



# IMPACT IMPROVING PUBLIC HEALTH MANAGEMENT FOR ACTION

## What's IMPACT?

Improving Public Health Management for Action (IMPACT) is a fellowship program that aims to build a cadre of highly trained public health managers throughout the world. This workforce development program aligns with Division of Global Health Protection's mission to enhance global health security by helping countries detect and control public health threats more rapidly.

IMPACT provides fellows with experience in public health program planning, management, and evaluation through specialized hands-on training, supervision, and mentorship. Development of this workforce will make IMPACT countries more proficient at translating research, theory, and scientific innovation into successful public health action.

Fellows spend around 25% of their time in the classroom, learning through interactive sessions and case studies. After completing the courses, they return to the field, where they gain on the job experience. Under guided mentorship and supervision, they produce products such as program plans, evaluations, budgets, community health assessments, and more.

IMPACT launched in Bangladesh and Kenya in spring 2016. Each country's Ministry of Health (MOH) owns the program; the MOH employees all of the fellows. We are currently working to expand in Cambodia, Pakistan, and Togo. Currently, there are two tracks of IMPACT.



Kenya's first cohort of traditional fellows with IMPACT staff

*"In 60 years, [IMPACT] will be the same kind of signature program as Epidemic Intelligence Service and will address one of the major barriers in global health today—the gap between tools available and the delivery of those tools."*

*Dr. William Foege  
Former CDC Director and  
Senior Gates Foundation Fellow*

### Current IMPACT Tracks

Fellow Type	Country	Length	Experience	Products completed
Traditional	Bangladesh	2 years	Entry-to-mid level	Project Plan
	Kenya			Evaluation
				Community Health Assessment
				Outbreak Response Management
Distinguished	Bangladesh	6 months	Senior level	Project Plan
	Kenya			



## Evaluation Results May 2016–May 2017

IMPACT is conducting a robust mixed-methods process, outcome, and impact evaluation. This past year, we focused on process evaluation, which will help us to improve IMPACT and to effectively expand to additional countries. The process evaluation describes ways in which we can improve the program’s structure, outreach strategy, course materials, and more. We used the Reach, Efficacy, Adoption, Implementation, and Maintenance (RE-AIM) Framework to assess key indicators. Our outcomes are listed below each metric, followed by a short process analysis.

### Our Reach Needs to Grow to Create Impact

We want to reach applicants from a variety of districts to ensure a diverse pool of fellows.

**The percentage of districts represented by applicants and fellows is below 50%**

Cohort	Districts Represented by Applicants	Districts Represented by Fellows
Bangladesh Traditional	41%	6%
Kenya Traditional	36%	9%
Kenya Distinguished	10%	7%

**Process Notes:** We will do additional outreach in current non-applying districts to increase district variety this applicant cycle. More importantly, we need to increase the number of accepted fellows to increase our reach and thus, overall impact. We currently have eight traditional (2-years) fellows in Kenya and six in Bangladesh. Twelve graduated from Kenya’s Distinguished Fellows Program (5-6 months).

### Adoption at the Local Level

We want a diversity of sites, mentors, and supervisors that will be champions of the program.



of graduated distinguished fellows became mentors or supervisors for Kenya’s two year fellows



districts in Bangladesh and Kenya with an IMPACT fellow

**Process Notes:** We need to increase the number of districts with IMPACT fellows. We will further analyze adoption by looking at other staff members who uptake management practices modelled by the IMPACT fellow.



CDC’s Bassam Jarrar discusses setting program goals and objectives with Bangladeshi fellows



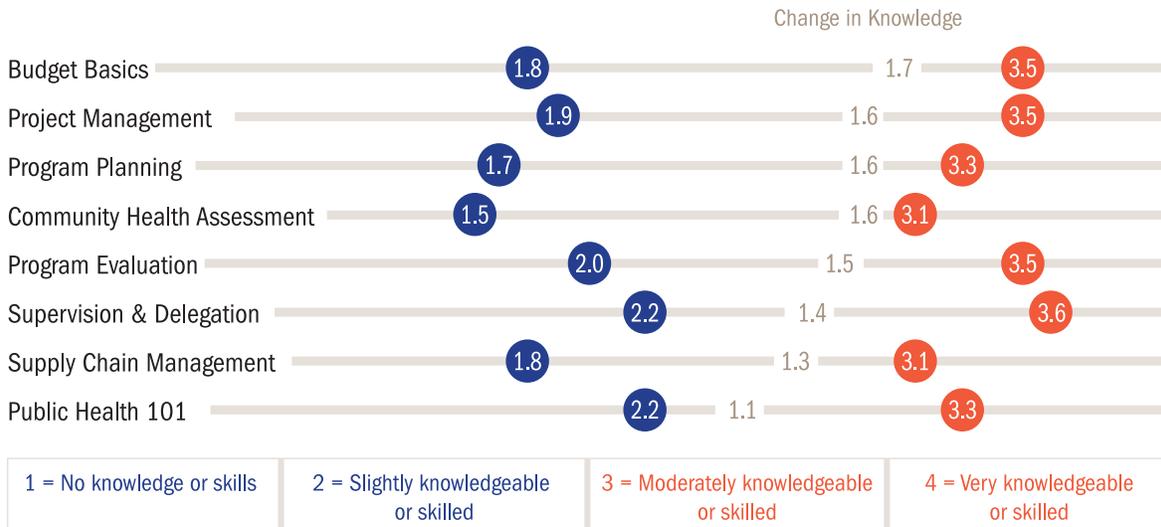
Kenyan fellows design their program plan to improve HIV detection

## Effective at Increasing Knowledge and Driving Action

We want our fellows to learn, but more importantly, we want them to use what they learn.

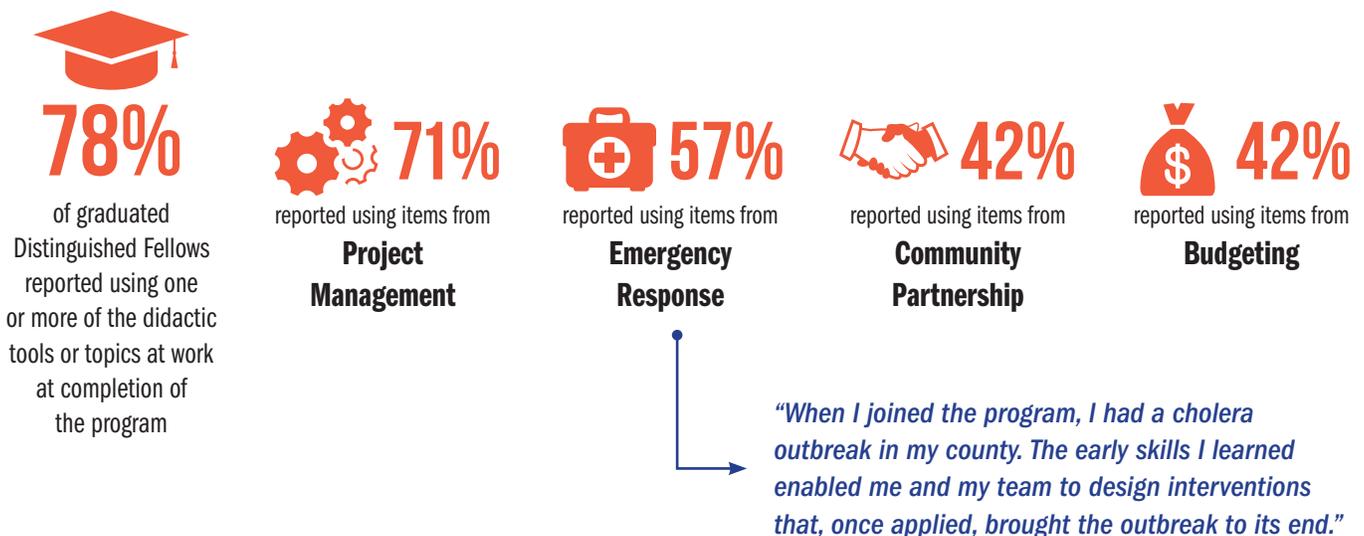
### Fellows have increased their knowledge by participating in IMPACT

Fellows' (in all three cohorts) self-assessment of knowledge, **before** and **after** IMPACT training



**Process Notes:** In addition to student feedback, the IMPACT team observed course instruction. Courses with low knowledge change also rated lowest on the observation tool. While it is easy to assume the instructor did poorly, qualitative analysis showed course materials were not optimizing student performance. For example, the format of the biostatistics class materials hindered student-teacher interaction, and there wasn't enough time to fully cover this difficult topic. IMPACT is revising these courses for future cohorts.

### Distinguished fellows are using what they learned

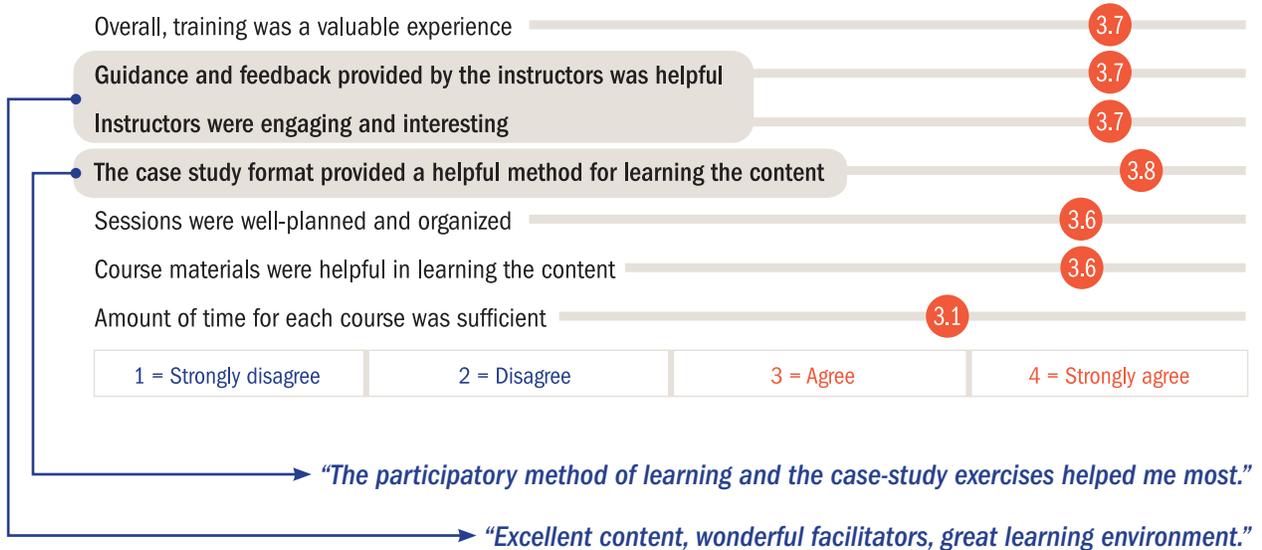


**Process Notes:** Distinguished Fellows (i.e. those with high seniority) are finding the topics relevant to their job, which helps to build IMPACT's credibility in country. This preliminary outcome helps to show how our fellows are translating the science of public health into action.

## Implementing As Intended

Instructors should maintain fidelity to the curriculum, and provide an engaging, interactive experience.

### Fellows are satisfied with the implementation of IMPACT



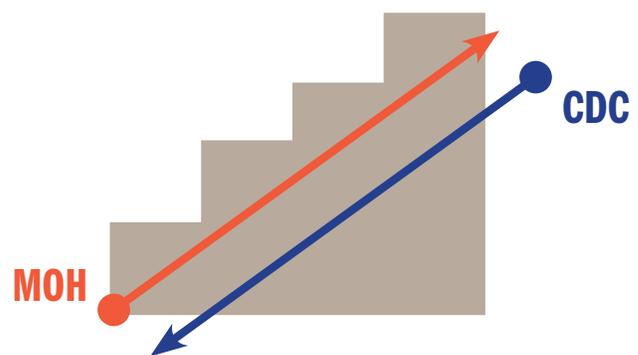
**Process Notes:** We are still analyzing the time needed for each course. Through observation of course instruction, we identified courses where we need to adjust course length or content. However, we still must determine the appropriate balance between coursework and on-the-job experience. To do this, we will look at how fellows apply what they have learned in the field.

## Maintaining Past CDC

We want IMPACT to be institutionalized in each Ministry of Health.

Typically, programs wait until the last year to transition the program from the funder to the partnering organization. We have developed a step-down tool which gradually shifts specific responsibilities from CDC to the country's Ministry of Health. IMPACT and country officials jointly identify program components the ministry can undertake each year. Over time, these components become more complex and substantial until the ministry has full programmatic ownership.

**Process Notes:** We developed the tool in conjunction with the Ministries; however, countries have not used it yet. We will implement the tool this year.



For more information about IMPACT, please visit:

<https://www.cdc.gov/globalhealth/healthprotection/impact>