Global Health Service Partnership
Building a Partnership for Global Health
Long-Term Solutions for Global Health

Health workers save lives!

- Maternal survival
- Child survival
- Infant survival

Probability of survival vs. Density of health workers

Low to High density, probability increases for all survival outcomes.
GHSP’s Contribution to Millennium Development Goals

The eight Millennium Development Goals are a blueprint agreed to by 193 member states and 20+ development organizations at 2000 UN Summit.

1. Reduce child mortality (Goal 4)
2. Improve maternal health (Goal 5)
3. Combat HIV/AIDS and tuberculosis (Goal 6)
GHSP Uniquely Prioritizes Education

GHSP Volunteers immediately scale up teaching capacity

Rapidly increases in-country clinical personnel

Strengthens local medical, nursing and health education systems

Increases healthcare services available to local population
Why Peace Corps?

Peace Corps has a rich, 50-year history of preparing and sending American Volunteers for service overseas.
Why Peace Corps?

The Peace Corps' mission has three simple goals:

1. Helping the people of interested countries in meeting their need for trained men and women.
2. Helping promote a better understanding of Americans on the part of the peoples served.
3. Helping promote a better understanding of other peoples on the part of Americans.
Peace Corps’ Work in Health

Active participants in community health strengthening and in the global response to HIV and PEPFAR:

• 20 years working in HIV/AIDS
• PEPFAR partner since 2004
• All Africa Volunteers trained in HIV/AIDS prevention
• Today, 1,922 Volunteers work on health as a primary assignment. A third of all Volunteers work on HIV
History of PEPFAR Funding to Peace Corps

FY04 – FY12 PEPFAR Funding at Peace Corps
$171,962,930

*Projected
Reconnecting to Our Roots

• October 14, 1960 President Kennedy spoke to students at University of Michigan. About 2 am.
• He asks “How many of you who are going to be doctors are willing to spend your days in Ghana? Technicians or engineers, how many of you are willing to work in the Foreign Service?... I think Americans are willing to contribute. But the effort must be far greater than we have ever made in the past.”
Repositioning for Our Future

- Host countries identified need for more trained health professionals
- U.S. health professionals seeking more global health opportunities
- PEPFAR’s target of training 140,000 health professionals
- Peace Corps’ rich history in health and recruitment assessment
GHSP Responds to Needs Identified by Host Countries

- Uganda, Tanzania & Malawi
- Worked with host Country Government Ministries
- Host country institutions
- Identify specialties needed
- Effort is bilateral with shared vision and long-term view for sustainability and independence
Public Partner

• Peace Corps and PEPFAR partners since 2004
• In collaboration with PEPFAR and USG health country teams, Peace Corps works closely with ministries of health and education to identify educational and health institutions
• PEPFAR is a major funding source for the GHSP
Private Partner:

• Committed to cultivating stronger, sustainable health systems by training a new generation of physicians and nurses.
• Staff offers expertise to Peace Corps in identifying in-country training institutions, and program evaluation, recruitment, and volunteer support.
• Works with private philanthropy to provide debt repayment and remove obstacles to service by the most qualified individuals. Funds used to offset educational debt, mortgage commitment and dependent tuition.
• A 501(C)(3) housed at Massachusetts General Hospital’s Center for Global Health in Boston.
American Academic Institutions

- University-based global health programs more than quadrupled between 2003 and 2009
  - **Surgery** – 90% of surgical residents at University of California, San Francisco interested in global health
  - **Pediatrics** – Over 50% have global health programs
  - **Nursing** – Johns Hopkins School of Nursing survey showed that 60% cited an “overseas experience” as a primary source of interest
- Building on pre-existing relationships between U.S. and host country medical institutions
  - Massachusetts General’s Center for Global Health Programs and Mbarara University in Uganda
How is the Global Health Service Partnership Implemented?
Peace Corps Response

- Expanded program for higher technical skilled professionals
- Volunteers serve one year assignments through Peace Corps Response
- Offers high-impact, short-term assignments
Benefits of Service

GHSP Volunteers receive same benefits as Peace Corps Response Volunteers:

- Transportation to and from their country of service
- Settling-in and living allowance
- Two vacation days per month of service
- Medical care
- Cash-in-lieu of a return plane ticket
- Readjustment allowance of $375 for each month of service
- Volunteers that serve at least two consecutive years are eligible for NCE
Recruitment: Volunteer Qualifications

Physician Educators -

Mandatory Qualifications:
- Training in one of seven core disciplines (Internal Medicine, Pediatrics, Medicine/Pediatrics, General Surgery, Obstetrics/Gynecology, Psychiatry or Family Medicine)
- Board eligible or board certified in one of the above specialties
- *Active license in the United States
- Excellent organizational, communication and writing skills
- Experience providing culturally sensitive and competent high quality care
- Successful candidates will possess the personal maturity and emotional intelligence to be able to manage working under challenging clinical circumstances.

*Note: Applicants will be required to meet licensing criteria and obtain appropriate clinical licenses in the host country.

Desired Qualifications:
- Experience in a faculty, teaching or mentoring position in a classroom/clinical setting
- Previous experience working in a developing or resource-limited setting

Nurse Educators -

Mandatory Qualifications:
- BSN with an MPH, or an MSN, APRN, DNP, PhD and/or a CNS
- Minimum of 3 years experience in a clinical specialty
- Active license in the United States
- Excellent organizational, communication and writing skills
- Experience providing culturally sensitive and competent high quality care
- Successful candidates will possess the personal maturity and emotional intelligence to be able to manage working under challenging clinical circumstances.

*Note: Applicants will be required to meet licensing criteria and obtain appropriate clinical licenses in the host country.

Desired Qualifications:
- Experience in a faculty position at a nursing educational institution that involved mentoring/precepting students in a classroom/clinical setting
- Previous experience working in a developing or resource-limited setting
2013 Applicant Pool

Specialty categories: MDs \(N=73\)

- Internal Medicine 28%
- Pediatrics 20%
- OB/GYN 18%
- Surgery 2%
- Anesthesiology 6%
- Psychiatry 4%
- Emergency Medicine 8%
- Family Medicine 14%

Degree categories: RNs \(N=100\)

- BSN 35%
- unspecified or lower degree 7%
- PhD 5%
- Midwife 9%
- Advanced Degree: APRN, CNS, MSN, NP 44%
Who Are Our 2013 Volunteers?

**Physician Educators**
- Internal Medicine - 5
- Pediatrics - 4
- OB/GYN - 3
- Family Medicine - 1
- Anesthesia - 1
- Cardiology - 1
- Psychiatry - 1

**Nurse Educators**
- Comprehensive - 8
- Midwifery/Women’s Health - 3
- Public/Community Health - 2
- Pediatrics - 2
- Psychiatry - 1
- Surgical - 1
- Medical-Surgical/Acute Care - 1
Where Are The Volunteers Going?

Uganda:
- Gulu University
- MUST (Mbarara Univ. of Science & Tech)
- Lira Nursing School

Tanzania
- MVUMI Clinical Officers Training Centre
- Bugando Medical Center
- Muhimbili Univ of Health & Allied Sciences
- Mirembe Nursing College

Malawi
- University of Malawi College of Medicine
- Kamuzu College of Nursing
- Mzuzu University
Training

• GHSP Coordinators in each of the three countries will attend training in Washington, D.C.

• All Volunteers will receive materials to begin pre-departure training on Peace Corps’ approach to development, practice of medicine and nursing in resource scarce conditions and local burdens of disease.

• On July 8, 2013 Volunteers will commence an intensive month long orientation split between the United States and their assigned country of service.

• Pre-departure, Volunteers will complete in-country licensing and credentialing to provide direct care in a teaching capacity within their country of service.

• In-service training (IST)
Monitoring and Evaluation

GHSP will employ rigorous M&E, both qualitative and quantitative measures and indicators.

**Goal 1: Human Resource Capacity Building**
To increase the number of nationally trained health workers providing services across all areas of health.

**Goal 2: Health System Strengthening**
To strengthen medical facilities which in turn serve to improve the health of their communities.

**Goal 3: Peace Corps Health Volunteer Capacity Building**
To improve the health-related technical capacity at post to support and improve PCV and counterpart activities and services.
Looking Forward

Lessons learned from M&E will inform future planning and growth of GHSP and whether to:

• Increase number of Volunteers
• Increase types of health care professionals
• Increase number of countries
Global Health Service Partnership

2014 Applications Now Open: www.peacecorps.gov/globalhealth