

# Developing Leaders for a Healthier Future



2020  
Annual Report

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In every theater of our lives, we need more people focused on the bigger, broader objective beyond the next earnings call or election: a long-term vision for a more just society ... Moral leadership—of all kinds, in every movement and institution, organization and community—is a prerequisite for positive change.

- Darren Walker, Ford Foundation

2019-2020 fellows in Rwinkwavu, Rwanda leading a sanitation initiative as part of their GHC cohort project.



A lot of times people think about policy but sometimes forget people within it ... There's a lot of trauma and a lot of stress that folks are under. And it's those same leaders that we're expecting to keep fighting.

- Nat Chioke Williams,  
Hill-Snowden Foundation



## Letter from the CEO

Dear friends,

2020 was a year of milestones, for better and for worse.

Personally, I completed my eighth year on staff and first year as CEO of Global Health Corps (GHC). I supported my husband through weeks of recovering from COVID-19 as we navigated childcare for our kids. I wrestled with uncertainty and limiting gender norms while grappling more deeply with how my white skin, my education, and my economic stability insulated me from many of the systemic inequities that the pandemic has laid bare. I prioritized listening, shifting power, and leading authentically.

As a community, many of us have stayed home more than ever, while others have braved being in public to do essential work. We've donned masks, endured swabs in our noses, cared for and missed seeing loved ones. We've uttered the words "unprecedented" and "pivot" countless times, feeling acutely how words can fall short. We've given speeches, facilitated workshops, co-designed interventions, welcomed new colleagues, shared feedback, strategized, mourned, and celebrated on Zoom.

One of the most important things we've done - individually and collectively - is ask important questions.

Where can we turn for wisdom, expertise, and moral courage in times of crises?

What will it take, beyond medicine and technology, to achieve health equity for all?

What kind of leaders do we need to be and to cultivate to realize this vision?

These questions have guided our work at GHC this year. Our global community of 1000+ leaders has worked relentlessly to protect and advance health equity. They're spearheading COVID-19 response and protecting hard-won gains in combating malaria, infant and maternal mortality, HIV, and more.

As we take stock of the long road to recovery and rebuilding that lies ahead, we find hope and purpose in the urgency of our mission to build a generation of trusted, values-driven leaders committed to transforming health systems. Thank you for your support and your belief in the power of people.

With sincere gratitude,

Heather Anderson  
Chief Executive Officer  
Global Health Corps

# The Case for Leadership



Uganda alumna Brenda Asimwe documenting community health needs in Busia district.

All the medical and technological advances in the world aren't enough to realize health as a human right for all.

**Case in point?** The U.S. has unparalleled resources and biomedical potential, but one of the highest COVID-19 death tolls globally.

There's a long road to recovery from the pandemic in all nations, and experts predict we'll experience more frequent global health crises in the future. **We need strong, equitable health systems to meet these challenges.**

**So how do we get there?** Systems are created, maintained, and transformed by people.

That means some of the most important work we can do right now is to equip a rising generation of leaders to transform health systems.

To prepare to meet future health crises with solidarity and strength, we need to invest in great leadership now.

The estimated cost of preparing for pandemics:

4.5\*  
billion USD  
per year

The estimated cost of COVID-19 to LMICs\*\*:

681  
billion USD  
per year

\* Gavi, The Vaccine Alliance, "10 Reasons Why Pandemic Could Threaten Global Health in 2021"

\*\* Low- and Middle-income Countries, as defined by The World Bank Group

**Global Health Corps has developed 1000+ health equity leaders since our founding in 2009.** United by the conviction that health is a human right and strengthened by differences in skill set and perspective, GHC leaders are more than their individual efforts: they're part of a movement.

## Our program is:

### **Dynamic:**

We address the intersection of health systems needs and our leaders' areas of interests.

### **Experiential:**

We adapt our offerings in response to real-time health challenges.

### **Co-designed:**

We engage fellows and alumni as thought partners and co-implementers.

### **Expert-driven:**

We seek out subject-matter experts to join us as speakers, facilitators, and advisors.

### **Aligned with our Theory of Impact:**

We strategically design and implement programs to improve our leaders' ability to lead effectively, collaborate for greater change, and influence the global health sector.

## Four pillars form the basis of our leadership development model:



### Systems Thinking

We cultivate working across silos and tackling the root causes of intersecting inequities.



### Design Thinking

We encourage feedback, out-of-the-box approaches, iteration, and learning from setbacks.



### Authentic Leadership

We center our shared values and strengthen our resilience and reflection muscles for sustainable impact.



### Collective Leadership

We foster deep personal and professional relationships and foster collaboration to amplify impact across our network.



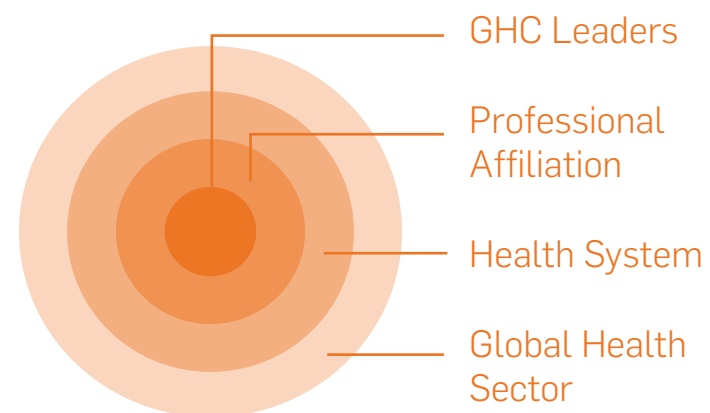
## An Ecosystem Approach to Health Systems Change

2012-2013 fellow Remy Pacifique, Pharmacy Lead at Partners In Health Liberia, with his team at a health clinic in Maryland County.

Health doesn't exist in a vacuum.

It's time leaders lead accordingly

to accelerate progress.



The pandemic makes it clear that health and other societal factors are deeply interdependent. That's why we place our fellows across health ecosystems, from **grassroots organizations to international NGOs and Ministries of Health.**

We equip our fellows and alumni to mobilize their broader networks for cultural and policy change for health issues such as **safe abortion access, stronger primary healthcare, and better health financing mechanisms.**

The GHC fellowship is an entry point into an **impactful career.**

96%

of partners said fellows met or exceeded goals of work assignments during their fellowship year.

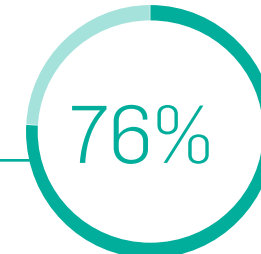
82%

of alumni remain in the fields of global health or human development beyond their fellowship year.

GHC leaders **influence the global health sector.**



of alumni found GHC offerings useful for their leadership development.

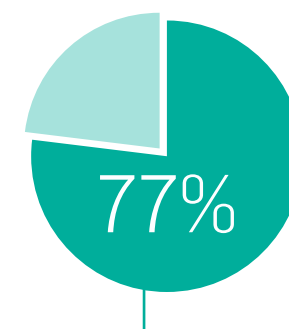


of fellows and alumni have spoken publicly, published writing, or participated in advocacy efforts this year.



of alumni from GHC's first four cohorts now hold senior-level decision-making positions.

The GHC network is a **powerful force for change.**



of alumni have collaborated with each other since their fellowship.

70

alumni in **8** countries engaged in **COVID-19 Collective Action Coalitions**, funded and supported by GHC.

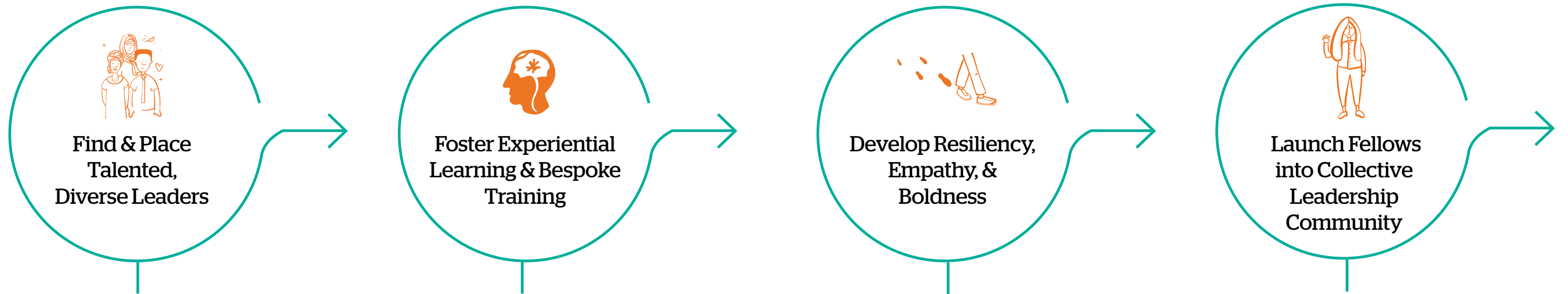
Alumni in **6** countries competed for



via the GHC & D-Prize Social Entrepreneurship Challenge.

# How GHC Works: Our Fellowship Program

STEP 1: We seed global health with fresh, diverse talent through our fellowship program. As the entry point to the GHC community, the year-long program instills foundational skills and provides access to a powerful network of global health experts, mentors, and peers.



Through a cost-share model, GHC selectively partners with [high-impact health organizations and Ministries of Health in Malawi, Rwanda, Uganda, and Zambia](#) looking for fresh talent.

The entire GHC community [recruits and selects leaders](#) ages 21-30 to fill fellowship roles.

From an initial intensive [Training Institute](#) to quarterly retreats throughout the year, fellows build community, sharpen their leadership skills, and amplify their impact.

Fellows gain [frontline experience, working in bi-national co-fellow pairs](#) to foster support and cross-cultural learning.

Fellows receive [executive coaching and training](#) to work through personal and professional challenges and deepen self-awareness and resiliency.

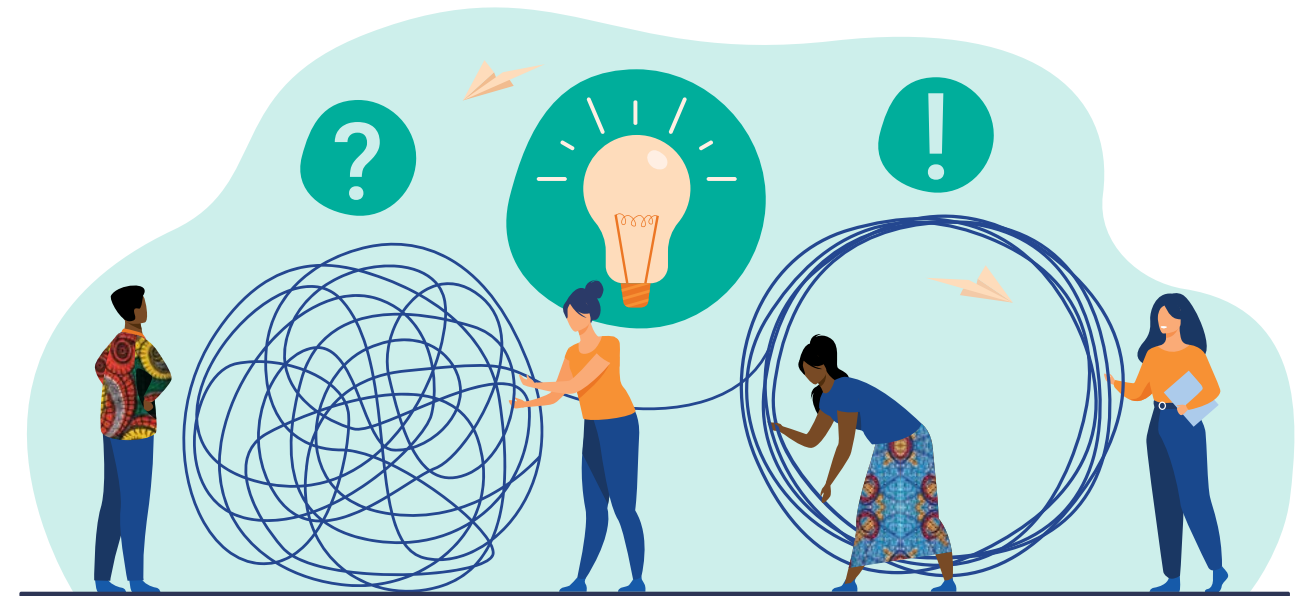
With funding from GHC, fellows pool their skills and networks to implement a [health project in their communities](#). They also pursue an [individual stretch project](#) and tap into a [professional development fund](#) for greater impact.

Fellows are [mentored by two alumni](#) throughout their fellowship and for the first six months of their post-fellowship careers. They access community wisdom and resources via [GHC's digital community portal](#).

Equipped with [more confidence, sharper skills, and a stronger network](#), fellows transition to our alumni community.

# How GHC Works: Our Alumni Program

STEP 2: We sustain and expand the impact of our alumni, who are the leaders the world's health systems need right now. Our alumni program provides essential resources and support for leadership growth and mobilizes alumni in collective action. Their engagement in the program accelerates progress towards health equity throughout their careers.



## Collective Action

In Malawi, Rwanda, Uganda, the U.S., and Zambia - GHC's operating countries with high concentrations of GHC leaders - alumni co-design and implement flagship programs to advance health equity in their communities.

### Impact Trajectories

GHC alumni around the world engage in a wide range of offerings to grow as effective leaders by improving their core competencies in focal areas introduced during their fellowship year.



Trajectory 1: Social Entrepreneurship



Trajectory 2: Executive Management



Trajectory 3: Advocacy, Policy and Governance



Trajectory 4: Academia and Research

Each Impact Trajectory advances three key aspects of leadership development through various programs:



#### Network, Coaching, & Mentorship

- Peer-Mentor Learning Circles
- Advisor Program
- Community Portal Groups
- Career Advising & Coaching



#### Knowledge & Theory

- Expert-led Webinar Series
- Management Trainings
- Communications, Advocacy, & Board Management Workshops
- Business Fundamentals & Resource Mobilization Courses



#### Practical Application

- Seed Funding through GHC Partnerships
- Public Speaking & Publication Opportunities
- Collective Action Initiatives

This program channels resources, time, and talent via GHC alumni chapters and issue-area coalitions, like our COVID-19 Coalitions, to amplify health systems impact on a national scale.

## Collective Action

# Health Equity Requires Gender & Racial Equity



Artwork co-created by artist Pekoe and fellows, alumni, and staff in GHC's "PSiCHART: Health Equity x Racial Justice" virtual event.

The tightly bound chains of colonialism endure in global health. It's time to enact **a lasting power shift.**

We're infusing diverse, young talent into the global health sector and harnessing our platforms to drive sector-wide change.



Our leaders...

45+  
languages speak

48  
countries hail from

400+  
health organizations work at

We support our community to write and speak on global stages to influence the sector.

We published **38 pieces** on our publication **AMPLIFY**, many on **leading through crisis and decolonizing global health.**



Fellows and alumni raised their voices for health equity in **90+** global platforms.



We championed the cause of diversifying leadership on our social media platforms, engaging our **100,000+** followers through **takeovers, chats, and broadcasts.**



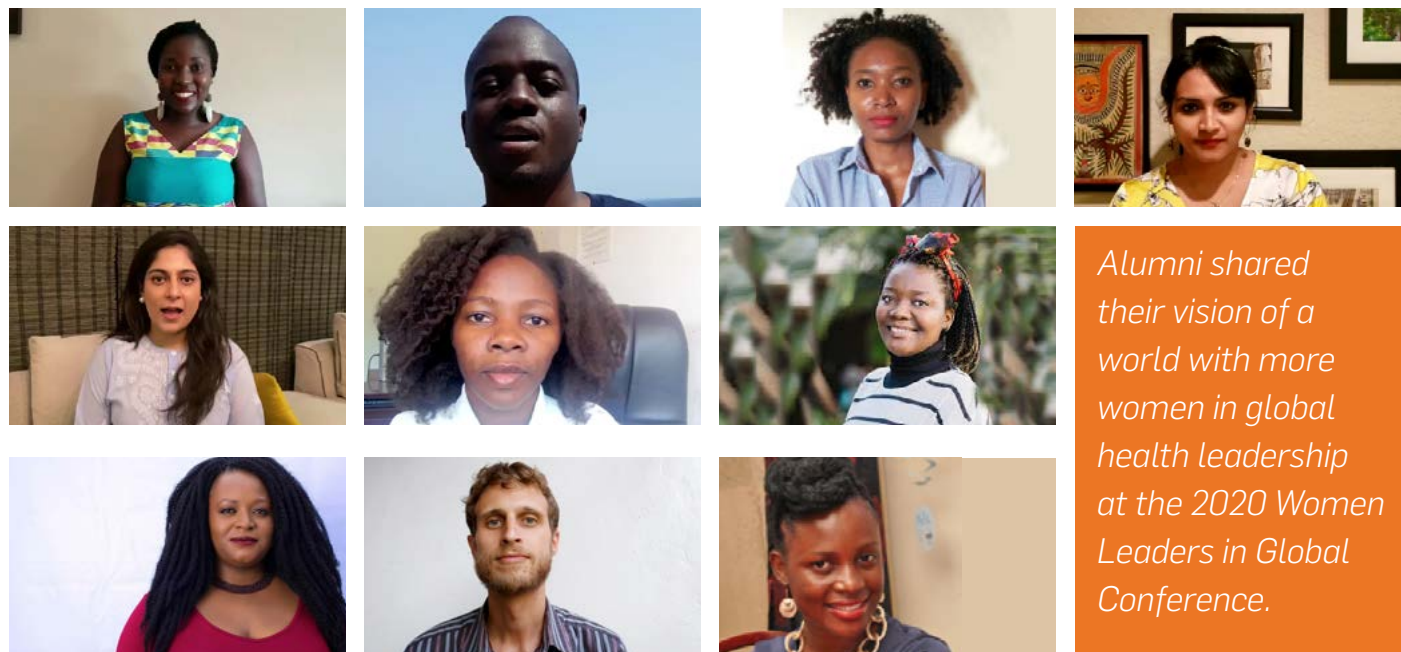
“ [There's] a distressing predictability in how crisis reinforces existing inequalities, and how the people in power who are making decisions at all levels...will lean on existing scripts, biases, and power structures that not only fail to solve the problem, but often make matters worse.

- Brian Simpson, Global Health NOW

## The gender gap in leadership impedes global health progress. It's time to invest in women.



Women comprise more than 70 percent of the global health workforce, but hold less than 25 percent of the sector's top leadership roles. It will take an estimated 54 years\* to reach gender parity in senior management roles in global health – without COVID-19's impact.



*Alumni shared their vision of a world with more women in global health leadership at the 2020 Women Leaders in Global Conference.*

**700+** of our leaders are female.

We've invested in these leaders through our programs and amplified the movement to close the sector's gender gap this year through key partnerships and platforms, including:



## Race is a leading social determinant of health globally. It's time to lead like Black Lives Matter.

From toxic stress caused by the threat of state-sanctioned violence to sub-par treatment in doctors' offices and hospitals, Black people in the U.S. and globally face numerous health challenges rooted in and exacerbated by systemic racism. We're deepening our commitment to advance equity at the intersection of race and health.

Our community is majority **Black and people of color**, including



This year, we convened our community to commemorate **Juneteenth with RAPtivism's Aisha Fukushima.**

We provided **40** Black community members of varying nationalities access to world-class management training through **McKinsey's Black Leadership Academy.**

We hosted **PSiCHART x Health Equity and Racial Justice**, a virtual collaboration with alumna Georgina Denis' social impact tech start-up SURU Together and alumna Eliza Ramos' coaching start-up Circles International.

We launched a **Racial Justice Learning Hub** on the GHC Community Portal.



# Meet GHC's 2020-2021 Fellows



Our 2020-2021 fellow cohort joined us in July 2020. Who are these inspiring and adaptive leaders?

- ▶ They hail from and are working on the front lines of health in **Malawi, Rwanda, Uganda, and Zambia**.
- ▶ They are **researchers, storytellers, policy wonks, finance gurus, data analysts, architects, and more**.
- ▶ They collectively speak **13 languages**.
- ▶ They bring experience from across the **private and public sectors and academia**.
- ▶ They are our first-ever **all-African nationals** cohort (with international fellow placement paused by COVID-19 travel restrictions).



During Training Institute, University of Global Health Equity (UGHE) Vice-Chancellor Dr. Agnes Binagwaho (left) and UGHE faculty member and former Executive Director of Partners In Health - Rwanda, Dr. Alex Coutinho (right) spoke with fellows about health equity and leadership.

Fellows continued learning, connecting, and reflecting through other creative programming:

- ▶ **August-October: Leadership Academy**, a series of five live workshops on topics like writing for social change, managing up, and building a feedback culture.
- ▶ **October-November: Quarterly Trainings** brought together fellows in each country of professional development and community building
- ▶ **October-November: Essentials of Global Health**, a six-week online course with Yale University's Dr. Richard Skolnick.
- ▶ **Ongoing: Weekly digest** of program offerings and resources, **check-ins** with Country Team staff, **writing and speaking support**, and access to **mentorship** and our virtual alumni programming.

## Co-fellow Spotlight



Gisele Ingenere, Ministry of Health (MOH) - Rwanda

**Hometown:** Kigali, Rwanda

**Motivation for joining GHC:** Searching for a community of others health equity advocates

**Background:** Business development and finance management in private sector

**Fellow role:** As Finance Program Officer, she helps manage a nationwide savings scheme for nurses, doctors, lab technicians, and other paramedics to boost healthcare worker retention in Rwanda throughout the pandemic.



Charles Mwanje, Ministry of Health (MOH) - Uganda

**Hometown:** Kyankyazi District, Uganda

**Motivation for joining GHC:** Personal experiences with lack of access to quality healthcare

**Background:** Social science research

**Fellow role:** As Mental Health and Control Substance Abuse Program Officer, he manages psychosocial support at three quarantine centers in Kampala and represents MOH at national COVID-19 stakeholder meetings.

Looking Ahead:  
**Recruiting & Selecting Our 2021-2022 Cohort!**



Spotlight on Alumni Impact

**Namwaka Mungandi,**

Lab Scientist Turned Advocate

*Namwaka is deeply passionate about the one thing nearly everyone on Earth agreed we needed this year: increased access to viral testing. She's been combining advocacy savvy and biomedical science expertise to combat COVID-19 in her home country of Zambia.*

A few years ago, Namwaka was working at a government-run laboratory in Zambia's Copperbelt region. It was her first foray into the health sector, and the sobering lack of resources and subsequent tragedies she encountered nearly made it her last. But she sought out a community of other health equity professionals to weather the long haul and found it in GHC.

Namwaka recalls joining GHC in 2017 as a quiet, methodical scientist. Today, she is known for asking tough questions, setting ambitious timelines, and mobilizing diverse groups to accomplish shared goals. Over the last few years as Program Manager Laboratory Systems with Clinton Health Access Initiative, Namwaka has architected an HIV viral load testing program reaching over a million Zambians.

“I never imagined I would have a role leading diagnostics for a global pandemic across Zambia...Achieving health equity is a long game, but we're seeing important gains through collective action and that motivates me.

“Being part of the GHC community has been so rewarding – the technical advice, professional development support, and networking connections we share make us better. The whole is truly greater than the sum of its parts.

This year, Namwaka brought her background in advocacy and biomedical science to the task of expanding Zambia's COVID-19 testing capacity. She's drafted national plans for decentralizing testing, organized virtual meetings with the Ministry of Health in Zambia's laboratory services directorate and other stakeholders, and advised labs by phone on appropriate testing protocol and results dissemination. She is also an active member of GHC's COVID-19 Collective Action Coalition in Zambia, leading initiatives to increase mask-wearing.



Spotlight on Alumni Impact

**Neil Malilwe,**

Digital Strategist & Creator of Covizap

*Neil's realization of the potential for digital solutions to improve health in his native Zambia led him to GHC in 2012. In 2020, his technical and leadership aptitude took on new importance as he mobilized youth across Africa to respond to COVID-19 and developed a pandemic data tool.*

As a fellow with the Centre for Infectious Disease Research in Zambia, Neil and his co-fellow led the development of a distance learning initiative for community health workers treating cervical cancer.

Since then, Neil has deepened his commitment to leveraging tech to improve health outcomes and stepped into a leadership role with African Union's Office of the Youth Envoy. When COVID-19 hit, Neil spearheaded digital outreach to equip youth across Africa and the diaspora to respond to the pandemic in their communities.

At the same time, Neil noticed that few Zambians were able to access or interpret the country's COVID-19 data through the official reports.

With the urban-rural digital divide in mind, he designed a user-friendly, quick-to-load COVID-19 data visualization micro-site dubbed COVIZAP. The first people Neil turned to test COVIZAP and provide feedback were GHC community members.

“GHC has taught me to adapt, adjust, and overcome challenges and to lean into trustworthy networks and embrace the potential to learn from them. This is especially true during uncertain times of crisis.



Beyond his work at African Union and COVIZAP, Neil is also a newly elected GHC Zambia Alumni Chapter leader. He's committed to deepening collaboration to strengthen the nation's health system and bolster his own ability to persevere when facing challenges. His biggest sources of inspiration? The determined, diverse people he's surrounded by and high-speed internet.

## Protecting Mental Health through GHC's COVID-19 Coalition in Rwanda

Globally, many mental health efforts were sidelined to emergency COVID-19 response at a time when they were needed most. Tapping into GHC's COVID-19 Collective Action Coalition for support and funding, GHC alumni in Rwanda designed an initiative to prevent this from happening despite the nation's shortage of psychiatrists.

Building on the Ministry of Health's National Mental Health Policy and Guidelines, they developed strategic partnerships with mental health providers and community health facilities to ensure sustainability. Their vision is to strengthen Community Health Workers capacity for providing mental health support services in 2021 and beyond.

2019-2020 fellows in Rwinkwavu, Rwanda.  
Credit: 2019-2020 fellow Nick Carney



Spotlight on Alumni Impact

**Eliza Ramos,**

Social Entrepreneur & Coach for Health Leaders

*An award-winning social entrepreneur, activist, healer, and advocate for social justice, Eliza Ramos spends her days pouring into leaders around the world who are giving their all to protect and advance health equity during and beyond crises like COVID-19.*

Eliza got her start in the global health sector as a 2012-2013 fellow at Partners In Health in Rwanda. As an GHC alumna, she joined GHC staff to expand opportunities for other alumni rising through the ranks in global health. *Since then, she's been on a mission to build a culture of mental health and resilience among the sector's leaders.*

In 2017, Eliza launched Circles International (CI) to drive this mission forward. As CEO and principal consultant, she leads the CI team to help leaders across the U.S., Central and South America, and East Africa thrive, which in turn fuels their sustained impact. Grounded in her experiences as a social worker and global health practitioner, she's a champion for the GHC leadership value of sustainable resilience.

Throughout the pandemic, Eliza has been striving to practice what she preaches as she's continued this work from her home in the Bay Area. When asked how she's coping, she shared:



*I've been covering and uncovering my workspace with a piece of Rwandan kitenge fabric to signal separation from work at the end of the day and an intentional commitment to do my best work each morning.*



Eliza (second from right), along with other speakers in GHC's webinar on Protecting Mental Health during COVID-19, from the left: Kruger Nyasulu (2013–2014 Malawi fellow, Rootwise Leadership Facilitator); Annie Bonz (GHC Advisor and Technical Director, Resilience Programs at HIAS); and alumna Shayni Geffen (2018–2019 U.S. fellow, MSc student in Global Mental Health).

## Spotlight on Malawi Community Impact: An Ecosystem Approach to COVID-19 Response

Since 2009, GHC has worked with a range of partners across Malawi to address the country's most pressing health challenges. As COVID-19 hit the global stage in early 2020, GHC fellows and alumni rose to the challenge of combating the spread.

### GHC in Malawi

11  
years

25  
partner  
organizations

172  
fellows

2019-2020 fellow **Hannah Lieberman** led procurement for personal protective equipment (PPE) for those most vulnerable to contracting severe COVID-19.

2017-2018 fellow **Limbani Thengo** is designing data management tools and COVID-19 training curriculum for community health workers.

2019-2020 fellow **Effort Binuel Kamnkhwani** developed a customized app to allow community health workers (CHWs) to track, trace, and follow up with COVID-19 patients.

2020-2021 fellow **Revelation Nyirongo** trains CHWs to use Effort and Limbani's tools and curriculum for COVID-19 contact tracing.



2015-2016 fellow **Lindiwe Bandazi** oversees operations to expand testing and COVID-19 awareness with The Malawi Liverpool Wellcome Trust.

2015-2016 fellow **Lucky Gondwe** manages a team of researchers to scale-up COVID-19 mitigation and behavior change interventions.



2020-2021 fellow **Lily Mwandira** developed a policy brief for MOH with evidence-based recommendations on epidemiological models and potential high-impact interventions.

As CEO of a manufacturing company, 2017-2018 fellow **Ceaser Chembezi** is producing affordable hand sanitizer and donating to GHC alumni-led initiatives.

As the CEO of Truss Group in Malawi, 2016-2017 fellow **Sachi Shah** is leading education and PPE outreach to Malawians in high-density, low-income townships.



2014-2015 fellow **Mphatso Bokosi** spearheaded an initiative to provide PPE, water, and soap in Bunda-Lilingwe.

2013-2014 fellow **Trinitas Kunashe** led a project to drill boreholes in Mzimba and promote hand-washing.

The **Malawi Alumni Chapter** coordinated outreach and PPE delivery to Mlodza Primary School, garnering national media attention in *Nyasa Times*.



2019-2020 fellow **Samson Fiado** deployed an e-health system in partnership with Malawi's Ministry of Health (MOH) to streamline COVID-19 testing and reporting nationwide.

2020-2021 fellow **Francis Botha** is developing software to connect the central laboratory system to district hospitals for COVID-19 data reporting.



The **Malawi Alumni Chapter** created educational videos in Chichewa and English to amplify government-approved COVID-19 prevention messaging on national media outlets.



2015-2016 fellow **Elizabeth Wetzel** spearheads Baylor College of Medicine Children's Foundation Malawi's partnership with MOH to procure PPE for 120 government health facilities nationwide.

2019-2020 co-fellows **Jemimah Nyirongo** and **Madeline Stark** supported COVID-19 initiatives to protect HIV-positive clients through the Tingathe program.



2020-2021 fellow **Louiser Kalitera** is developing Malawi's COVID-19 Syndromic Surveillance Survey to monitor trends in morbidity, mortality, and indicators for access to care.



# The Power of Partnership: GHC & LifeNet International

LifeNet staff provide services for community members in Kampala

Global Health Corps (GHC) and LifeNet International launched their partnership in 2012. With both organizations in their early years, two GHC fellows filled critical capacity gaps in project management and monitoring and evaluation on LifeNet's team in Burundi. In 2015, the partnership evolved as fellows began working with LifeNet Uganda. GHC's infusion of talent is accelerating LifeNet's progress towards their bold goal of transforming care for more than 10,000,000 patient visits annually, across 10 African countries by 2023.

Josh Guenther, LifeNet's Uganda Country Director and a GHC fellow supervisor, credits the partnership with deepening his team's impact:

“GHC provided access to excellent talent that allowed us to grow sustainably and punch above our weight as a small organization. Massive shifts in how we've been reporting about our work and operating can be traced to GHC fellows and alumni.

William Mugabi is one of those alumni. He joined LifeNet as a 2016-2017 GHC fellow because his work in private healthcare clinics opened his eyes to deep systemic inequities. He brought his background in software engineering and healthcare management to his role as a Management Officer, working to deliver logistics, training, and supply chain support to health centers.

Beyond his technical skills, Josh points to William's leadership potential as a major factor in the steady expansion of his scope and influence on the LifeNet team:

“William was an obvious choice when it was time to select our next team lead. Like all the fellows GHC has sent our way, he has always had a fire to learn and grow, regardless of position.

William is in good company among other GHC alumni including James Kaggwa, Safaa Garelnabi, and Julius Kirya, critical LifeNet team members who have led family planning and non-communicable disease initiatives. The team also partnered with alumnus Brian Ssenoga to roll out an mHealth app designed to help clinicians and nurses in rural areas treat patients with high blood pressure.

Current 2020-2021 fellow Steven Twinomugisha is leveraging his design and storytelling expertise to spearhead the launch of LifeNet's online distance learning platform, which provides partner health facilities with accurate COVID-19 information and more. Josh and William say they've benefited from Steven's flexibility, a trait GHC trains fellows to hone and one that COVID-19 has demanded of leaders everywhere.

In addition to recruiting a new fellowship pair for the Uganda program, recruitment is now underway for two fellows to bolster LifeNet's team in Malawi starting in July 2021. Josh says it's a timely development:

“As we head into our fourth year of operations in Malawi, integrating GHC fellows into the programs early boosts our capacity to grow and scale much sooner than we otherwise could.

Among frontline health organizations in GHC's countries of operation, demand is high for the diverse talent and quality training GHC provides through our fellowship program.

Each year, we receive an average of twice as many applications for fellow placement organizations as we can accept.

75% of our placement organization partners return year-over-year.

Placement organizations cover a percentage of fellow expenses through a tiered cost-share approach driven by each organization's budget.

## Spotlight on Alumni Impact in Rwanda: Strengthening Supply Chains During COVID-19



Photo by Christine Sandu  
via Unplash



Photo by Testalize via Unsplash



Joseph Ndagijimana with  
colleagues at Zipline

**COVID-19** has revealed the weakness and fragmentation of global supply chains. In particular, disruptions in the supply chains of pharmaceuticals, personal protective equipment (PPE), medical devices and supplies, blood, and even food have threatened the health and wellbeing of populations around the world.

*In Rwanda, GHC fellows and alumni tackled this challenge collaboratively and creatively throughout the country's lockdown, which was among the strictest in the world. Pooling their expertise and networks, they are playing critical roles in delivering life-saving drugs and supplies for sexual and reproductive health needs; COVID-19 prevention; and treatment for cancer, HIV, TB, malaria, and more.*



Meet John Wilson Niyigena  
(2010-2011 fellow),  
Director of Supply Chain,  
Logistics, and Warehousing at  
the Rwanda Biomedical Center

John transitioned from the biodiesel production sector to global health when he joined GHC as a fellow in 2010. A decade of sharpening his leadership skills and technical expertise prepared him to mobilize his team to meet the supply chain challenges sparked by COVID-19 this year. Throughout the pandemic, he's overseen supply chain operations from the central medical store to health facilities across Rwanda in partnership with the Ministry of Health and a range of NGOs.



Meet Joseph Ndagijimana  
(2016-2017 fellow), General  
Manager for Zipline in Rwanda

The skills honed and connections made during Joseph's fellowship year as a Supply Chain and Procurement Officer at Partners In Health (PIH) are vital to his leadership at Zipline. In March, Joseph and his team launched an innovative partnership with PIH to use drones to deliver medication to thousands of cancer patients at home during lockdown.



Meet Athanase Rukundo  
(2017-2018 fellow), Director  
of Programs at Health  
Development Initiative (HDI)

A vocal advocate for sexual and reproductive health, Athanase heads up efforts to procure health commodities, including contraceptives, throughout the pandemic. Harnessing his GHC training in collaborating across silos and building strong synergies, he has continued to advance HDI's goal of providing consistent stigma-free quality service for all patients at each of the organization's clinics.



Meet Morris Ndekwe  
(2011-2012 fellow), Managing  
Director & Chief Pharmacist,  
Vine Pharmacy

In the eight years since completing his fellowship working on supply chain with PIH, Morris' commitment to advancing equity has remained steadfast. He founded Vine Pharmacy, the only 24 hour pharmacy in Rwanda, to expand access to critical medicines and supplies. When COVID-19 hit, he leveraged the GHC network to design and execute a plan to deliver medical supplies to patients' homes for continuity of care.

# Thank You to Our Partners

Transforming systems requires collective efforts. We're grateful to all the individuals and organizations who have joined us in envisioning and working for a more equitable world. A special note of thanks to the following partners with whom we've had the honor of working closely throughout the past year.

2019-2020 fellow Jemimah Nyirongo at Training Institute in Rwanda; Credit: 2019-2020 fellow Nick Carney

## 2019-2020 Fellowship Placement Organizations



### Ministry of Health Partners



Malawi



Zambia



Rwanda



Uganda

## Additional Program Partners



# Thank You to Our Donors

All of our funders share our belief in the power of people to transform health systems. We are grateful for their steadfast commitment to our movement and their generous support for our work developing the next generation of leaders.

2019-2020 fellows Enock Nsokolo and Sarah Anderson at Training Institute in Rwanda; Credit: 2019-2020 fellow Nick Carney

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## In-Kind Donors & Special Thanks

Dr. Agnes Binagwaho  
Dr. Alex Coutinho  
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*In honor of Global Health Corps' 10 year anniversary, 162 alumni donated to our work.*

# Our Team

Developing a generation of great leaders takes great leaders, especially through the tumult and uncertainty of the past year.



## *We strive to walk the talk.*

We cultivate our own empathy, humility, self awareness, and resilience.

We hold joy and pain, setbacks and breakthroughs, patience and urgency, in beautiful tension.

We work hard and push for progress each day while pacing ourselves for the long game.

Above all, we strive to show up - for each other, for our community, and for the world.

Our team has deepened our efforts to heal, to cultivate accountability, and to nurture diversity, equity, and inclusion (DEI) within our team, including key efforts underway:

- ▶ Launching an internal DEI task force to set and drive change through FY21
- ▶ Working to Hiring DEI consultant(s) to help shift our culture, practices, and policies as needed
- ▶ Collaboratively drafting a DEI vision to guide our work
- ▶ Providing staff with wellness days and creating virtual opportunities to process, connect, and support each other



**Alex Munzinda**  
Facilities Proprietor

**Alida Bivegete**  
Rwanda Operations Manager

**Anita Namuyaba**  
Community Impact Manager

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**Namuyamba Muyunda**  
Community Impact Manager

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Impact & Learning Manager

**Rose Anderson**  
Director of Labor & Compliance

**Ruth Achillah**  
Director of Fellowships

**Sarah Endres**  
Grants Manager

**Sheila Sibajene**  
Zambia Senior Country Manager

**Shivani Mulji**  
Finance & Operations Coordinator

**Simon Simkoko**  
Malawi Senior Country Manager

**Victoria Choong**  
Finance & Operations, Senior Director

# Our Finances

REVENUES, GAINS AND OTHER SUPPORT

Public Support and Contributions	\$	3,890,767
Fees and Other Revenue	\$	169,071
Total revenues, gains and other support	\$	4,059,838

EXPENSES

Program Services		
Fellow Support & Development	\$	1,614,630
Alumni Support & Development	\$	1,159,699
Total program services	\$	2,774,329

Supporting Services		
Management and General	\$	524,506
Fundraising	\$	470,944
Total supporting services	\$	995,450

Total operating expenses	\$	3,769,779
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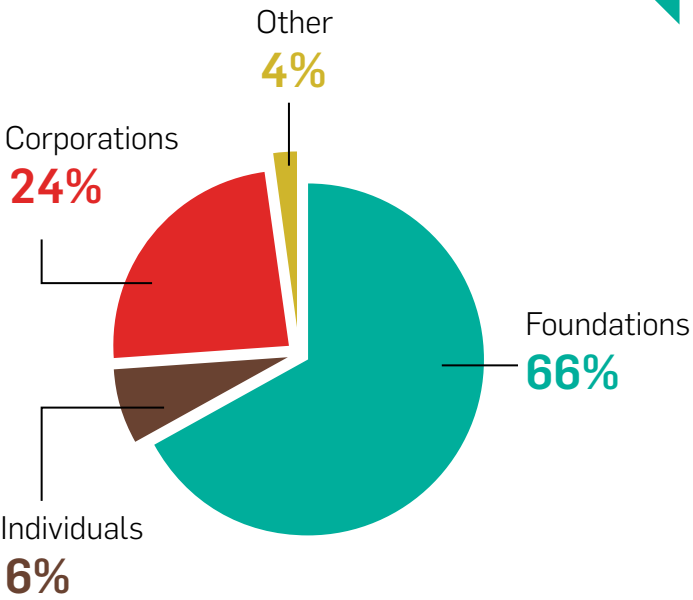
Change in Net Assets from Operations	\$	290,059
Non-Operating Adjustments to Net Assets	\$	(1,401,975)

NET ASSETS

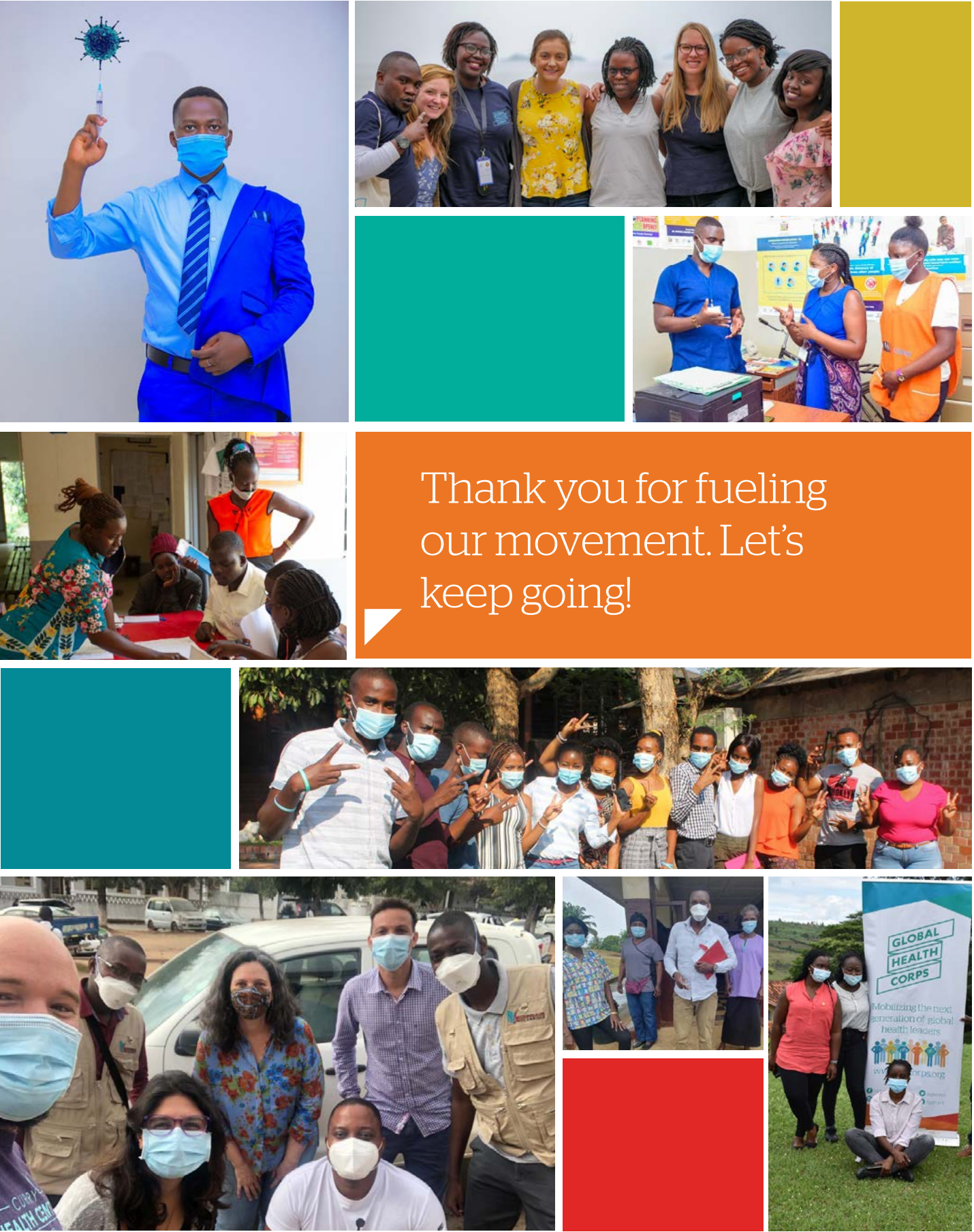
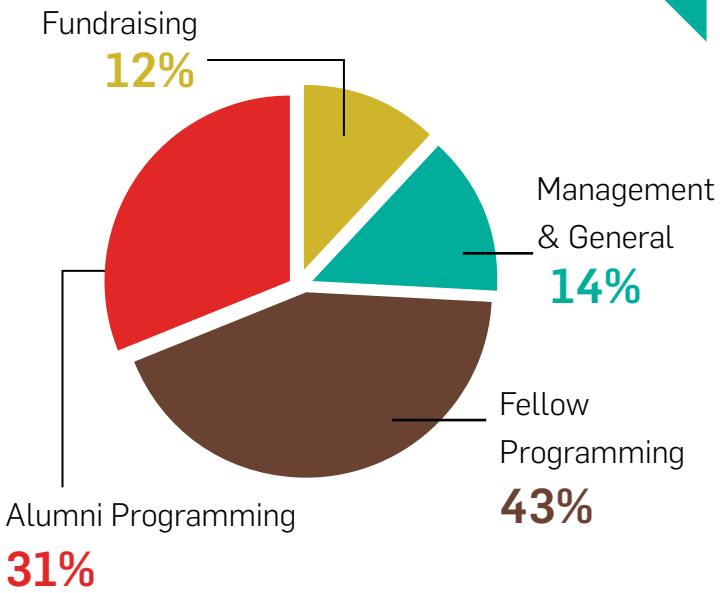
Net Assets, Beginning of Year	\$	4,578,016
Net Assets, End of Year	\$	3,466,100

In addition to the \$1.6 million that Global Health Corps invested to support fellows, our partner organizations contributed another \$300,000.

FY20 Funding



FY20 Expenses





The future looks bright!

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