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# Global Health Fellows Program I (GHFP-I)

## End-of-Project Report

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The Public Health Institute implements USAID's Global Health Fellows Program I in partnership with Management Systems International

## Executive Summary

The US Agency for International Development’s global health programs focus on improving the well-being of people in resource-challenged settings. Over the years, USAID has helped mitigate the impact of infectious diseases and improved the quality of health service delivery throughout the developing world. Despite significant progress, formidable challenges remain as millions of individuals live in poverty and face untimely deaths from preventable causes. High numbers of children die before their fifth birthday from respiratory conditions or diarrhea. Women die from complications related to pregnancy, with many giving birth without the support of a skilled birth attendant. And malaria, tuberculosis, and HIV/AIDS still bring about the deaths of millions of people worldwide.

These challenges will not be solved quickly or easily. They require collaboration between host governments and international partners, the transfer of knowledge, technology and scientific innovation to the field, and, perhaps most important, they require the commitment, passion, and technical skills of a talented cadre of global health professionals eager to use their skills to address these challenges. From 2006–2012, the Global Health Fellows Program I helped to staff and develop the current and next generation of USAID’s global health leaders to support the US Government commitment to the health and well-being of people in the developing world. With a two-fold effort, GHFP-I realized its vision of cultivating a diverse and sustainable pool of talented global health professionals and improving individual and organizational performance. GHFP-I was invaluable to the effectiveness of USAID’s population, health, and nutrition programs worldwide by:

- Offering 95+ internships and 335+ fellowships for junior-, mid-, and senior-level global health professionals with an average performance rate of excellent to outstanding (4.5+ - 5).
- Implementing 145+ professional and organizational development activities for over 1,843 participants by USAID’s health sector staff in Washington, DC and overseas, with an average rating of 4+ out of possible 5 for value, relevancy and applicability to daily work.

<b>Global Health Fellows Program Fellowships and Internships</b>	
<b>Fellowships</b>	
Number	335+
Level	Junior, Mid, Senior
Performance Ratings	4.5 – 5 (excellent to outstanding)
<b>Internships</b>	
Number	95+
Placements	Washington, DC, and Overseas
From Underrepresented Groups	≥ 33% each year

USAID awarded GHFP-I in July, 2006 to The Public Health Institute (PHI). This cooperative agreement (CA) was a continuation of PHI’s work on the Population Leadership Program that provided fellows and organizational development support to USAID’s population and reproductive health programs. The primary recipients of GHFP-I services were staff in the Bureau for Global Health, health offices in USAID missions worldwide, and the health units in

each of USAID's regional bureaus. GHFP-I's "home office" in the Bureau for Global Health was the Office of Professional Development and Management Support (USAID/GH/PDMS). All GHFP-I program activities were closely aligned with objectives established by USAID's Office of Professional Development and Management Support, whose primary purpose is to improve the quality and sustainability of health sector activities through program support and professional development. The GHFP-I Results Framework (Figure 1) mirrors the goals of PDMS—that is, to enhance the health sector cadre worldwide, to improve management and program support, and to strengthen the capacity to lead and manage.

The original partnership included Harvard University, Tulane University, University of Washington, and the United Negro College Fund-Special Programs. During the first year, with USAID's encouragement, PHI made significant efforts to ensure that each subcontractor brought significant and unique value to the cooperative agreement. At the end of year one, with USAID encouragement and support, PHI decreased the number of partners and continued to work with Harvard, Tulane and Management Systems International for the rest of the program. During the last year of the program which included only Professional/Organizational Development activities, only MSI was retained. Understanding the need to "right size" the resources to fit the work was an important challenge and lesson for the project.

The GHFP CA was initially awarded for five years. USAID later extended the program through September 2011. In April 2011, GH/PDMS initiated the re-bid of GHFP-I. The scope of GHFP-II did not include the provision of professional and organizational development (POD) activities for USAID's health sector staff. These interventions became the purpose of a stand-alone contract for which an RFP was published in April 2012. To ensure continuation of services, the professional and organizational development division of GHFP-I was extended through December 2011. PHI was awarded GHFP-II in July of 2011 effective October 1. By the effective date all GHFP-I fellows were transitioned to GHFP-II. In November 2012, USAID extended GHFP-I (for professional and organization development only) through September 2012. This report covers six program years of which five included fellows and interns and the sixth year focused only on POD activities.

During the life of the program, approximately 10,000 candidates applied for fellowships, and GHFP-I supported 335 fellows, who worked in USAID's Washington, DC headquarters, in USAID's overseas missions, and with overseas partners. The standard fellowship was two years, renewable up to another two years. Fellows contributed much-needed expertise in such technical areas as HIV/AIDS, malaria, pandemic response, tuberculosis, food security, nutrition, family planning, reproductive health, and many other specialized technical areas. In turn, fellows were able to enhance their skills through GHFP-I sponsored professional development activities, including courses to build leadership and management capacity, personal effectiveness, language training, state-of-the-art technical training in their areas of expertise, and individualized career or management coaching. Equally important, all fellows assigned to USAID became familiar with the Agency's systems and processes—knowledge that many fellows said was invaluable in positioning themselves for long-term involvement in the field of global health, given USAID's prominent role as a donor in global health.

Interns were also part of the Global Health Fellows Program I, serving at USAID's headquarters in Washington, DC, and in international placements. Cognizant that gaining international experience is often difficult for young people interested in global health who lack resources to

support such an endeavor, GHFP-I's recruitment process took into account internship applicants' life experiences, including any obstacles they may have faced in achieving their educational and professional goals. By considering these factors, GHFP-I recruited a pool of interns of greater diversity—including dozens placed in overseas internships— from ethnic minority groups underrepresented in the global health field.

Developing USAID organizational capacity was another important component of the Global Health Fellows Program I. On request, GHFP-I provided tailored organizational development activities for a variety of USAID teams, both domestic and international. GHFP-I facilitated teambuilding and/or strategic planning retreats and regional meetings and conducted program consultations and organizational assessments. GHFP-I provided more than 150 of these organizational development activities throughout the life of the program, with more than 25 missions receiving support. All of these highly rated activities helped promote more effective and efficient teams within the Agency.

As the first phase of the Global Health Fellows Program comes to a close, we look back on six years of accomplishments, and stand ready to confront new challenges in the years to come. Working at USAID or elsewhere in the global health field, former GHFP-I participants are making a difference for people in the developing world striving for a better life.

Figure 1

# Global Health Fellows Program Results Framework

USAID/GH/PDMS Activity Objective

Improved quality and sustainability of health sector activities through program support and professional development

## Global Health Fellows Program Vision

A sustainable pool of talented global health professionals

Individual and organizational performance that improves the effectiveness of USAID PHN programs

### Strategic Objective 1:

Health sector cadre enhanced worldwide

#### IR 1.1: Health professionals recruited, developed, and supported

- Recruit health professionals effectively
- 1.1.1: Expanded awareness of GHFP and its opportunities
- 1.1.2: Procedure for selection and placement of fellows improved
- Meet USAID technical and workforce needs
- 1.1.3: Cadre of fellows meets USAID/GH/PHM technical and workforce needs
- 1.1.4: Maintain and strengthen strategies and systems for fellows' support
- Contribute to global health sector sustainability
- 1.1.5: More GHFP alumni engaged in global public health education or employment
- 1.1.6: Maintain high retention of fellows

#### IR 1.2: GHFP internships implemented

- 1.2.1: Expand awareness of GHFP internship opportunities
- 1.2.2: Procedure for selection and placement of interns improved
- 1.2.3: Maintain and strengthen strategies and systems for interns' support

#### IR 1.3: Diversified workforce improved

- 1.3.1: Increased diversity among GHFP interns
- 1.3.2: Increased diversity among GHFP applicants and fellows
- 1.3.3: Minority GHFP alumni engaged in global public health education or employment

### Strategic Objective 2:

Staff capacity to lead and manage strengthened

#### IR 2.1: Essential PHN skills and knowledge developed and improved

- 2.1.1: Professional development training provided
- 2.1.2: Professional development programs address needs of training attendees
- 2.1.3: Access to state-of-the-art technical information provided

#### IR 2.2: Institutional capacity developed

- 2.2.1: Organizational development interventions provided

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## Strategic Objective 1: Health sector cadre enhanced worldwide

The USAID Global Health Fellows Program supported the quality of the US Agency for International Development's health sector activities by recruiting, developing and supporting global health professionals at all levels.

One of GHFP-I's most important objectives was to strengthen the skills of global health professionals around the world—that is, the global health sector cadre. By offering challenging and varied fellowships and internships, GHFP-I provided global health professionals at the junior-, mid-, and senior-levels with opportunities to build their skills and knowledge—both technical and managerial—while implementing USAID health programs.

### Recruiting Strong Fellowship Candidates

Fellowship recruitment						
	PY1	PY2	PY3	PY4	PY5	PY6*
<b>Transitioned</b>	61	0	0	0	0	0
<b>New positions</b>	13	50	42	41	40	10

*\*Includes 1 July 2011-30 September 2011.*

Using a thorough, multifaceted recruitment strategy, GHFP-I brought information about the program's professional and developmental opportunities to potential candidates at professional conferences, employment fairs, and universities, including minority serving institutions, amongst other outreach avenues. GHFP-I staff made informational interviews widely available to anyone interested in learning more about the global health field. The program's website was also an important recruitment tool that increased awareness of the program and made it easy to apply through an online application system. Over the course of all five program years combined, outreach efforts garnered over 10,000 well-qualified fellowship applications.

### Meeting USAID's Technical and Workforce Needs

In addition to providing an outstanding career opportunity for fellows, GHFP-I made important contributions to USAID's technical and workforce needs. From the outset, all GHFP-I activities were closely aligned with longstanding objectives established by USAID's Office of Professional Development and Management Support. Highly qualified fellows were recruited to fill key technical positions, and offers were usually made within three months of a fellowship's posting date. Fellows worked primarily in USAID's Washington, DC, headquarters and in USAID missions overseas. A small number of fellows were placed with USAID partner organizations in the field, supporting USAID programming in population, health and environment and family planning/reproductive health.

GHFP-I's overall contribution to establishing a sustainable pool of professionals who could strengthen the global health sector can be measured by examining retention of fellows, both within the program and within the field of global health itself. After a two-year fellowship, approximately 90 percent of fellows extended their time with GHFP-I, typically for another two years. When their fellowships ended, almost all fellows remained within the global health field.

## **Providing Enriching Internship Experiences**

Interns were an important part of GHFP-I. For the first two program years, interns worked at USAID's Washington, DC, headquarters in the Global Health Bureau each summer. In Program Year 3, GHFP-I began implementing overseas internships with the One World Foundation. Also that year, DC-based interns traveled overseas for field trips that familiarized them with USAID's work in such countries as Ethiopia, Uganda, Liberia, Botswana, Nigeria, South Africa, and Vietnam.

Intern recruitment targeted schools of public health and minority serving institutions, particularly those who served populations underrepresented in the global health field. Internship applications rose steadily each year, with more than 2,000 applications being received for just 27 available DC-based internships in Program Year 5.

Besides gaining on-the-job training and mentoring from their onsite managers, interns participated in career development activities that included lectures and activities developed by GHFP-I to enhance their learning experiences.

## **Empowering a Diverse Workforce**

Ensuring the diversity of interns and fellows was another important priority of GHFP-I. Fellowship applicant breakdown by gender was similar for fellows and interns. Across all five program years, at least 60 percent of applicants were women. The gender of individuals selected for fellowships mostly mirrored the applicant pool. The percentage of ethnic minorities selected for fellowships increased each year from 20 percent in Program Year 2 to more than half of new fellows for Program Year 4. In the final program year, approximately one third of new fellows were from ethnic minorities. The large majority of minority fellows who left the program in the first four years remained engaged in global health and development work or education.

Although staff made significant efforts to present diverse, highly qualified candidates for fellowships and internships, work remains to be done towards sensitizing USAID "hiring manager" staff to keep workforce diversity considerations as a key factor in selecting candidates. The program recommends better alignment with project diversity efforts and the Agency's internal approach to sensitization and support for a more diverse workforce.

## **Strengthening Organizational Performance**

Fostering organizational performance that improved the effectiveness of USAID's population, health, and nutrition programs was also a key objective of GHFP-I.

GHFP-I's professional development activities included training on personal effectiveness (such as writing skills, workflow/productivity improvement, meeting facilitation skills, etc.), management (such as supervision skills, mastering the art of project management, etc.), technical information (such as "technical exchange" sessions), and orientation (such as the "PHuNdamentals for Success" course). GHFP-I also helped build institutional capacity within the Global Health Bureau and among USAID missions by conducting organizational development activities. Through a range of activities, such as office, division, or team retreats, workforce analyses, and training programs, GHFP-I helped boost the organizational performance of USAID's population, health, and nutrition programs.

## **Providing Health Sector Staff with Valuable Professional Development Opportunities**

Each year, GHFP-I professional development offerings grew in scope, number, and reach. By the final program year, GHFP-I course offerings had expanded to 28 professional development activities attended by 349 participants. In Program Year 3, GHFP-I added a career management series to help participants take charge of their careers, and this series continued through Program Year 5. GHFP-I courses were rated very highly by participants. On a scale of 1-5, with 5 being excellent, most participants rated professional development activities with a 4 or higher across several categories. Ratings and individual feedback suggest that professional development activities were valued and highly relevant for participants' work.

GHFP-I further ensured a positive, enriching experience for fellows by providing them with professional development funds each year that they could use for outside professional development activities—most often for professional coaching, technical or management training, or language training. In surveys conducted across all five years, fellows said they were very happy with the program, with satisfaction levels reaching and then exceeding 90 percent for the final three years.

## **Ensuring Fellows' Access to State-of-the-Art Technical Information**

GHFP-I ensured that fellows had access to state-of-the-art technical information through channels that the fellows regularly accessed as part of the program—that is, the fellows' portal of GHFP.net, the biweekly *Fellows' Express* e-newsletter, and a searchable online database of professional development activities. By Program Years 4 and 5, more than nine out of every ten fellows agreed or strongly agreed that state-of-the-art technical information was made available to them by the program. In addition, 97 percent reported that the information was relevant to their needs.

## **Helping Build a Stronger, More Effective Global Health Sector Cadre**

When the Global Health Fellows Program began in 2006, one of its most important objectives was strengthening the skills of USAID global health professionals around the world—that is, the global health sector cadre. USAID knew that the more confident and capable these individuals became—as leaders, as managers, and as technical experts in their specialties—the better they would be able to meet the demands of their jobs in a rapidly changing, often fast-paced field.

GHFP-I laid the groundwork for achieving this goal by executing a thorough, multifaceted recruitment plan that solicited applications from individuals experienced or interested in the global health field.

While enhancing fellows' knowledge and professional skills was a clear objective of GHFP-I, candidates still needed to demonstrate competence or aptitude in areas in which USAID hiring managers had requested expertise. Those chosen were of varying levels of experience—some were individuals at the beginning or midpoint of their careers who were ready to take their careers to the next level, while others were global health professionals with many years of international experience who brought to the Agency important expertise in newly emerging technical areas. Examples include veterinarians familiar with animal to human infection transmission and cultural anthropologists working in the social determinants of health behavior.

The competitiveness of the fellowship application process is a key indicator of the effectiveness of the recruitment process. Each year, as GHFP-I honed its processes for reaching a large pool of diverse and qualified candidates, the number of applicants increased. Over the course of all five program years combined, GHFP-I received nearly 10,000 fellowship applications.

## Health Professionals Recruited, Developed and Supported

### Effective Recruitment = Attracting a Diverse Range of Applicants

GHFP-I used varied in-person and virtual outreach approaches to promote awareness of the program. Because GHFP-I partner organizations were located in diverse geographic locales (Washington, DC, Oakland, CA, Boston, MA and New Orleans, LA), the team used a regional approach to focus outreach efforts throughout the United States. Each year, staff spread the word about opportunities to participate in a fellowship or internship by visiting universities, attending conferences and career fairs for global health professionals, and presenting at gatherings or special meetings of groups working in global health. More than 21,000 people participated in GHFP-I outreach events throughout the life of the program.

Outreach and Recruitment of Participants Including Focus on Minorities						
Outreach and university partner inreach events, presentations, booths, etc.						
	PY1	PY2	PY3	PY4	PY5	PY6*
<b>Events</b>	18	39+	40+	56	52	11
<b>Attendees</b>	2,300	4,000	5,000+	5,700+	6,500+	1,100

*\*Includes 1 July 2011-30 September 2011.*

### University and Minority Outreach

GHFP-I took part in career fairs, information sessions, and presentations at a range of schools of public health and other relevant academic institutions. These schools spanned the traditional conduits into the field of global health to newly emerging programs, many of which were at minority serving institutions.

A selection of frequently visited academic institutions	
<ul style="list-style-type: none"> <li>• American University</li> <li>• Boston University</li> <li>• George Washington University</li> <li>• Harvard University</li> <li>• Johns Hopkins University</li> <li>• Loma Linda University</li> <li>• Morehouse University</li> </ul>	<ul style="list-style-type: none"> <li>• New York University</li> <li>• Tufts University Tulane University</li> <li>• University of California, Berkeley</li> <li>• University of California, Los Angeles</li> <li>• University of North Carolina</li> <li>• University of San Francisco</li> <li>• University of South Florida</li> </ul>

In addition, GHFP-I furthered its goal of increasing the number of underrepresented individuals who build their careers in global health with a presence at conferences where students from historically black colleges and universities and Hispanic-serving institutions would take part. These include the Hispanic Medical Conference, the African American Consortium of Schools of Public Health, the American College of Nurse-Midwives Women of Color meeting, and the Career Expo for People with Disabilities.

### Professional Conferences and Employment Fairs

Candidates were also recruited at professional conferences and employment fairs, with GHFP-I making presentations, staffing a booth, or hosting a reception enabling prospective applicants to meet with current and former fellows and interns. Throughout the program, GHFP-I staff attended conferences or career fairs where likely applicants would be present, including the Global Health Council Annual Conference, the American Public Health Association Annual Meeting, career fairs

for returning Peace Corps volunteers, the Society for International Development Career Fair, and the US Department of State Transition Center Job Fair. A popular service GHFP-I offered at many of these events were one-on-one resume consultations with a GHFP-I staff person. In addition, GHFP-I leaders and fellows made presentations or participated in panel discussions at the Global Health Council Annual Conference and the American Public Health Association Annual Meeting.

### *Targeted One-on-One Outreach*

In Program Year 3, GHFP-I made informational interviews more widely available by enabling them to be scheduled through the website. In this way, anyone interested in global health would have an opportunity to speak with a staff member and gain insights into the field as well as have a review of their resume. The number of informational interviews conducted increased each year, from 138 in Program Year 3 to 317 in Program Year 5. These meetings often included a resume review for the individual. Each year, GHFP-I also hosted a career panel in its Washington, DC, office to introduce job seekers to the global health field and familiarize them with the work of the fellows.

### *Web-Based Outreach*

Website page hits						
	PY1	PY2	PY3	PY4	PY5	PY6*
<b>Annual</b>	773,000	3,400,000	7,630,000	6,248,000	8,000,000+	85,529
<b>Cumulative</b>	773,000	4,174,000	11,804,000	18,052,000	36,052,000+	36,137,529+

*\*Includes 1 July 2011-30 September 2011.*

The purpose of the GHFP-I website was to increase awareness of the program and facilitate the application and review process for fellowships and internships. A full-featured version, launched in the fourth quarter of Program Year 1, included online application systems for fellowships and internships. This, coupled with a greater number of available positions at the time, resulted in a steep increase in applications.

The website was regularly updated and modified in response to input from fellows regarding how it could better meet their needs. In Program Year 4, the website was refreshed with a new layout and enhanced content for all program areas making it easier to access certain information and resources. Website use increased each year across all categories, from annual number of unique website visitors to average number of pages visited by a user. For instance, in April 2007, when the website was new and not yet well-known, the total number of unique website visitors was 553. After the site was revamped in May, the number of unique visitors increased to more than 6,000 per month. The number of visits continued to increase exponentially each year. Overall, the website logged a total of 25 million page hits by the end of Program Year 5.

### *A Comprehensive Strategy for Fellows' Support*

Throughout the program, GHFP-I staff took great care in ensuring that fellows benefited from an extensive support system that offered prompt, individualized attention. Each fellow was assigned a dedicated staff member for operational and logistical support. In addition, a wide range of specialized professional development activities were made available to fellows in GHFP-I's Washington, DC office. In Program Year 3, all fellows were assigned a Performance and Career Development Advisor at one of the partner universities—Harvard University or Tulane University—and given access to university support such as assistance with work planning, career development, and networking.

The dedicated fellows portal of the program's website was also an important resource for fellows, offering performance management/evaluation materials, training opportunities, professional development information, and networking tools.

In addition, fellows benefited from the availability of \$2,500 per fellowship year of professional development funds. With authorization by GHFP-I and their USAID onsite managers, fellows could use this resource for a variety of career-enhancing activities. The most popular uses for professional development funds were professional coaching, technical or management training, and language training.

### *Fellows' Satisfaction with GHFP-I*

Survey data indicated a high level of program satisfaction among fellows. From Program Year 3 onward, the percentage of those who reported that they agreed or strongly agreed that GHFP-I services were satisfactory hovered around 90 percent, peaking at 94 percent in Program Year 5. In addition, for each of the program years, over 90 percent of fellows who completed the survey indicated that GHFP-I responds in a timely manner. This percentage also reached its highpoint in Program Year 5, when it stood at 99 percent.

The perceived value of the faculty mentorship/university affiliation program among fellows peaked in Program Year 2, when 70 percent said they were satisfied, but declined in the following years when GHFP-I began providing university affiliation to all fellows, regardless of career stage. In Program Year 5, when just 39 percent of fellows said they found the faculty mentoring program useful, GHFP-I decided to discontinue faculty mentoring.

Fellows reported using the dedicated fellows portal of the program website to download forms, access reports, check the calendar of events, and check job postings. Their views on the website's usefulness became more positive each year. In Program Year 1, 25 percent of fellows thought the website was useful, but by Program Year 5, after several modifications had been made in response to fellows' comments, 63 percent responded that it was useful.

### **Supporting USAID's Technical and Workforce Needs**

Fellows were recruited for specific positions that addressed a workforce need and increased the technical capacity of USAID Washington, USAID missions, and USAID partner organizations. The standard fellowship period was two years, although most were asked to extend their tenures for an additional two years. Officially employees of the Public Health Institute, fellows were managed and received their day-to-day assignments from a USAID onsite manager.

Strategies for finding and recruiting talented and qualified candidates were carefully considered and adjusted as needed thanks to the efforts of GHFP-I's Recruitment Team. Monitoring and evaluation data demonstrate that procedures for applicant selection and recruitment allowed for applications from highly-qualified candidates to be forwarded to USAID onsite managers for review within two weeks of the position closing date. Throughout the life of the program, it generally took approximately three months to make an offer to a candidate from the time a position opened.

Most fellows provided technical expertise to the Global Health Bureau, USAID Washington, and to USAID missions throughout the developing world. Six of 13 new hires in Program Year 1 were stationed overseas, and in subsequent years between 20 and 26 percent were posted to USAID missions abroad.

By the middle of Program Year 2, the number of fellows supported by GHFP-I consistently exceeded the maximum number of 75 that was originally anticipated in the RFA. The number of fellows increased gradually each year, from 74 in Program Year 1 to 109 in Program Year 2 to 120 in Program Year 3 to 142 in Program Year 4 and 156 in Program Year 5. At any given time, supported fellows were at various stages in their tenures: some were new hires, others were mid fellowship and others were fellows at the end of their tenure.

In GHFP-I's first years, the majority of fellows were those transitioning into GHFP-I from one of three previous fellowship programs that had ended with the inception of GHFP. In Program Year 1, in addition to hiring 13 fellows for new positions, GHFP-I assumed responsibility for the work of 61 fellows who already held USAID fellowships through previous programs—the Johns Hopkins Health and Child Survival Fellows Program, the University of Michigan Population Fellows and Population-Environment Programs, and the Public Health Institute's Population Leadership Program. The terms of these fellows gradually ended, and by the end of Program Year 5, 150 out of 156 fellows managed by GHFP-I were direct recruits.

Throughout the life of the program, fellows provided USAID with technical expertise in high-priority areas. These included maternal and child health, orphans and other vulnerable children, HIV/AIDS, tuberculosis, malaria, health systems strengthening, avian influenza, information management, family planning, food security and nutrition, and monitoring and evaluation, amongst other areas.

### Supporting the Professional Development of Foreign Service Nationals

GHFP-I's contributions to global health sector sustainability extended beyond enhancing the expertise of US citizens engaged in global health work to include Foreign Service Nationals (FSNs). By supporting FSNs' professional development, GHFP-I advanced the goal of building the skills of global health professionals. These skilled professionals, employed at USAID missions around the world, were selected to spend time working at USAID headquarters in Washington, DC on a "Washington Fellowship" program. This program had a dual effect: FSNs gained first-hand knowledge of activities and projects based at Agency headquarters, and they were in turn able to offer the mission perspective and field expertise to headquarters staff.

### Encouraging the Next Generation of Global Health Professionals

Internship recruitment					
	PY1	PY2	PY3	PY4	PY5
<b>Total interns</b>	6	9	26	37	37
<b>Domestic</b>	6	9	16	27	19
<b>Overseas</b>	-	-	10	10	18*

*\*Includes 10 OneWorld sponsored interns and 8 directly hired interns in Uganda.*

Like their more senior level counterparts, GHFP-I interns benefited from mentoring and professional development opportunities that helped them set and achieve individualized career goals. Most internships lasted 12 weeks, though increasingly over the life of the program interns were invited by their host offices to extend up to six months. Each internship had a specific scope of work with an onsite manager providing day-to-day oversight.

In Program Year 3, GHFP-I began implementing overseas internships in collaboration with the One World Foundation. These opportunities continued, with a variety of collaborators throughout the life of the program. In Program Year 4, GHFP-I periodically offered additional internships

throughout the year. Known as “on-demand” internships, these placements arose out of a specific request for programmatic assistance from USAID’s Bureau for Global Health. In Program Year 5, GHFP-I supported a cadre of eight interns to work with USAID/Uganda-selected partner organizations operating in Kampala.

### Expanding Awareness of GHFP-I Internships

Although GHFP-I took over the Washington, DC, summer internship program in Program Year 1, new intern recruitment did not begin in earnest until Program Year 2. That year, a plan was developed and implemented for reaching students and mid-career changers who hoped to gain experience in global health.

The outreach strategy promoted the program at schools of public health while also targeting minority-serving institutions with public health programs. For example, during Program Year 2, GHFP-I conducted a brownbag session about the program at the Harvard School of Public Health. During Program Year 3, GHFP-I participated in the Internship and Scholarship Day at the University of the District of Columbia, a minority-serving institution. Other outreach activities entailed information sessions, career fairs, campus visits, and conferences with all GHFP-I outreach activities including information about internships.

In Program Year 2, over 600 applications were received for nine available internship positions. The following year, 1,351 applications were received for the 16 available DC-based internships and 100 for the 10 available international openings. The number of applications increased each subsequent year. In the final program year, GHFP-I received 2,227 applications for 27 available internship positions, including 1,482 applications for 19 positions in Washington, DC, and 745 applications for eight available overseas internships.

The website was an important vehicle for promoting internships. Like fellows, interns were also able to apply online. Internship page views of the website grew each year, reaching nearly 980,000 in Program Year 5. In addition, the internship web pages had over 88,000 unique visitors during Program Year 5, up from around 61,000 during the previous program year.

### Enhanced Selection and Placement Procedures for Interns

All GHFP-I partners were involved in the review and initial selection of qualified internship candidates. Each review team included a primary and secondary reviewer. GHFP-I used best practices in diversity hiring to develop intern application review teams, ensuring that each individual in the pairing brought unique and appropriate personal attributes and experiences to the review process. USAID onsite managers reviewed and vetted applications provided to them by the teams and interviewed final candidates. Upon completion of the summer internship session, onsite managers and interns took part in meetings that provided lessons learned for the next year.

### Improving Intern Support

Interns participated in orientation activities developed by GHFP-I to enhance their learning experiences. Topics covered included fundamentals of working at USAID (known as the mini PHuNdamentals course), a technical essentials series, a seminar on diversity skills for collaboration, a resume-building seminar, training in interviewing skills, technical conferences, and networking events. Interns also took part in individualized career planning sessions with GHFP-I program staff and attended each summer’s Global Health Council Annual Conference in Washington, DC. During Program Year 3, the Diversity and Internship Manager established a journal club for interns within the Office of HIV/AIDS. Through this optional program, interns critically reviewed articles on global health topics and presented their findings to peers and fellows in a formal setting.

At the end of Program Year 4, GHFP-I scheduled an “Intern Showcase” at USAID’s headquarters to highlight interns’ work through poster presentations. More than 50 USAID colleagues attended. That year, 20 Washington, DC, summer interns were invited to extend their placements beyond the original 12-week duration, and 17 accepted. Because DC-based interns reported good experiences with international field trips that were piloted in Program Year 3, these opportunities were expanded in Program Year 4. Most of the 2010 and 2011 summer interns based at USAID Washington were able to visit field locations such as Ethiopia, Uganda, Liberia, Botswana, Nigeria, South Africa, and Vietnam. These trips provided them with experiences such as the chance to participate in consultations with Ministry of Health representatives and local USAID partner organizations, to visit implementing organizations, and to provide technical assistance to strengthen program implementation.

At the end of Program Years 3, 4, and 5, all interns who participated in a rapid end of internship assessment said they would recommend the program to friends and said it was highly likely that they would seek employment opportunities in the global health and development field. Several said the internship experience gave them greater perspective on their career goals, including an understanding of where in the broad spectrum of global health they wanted to work. Interns valued the firsthand understanding they gained of USAID and the mentoring they received from their onsite managers. Overseas interns also rated their experiences as good or excellent.

## **Diversified Workforce Improved**

### **Seeking Diversity among Interns**

With a commitment to recruiting a talented pool of interns who met USAID’s needs, GHFP-I recognized that some minority groups are underrepresented in the global health and development field. As a result, a special effort was made to reach out to potential internship applicants of diverse backgrounds. These individuals represent the global health workforce of the future, and GHFP-I recognized that providing exposure to the global health field and opportunities to gain international experience early in their professional lives could help position them for greater involvement and leadership.

Such a targeted approach began with outreach that promoted GHFP-I internships at minority-serving institutions, community colleges, schools of public health with the highest numbers of minority students, and organizations that have memberships largely composed of people from groups underrepresented in the global health field.

In Program Year 3, GHFP-I increased its emphasis on diversity among interns by reexamining the program’s strategies for increasing diversity and bolstering minority inclusion. Based on expert recommendations, a series of questions was added to the internship application that were designed to uncover challenges applicants may have overcome while maintaining academic excellence and a commitment to global health.

That same year, GHFP-I began offering overseas internship opportunities. These internships came about, in part, because of discussions with USAID onsite managers who observed that a lack of international experience was a common issue for many applicants who otherwise had the required academic background and technical skills for a position. Often, these potential applicants were from groups underrepresented in the field of global health.

To launch the international internship program, GHFP-I joined forces with One World Foundation of New York, Inc., a nonprofit organization focused on empowering young people of color to become leaders engaging in careers in international human rights and development. That year, all 10 interns participating in the overseas internship program were from ethnic minorities mostly underrepresented in global health.

Also in Program Year 3, GHFP-I began offering a small number of registration scholarships, enabling students from minority serving institutions majoring in a health-related discipline to attend major global health conferences. By enabling their participation in either the Global Health Council Annual Conference or the American Public Health Association Annual Meeting, GHFP-I aimed to expose these students to the global health field and prompt them to consider it as a career option. Indeed, many scholarship recipients went on to apply for GHFP-I internships.

Across all program years, at least 80 percent of internship applicants were female.<sup>1</sup> This is fairly consistent with the US global health workforce as represented by the graduates of the Association of Schools of Public Health, whose member schools have graduated, on average, just under 70 percent female over the last 10 years. From Program Years 2–5, about half of all internship applicants were from ethnic minority groups, especially African-American and Asian-American females.

The distribution of interns hired for all program years mostly mirrored the applicant pool. A large majority of interns—more than 80 percent—were female. In any given program year, at least 1 in 3 interns were from an ethnic minority group. Consistent with the applicant pool, most minority interns were African-American or Asian-American.

### Seeking Diversity Among Fellows

Applicant breakdown by gender was similar for fellows and interns. From Program Years 1–5, at least 60 percent of applicants were women. Over the course of the first four program years, more than half of all fellowship applicants were from ethnic or racial minorities. During Program Years 4 and 5, 60 percent of applicants were from racial or ethnic minorities. African-American and Asian-American women represented the most significant groups of minority applicants throughout the program.

The gender of individuals selected for fellowships mostly mirrored the applicant pool. For Program Years 1–3, 60–70 percent of fellowship applicants were female and 62–79 percent of new hires were female. However, during Program Year 4, the gender distribution of new hires was relatively even—22 females and 19 males. The following year, women accounted for just over 80 percent of new hires.

### Minority Alumni Engagement in Global Health

The vast majority of minority fellows who completed the program over the five years remained engaged in global health and development work or education.

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<sup>1</sup> *Recruitment for the 2007 internships was conducted by USAID; hence, applicant data is not available.*

## Strategic Objective 2: Strengthening Staff Capacity to Lead and Manage

Achieving the first part of GHFP-I’s two-pronged vision—a sustainable pool of talented global health professionals—began with recruitment of fellows and interns who had the expertise and abilities to meet USAID’s technical and workforce needs. GHFP-I strived to achieve the second component of that vision—fostering individual and organizational performance that improved the effectiveness of USAID’s health programs—by offering Global Health Bureau and USAID mission staff a range of professional and organizational development opportunities.

Activities designed and executed by GHFP-I drew on the combined strengths of GHFP-I staff, consultants, professional coaches, and partner organizations, engaging the most qualified experts on a given topic. In particular, GHFP-I relied on the expertise of partner organization Management Systems International. In addition, GHFP-I provided support to training courses facilitated by PDMS staff.

### Essential Population, Health, and Nutrition Skills and Knowledge Developed and Improved

GHFP-I provided professional development activities and offered access to state-of-the-art technical information to fellows and USAID staff, and built institutional capacity through organizational development activities with USAID offices and missions.

#### Professional Development Training Addresses Participant Needs

Each year, professional development opportunities offered by GHFP-I grew in scope, number, and reach. In the first year, GHFP-I provided four courses. By Program Year 6, course offerings had expanded to 28 professional development activities attended by 349 participants. All of these courses focused on helping participants enhance technical skills, leadership, management, and performance, and all were available to individuals across all six offices of the Global Health Bureau, regional bureau health teams, and missions.

Professional Development Events						
	PY 1	PY 2	PY 3	PY 4	PY 5	PY 6*
<b>Number of PD events</b>	5	16	30	39	27	28
<b>Number of participants in PD events</b>	-	300+	425+	449	320	349
<b>Average evaluation</b>	Very Good					

*\*PY 6 was one quarter longer than the other years (July 2011 - Sept 2012)*

Number of Times Conducted Per Program Year							
Title of PD Event	PY1	PY2	PY3	PY4	PY5	PY6	Total
Planning your Work; Working your Plan		4	4	4	2	2	16
Strategies for Workflow Mastery			2	4	3	3	12
PHuNdamentals for Success	1	2	2	2	2	2	11
Advanced Technical and Administrative Writing for GH Professionals (previously Modern Business Writing)		2	1	3	2	3	11
Technical Exchange Sessions		3	4	3			10
MBTI Workshop			2	4	2	2	10
Emotional Intelligence	1	2	2	1	1	1	8
Mastering the Art: Financial Management			2	2	2	2	8
Beyond Bullet Points			1	2	2	2	7
Situational Leadership II (previously Sharpening Your Supervisory Skills)				4	2	1	7
Multiparty Collaboration			1	2	1	2	6
Making Meetings Work			2	1	2		5
Managing Change			1	1		3	5
GHFP-I Leadership Course		1	1	1	1		4
Mastering the Art: Managing without Micromanaging (previously Managing a Contract/Monitoring a CA)			2	2			4
Working Smarter Not Harder		2	1				3
Mastering the Art: Entering a Project Midstream			2	1			3
Influencing from the Middle (previously The Art and Skill of Influence)	1			1	1		3
Negotiation and Conflict Resolution (Harvard)	2						2
Mastering the Art: Analyzing Program Level Data				1	1		2
Mastering the Art: Developing HQ SOW/PD					1	1	2
GHFP-I Publishing Guide Discussion					2		2
Stepping Up to Health Team Management (in the field)					1	1	2
Strengthening Health Systems in Times of Transition						1	1
Working across Generations						1	1

The second year of the program, professional coaching services gained momentum, as 21 fellows took advantage of these services. Coaches helped fellows address several needs, from how to improve their leadership and management skills to how to transition most effectively to a new position upon a fellowship's completion. That same year, GHFP-I made special efforts to ensure fairer use of allocable funds for field-based fellows by requiring them to participate in a multiday professional development event in Washington, DC, once every two years. Although most field-

based fellows met this requirement by attending the PHuNdamentals course, several chose to attend the Annual Intensive Leadership Course. GHFP-I also designed and led regional meetings for field-based fellows in Africa and Asia.

In Program Year 3, GHFP-I added a career management series, which aimed to help participants take charge of their careers, brand themselves better, use networking, and improve their interviewing and salary negotiating skills. Courses that were part of this series included “Take Charge of Your Career,” “Personal Branding,” “Behavioral Interviewing and Salary Negotiation,” and “Networking.”

Upon completion of each professional development activity, participants were asked to rate its appropriateness of content, quality of instruction, and usefulness using a 5-point scale, with 5 being excellent. Each year, the average rating of the activities was between very good (4) and excellent (5) across all categories. For instance, in Program Year 5, the average rating for all professional development activities across all categories was 4.59. These ratings, coupled with specific comments and feedback offered by participants, suggest that professional development activities were valued and highly relevant to participants’ daily work.

### Participants Access State-of-the-Art Technical Information

Although staying up-to-date on developments in one’s field is critical for good decision-making and professional credibility, it can be challenging for any busy professional to remain informed while handling day-to-day job responsibilities and, for global health professionals, sometimes busy travel schedules, as well.

GHFP-I ensured that fellows could easily access state-of-the art technical information and updates about significant developments in the global health field through channels regularly accessed through the program.

- Beginning in Program Year 1, GHFP-I regularly posted technical information on the fellows’ portal, [www.GHFP.net](http://www.GHFP.net).
- Through the biweekly *Fellows’ Express* e-newsletter, GHFP-I updated fellows on professional development opportunities.
- Through a searchable online database of professional development opportunities developed and launched in Program Year 4, GHFP-I provided fellows with a resource for quickly identifying programs that met their needs, which was accessible via the GHFP website.

Fellows also were able to use their professional development funds to participate in training courses or to attend professional conferences that met their individual needs. This helped them to enhance their skills and remain up-to-date on the latest developments in the field. For instance, fellows used professional development funds for such activities as attending a conference on microbicides, a water sanitation course, a course on data presentation, and the Pediatric Academic Societies Annual Meeting. Several also took language courses or tutoring.

Surveys conducted across all five program years confirmed that fellows felt that GHFP-I provided them with technical information relevant to their needs. As professional development opportunities expanded with each program year, fellows’ satisfaction increased. By Program Years 4 and 5, more than nine out of every ten fellows agreed or strongly agreed that state-of-the-art technical information was made available to them. In addition, 97 percent reported that the information was relevant to their needs.

## Institutional Capacity Developed

GHFP-I helped build institutional capacity within the Global Health Bureau and among USAID missions by conducting organizational development activities. Whether facilitating technical meetings, team retreats, or providing other services such as workforce analyses, GHFP-I partners PHI and MSI worked to be responsive and creative in addressing USAID's needs.

## Organizational Development Provided to USAID's Global Health Bureau

GHFP-I's organizational development expertise ranged from workforce analyses to strategic planning exercises and team-building activities.

Organizational development support requests came to GHFP-I through several channels, including fellows, onsite managers, office directors, division chiefs, and team leaders. GHFP-I provided assistance at various levels, including mission-wide, office-wide, and within divisions and teams.

As in other program areas, GHFP-I paid attention to continuous improvement and increased output. Between Program Years 2 and 3, GHFP-I's organizational development work in Washington, DC more than doubled, while international organizational development work more than tripled.

<b>Growth of Demand for GHFP-I Organizational Development</b>						
	<b>PY 1</b>	<b>PY 2</b>	<b>PY 3</b>	<b>PY 4</b>	<b>PY 5</b>	<b>PY 6*</b>
Number of activities, both domestic and overseas, including SOTA events	5	13	26	30	37	48

*\*PY 6 was one quarter longer than the other years (July 2011 - Sept 2012)*

Other examples of organizational development activities supported by GHFP-I include:

- Facilitating Multiparty Collaboration and Negotiation Skills courses for PEPFAR staff at the request of the Office of HIV/AIDS. These three-day courses were conducted in Washington (twice), Atlanta, and South Africa (twice).
- Developing curriculum for a conflict, recovery, and stabilization in health course to be offered by USAID's Office of Professional Development and Management Support.
- Providing consultants to support USAID health offices and PEPFAR teams in the field.
- Conducting organizational assessments of partner or governmental agencies overseas, including the National Population and Family Planning Body (BKKBN) in Indonesia and the Philippines Health Information System (PHIS).

Planning and teambuilding retreats were among the most common organizational development activities supported. GHFP-I conducted tailored staff retreats, both domestically and internationally, that ranged in length from one to five days.

### Select sample retreat objectives

By the end of the retreat, we will have:

- Strengthened our team by learning more about one another, particularly through understanding one another's work styles and preferences
- Reviewed and clarified current roles and responsibilities and examined future workloads and staffing needs in light of GHI and office priorities
- Defined milestones that we want to achieve, collectively, in the coming year (beyond simply implementing our programs; e.g. publishing three papers)
- Enabled better integration of new staff, including building of relationships across the three divisional teams to utilize available and under-utilized technical resources
- Improved cross-team communication processes
- Better aligned individual work objectives with team, division, and agency goals

GHFP-I also supported eleven regional State of the Art (SOTA) conferences or Health Managers Workshops (HMW) held overseas. Throughout the life of the program, GHFP-I supported nine of these events, three each for the Africa, Asia/Middle East, and Latin America & Caribbean regions and two of these events in the Europe & Eurasia region. GHFP-I support included either full logistical support, facilitation of the event, or both.

## Acronyms

BKKBN	National Population and Family Planning Body (Indonesia)
FSN	Foreign Service National
GH	Global Health Bureau
GHI	Global Health Initiative
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
MBTI	Myers-Briggs Type Indicator ®
PD	Professional Development
PHI	Public Health Institute
PHIS	Philippine Health Information System
PDMS	Office of Professional Development and Management Support
PEPFAR	President's Emergency Plan for AIDS Relief
RFA	Request for Applications
SOTA	State of the Art health officers' conference
USAID	United States Agency for International Development