



Building the next generation of global health leaders



Global Health Corps' mission is to mobilize a diverse community of leaders to build the movement for global health equity.

GLOBAL HEALTH CORPS

Co-fellows Evelyn Kasambara and Emma Heinene (Malawi, 2018-2019) working on an environmental health project with their cohort in Zomba

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I joined GHC because I wanted to be part of a network of reflective learners. We rely on each other in our collective pursuit of health equity, which means we'll get there faster.

Joanna Galaris, 2016-2017 Rwanda fellow Advisor to the Executive Director, Partners In Health/Inshuti Mu Buzima

Canopy Bridge in Nyungwe National Park, Rwanda / Photo Credit: Jillian Kenny, 2017-2018 Rwanda fellow



# Letter from the CEO

Dear friends,

It is my honor to share with you a snapshot of Global Health Corps' (GHC) first decade of life in the pages that follow. As I reflect on our movement's journey - from its inception with a class of 22 bold fellows in 2009 to a vibrant global community of more than 1,000 changemakers today - two words come to mind: community and transformation.

First, community. When I joined GHC's small but mighty team in 2012, I felt that I fit right in because despite our differences, we all spent a lot of time thinking about broken systems and how to fix them. Through long days (and nights) of hustling in our makeshift offices and on the road, our shared commitment to mobilizing health equity leaders blossomed into a rock solid sense of community.

This matters because building equitable systems is complicated, messy work. It's nearly impossible to keep going over the long haul if you're not sustained by the joy that is found in community. Our fellows and alumni have taught me this time and again as they engage in the radical act of working together across borders and boundaries. Their connection powers their relentless efforts to ensure healthcare reaches those who need it most.

Which brings me to transformation. When I joined GHC, I believed we were working to develop young leaders who would collectively transform health systems. Through countless hours of recruiting, selecting, training,

facilitating, mentoring, and connecting, we've done that, and we're still doing it. What I didn't know was how transformative this journey would be for me personally.

I have seen firsthand what can happen when we equip a diverse cadre of young people to lead the way to a brighter future, and it's made me more resilient and hopeful. This is critical because transforming systems is a process that defies short cuts but promises sustainable results. As leaders, we must be as steadfast about ensuring our own continued transformation as we are in our efforts to change the world around us.

As GHC enters a new decade armed with a new strategic plan, ten years of learning, and the same undying passion for developing leaders, we'll continue to center community building and an inside-out approach to transformation. Thank you for supporting our work and believing with us that health is a human right and great leaders can make it a reality.

Here's to the next ten years,

Heather Anderson Chief Executive Officer, Global Health Corps





# Our Approach to Impact

e believe that leadership – the power of people – is the most effective lever for transforming complex and failing health systems. GHC was established to foster a diverse, highly skilled, and tightly-networked community of leaders who work together to realize health as a human right.

The entry point to our high-impact community is a paid 13-month fellowship with placement organizations working on the front lines of global health in Malawi, Rwanda, Uganda, and Zambia. In addition to contributing to the work of our partner organizations, fellows engage in leadership trainings and community building activities.

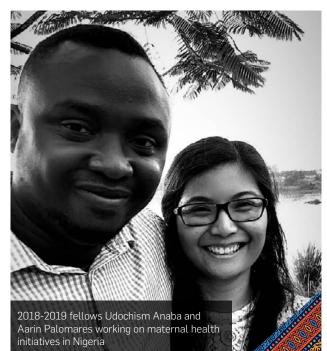
Beyond the fellowship year, they join our alumni community and access ongoing support as they advance in their careers, collaborate with each other, and influence the field of global health. Our leaders follow many paths, but are united by a common goal of achieving global health equity.

# Measuring Impact in Leadership Development

ven as the field of global health increasingly recognizes the need for more effective leadership and management, there remains a lack of data on leadership programs. Measuring the impact of a leader – or a network of leaders – on complex and evolving health systems is challenging given the distance between program implementation and an ultimate vision of health equity. Despite the difficulties, we decided to push this nascent field forward by evaluating our own program 10 years in.

# How did we do it?

hroughout 2018, we conducted our first formal impact evaluation in partnership with Dr. Amy Lockwood of the University of California, San Francisco. We designed a study including surveys, interviews, and focus groups to understand the effects of GHC's leadership development program on participants' careers and to explore how any measurable change was achieved.



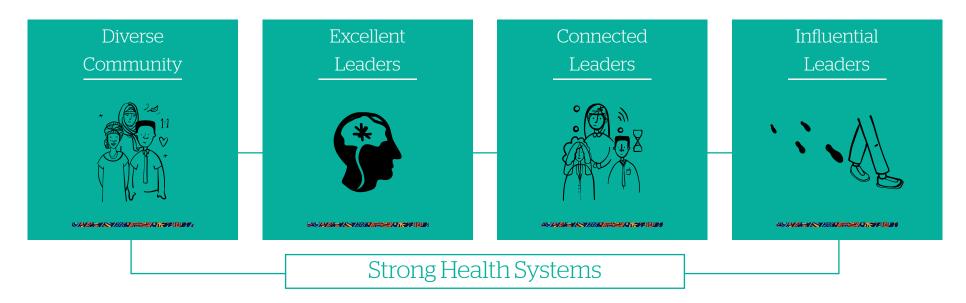
### Key research findings include:

- GHC alumni are almost twice as likely as finalists to work in public health or social impact in their careers.
- The fellowship experience shapes GHC alumni's worldviews, builds technical skills and leadership capacity, and provides access to a network critical to career advancement.

- Fellows and alumni make meaningful contributions to their organizations, translating to lasting systems change over time.
- Confidence building, particularly among African national and female fellows, has been formative for driving continued leadership development.

## Theory of Impact

Our findings provided direction for our 2019-2022 Strategic Plan and guided the creation of our new Theory of Impact to accurately capture meaningful change among our community of leaders as it relates to progress in health outcomes in our countries of operation.





# Our Diverse Community

n a field where women and other minorities have long been under-represented at the highest levels of leadership, we intentionally recruit young professionals from a wide variety of nationalities, ethnicities, and backgrounds to assemble the most diverse talent pipeline in global health. We train our young leaders to harness collective diversity as a strength in tackling complex health challenges.



# Closing the Gender Gap in Global Health Leadership

omen are significantly affected by weak health systems globally, but their perspectives have been missing from the highest levels where decisions are made. Despite comprising more than 70% of the global health workforce, women hold fewer than 25% of top leadership roles in global health.

GHC is actively seeding the field of global health with a diverse pool of talented young women and equipping them to rise to leadership despite the numerous barriers they face, from a culturally conditioned lack of confidence to harmful gender stereotypes.

A critical mass of our young leaders are working to advance the health and human rights of women and girls worldwide, so that investing in their leadership translates to a ripple effect of positive impact for these populations. As we seek to propel GHC's female alumnae to greater roles of influence across health systems, we provide them with tailored resources and a vibrant support network through our tightknit global community. At the same time, we leverage our organizational voice and influence to spark a broader movement for more diverse leadership in global health:

- Through an ongoing partnership with McKinsey Academy, we have engaged dozens of alumnae in the digital course "Unlocking the Potential of Women" to support them in attracting, retaining, and developing women within their organizations.
- We advise the coordinators of major global conferences such as Women Leaders in





Global Health, Women Deliver, and AMREF's Africa Health International Conference to ensure young women - and especially women of color from the Global South - are invited and funded to participate. We pitch and prepare our female alumnae to deliver main stage talks, speak on panels alongside senior leaders, and share their expertise through workshops and lightning round remarks.

 We also design and deliver trainings on honing authentic voice for young women beyond our program and have hosted Twitter Chats on women's leadership that regularly engage
500+ participants. Through ongoing media partnerships with Devex and She Leads Africa and curation of our original publication AMPLIFY, we place and publish op-eds, interviews, and articles highlighting our female leaders and directly calling for increased investment in women in the sector.



2017-2018 Rwanda fellow Cynthia Dushime and GHC CEO Heather Anderson at the 2019 Women Leaders in Global Health Conference

# Rising to Career Excellence

e believe the best global health leaders have both "hard" technical skills and "soft" management skills. That's why our fellowship and alumni programs are built on a foundation of experiential learning coupled with a bespoke curriculum that emphasizes systems and design thinking and authentic and collective leadership. We train our leaders to deepen traits like cultural humility and resilience even as they hone their skills in functional areas from data analysis and communications to program management and budgeting over the course of their careers.



### Building Excellent Leaders

We develop strong managers by providing our leaders with 1:1 coaching on topics such as strategic decision making, managing teams, and measuring results. Fellows and alumni have access to each other, our staff members, and a global network of established professionals for advice and mentoring.

We have funded and supported a dozen alumni chapters around the world. Alumni elect chapter leaders annually and leverage GHC-provided budget and staff support to respond to major health outbreaks, host community health fairs and blood drives, mentor adolescents, and more.

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Through an ongoing partnership with McKinsey & Co. launched in 2017, our alumni are competitively selected for world-class trainings on topics such as team management and navigating gendered challenges in the workplace.

### Excellence in Action



### T. Arthur Chibwana

T. Arthur Chibwana brought his training in economics and his passion for agriculture to the global health sector as a GHC fellow with mothers2mothers in Malawi in 2011. Over the better part of the last decade, Arthur has honed both his monitoring and evaluation skills and leadership capacity, which have both accelerated the impact he has had in his current role as a manager at Christian Aid. As President of GHC's Malawi Alumni Chapter, he has spearheaded a partnership with the Malawi Ministry of Health to quell the spread of cholera and led a country-wide effort to recruit a more diverse applicant pool for the GHC fellowship. As Arthur explains, "Global health challenges are not just for medical professionals to tackle. A wide range of skills, strong leadership traits, and collective efforts are necessary to make a real difference in health equity."

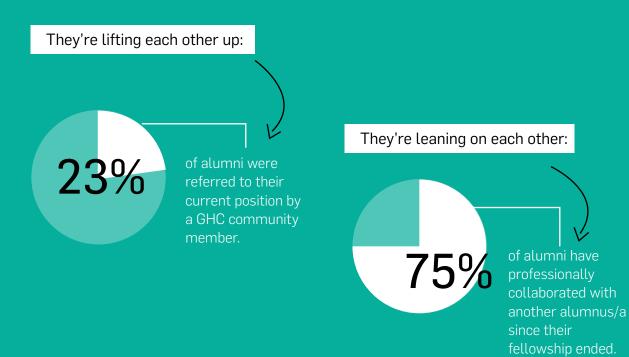
### Solange Impanoyimana

Solange Impanoyimana joined GHC from the world of journalism, where she got her start translating genocide narratives for Voices of Rwanda. As a 2012-2013 fellow at Gardens for Health International, she worked to strengthen relationships between community health workers and policymakers. Leveraging the relationships she built and the skills she honed during her fellowship, she went on to co-found Generation Rise, a nonprofit that uses literature to help girls discover their potential. Solange has been named a Rising Social Entrepreneur and a Social Impact Incubator Champion. She credits *"seeing the joy that resonates from girls and women as they participate in our program and attain new skills"* as her motivation to amplify their voices for change and invest in them as leaders.



# Collaborating Across Borders & Boundaries

eaningful collaboration across lines of difference unleashes incredible potential to solve complex health challenges with political, economic, environmental, and psychosocial components. Our commitment to breaking down silos for greater impact starts with our co-fellow model during the fellowship year and remains a core tenet of our alumni programming. Even as our community spans the globe, our fellows and alumni continue to share resources and build connections with each other to drive their careers forward and amplify their impact.



### Building Connected Leaders

We place fellows in co-fellow pairs - one national and one international fellow - within each of our placement organizations. Cofellows both buoy and challenge each other to grow personally and professionally throughout the fellowship year and beyond.

Our alumni programming cultivates community through our digital community portal, curated trainings and convenings, our alumni chapters around the world, and our regional Leadership Summits.

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Through partnerships with organizations like D-Prize and World Connect, we offer tailored funding opportunities for teams of alumni to pool their expertise, resources, and time to launch and scale innovative interventions in their communities.

### Collaboration in Action



### Jourdan McGinn and Rehema Aanyu

Jourdan McGinn and Rehema Aanyu joined GHC in 2012. Working as co-fellows with Action for Community Development in Kasese, Uganda, they forged a strong connection that both credit with improving their ability to tackle complex health challenges with grit and creativity. Today, Jourdan is spearheading efforts to radically reduce maternal mortality with Partners In Health in Sierra Leone and Rehema is leading clean water and sanitation initiatives for communities across Uganda. In Jourdan's words: *"My co-fellow Rehema became my anchor, my confidant, and my sister in navigating the many injustices, inequities, and heartbreaks we both encountered and invariably overcame. And in the many years since as we have moved across the globe, she remains the person I turn to."* 

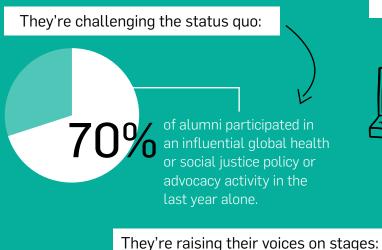
### D-Prize Team

For the past three years, we have partnered with The D-Prize, a nonprofit based at Stanford University that is dedicated to supporting new entrepreneurs. Through this collaboration, we fund cross-cultural teams of GHC alumni to bring health innovations to scale. In 2018, a team spearheaded by Mehreen Shahid of Pakistan, Anne Marie Collins of Scotland, and Tinotenda Muchena of Zimbabwe launched "Safe Delivery, Safe Mother" to reduce postpartum hemorrhaging (PPH) in Pakistan. In partnership with Pakistan's Maternal Health Department and UNFPA, they have trained 600+ community health workers on PPH prevention and launched a digital application in Urdu to aid them in making referrals and reporting on maternal health indicators.



# Influencing the Field ofGlobal Health

ccelerating progress towards solving complex health challenges requires expanding participation to include new perspectives in decision-making. For far too long, young people, women, people of color, LGBTQ community members, and other minorities have been left out. We're committed to building and amplifying the voices of our young leaders by providing mentorship, facilitating trainings, and leveraging our own influence to ensure their insights and expertise reach a wider audience to spark change.





locations around the world where our fellows and alumni have spoken in the last year alone.

They're speaking up on pages:

MPLIF

29

original pieces our

fellows and alumni

have written for our

publication AMPLIFY since its launch in

### **Building Influential**

### Leaders

We facilitate convenings and trainings on real-time health issues in partnership with communications and advocacy experts, policymakers, and key stakeholders in each of our countries of operation.

We secure opportunities and provide support for our young leaders to speak on stages such as the Skoll World Forum, United Nations General Assembly, Africa Health International Conference, and Women Deliver and write in outlets such as *Devex, AllAfrica*, and *NPR*.

We manage a collaborative editing process for our publication AMPLIFY that facilitates training on writing skills and builds confidence. We also curate spaces for our leaders to raise their voices for health equity through social and earned media channels.

### Influence in Action



### Frank Ategeka

Frank Ategeka brought his computer engineering background to the health equity movement as a 2018-2019 GHC fellow at the Center for Health, Human Rights & Development. In his current role as Executive Director of the Rural Aid Foundation, he heads up efforts to leverage technology and advocacy to improve health outcomes for refugees living in Western Uganda. He uses this platform to speak out about the needs of refugees at global fora including AMREF's Africa Health Agenda International Conference, the 74th United Nations General Assembly, and the International Conference on Population and Development. In his words, "As more people understand that health is a human right and are equipped with the tools to advocate for it, our movement of health leaders and changemakers will grow."

### Edith Namukonda and Greg Rosen

A dynamic duo from their first meeting at GHC's Training Institute, co-fellows Edith Namukonda and Greg Rosen are fierce advocates for comprehensive sexuality education. During their fellowship year with Population Council in Zambia, the pair analyzed, translated, and presented research findings to stakeholders including Ministry of Health and United Nations officials to influence sexual and reproductive health (SRH) policies. Greg is now pursuing a PhD in Social and Behavioral Interventions at Johns Hopkins Bloomberg School of Public Health, while Edith continues to promote SRH research and advocacy efforts at Population Council. In a speech they delivered together, they shared their vision for global health leadership: *"A well-networked hive of compassionate individuals who hail from diverse backgrounds and make equity a priority."* 



...a good leader has the ability to admit that they don't know everything. That regardless of where they stand, there are miles and miles to go. I look forward to going the distance.

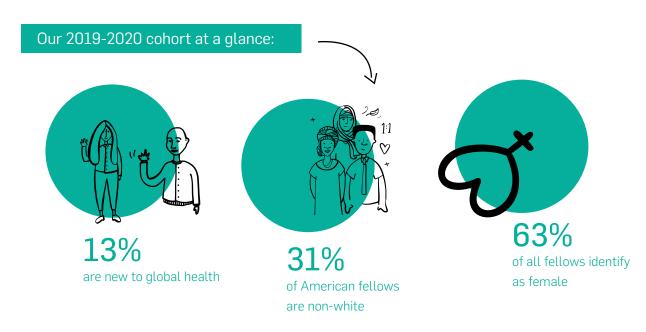
Samia Kemal, 2018-2019 Rwanda fellow

2019-2020 fellows at Training Institute in Rwanda

# Spotlight On the 2019-2020 Fellows

fter selecting our 2019-2020 fellows from amongst a strong pool of thousands of applicants ages 21-30, we were thrilled to officially welcome them at Training Institute in Rwanda in July 2019. Since then, they've been hard at work, bringing their expertise in everything from communications to IT to all levels of the health systems in Malawi, Rwanda, Uganda, and Zambia.

As they contribute to developing solutions to challenges like strengthening primary health care systems, tackling non-communicable diseases, and eradicating HIV and maternal mortality, they're also developing their leadership capacity to continue their journeys far beyond their fellowships as members of our growing alumni community.





# Partnering Across theHealth Ecosystem

Due to their complexity, transforming health systems necessitates a multi-faceted and cross-sectoral approach. That's why, since our founding, GHC has built deep and diverse partnerships across health ecosystems.



# Partnering with Government to Develop Leaders

Over the past 10 years, we've prioritized developing strong partnerships with governments because we believe it's critical to build effective health leadership in the public sector. Dozens of our leaders work within and with government to shape and implement health policies.



U.S. Department of Health and Human Services Centers for Disease Control and Prevention



In our 2019-2020 class, 10 fellows work within ministries in East and Southern Africa.

Local and national governments around the world employ  $\mathbf{37}$  alumni.



Dr. Aflodis Kagaba, Executive Director of Health Development Initiative, speaks on a panel about expanding contraception access to adolescents

# Building a Leadership Pipeline for Impact

We're also proud to partner with high-impact organizations that work alongside government agencies to transform broken health systems. Many of these organizations have grown to rely on GHC as a recruiter and supporter of bright young talent with strong leadership, management and technical skills:



# Convening Stakeholders & Training Advocacy Champions

n partnership with Ministries of Health, our placement organizations, and other key stakeholders, we have hosted convenings and trainings on real-time advocacy issues in Malawi, Rwanda, Uganda, and Zambia. These events provide GHC alumni with opportunities to hone their voices as advocates, build their profiles as young leaders with valuable expertise, and connect with others beyond the GHC community to bolster their influence.



2017-2018 Rwanda fellow Anysie Ishimwe moderates a discussion on family planning at a GHC-hosted convening in Kigali

# Rwanda: Improving Sexual & Reproductive Health

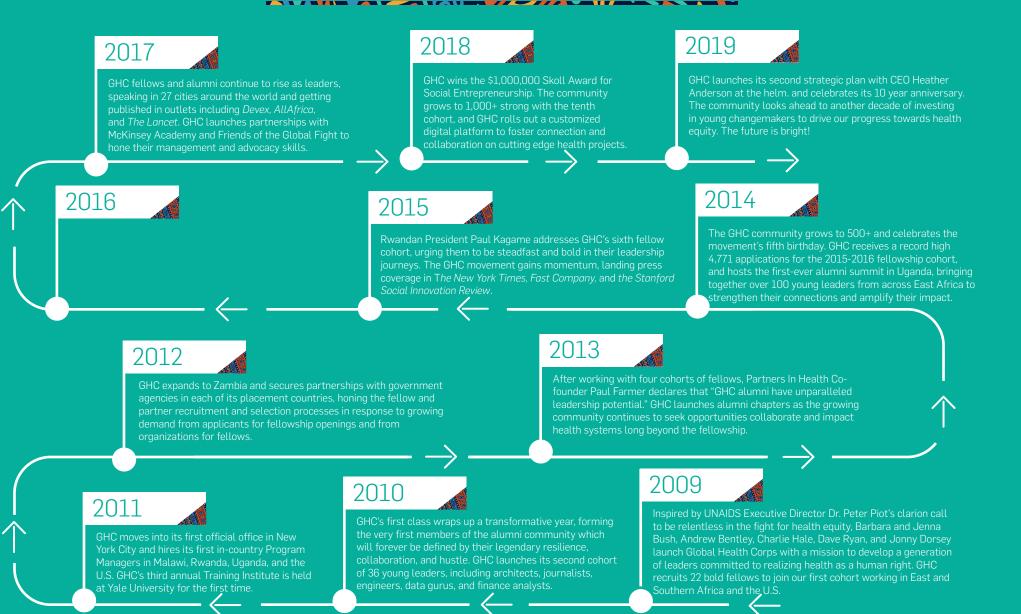
or the past three years, GHC has partnered with the Ministry of Health in Rwanda to host a high-level sexual and reproductive health (SRH) convening. Our most recent event brought ~100 stakeholders together to drive progress on expanding access to family planning for adolescents. Speakers included:

- Chief Gender Monitoring Officer Mrs. Rose Rwabuhihi
- Dr. Aflodis Kagaba of Health Development International
- Dr. Anaclet Mwumvaneza, the Ministry of Health's leading SRH Expert

Partners from AIDS Healthcare Foundation, Health Development International, Society for Family Health Rwanda, UNFPA, Face AIDS, Team Heart, and dozens of others participated.

We also partnered with SPECTRA to facilitate a post-convening advocacy training. 92% of participants reported increased understanding of the main challenges to expanding family planning access and 100% reported increased skills for participating in SRH advocacy.

# Our Global Movement, 2009-2020





# Our Team

Our global team is made up of leaders who are focused on developing leaders with the belief that health is a human right. We bring a deep expertise, sense of humor, and generous spirit to the challenging, rewarding work of building a movement to transform health systems so that they deliver for all.



Alide Bivegete, Rwanda Operations Manager

Anita Namuyaba, Uganda Program and Operations Coordinator

Brittany Cesarini, Advocacy and Communications Manager

**Eleanor Grams**, Admissions and Operations Associate

Elizabeth Farrell, Development Associate **Gwen Hopkins**, Director of Operations **Hannah Taylor**, Director of Community Engagement

Heather Anderson, Chief Executive Officer

**Jean Rene Shema**, Rwanda Country Director

John Cape, Vice President of Programs

Mera Boulus, Strategic Partnerships Manager

Naeha Vora, Admissions and Operations Manager

Namuyamba Muyunda, Zambia Program and Operations Manager

Rose Anderson, Director of Labor & Compliance

Ruth Achillah, Uganda Country Manager

Sheila Sibajene, Zambia Country Manager

**Shivani Mulji**, Finance and Operations Senior Associate

**Simon Simkoko**, Malawi Country Manager

Toyosi Olowoyeye, Program Manager

Victoria Choong, Finance and Operations Director



# Burundi

Burundian National Association of Support for People Living with HIV and AIDS Patients CARE International Cries of a Child FVS-AMADE LifeNet International Population Media Center Populations Services International Society for Women Against AIDS in Africa Village Health Works

### Malawi

African Institute for Development Policy Art and Global Health Center Africa Banja La Mtsogolo Baylor College of Medicine Children's Foundation Malawi\* Christian Health Association of Malawi Clinton Development Initiative Clinton Health Access Initiative\* Dignitas International Elizabeth Glaser Pediatric AIDS Foundation Partnership is critical to our efforts to build a movement of diverse leaders to collectively transform health systems. We are grateful to all of the organizations that we have partnered with to place fellows since our founding in 2009, from grassroots organizations to international NGOs and government ministries working across health issue areas.

Emmanuel International Family Planning Association of Malawi Girls Empowerment Network Imperial Health Sciences Johns Hopkins Center for Communication Programs – One Community Project Lighthouse Millennium Villages Project Ministry of Health - Malawi\* mothers2mothers Partners In Health/Abwenzi Pa Za Umoyo\* Riders for Health Tingathe Program VillageReach Youth Empowerment and Civic Education

### Rwanda

African Evangelistic Enterprise CARE International Clinton Health Access Initiative Rwanda Elizabeth Glaser Pediatric AIDS Foundation FACE AIDS Gardens for Health International Health Builders Health Development Initiative Health Poverty Action MASS Design Group Ministry of Health - Rwanda\* Partners In Health Populations Services International The Access Project The Ihangane Project The Women's bakery Young Women's Christian Association of Rwanda University of Global Health Equity\*

### Tanzania

Clinton Health Access Initiative Southern African Centre for Infectious Disease

### Uganda

ACODEV Action Africa Help International Alive Medical Services Baylor College of Medicine Children's Foundation Uganda Brick by Brick Uganda Clinton Health Access Initiative Conservation Through Public Health Days for Girls

Development in Gardening Elizabeth Glaser Pediatric AIDS Foundation Foundation for Community Development and Empowerment Infectious Disease Institute Innovation Program for Community Transformation (InPact) IntraHealth International\* Jhpiego\* Joint Clinical Research Centre Kvetume LifeNet International\* Mengo Hospital MIFUMI Millennium Villages Project Ministry of Gender, Labour, and Social Development Ministry of Health - Uganda\* Mpoma Nyaka AIDS Foundation Planned Parenthood Federation of America Programme for Accessible Health Communication and Education (PSI Uganda) Reach Out Mbuya Parish HIV/AIDS Initiative Reproductive Health Uganda S.O.U.L. Foundation Save the Mothers Set Her Free The Uganda Initiative for Integrated Management Uganda Development and Health Associates Uganda Village Project

### **United States**

1000 Days Archive Global Boston Public Health Commission Boys and girls Clubs Newark **BRAC USA** Center for Health and Gender Equity Children's Health Fund **Clinton Health Access Initiative** Covenant House Dothouse Health **Evidence** Action GBCHealth **GE** Foundation Global Health Council Global Health Delivery Project Grameen PrimaCare Greater Newark Healthcare Coalition **HIPS** Housing Works Inc. Inter-American Development Bank Intrahealth International Marie Stopes International Mayor of Newark's Office NYC Dept. Health and Mental Hygiene PACT Partners in Health Pink Ribbon Red Ribbon Planned Parenthood Federation of America Possible Public Health Solutions Single Stop The Grassroot Project

Tiyatien Health Together for Girls/UNAIDS University of Medicine and Dentistry of New Jersey US State Department Vecna Cares Charitable Trust Women Deliver

### Zambia

Action Africa Help International Afya Mzuri AKROS\* Catholic Medical Mission Board Centre for Infectious Disease Research in Zambia CHAMP Concern Worldwide **Copperbelt Health Education Program** Flizabeth Glaser Pediatric AIDS Foundation Ministry of Health - Zambia National Health Research Authority\* PATH\* Planned Parenthood Association of Zambia Population Council\* Rwanda Zambia HIV Research Group Save the Children Society for Family Health Affiliate of Population Zambia Civil Society Scaling Up Nutrition Alliance

\* indicates placement organization for 2019-2020 fellow class

I am sitting in a room in Armenia, where I lead discussions on national health reforms with the potential to transform millions of lives. GHC - through the leadership training, fellowship experience, and friendships I formed - has contributed to me being able to get here. More young people who care about global health should have the same opportunity."

> Adanna Chukwuma 2012-2013 U.S. fellow, on why she donates to GHC



A residential neighborhood in Kampala, Uganda / Photo Credit: 2017-2018 fellow Bailey Adams

# Our Donors

Our donors and supporters have provided critical resources to fuel our growth from a small start-up launching our first class of 22 fellows in 2009 to a vibrant global community of 1,000+ changemakers today. We are grateful for your commitment to building a brighter future with us.

### \$1,000+

Dolores Blum Greg Tschider James Shea Stapleton Charitable Trust William Sledge

### \$5,000+

Derek Anderson George Andrews Victoria Hausman

# \$10,000+

Howell Ferguson Joe Gebbia Mary and Terry MacRae MCJ Amelior Foundation The Ina Kay Foundation

### \$25,000+

Carolyn Lacy Miller Charitable Fund David B Miller Family Foundation Diamond Family Foundation George W. Bush Orfalea Foundation Veronica Beard

# \$50,000+

American Express Foundation Bristol-Myers Squibb Foundation Guggenheim Partners Imago dei Fund Lyda Hill Foundation S. Javaid Anwar Sandi Young Sujay Jaswa Virginia B. Toulmin Foundation

# \$100,000+

Abbvie Foundation Bank of America Charitable Foundation Bill & Melinda Gates Foundation Bloomberg Philanthropies Bohemian Foundation Caris Foundation David and Lucile Packard Foundation Johnson & Johnson Mulago Foundation Segal Family Foundation

# \$250,000+

Anonymous Caerus Foundation Skoll Foundation William and Flora Hewlett Foundation

# \$1,000,000+

Denny Sanford and Sanford Health

# In-Kind Donors and Special Thanks

Arnold & Porter Kaye Scholer LLP Christian Benimana Dr. Agnes Binagwaho Dr. Alex Coutinho Dr. Richard Skolnik Headspace McKinsey & Company SYPartners LLC Yale University

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Biju Mohandas Raj Gupta Pauly Rodney

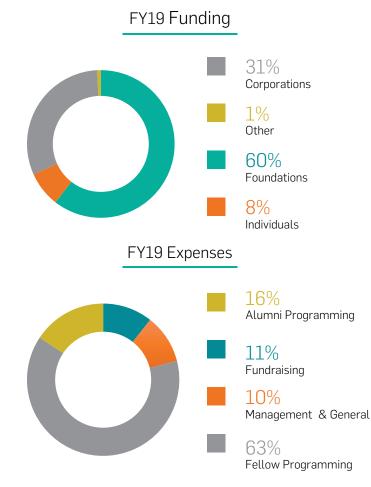
Information for fiscal year ending July 31, 2019



# Our Finances

Information for year ending July 31, 2019 (unaudited)

REVENUES, GAINS AND OTHER SUPPORT	
Public Support & Contributions	\$ 5,238,340
Fees & Other Revenue	\$ 41,741
Total revenues, gains & other support	\$ 5,280,081
EXPENSES	
Program Services	
Fellow Support & Development	\$ 3,955,125
Alumni Support & Development	\$ 980,532
Total program services	\$ 4,935,656
Supporting Services	
Management & General	\$ 653,912
Fundraising	\$ 662,111
Total supporting services	\$ 1,316,024
Total operating expenses	\$ 6,251,680
Change in Net Assets	\$ (971,599)
NET ASSETS	
Net Assets, Beginning of Year	\$ 5,552,733
Net Assets, End of Year	\$ 4,581,134



In addition to the \$3.9 million that Global Health Corps invested to support fellows, our partner organizations contributed another \$2.1 million.



