is provided in Annex B.

PROFESSIONAL AND CAREER DEVELOPMENT

KEY RESULT AREA 3:

Fellows' technical, program management, and leadership competencies enhanced

Intermediate Result (IR) 3.1: Professional and career development (PCD) information, tools, and assistance provided to Fellows

INDIVIDUAL WORKPLANS & PROFESSIONAL DEVELOPMENT PLANS

SR 3.1.1 DEVELOPMENTAL GOALS FOR FELLOWS DEFINED AND APPROPRIATE RESOURCES IDENTIFIED

Indicator	Year 1	Year 2	Year 3	Year 4	Target
3.1.1.1 Percent of new Fellows completing baseline job competency assessment within 90 days of starting employment	24%	79%	53%	73%	Y1: 20% Y2: 50% EOP: 90%
3.1.1.2 Percent of new Fellows completing initial APP within 90 days of starting employment	n/a	36%	71%	62%	Y1: 20% Y2: 50% EOP: 90%
3.1.1.3 Percent of continuing Fellows updating APP within 45 days of anniversary date	n/a	2% ³⁰	62%	58%	Y1: 20% Y2: 35% EOP: 75%

GHFP-II staff use several tools to help Fellows plan and evaluate their work. To start, Fellows are expected to complete baseline job competency assessments, which serve as a foundation for discussions about the fellow's professional development needs. In PY4, 73 percent completed this assessment within the target of 90 days of starting employment, a significant increase from 53 percent in PY3 (3.1.1.1). The improvement occurred after designated time was set aside in orientation for Fellows to complete the competency assessment.

The second tool is the annual performance plan (APP), which GHFP-II requires Fellows to complete within 90 days after starting employment. The purpose is to facilitate discussion and agreement between the fellow and his/her OSM on goals and priorities for the upcoming year, and to document the specific performance objectives and major work activities the fellow will pursue. In PY4, 62 percent of new Fellows completed their initial draft APP within the target, a decrease from 71 percent in PY3 (3.1.1.2). While the number of Fellows that met the 90-day target decreased, the overall number of Fellows who complete an APP in their first Fellowship year improved from 82 percent in PY3 to 96 percent in PY4. Seven Fellows in PY4 completed an APP after the 90th day, and only one did not complete an APP in the first year of the Fellowship.

³⁰ The percentage of continuing Fellows updating their APP within 45 days of their anniversary date was low partly due to the lack of systems in place to accurately capture data.

The third tool is the update to the APP, which Fellows are expected to complete within 45 days of their anniversary date. In PY4, nearly 60 percent of Fellows met this target, which was similar to results in PY3 (3.1.1.3). Timely submission of the APP is indicated as a factor in determining annual merit increases, and an updated APP is required before the annual performance evaluation can be finalized with PHI.

PROFESSIONAL DEVELOPMENT

SR 3.1.2 Fellows' pursuit of developmental activities, access to technical information, and completion of relevant training facilitated

Indicator	Year 1	Year 2	Year 3	Year 4	Target
3.1.2.1 Percent of Fellows completing an Individual Development Plan (IDP) ³¹	n/a	22%	64%	48% (all Fellows)	Y2: 50% EOP: 75%
3.1.2.2 Percent of Fellows completing majority of developmental activities in approved IDPs ³²	54%	82%	88%	75%	Year Two: 60%
3.1.2.3 Number of regional conferences/workshops for field Fellows planned and conducted	1	1	1	1	EOP: 5
3.1.2.4 Percent of attendees rating their satisfaction with the regional conference as high or very high	100%	100%	60%	100%	Y1: 3.5 Y2: 4.0 EOP: 4.5 ³³
3.1.2.5 Percent of new Fellows completing all orientation modules offered by GHFP-II	n/a	31%	26%	45%	Y1: 20% Y2: 40% EOP: 60%
3.1.2.6 Average satisfaction rating with PCD portion of Washington orientation ³⁴	n/a	72%	58%	77%	Y1: 3.5 Y2: 75% EOP: 90%
3.1.2.7 Percent of Fellows receiving coaching who indicated that they were satisfied or very satisfied with the quality of coaching ³⁵	67%	75%	62%	70%	Y1: 3.5 Y2: 75% EOP: 90%

Professional development (PD) is an integral part of GHFP-II, and each Fellow receives \$2,000 in PD funds per Fellowship year towards enhancing their technical and managerial excellence. Fellows who are interested in using the funds are required to complete an individual development plan (IDP) in consultation with their PCD coordinator.

³¹ The indicator for 3.1.2.1 changed in PY2, and no comparable data is available for PY1.

³² 3.1.2.2 is based on survey results that first ask Fellows if they had an IDP in place for the previous year. If they did, they are asked if they were able to complete a majority of activities for the previous year's IDP. In PY2, results were based on 67 responses; PY3 on 50 responses; and PY4 on 64 responses.

³³ The target for 3.1.2.4 does not match the survey mechanism for regional conferences.

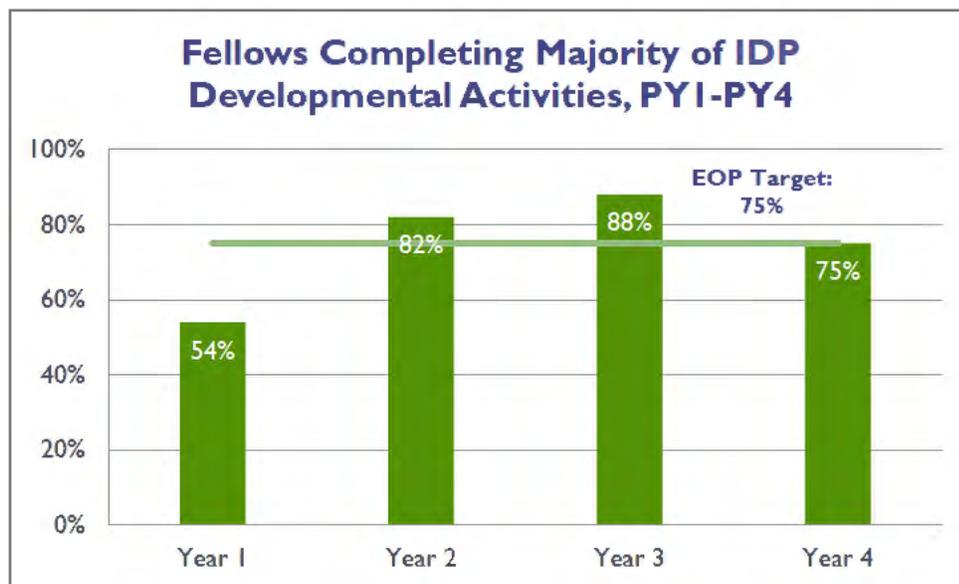
³⁴ Please see Annex F for information about PY4 surveys. This was a new indicator in PY2.

³⁵ Please see Annex F for information about PY4 surveys.

In PY4, 48 percent of Fellows completed their IDP. Reaching the EOP target of 75 percent will be challenging because completion of an IDP is only required if Fellows plan to use their PD funds, and they are not required to update their IDP annually. The increase from PY2 to PY3, when 64 percent completed an IDP, was partly due the introduction of the new IMARS database and improved data collection. More realistic for the project was the two-year target of 50 percent, that has been met or nearly met in both PY3 and PY4 (3.1.2.1).

For Fellows who had an IDP the previous Fellowship year, completion of activities was high with 75 percent of Fellows reporting in the survey that they had completed a majority of development activities (3.1.2.2). This met the EOP target, as has been the case since PY2. Feedback from Fellows ranged from finding IDPs to be “incredibly useful tools,” to descriptions of the challenge of focusing on PD when needs of the field take priority. Some said it was difficult to focus on PD when busy with day-to-day tasks and changes in funding, strategy and priorities over the course of a year.

Indicator 3.1.2.2 – Fellow Completion of IDP Developmental Activities, PY1-PY4



Overseas Fellows are uniquely challenged in their ability to access professional development opportunities. In order to address Fellows’ needs and provide an opportunity for networking and connection with staff, GHFP-II hosted its fourth regional conference/workshop for field Fellows in Brussels, from Sept. 9-11, 2015 (3.1.2.3).

Fellow Feedback about the Regional Conference, PY4

- “The overview of trends in the industry was also useful. Many Fellows have good field experience but they are isolated and it can be hard to network and job hunt while overseas.”
- “Good learning about processes and details of GHFP that I didn't realize.”
- “I want to thank GHFP-II once again for the opportunity to work on my career planning in a very simplified method.”

Topics included problem solving in cross-cultural contexts, an overview of hiring and career trends in GH, and personal effectiveness training. Individual meetings with GHFP-II program staff also were offered. Fourteen field Fellows participated, and all survey respondents rated their satisfaction with the conference as high or very high (3.1.2.4).³⁶

ORIENTATION MODULES

In PY3, GHFP-II implemented two self-study orientation modules for new Fellows, which continued into PY4. The modules were reviewed and updated periodically to reflect the most current information about USAID.

- **Module 1:** USAID Survival Skills provides an overview of GHFP-II and USAID's structure and global health initiatives.
- **Module 2:** APP provides an overview of GHFP-II's performance planning requirements and provides guidance on how to develop good performance objectives.

PY4 Fellow Highlight: Niyati Shah

*Senior Gender Advisor
GH/HIDN/Front Office*

Niyati has worked across the range of HIDN, Agency partners and country teams to strengthen gender leadership and integration. She has worked closely with technical and leadership teams in missions to fully integrate gender into programs and planning, particularly through building capacity. Her dedication to her work in the field allows her to enrich gender analysis and programing in HIDN core health areas by inserting real-life experiences and examples from countries.

In PY4, 45 percent of new Fellows completed all orientation modules offered by GHFP-II (3.1.2.5). This was lower than the EOP target of 60 percent, which will be challenging to reach since the modules are self-paced and voluntary, and Fellows do not always choose to complete both modules.

Completion of the modules is self-paced, and, in an effort to increase participation, Fellows were given times during their orientation in Washington to complete Module 1. However, Fellows who are already familiar with USAID still may choose not to take Module 1. In addition, Fellows were reminded to use Module 2 as a resource in preparing their APP, but it was not required for them to complete it in order to develop their APP.

ORIENTATION

In PY4, 77 percent of Fellows indicated that they were satisfied or very satisfied with the PCD portion of the Washington, DC orientation (3.1.2.6), compared to 58 percent in PY3. Of note, the six (of 26) responses that were not positive included five neutrals and only one dissatisfied. Overall, the DC Fellows were more satisfied (84 percent) than overseas Fellows (57 percent), which was a switch from PY3. Also, Fellows in level III were the most satisfied (82 percent), followed closely by levels I and II. Disaggregation details are available in Annex E.

³⁶ For 3.1.2.4 about conference satisfaction in PY4, the survey had a response rate of 64 percent (nine of 14 attendees).

Of the 26 Fellows who gave feedback on the PCD portion of orientation, one commented that it was well organized and the modules helpful; that individual did it twice. Another wrote that it would be helpful to have all of the information from the binder available electronically. Two wrote that they did not remember this part of the training or that there were a lot of things to sort out at that time. In PY5, the team is reviewing the order in which Fellows receive information so they receive PCD content (development of the APP, discussion of professional development, etc.) when it is most relevant to them.

COACHING

GHFP-II has continued efforts to introduce Fellows to coaching early in the Fellowship. In PY4, GHFP-II continued to offer all new Fellows up to four hours of coaching without requiring them to use PD funds. In addition, the PCD team and coaching coordinator reached out to all new Fellows to identify the possibilities of coaching for their individual situation, and coaching information also was available in the bi-weekly Fellows ' Express newsletter.

In PY4, 35 Fellows were matched with a coach, and 43 Fellows had at least one coaching session. In total, Fellows received 164 hours of coaching.

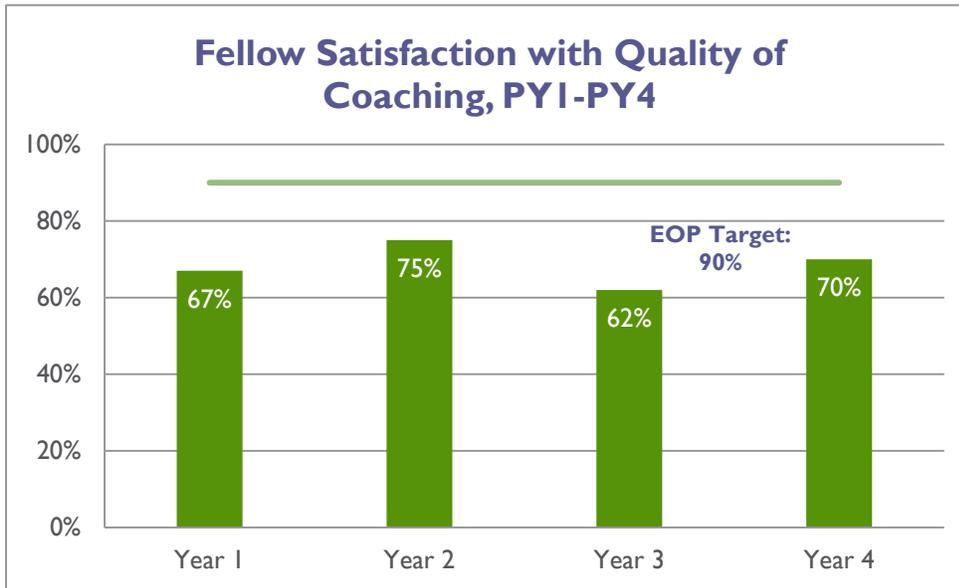
Fellows paired with a coach in PY4	Level I	Level II	Level III
Overseas	0	3	1
Domestic	8	16	7
TOTAL	8	19	8

In PY4, 65 percent of survey respondents indicated that they had used coaching (61 of 94 Fellows), and, of those, 70 percent were satisfied or very satisfied with the quality (3.1.2.7). Of note, 23 percent indicated that they were neutral, and only seven percent (four Fellows) were dissatisfied. Fellows in levels II and III were the most satisfied, and there was no difference in satisfaction in coaching whether based in DC or overseas. Disaggregation by level and location is available in Annex E.

Fellow Feedback about Professional Coaching Services, PY4

- “When I first learned about the coaching services, I thought they were a thoughtful but unnecessary benefit. I could not have been more mistaken. The two coaches I have worked with have been phenomenal and my whole Fellowship has changed because of them!”
- “My coach boosts my morale and helps me get in touch with my “inner professional,” i.e., many things we know are better practice, we don't follow through on due to competing priorities. Great to have the reinforcement and inspiration from a competent coach.”
- “I was disappointed with the first coach after the first session and requested a change, but couldn't be happier with the second coach.”

Indicator 3.1.2.7 – Fellow Satisfaction with Coaching, PY1-PY4



In survey feedback, Fellows appreciated the coaching support they had received for public speaking, presentation skills and language skills, along with, more generally, “helping me better do my job,” as one Fellow described it. Two also said that their coach’s assistance was valuable while they were dealing with difficult transitions or work issues that were causing anxiety. Suggestions related to wanting more assistance to design their future target position and more follow up from GHFP-II.

For 33 Fellows who had not used coaching, 36 percent intended to in the future, 39 percent were not sure and 24 percent did not intend to use coaching. For those who indicated ‘no’ or ‘not sure,’ the main reasons were lack of time (30 percent), not relevant to their needs or not sure what coaching was (15 percent each), or did not want to use professional development funds for it (10 percent). Other reasons included late in their career or did not think the roster of coaches met their needs.

COMPETENCY OF FELLOWS

SR 3.1.3 INCREASE IN FELLOWS' COMPETENCY LEVELS DEMONSTRATED AND DOCUMENTED

Indicator	Year 1	Year 2	Year 3	Year 4	Target
3.1.3.1 Average composite competency rating based on Fellows' self-assessment ³⁷	N/A	3.4	3.5	3.2	Y1: 2.0 Y2: 2.0 EOP: 3.5
3.1.3.2 Average composite competency rating based on OSM assessments	N/A	3.6	3.6	3.4	Y1: 2.0 Y2: 2.0 EOP: 3.0

In annual performance evaluations, Fellows and OSMs were asked to assess the fellow's competence in several skill areas: technical skills and knowledge, resource management, leadership and professionalism. GHFP-II defines competency using a four-point rating scale ranging from awareness to expert.

In all years, the average composite competency rating by Fellows has ranged from 3.2 to 3.5 (3.1.3.1) and by OSMs from 3.4 to 3.6 (3.1.3.2). For PY4, the rating by Fellows was just below the EOP target, and the OSM rating was above it.

Fellow's self-assessments had higher ratings depending on their level, ranging from 2.9 for level I to 3.4 for level IV. For the OSM ratings, however, level III was slightly higher (3.5) than levels II and IV (3.4 each). Details are in Annex E.

Competency Rating Definitions

- 1 = awareness–observer-apprentice
- 2 = developing–contributor-craftsman
- 3 = intermediate–practitioner-journeyman
- 4 = advanced–expert-master

³⁷ The indicators 3.1.3.1 and 3.1.2.2 use a four-point scale. The scale for Fellow and OSM assessments changed after PY1.

SUPPORT FOR OSMS

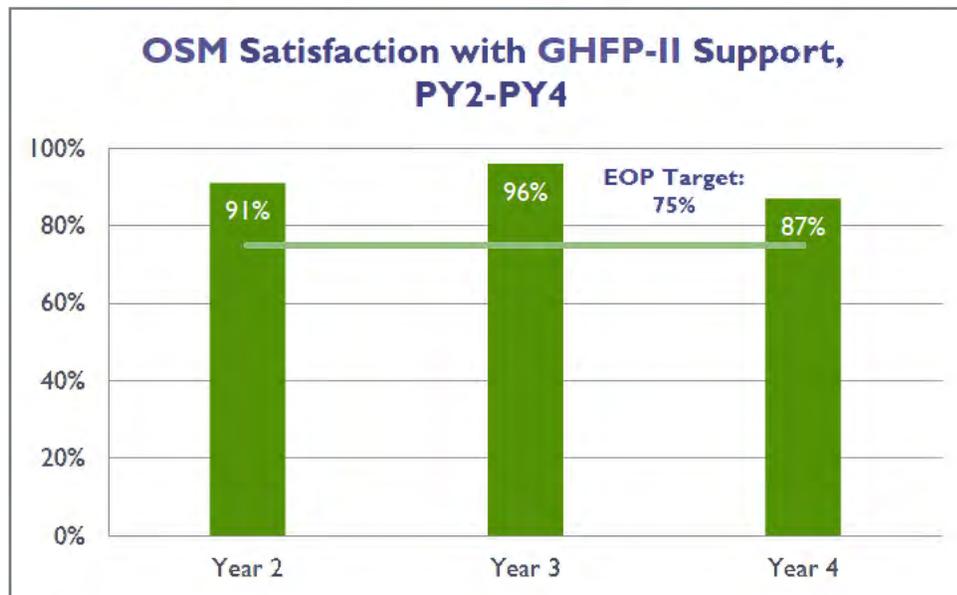
Intermediate Result (IR) 3.2: On-site managers supported in their role as mentors for Fellows' professional development

SR 3.2.1 TECHNICAL ASSISTANCE, TRAINING AND COACHING SERVICES OFFERED TO OSMS

Indicator	Year 2	Year 3	Year 4	Target
3.2.1.1 Average rating of the value and responsiveness of GHFP II technical assistance (TA) provided to OSM ³⁸	91%	96%	87% ³⁹	Y1: 3.5 Y2: 75% EOP: 90% (satisfied or very satisfied)

OSMs have consistently reported a high level of satisfaction with GHFP-II assistance for Fellowship management. Results for past years were above the EOP target of 90 percent, and PY4 results were close to the target – 87 percent. OSM ratings of GHFP-II support, disaggregated by office, are available in Annex E, and survey details are in Annex F.

Indicator 3.2.1.1 – OSM Satisfaction with GHFP-II Support, PY2-PY4



The lower ratings from OSMs in PY4 were the result of the 10 percent of respondents who indicated a “neutral” response. If including all those who were very satisfied, satisfied and neutral, the result would have been 97 percent – similar to last year.

³⁸ This question was not asked of OSMs in PY1.

³⁹ The OSM survey had a responses rate of 49 percent in PY4, with 40 of 82 participating. Of those, 78 percent (31 OSMs) indicated that they had been in touch with GHFP-II staff regarding questions/issues related to managing a Fellow and were asked the question about value and responsiveness.

Location influenced OSM satisfaction with the value of responsiveness of GHFP-II's technical assistance. For the 10 OSMs based overseas, none were very satisfied, 80 percent were satisfied and the remaining two were neutral or dissatisfied. While the distinction between satisfied and very satisfied is subjective, GHFP-II is well aware of the additional challenges that come with support to overseas Fellows and OSMs, including frequent staffing changes at the missions that result in OSM changes throughout the fellow's placement. In PY5, GHFP-II plans to follow up on suggestions received by overseas Fellows at the regional Fellows meeting to improve support to overseas Fellows and OSMs.

PY4 Fellow Highlight: Ramona Godbole
HIV/AIDS Costing Advisor
GH/OHA/SPER

Ramona did an outstanding job covering expenditure technical assistance for Rwanda, Zambia, and the Caribbean region. She worked extensively with PEPFAR country teams, the Office of the Global AIDS Coordinator and implementing partners to ensure that cost data was used in country operational plan (COP) development. This was the first year PEPFAR teams has to apply this type of data in COP planning and Ramona was able to patiently and effectively work with her teams to ensure the meeting of tight deadlines.

For DC-based OSMs, 57 percent were very satisfied, 33 percent satisfied and 10 percent neutral.

In PY4, GHFP-II staff continued to provide guidance to OSMs on GHFP-II policies and to address specific issues related to management of their fellow(s), as needed. Staff will consider suggestions made by OSMs in the survey feedback, including:

- Add a quarterly check-in with GHFP-II management.
- Keep OSMs in the loop on specific updates on issues that come up with Fellows.
- Increase OSMs' formal orientation on procedures for Fellows.

OSM Feedback: Satisfaction with GHFP-II Support, PY4

- "This is a great mechanism and GHFP has always worked well with our team in recruitment, onboarding, and support of ongoing Fellows."
- "I value and like that GHFP's first instinct is to find a way to say yes if the request is in the fellow's interest. It is useful to be organizationally flexible in terms of practices, precedent, etc. I also value and like the requirement to establish work plans and performance indicators early on, and to see them evolve over time."
- "Keep up the good work. You guys have been very easy to partner with."
- "I appreciate GHFP's flexibility and support as my Office looks for ways to meet staffing support needs in a changing environment."
- "GHFP-II is without doubt, the best hiring mechanism for non-direct hires for USAID. We are able to access young professionals at earlier stages of their career, through to some of the most senior people working in the field of public health. It is important for USAID to keep a diverse workforce as well as a diverse set of hiring mechanisms."
- "I think the Fellows program is being managed well, and the staff seem satisfied with their situations."

CHALLENGES AND LESSONS LEARNED

GHFP-II focused on addressing indicators that are potentially out of reach in a five-year cooperative agreement and the dilemma of needing to meet program goals without adding additional requirements to the participants' and onsite managers' busy schedules. Also in PY4, GHFP-II staff were challenged to continually respond to the Fellows' and OSMs' concerns regarding the impact of the move to Crystal City on their ability to get work done and have decent work/life balance.

CHALLENGE: Although almost all other PMEP targets are being met or exceeded, the program is challenged to meet the ambitious PMEP goals for a few factors in performance management and professional development (PM/PD). For example, only 48 percent of Fellows completed their Individual Development Plan, while 75 percent completed the majority of their professional development activities in the approved plans. These are small percentage decreases from the last few years and are significantly influenced by the needed involvement of the OSM to get the paperwork completed.

ACTION: We are consistently reinforcing the message that professional and career development is a serious aspect of the Fellowship experience. We have also been introducing these changes incrementally with an eye towards continuously reducing and simplifying administrative requirements for onsite managers, shifting the burden from them to Fellows and project staff wherever possible. We will continue to implement improvements and orient new Fellows to meet program expectations. We will also seek to streamline a few of the activities and tie them to benchmarks already required for PHI employees.

CHALLENGE: Ongoing and new obstacles continue to make the placement of overseas-based Fellows challenging. The program depends on USAID Mission and Department of State (DOS) staff (hiring managers, EXOs, admin officers) to ascertain and verify whatever specific documentation (and approvals) may be required to complete each placement and successfully onboard their choice of Fellow. Significant variations by country, region, candidate, and especially, by post, (i.e., inconsistency in DOS priorities, practices and preferences) continue to make field placements almost custom exercises each time GHFP-II accepts an overseas Fellowship request. In PY 3, US Missions withdrew legal sponsorship of mission Fellows already working in two countries (Tanzania and Tajikistan), thus putting the Fellows' legal status, and the Fellowship itself, at risk. This, plus increased security concerns, is requiring more focus on this group of Fellows for PY5.

ACTION: The program resolved the PY3 issues by establishing different sponsors for each of these Fellows. We continue to reengineer the Site Development function including reorienting the scope of work for the site development coordinator position, while also clarifying how project staff work together to support field placements including hiring, onboarding and ongoing support to field based Fellows. GHFP's site development team will be working more extensively with field-based fellows as key informants to upgrade security and support. Staff are expected to increase temporary duty (TDYs) to the field to improve our understanding of the changing landscape of field placements; to learn how we might better assist the hiring manager to ensure due diligence; and to explore what expectations and influence USAID staff might bring to bear on preventing future difficulties.

CHALLENGE: Part of PHI's strategy to promote employees' productivity and well-being is to have each new employee based in the U.S. meet with an ergonomist at their place of work. The ergonomist often recommends physical changes to be made to employees' workstations to improve workflow and avoid injury from repetitive motions. Based on the ergonomist's reports, GHFP-II's Admin Team orders keyboard trays, monitor risers, sit/stand desks, ergonomic keyboards, etc., and gets them installed at the Fellows' desks. After the move to CP3, many Fellows were eager to meet with the ergonomist a second time, as they were faced with a new work environment. Unlike GHFP-II's offices at 1201 Penn, CP3 requires a badge for entry, or an escort by someone with a badge. As a result, the logistics involved in implementing the ergonomic assessments have grown much more complicated now that the majority of Fellows are based in CP3. Making sure the recommended supplies ship to the correct location and have all been received before scheduling installation is a time-consuming process. An additional challenge is that more and more Fellows request standing desks, which are some of the bulkiest items to ship and most labor-intensive to install.

ACTION: Both the ergonomist and the subsequent installation services are being planned with an escort and arrangements need to be made with CP3's building management to ensure installer access via the loading dock and service elevator. The GHFP-II Admin Team are making frequent trips from 1201 Penn to CP3, and making connections with building management and installers, to establish a multi-step system to bring each round of ergonomics assessments to completion.

PLANS FOR PROGRAM YEAR FIVE

In Program Year Five, GHFP-II will focus on documentation and dissemination of results, and ensure continued quality of recruitment, performance management and professional development activities as well as strengthening the pipeline of future, diverse global health professionals. Specifically, GHFP-II will:

- Submit the Program Year (PY) Four Annual Progress Report, the semi-annual Performance Monitoring Report, and required as well as ad hoc financial reports.
- Implement final, cumulative evaluations, both at the project-wide level as well as cumulative reports from partners.
- Gather, organize and disseminate the program's results, accomplishments and lessons learned. Submit the Final Performance and Financial Reports, covering the entire period of the award, by December 31, 2016.
- Continue to implement robust recruitment and outreach programs, focusing on high-quality candidates who meet USAID's technical expectations and organizational needs.
- Continue to support participant performance including career and professional development.
- Continue to refine and strengthen IT and the physical infrastructure, including responding to any requests that enhance usage of the 1201 Pennsylvania Avenue space.
- Continue to support USAID's efforts to diversify its professional presence in Global Health, supporting GlobeMed and Global Health Corps diversification activities, as well as strengthening HBCU is potential in preparing future GH professionals.
- Continue to implement the recommendations that came from the 2013 Summit on the Future of the Global Health Professional via collaborations with the Consortium of Universities for Global Health, Global Health Council, and the University of Maryland among others.

Besides continue to strengthen and innovate GHFP-II's core work, in PY5, we will also focus on cumulative evaluation and communications to key and external stakeholders about the value of PHI's contribution to USAID's investment in diverse GH talent. Examples of the key messages that will be incorporated throughout GHFP-II's work in PY5 include:

- “GHFP-II is USAID’s premiere Fellowship program that identifies and supports diverse, technically excellent professionals at all levels to achieve the Agency’s health priorities.”
- “USAID/GH bureau is leveraging GHFP-II to contribute meaningfully to identifying and training future global health professionals, and engaging academia to strengthen non-technical competencies that are essential for a successful GH career.”
- “GHFP-II supports USAID’s thought-leadership in developing a diverse next generation of GH professionals who mirror the American people.”
- “GHFP-II offers USAID/GH bureau innovative, responsive, and tailored recruitment systems that identify and deepen its network of health professionals and experts who enhance the Agency’s ability to manage complex global health challenges.”
- “GHFP-II supports USAID’s commitment to diversity by working with HBCU’s, MSIs, HSIs, and people living with disabilities to strengthen the GH pipeline.”
- “GHFP-II is contributing meaningfully on behalf of USAID/GH to the diversity and inclusion conversation, data, analysis, and programming.”
- “GHFP-II’s values amplify USAID/GH’s messages of respect, agility, client-focus, and inclusivity that are integral to the Agency’s work.”
- “40 percent of GHFP-II participants represent diverse groups, which highlights USAID’s commitment to inclusivity in GH.”