

Building

NEXT
GENERATION
LEADERSHIP

to achieve health equity worldwide

Global Health Corps is a leadership accelerator building a diverse community of better and more connected emerging leaders to **transform health systems.**

LETTER FROM OUR CEO

Dear Friends,

I was excited and honored to join Global Health Corps (GHC) in January, taking the reins from our inspiring co-founder Barbara Bush and fully embracing my belief in the power of people to change the world.

Every single day I wake up motivated by what our movement of 1,000 emerging health equity leaders is doing and will do, because I've seen that the right kind of leadership is truly transformative.

It was a joy to watch GHC, and Barbara herself, receive the 2018 Skoll Award for Social Entrepreneurship in April. It validated our impact to date and signals our potential for impact at scale going forward. While the global health sector has made progress, health systems are still far from delivering for all. The urgent need for better, more connected, and more diverse leaders to save and improve lives is clear. We have already built the sector's most diverse talent pipeline, and we are ready to do so much more.

Our growing community is hungry for a new leadership paradigm and united in their belief that health is a human right. I've seen them in action this year, and I've realized that change is not only possible, it's already on its way. From the bottom of my heart, thank you for being part of our movement. Your support is critical to accelerating global health progress - together, we can continue building the leadership we need to transform health systems. We look back on this year with gratitude and pride, and we look ahead to the blue sky that we must reach. So let's go!



Daniela Terminel
CEO OF GLOBAL HEALTH CORPS

With GHC Love,
Dani



GHC's global team at a staff retreat in New York City in June 2018



GHC staff members at a staff retreat in New York City in June 2018

- Aisha Mitchell**
Advocacy & Communications Team
- Alex Muzinda**
Zambia Country Team
- Alida Bivegete**
Rwanda Country Team
- Anita Namuyaba**
Uganda Country Team
- Armand Giramahoro**
Uganda Country Team
- Brittany Cesarini**
Advocacy & Communications Team
- Caroline Numuhire**
Rwanda Country Team
- Carrie Rubury**
Alumni Team
- Daniela Termini**
CEO
- Gwen Hopkins**
Central Operations Team
- Hannah Taylor**
U.S. Program Team
- Heather Anderson**
Central Program Team
- Isabel Kumwembe**
Malawi Country Team
- Jacob Gomez**
Central Program Team
- James Mayinja**
Uganda Country Team
- Jean Rene Shema**
Rwanda Country Team
- Jenny Peck**
U.S. Program Team
- Jeremy Harding**
Strategic Partnerships Team
- Jess Mack**
Advocacy & Communications Team
- John Cape**
Central Program Team
- Joseph Elias**
Alumni Team
- Lena Derisavifard**
People Team
- Mamata Venkat**
U.S. Program Team
- Meghan Kappus**
Strategic Partnerships Team
- Mera Boulus**
Strategic Partnerships Team
- Naaha Vora**
Central Operations Team
- Namuyamba Muyunda**
Zambia Country Team
- Nicholas Setteducato**
Central Operations Team
- Russatta Buford**
Central Operations Team
- Ruth Achillah**
Uganda Country Team
- Sarah Endres**
Central Program Team
- Sheila Sibajene**
Zambia Country Team
- Shivani Mulji**
Central Operations Team
- Simon Simkoko**
Malawi Country Team
- Toyosi Olowoyeye**
Central Program Team
- Victoria Choong**
Central Operations Team

WE ARE LEADERS...

Developing leaders is tough and rewarding work. It requires immense leadership, patience, generosity, and a sense of humor.

Our team has an unwavering commitment to helping people realize their fullest potential. Based across Malawi, Rwanda, Uganda, the United States, and Zambia, we bring our wide-ranging expertise and perspectives to create a powerful leadership accelerator. We are published authors, meditation teachers, athletes, former private sector consultants, and more; we have lived and worked all over the world and speak multiple languages.



GHC's global team at a staff retreat in New York City in June 2018



GHC staff members at End of Year training in Dar es Salaam, Tanzania in July 2018

DEVELOPING A CADRE OF LEADERS.

Our global team is made up of the best and brightest. In the past year, we have supported our emerging leaders through:

TRAINING



5,192 HOURS designing and facilitating bespoke leadership programming

COACHING



23,088 HOURS providing one-on-one coaching, mentorship, and psychosocial and career support

CONNECTING



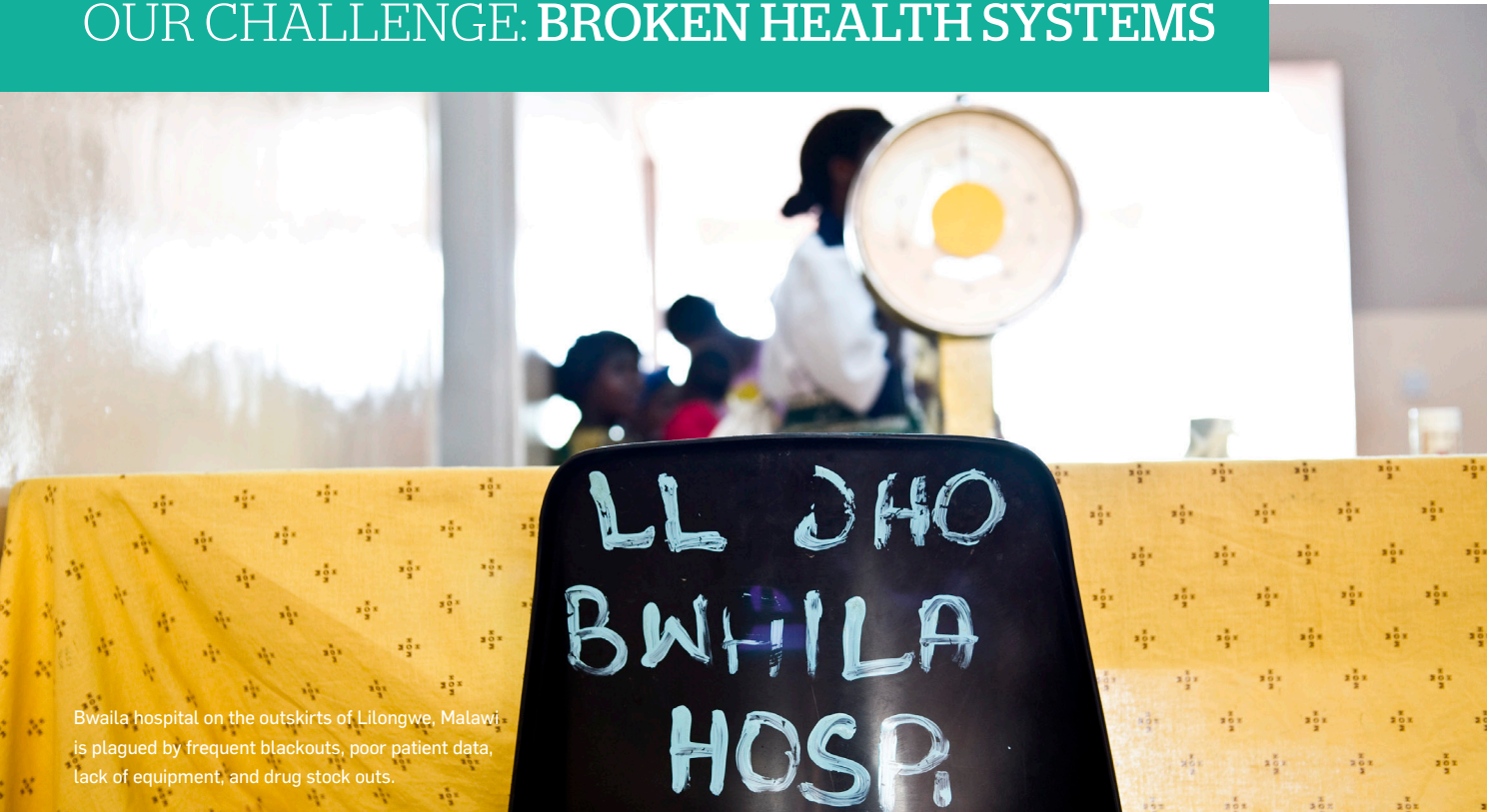
467,136 KILOMETERS traveled to site visits and in-person trainings

INVESTING



1 MILLION* calls, messages, and emails that serve as touchpoints for our emerging leaders
*Estimation, too many to count!

OUR CHALLENGE: BROKEN HEALTH SYSTEMS



Bwaila hospital on the outskirts of Lilongwe, Malawi is plagued by frequent blackouts, poor patient data, lack of equipment, and drug stock outs.

We are up against an immense challenge: failing and broken health systems. This is true in each of the countries where we work and around the globe. Our world has the tools and resources to save and improve lives, yet millions still suffer because systems breakdowns undermine the delivery of quality, affordable, and accessible care.

Global health challenges are complex – solving them requires exceptional leadership.



1/3 of the world's population does not have access to essential medicines and diagnostics.¹



Lack of trust in health systems contributed to deaths in West Africa's 2014-2016 Ebola outbreak.²



Black women are 3-4 times as likely to die from pregnancy-related causes as white women in the U.S.³

Health influences – and is influenced by – political, cultural, economic realities and more. Everything from road quality and local politics to burial practices and gender norms impacts health outcomes. Tackling health issues sustainably requires a broad, multidisciplinary, systems-wide approach that breaks down silos.

¹ Stevens H, Huys I. Innovative Approaches to Increase Access to Medicines in Developing Countries. *Frontiers in Medicine*. 2017;4:218. doi:10.3389/fmed.2017.00218.
² Shoman H, Karafillakis E, Rawaf S. The link between the West African Ebola outbreak and health systems in Guinea, Liberia and Sierra Leone: a systematic review. *Globalization and Health*. 2017;13:1. doi:10.1186/s12992-016-0224-2.
³ Villarosa, L. (2018). Why America's Black Mothers and Babies Are in a Life-or-Death Crisis. [online] *Nytimes.com*. Available at: <https://www.nytimes.com/2018/04/11/magazine/black-mothers-babies-death-maternal-mortality.html> [Accessed 10 Oct. 2018].

OUR SOLUTION: DEVELOPING NEW LEADERS

We are developing the next generation of leaders to transform health systems in our rapidly changing world. There's overwhelming evidence that changing who is at the decision-making table is what it will take to accelerate progress in global health and shift the status quo. That's exactly what we're doing - since 2009, we have built a pipeline of emerging changemakers who are...

EFFECTIVE Strong managers who mobilize strong teams

RESILIENT Driven by purpose and adaptive to changes

CONNECTED Collaborating in new ways for greater impact

INCLUSIVE Working intentionally across borders and boundaries

COMMITTED In this work for the long haul

DIVERSE Representative of a range of perspectives, skills, and backgrounds

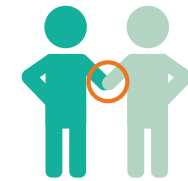
HOW GHC WORKS



STEP 1: Identify high-impact health organizations with gaps that need filling



STEP 2: Competitively select exceptional leaders ages 21-30 with diverse skills



STEP 3: Pair them as co-fellows, one national & one international



STEP 4: Place them at an organization



STEP 5: Train them over 13 months to be health equity leaders



STEP 6: Build a global ecosystem of fellows & alumni transforming health systems

“

Poor data had long affected the quality of our program decisions and patient care. In less than a year, **our fellow transformed the team**, catalyzing cross-district quality improvement and coordination.

”

-Rwanda Fellow Supervisor

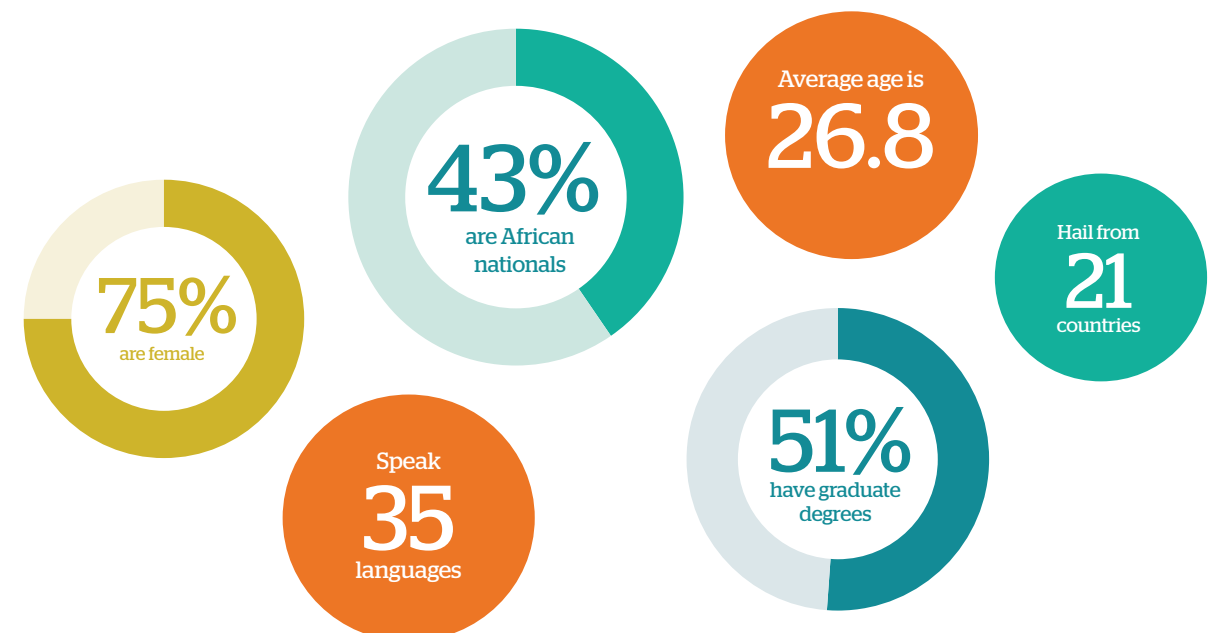
Over the past ten years of developing health leaders, we've built a robust community of **changemakers**. Collectively, they are working to transform health systems across the globe.



Our fellows and alumni bring a wide range of expertise - from finance, research, and software development to supply chain, project management, and fundraising - to bear on critical health systems gaps. They work across dozens of health issue areas, including:

AGRICULTURE, NUTRITION, & FOOD SECURITY **CHILD HEALTH** *Infectious Diseases* **YOUTH**
ART AND HEALTH *Economic Development* **HIV / AIDS** *POPULATION, HEALTH, AND ENVIRONMENT*
 Community Health Workers **EDUCATION** *Sport for Development* **ORPHANS AND VULNERABLE CHILDREN**
HEALTH SYSTEMS STRENGTHENING / HEALTHCARE ACCESS *Water and Sanitation*
 Maternal and Reproductive Health **NONCOMMUNICABLE DISEASES** **WOMEN AND GIRLS**

We officially welcomed our tenth fellowship cohort in June 2018, and they're already hard at work across 63 partner organizations. They represent a snapshot of our total community:



NEXT GENERATION HEALTH LEADERS



Malawi fellows organized a community health fair in Lilongwe



UNAIDS/Together for Girls fellows Nigel James and Orla Murphy at work



Co-fellows Musonda Chikwanda and Helena Archer at a training in Zambia



Co-fellows Ann Duong and Fabrice Mukunzi during a training in Rwanda

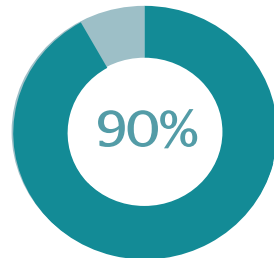


Co-fellows Jasmine Burton and Lute Mkala deliver a speech in the U.S.

Through a 13-month fellowship, we combine experiential learning with a robust leadership development curriculum built on pillars of systems and design thinking and a focus on personal resilience and networked leadership. Our model is designed to foster cultural humility and address the complexity of health systems challenges in Africa and the U.S.

FILLING GAPS IN HEALTH SYSTEMS

Our fellows represent a diversity of perspectives and skill sets and they work to fill real-time gaps within our partner organizations in five countries.



of supervisors report GHC fellows contributed positively or were critical to their organization's success.

EMERGING LEADER SPOTLIGHT: JOSH GREENE



Josh on site at a construction project in Bugusera, Rwanda

During his fellowship year, Josh, an architect by training, joined the social impact firm MASS Design Group in Kigali, Rwanda. He worked to address food insecurity and vector-borne illness as part of a team designing an agriculture university for farmers. Post-fellowship, Josh has stayed on with the team, continuing to apply his architecture skills to ensure that health and dignity are prioritized in the design and creation of new buildings in rapidly developing Rwanda. GHC has engaged designers with a passion for social impact like Josh to join the movement for health equity since 2009, because leaders with non-traditional backgrounds are an asset to solving complex health challenges.

CULTIVATING COLLABORATION

Our commitment to fostering collaboration across lines of difference begins with our unique co-fellow model. We place our fellows in bi-national pairs within each placement organization. This helps foster cross-cultural innovation and fresh thinking within our partner organizations and helps our fellows hone their cultural humility and resilience throughout the year and beyond.

EMERGING LEADER SPOTLIGHT: KATE SEGAL & CONSTANCIA MAVODZA



Kate and Constancia at a GHC training in Boston, MA

Kate - a white American atheist - and Constancia - a black Zimbabwean Catholic - cultivated an appreciation for their differences and leaned on each other for support and inspiration during their fellowship year. Kate and Constancia spent much of their year researching the harmful impacts of the Global Gag Rule, a U.S. foreign policy that restricts funding for safe abortion at CHANGE in Washington, D.C. Together, they helped publish a landmark report that provides key data for reproductive rights advocacy worldwide.

Constancia also supported Kate to tackle her fear of public speaking, cheering her on to speak at the National Young Feminist Leadership Conference and in a Congressional hearing on The Hill. Kate encouraged Constancia to explore non-academic writing, including publishing op-eds and blog posts on women's leadership and gender-based violence. Both are keeping up the fight to protect sexual and reproductive rights post-fellowship. As for their partnership? "#ConstaKate is for life."

BEYOND THE FELLOWSHIP



Alumni speaking to fellows at a panel at The Aspen Institute



Alumni connecting at Community Weekend at Yale University



Malawi alumni organized a cholera outreach campaign in Salima



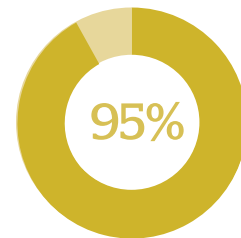
U.S. fellows and alumni lobbied lawmakers in D.C. to protect global health funding



Uganda fellows and alumni coordinated a blood drive in Kampala

After fellows complete their fellowship, they join our engaged alumni community. As they continue rising into positions of influence across the global health ecosystem, we see immediate and potential impact for stronger health systems. Our alumni programming harnesses this potential and is designed to foster effective leadership at the individual and collective levels.

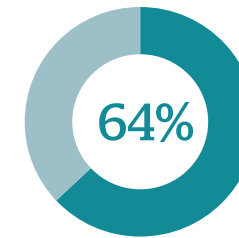
The strong connectivity of our community amplifies the impact of individual leaders and sparks creative initiatives and deep cultural humility. With burgeoning cross-sector partnerships and a newly launched digital community portal, our leaders are working together across cohorts and regions more than ever before.



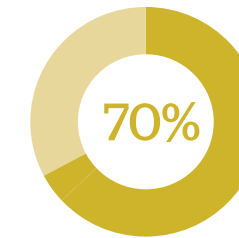
95% of our alumni continue to work in global health and social good, demonstrating their commitment to building more equitable systems over the long term.

TRAINING EFFECTIVE MANAGERS

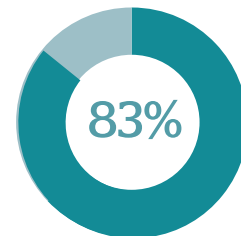
We build strong management skills through **1:1 coaching, a advisor program, and specialized trainings.** We partnered with McKinsey & Co. to provide world-class management courses for 50+ alumni, who out-performed the global cohort.



64% of alumni directly work together across geographies, citizenship differences, work-level hierarchies, and organization silos.



70% of our partner organizations employ at least one alumnus/a in addition to hosting fellows.



83% of alumni hold mid- or senior-level positions where they are leading teams, managing budgets, and informing decisions that directly impact health outcomes.

FOSTERING CONTINUED GROWTH

We convene our alumni at regional leadership summits to **facilitate professional development, strategic collaboration, and network building.** Over 40 alumni attended our most recent Summit in upstate New York.

INVESTING IN ALUMNI CHAPTERS

Alumni have formed a dozen chapters primarily in our hub regions to **mobilize around local health issues** as a community. Our investment in chapters through budget, resources, and staff support has fostered powerful initiatives over the past year (pictured above).

CONNECTING IN THE DIGITAL ERA

We're tapping into the connectivity of our world to build a stronger community. Over the past two years, we have **designed and launched a custom digital platform** using Salesforce technology to connect our fellows and alumni across borders and boundaries.

EMERGING LEADER SPOTLIGHT: TEMIE GIWA

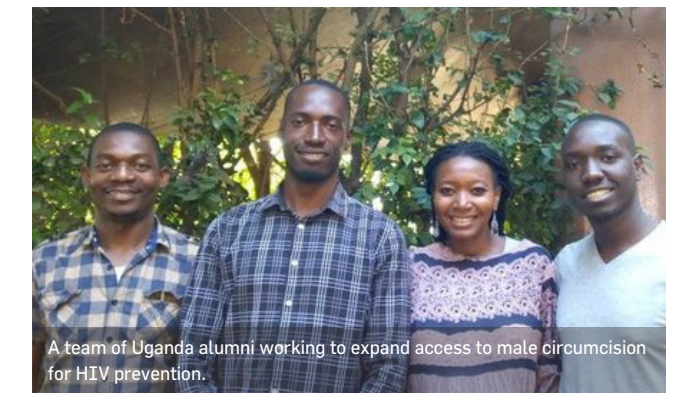


Temie with the motorcycles that LifeBank deploys to deliver blood quickly within Lagos

Temie is on a mission to save lives by facilitating access to blood in her native Nigeria. After a tough childbirth experience, Temie leveraged the network she gained as a 2011-2012 GHC fellow to launch cold-chain delivery company LifeBank. Temie, who was named a best African female tech entrepreneur at the World Economic Forum, has built Lifebank into a trusted resource for medical providers in Lagos.

SEEDING INNOVATION

For the past two years, we have partnered with D-Prize out of Stanford University to **fund cross-cultural teams of GHC alumni to bring health innovations to scale.** Alumni are tackling club foot and expanding access to male circumcision in Uganda, addressing post-partum hemorrhage in Pakistan, and promoting anti-retroviral therapy in Zambia.



A team of Uganda alumni working to expand access to male circumcision for HIV prevention.

AMPLIFYING NEW LEADERSHIP VOICES



U.S. fellow Mwandwe Chileshe speaking at a nutrition event



Zambia fellows Greg Rosen and Edith Namukonda on embracing differences



Zambia alumna Angel Chelwa moderating a panel on primary healthcare in Lusaka; Rwanda fellow Richard Nduwayezu interviewed at a health conference in Kigali



We need leadership that better reflects the communities most impacted by health inequities.

Our emerging leaders are majority women, majority people of color, and all young people. Their voices and perspectives have long been under-represented. We're working to change that by supporting and coaching them to find, hone, and amplify their voices for social change.

EMERGING LEADER SPOTLIGHT: UMBA ZALIRA



Umba Zalira didn't consider herself a leader before joining GHC in Malawi in 2014. She credits the mentorship, coaching, and support she received through the fellowship with transforming her understanding of whose voice deserves to be heard and honing her ability to speak up impactfully. Today, Umba hosts a podcast called "Feminizing While Malawian" and speaks on sexual health issues with Theatre for A Change (TfaC). She's committed to helping others find their voices in her work managing teams at TfaC and Growing Ambitions, a mentorship nonprofit she co-founded.

EMERGING LEADER SPOTLIGHT: JUMA OMALA

Juma Omala spent the past year as a fellow at Covenant House teaching Newark youth experiencing homelessness to navigate the U.S. healthcare system. Shocked by the system's complexity and inefficiency, he worked hard to mobilize others to act to combat health inequities, building his voice through writing and speaking via GHC-facilitated platforms. Now back home in rural Kenya, Juma is committed to using his voice to ensure other youth are not left out of decision-making processes that impact their health and wellbeing.



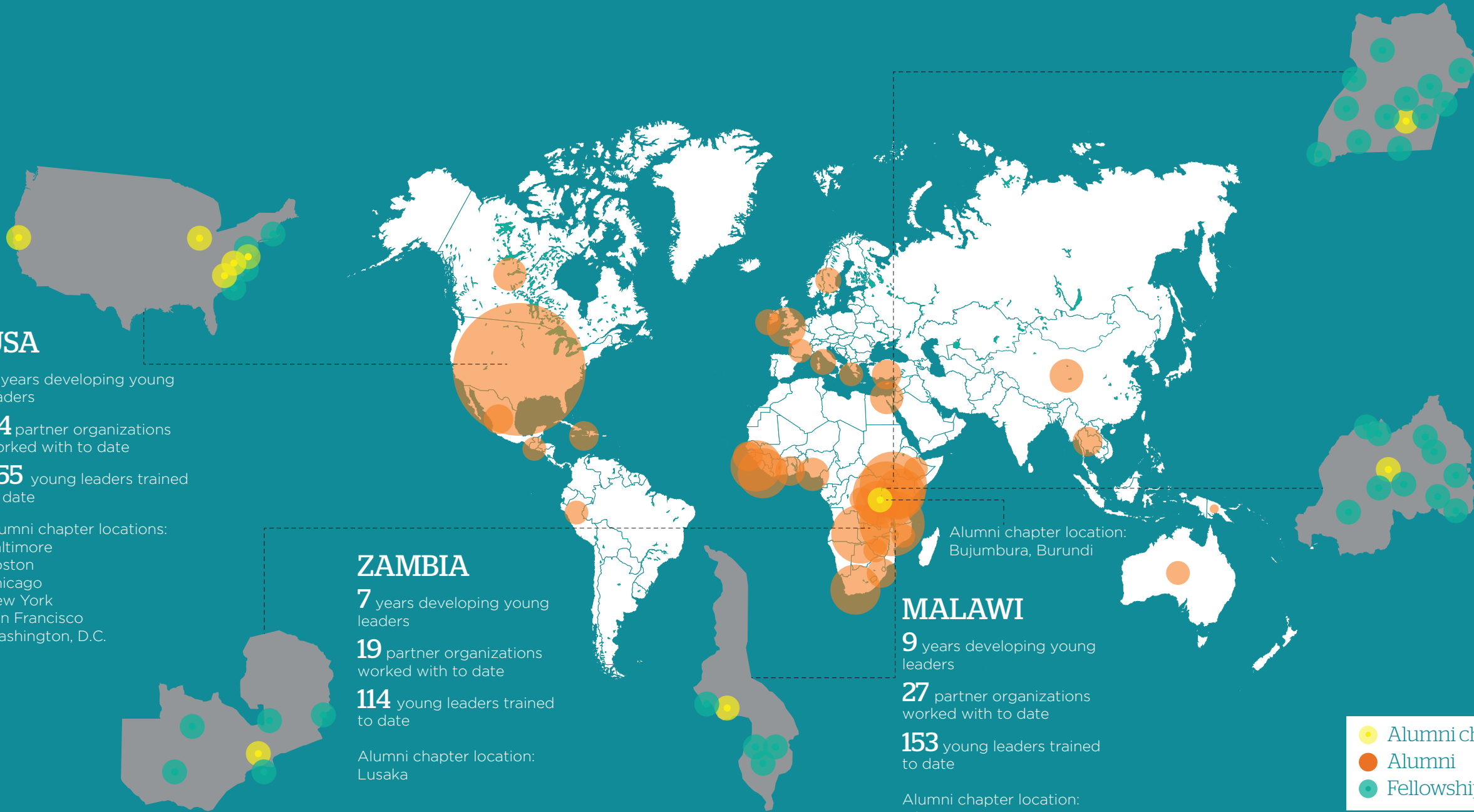
58 outlets in which our community has been published

63 platforms where our community has spoken on panels or delivered talks



WORKING ACROSS HEALTH SYSTEMS

Our growing community spans the globe, collaborating across borders and boundaries of all kinds. We intentionally go deep in our hubs in East and Southern Africa and the Northeastern United States, where nearly three quarters of our emerging leaders live and work.



USA

9 years developing young leaders

44 partner organizations worked with to date

255 young leaders trained to date

Alumni chapter locations:
Baltimore
Boston
Chicago
New York
San Francisco
Washington, D.C.

ZAMBIA

7 years developing young leaders

19 partner organizations worked with to date

114 young leaders trained to date

Alumni chapter location:
Lusaka

MALAWI

9 years developing young leaders

27 partner organizations worked with to date

153 young leaders trained to date

Alumni chapter location:
Lilongwe

UGANDA

8 years developing young leaders

42 partner organizations worked with to date

220 young leaders trained to date

Alumni chapter location:
Kampala

RWANDA

9 years developing young leaders

22 partner organizations worked with to date

192 young leaders trained to date

Alumni chapter location:
Kigali

- Alumni chapters
- Alumni
- Fellowship placements

THANK YOU TO OUR 2017-2018 PARTNERS

Our work is built on a strong foundation of collaboration. We're grateful for all the organizations working on the front lines of global health that partnered with us for the 2017-2018 fellowship year.

MALAWI

African Institute for Development Policy
Art and Global Health Center Africa
Baylor College of Medicine Children's Foundation Malawi
Christian Health Association of Malawi
Clinton Health Access Initiative
Dignitas International
Elizabeth Glaser Pediatric AIDS Foundation
Family Planning Association of Malawi
Johns Hopkins Center for Communication Programs - One Community Project
Ministry of Health - Malawi
Partners In Health/Abwenzi Pa Za Umoyo

RWANDA

CARE International
Gardens for Health International
Health Builders
Health Development Initiative
MASS Design Group
Ministry of Health – Rwanda
Partners In Health/Inshuti Mu Buzima
Rwanda Zambia HIV Research Group (Project San Francisco)

The Ihangane Project
The Women's Bakery
University of Global Health Equity
Voluntary Service Overseas

UGANDA

Alive Medical Services
Brick by Brick Uganda
Days for Girls
Elizabeth Glaser Pediatric AIDS Foundation
Foundation for Community Development and Empowerment
IntraHealth International
Jhpiego
LifeNet International
Minister of Gender, Labour, and Social Development
Ministry of Health – Uganda
PSI Uganda
Planned Parenthood Global
Reach Out Mbuya Parish HIV/AIDS
Save the Mothers
Spark MicroGrants

USA

1,000 Days
Boston Public Health Commission
Boys & Girls Club of Newark
Center for Health and Gender Equity
Children's Health Fund
Covenant House New Jersey

DotHouse Health
Evidence Action
Global Health Council
Greater Newark Healthcare Coalition
HIPS
Housing Works
Inter-American Development Bank
IntraHealth International
New York City Department of Health and Mental Hygiene
Pink Ribbon Red Ribbon
The Grassroot Project
Together for Girls/UNAIDS
Vecna Cares Charitable Trust
Women Deliver

ZAMBIA

Akros
Centre for Infectious Disease Research in Zambia
Ministry of Health – Zambia
PATH
Planned Parenthood Association of Zambia
Population Council
Rwanda Zambia HIV Research Group
Zambia Center for Applied Health Research and Development

“

Youth aren't just the leaders of tomorrow; **we're leaders today.** Bold, innovative, and visionary, my peers are making noteworthy advances in the way we pursue global public health. Youth must be empowered to push for greater accountability, stronger policies, and resilient health systems.

”

- Arush Lal

2017-2018 U.S. fellow

THANK YOU TO OUR DONORS

We are so grateful for the partnership and dedication of our donors. Thank you for believing in and generously supporting our movement to build the next generation of health equity leaders. It's long-term and immensely transformative work.

\$1,000,000+

Denny Sanford & Sanford Health

\$500,000+

Global Health Fellows Program II
Max M. & Marjorie S. Fisher Foundation
Skoll Foundation

\$250,000+

Caerus Foundation
Dee Ann & Marshall Payne
Rainwater Charitable Foundation
Robertson Foundation
William & Flora Hewlett Foundation

\$100,000+

AbbVie Foundation
Bill & Melinda Gates Foundation
Bloomberg Philanthropies
Bohemian Foundation
Caris Foundation
CME Group
DAK Foundation
David & Lucile Packard Foundation
ExxonMobil Foundation
Johnson & Johnson
Lyda Hill Foundation
Rockefeller Foundation
Segal Family Foundation
Virginia B. Toulmin Foundation
Starkey Hearing Foundation

\$50,000+

American Express Foundation
Bristol-Myers Squibb Foundation
Corporation for National and Community Service
Child Relief International
DSM
Guggenheim Partners
Imago Dei Fund

\$25,000+

Anthony Schiller
Bradford M. Freeman Foundation
Carolyn Lacy Miller Charitable Fund
David B. Miller Foundation
Diamond Family Foundation
Laurie M. Tisch Illumination Fund
MCJ Amelior Foundation
President George W. Bush
Rebecca and Bill Sanders
Salesforce.org
The Khoury Foundation
Turrell Fund

\$10,000+

Howell L. Ferguson
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\$5,000+

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Vin and Caren Prothro Foundation

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“

I didn't consider myself a leader before joining GHC. Through the fellowship, I realized **there is too much at stake not to raise my voice.**

”

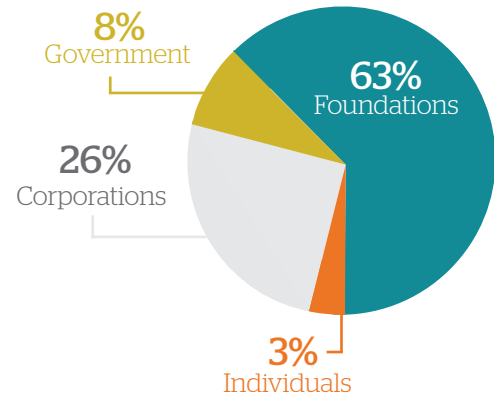
- *Umba Zalira*
2014-2015 Malawi fellow

Lusaka, Zambia

OUR FINANCES

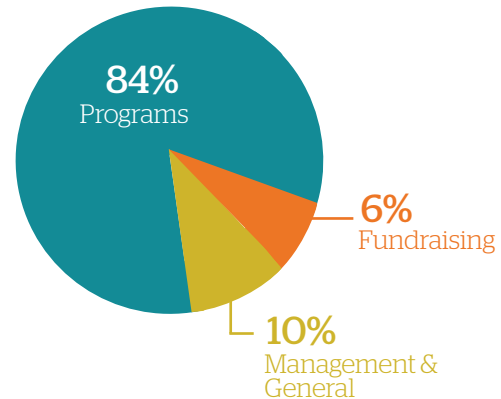
GHC partnered with a diverse set of funders across the nation with 92% of cash contributions coming from private sources to support our operations in Africa and the United States.

FY18* FUNDING



*FY18 is Fiscal Year 2018, which ran from August 1, 2017 to July 31, 2018.

FY18* EXPENSES



Revenue, Gains & Other Support

Public Support and Contributions	\$ 6,982,490
Government Grants	\$ 590,317
Fees and Other Revenue	\$ 640
Total revenues, gains and other support	\$ 7,573,447

Expenses

Program Services	
Fellow Support & Development	\$ 4,720,077
Alumni Support & Development	\$ 880,293
Total program services	\$ 5,600,369

Supporting Services

Management and General	\$ 659,329
Fundraising	\$ 366,882
Total supporting services	\$ 1,026,211

Total operating expenses \$ 6,626,580

Change in Net Assets from Operations \$ 946,867
 Non-Operating Adjustments to Net Assets \$ (1,128,289)

Change in Net Assets \$ (181,422)

Net Assets, Beginning of Year \$ 5,725,281

Net Assets, End of Year \$ 5,543,859

In addition to the \$4.7 million that Global Health Corps devoted to the support of fellows, our partner organizations contributed another \$2.1 million.



Thank you for helping us build the next generation of global health leaders.
 Let's keep going!



2017-2018 fellows at their closing retreat in Dar es Salaam, Tanzania

THE FUTURE LOOKS BRIGHT

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HEALTH
CORPS**