INTRODUCTION

Form Approved OMB No. 0920-1078 / Expiration Date XX/XX/XXXX

Thank you for taking the time to participate in the PHAP Alumni Assessment survey. The purpose of this survey is to learn about your career progression, accomplishments, and perceptions of PHAP's value.

All information that you provide will be kept secure and not shared. This survey is voluntary and will have no negative effect on you if you decide not to participate. Results of this survey will only be reported in the aggregate (e.g., 75% of alumni are employed in public health). The survey should take you fewer than 10 minutes to complete.

If you have any questions or concerns, please contact [Evaluator's name] at [phone] or phap_evaluation@cdc.gov.

DISPOSITION

1. **Select the Best Option:**
    - I am employed. **- SKIP TO EMPLOYMENT: PAGE 2, QUESTION 2**

    - I am furthering my education at an academic institution (e.g., graduate school, certificate program). **- SKIP TO FURTHERING EDUCATION: PAGE 6, QUESTION 18**

    - I am employed and am furthering my education at an academic institution at the same time. **- SKIP TO EMPLOYMENT/EDUCATION AT SAME TIME: PAGE 7, QUESTION 23**

    - I am participating in a training or service program, such as a fellowship or internship (e.g., Public Health Informatics Fellowship Program, Peace Corps). **- SKIP TO TRAINING/SERVICE PROGRAM: PAGE 12, QUESTION 46**

    - Other (please explain). **- SKIP TO IMPACT OF PHAP: PAGE 13, QUESTION 48**

Public reporting burden of this collection of information is estimated to average 8 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget control number. Send comments regarding this burden estimate, or any other aspect of this information collection, including suggestions for reducing this burden to CDC/Agency for Toxic Substance and Disease Registry Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attention: PRA (0920-1078).

EMPLOYMENT

2. *Employer/Organization Name:
    (e.g., The Centers for Disease Control and Prevention)

3. *Location of Employment:
    (e.g., Austin, TX)

4. Salary Range (per year):
    - Less than $30,000
    - $30,000–$49,999
    - $50,000–$69,999
    - $70,000–$89,999
    - $90,000 or more

We are interested in learning more about your career advancement over the past [insert timeframe]. Select the best option for the statement below.

5. Have you advanced in your career within the past [insert timeframe]?
    - No
    - Yes

6. Have you received an increase in salary in the past [insert timeframe, e.g., year, 2 years]?
    - No
    - Yes

7. Have you been given more responsibility in your job in the past [insert timeframe, e.g., year, 2 years]?
    - No
    - Yes

    If you have been given more responsibility in your job, please explain:

8. We are interested in learning more about your <u>current</u> job responsibilities. Please select the best option for the statements below.

	No	Yes
I lead one or more projects	1	2
I lead a team, but do not hold an official supervisory position	1	2
I hold a supervisory position	1	2

9. *Which of the following best describes the primary focus of your job?
    - Public health (including population health)
    - Health care
    - Other (Please identify)

TYPE OF EMPLOYMENT

*Required Question

10. *Which of the following best describes your type of employment?
    - I am working as a **federal government** employee (e.g., CDC) SKIP TO FED JOB SERIES
    - I am working as a **non-federal government** employee (e.g., state, local, tribal, territorial) SKIP TO WORK SETTING NON-GOVERNMENT
    - I am working as a contractor in support of federal, state, , tribal, territorial, or local government (e.g., ORISE, Northrup Grumman) SKIP TO WORK SETTING CONTRACTOR TO GOVERNMENT
    - I am **not** working for the government in any capacity SKIP TO WORK SETTING FOR NON GOVERNEMENT

JOB SERIES/GRADE LEVEL: FEDERAL GOVERNMENT

11. What is your grade level / Commissioned Corps equivalent?
    - GS-7/O-2
    - GS-8
    - GS-9/O-3
    - GS-10/O-3
    - GS-11/O-3
    - GS-12/O-3 or O-4
    - GS-13/O-4 or O-5
    - GS-14/O-6
    - GS-15/O-6
    - SES/O-7/8
    - I don't know
    - Other, please specify: _____

      SKIP TO QUESTION: WORK SETTING FEDERAL GOVERNMENT

WORK SETTING: FEDERAL GOVERNMENT

12. *Which of the following best describes the setting in which you work?
    - Centers for Disease Control and Prevention (CDC) **stationed at headquarters** - SKIP TO CDC WORK LOCATION (1)
    - CDC **stationed in the field** - SKIP TO CDC WORK LOCATION (2)
    - Other (non-CDC) Department of Health and Human Services (HHS) **(3)**
    - Other federal government agency (e.g., State Department, USAID) **(12)**
    - Other (please identify) **(13)**

WORK SETTING: NON-FEDERAL GOVERNMENT

*Required Question

- City or county government agency **(4)**
- State government agency **(5)**
- Territorial agency/organization/coalition **(6)**
- Tribal government/organization/coalition **(7)**
- Academic institution or university **(8)**
- Other (please identify) **(13)**

SKIP TO: TOPICAL AREAS

WORK SETTING: CONTRACTOR TO THE GOVERNMENT

13. ***Which of the following best describes the setting in which you work?**
    - Centers for Disease Control and Prevention (CDC) <u>stationed at headquarters</u> - **SKIP TO CDC WORK LOCATION (1)**
    - CDC <u>stationed in the field</u> - **SKIP TO CDC WORK LOCATION (2)**
    - Other (non-CDC) Department of Health and Human Services (HHS) **(3)**
    - Other federal government agency (e.g., State Department, USAID) **(12)**
    - City or county government agency **(4)**
    - State government agency **(5)**
    - Territorial agency/organization/coalition **(6)**
    - Tribal government/organization/coalition **(7)**
    - Academic institution or university **(8)**
    - Other (please identify) **(13)**

WORK SETTING FOR NON-GOVERNMENT

14. ***Which of the following best describes the setting in which you work?**
    - State or local nonprofit organization **(9)**
    - National nonprofit organization **(10)**
    - For-profit organization/company/industry **(11)**
    - Territorial agency/organization/coalition **(6)**
    - Tribal agency/organization/coalition **(7)**
    - Academic institution or university **(8)**
    - Other **(13)**

CDC CENTER, INSTITUTE OR OFFICE (IF GOVERNMENT OR CONTRACTOR WORKING FOR CDC)

15. **What is your CDC Center, Institute, or Office?**
    - CDC Washington Office **(1)**

*Required Question

- Center for Global Health (CGH) **(2)**
- National Institute for Occupational Safety and Health (NIOSH) **(3)**
- CDC Office of the Director (OD) **(4)**
- Office for State, Tribal, Local, and Territorial Support (OSTLTS) **(5)**
- Office of Infectious Disease/Office of the Director (OID/OD) **(6)**
- Office of Infectious Disease/ Influenza Coordination Unit (OID/ICU) **(7)**
- Office of Infectious Disease/ National Center for Immunization and Respiratory Diseases (OID/NCRID) **(8)**
- Office of Infectious Disease/National Center for Emerging and Zoonotic Infectious Disease (OID/NCEZID) **(9)**
- Office of Infectious Disease/ National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- (OID/NCHHSTP) **(10)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ Office of the Director (ONDIEH/OD) **(11)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center on Birth Defects and Developmental Disabilities (ONDIEH/ NCBDDD) **(12)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Chronic Disease Prevention and Health Promotion (ONDIEH/ NCCDPHP) **(13)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Environmental Health (ONDIEH/ NCEH) **(14)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ Agency for Toxic Substances and Disease Registry (ONDIEH/ NCEH-ATSDR) **(15)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Injury Prevention and Control (ONDIEH/ NCIPC) **(16)**
- Office of Public Health Scientific Services office of the Director (OPHSS/OD) **(17)**
- Office of Public Health Scientific Services/ Center for Surveillance, Epidemiology, and Laboratory Services (OPHSS/CSELS) **(18)**
- Office of Public Health Scientific Services/ National Center for Health Statistics (OPHSS/NCHS) **(19)**
- Office of Public Health Preparedness and Response (OPHPR) **(20)**
- I do not know what my CDC Center, Institute, or Office is **(21)**
- Other (please identify) **(22)**

16. **In which of the following topical areas have you been working for the past** [insert timeframe]**? Select all that apply.**
    - **Communicable disease control** (e.g., HIV, STDs, tuberculosis, influenza, healthcare-associated infections)
    - **Chronic disease** (e.g., diabetes, heart disease and stroke, nutrition, physical activity, obesity, tobacco use, cancer)
    - **Injury prevention** (e.g., motor vehicle injury, violence prevention, prescription drug overdose)
    - **Environmental public health** (e.g., air pollution and respiratory health, asthma)
    - **Maternal, child, and family health** (e.g., reproductive health, teen pregnancy, birth defects)
    - **Access to and linkage with clinical care**
    - **Public health preparedness and response**
    - **Global migration and quarantine**
    - **Immunization**
    - **Not applicable; I am not working in public health or healthcare**
    - **Other (please specify): _____**

17. **Which of the following describe your work activities over the past** [insert timeframe]**? Select all that apply.**

- **Monitoring community health status,** including identifying health risks, conducting monitoring and surveillance activities, and using methods and technology (e.g., registries, graphic information systems) to collect, interpret, and communicate data. (Essential Service 1)
- **Investigating community health problems and/or hazards,** including disease screening, laboratory activities (e.g., testing), and epidemiologic investigation of disease outbreaks. (Essential Service 2)
- **Health promotion and health education,** including designing and implementing programs that build knowledge, shape attitudes, or inform decision-making related to disease prevention (e.g., immunization), healthy behaviors (e.g., nutrition, physical activity), and injury prevention. (Essential Service 3)
- **Mobilizing community partnerships,** including building and maintaining formal and informal community partnerships (e.g., not-for-profit, private sector, government partnerships) and building coalitions to tackle public health issues. (Essential Service 4).
- **Developing public health policies and plans** and aligning resources to ensure successful policy and plan development. (Essential Service 5)
- **Enforcing public health laws and/or regulations,** including educating about, advocating for, and enforcing public health laws and regulations (e.g., child seat belt laws, protection of drinking water). (Essential Service 6)
- **Linking people to healthcare services,** including identifying populations that face barriers to accessing health services, linking these populations to health services, and developing and implementing interventions to address barriers. (Essential Service 7)
- **Public health workforce development,** including assessing whether the public health workforce meets the health needs of the population, maintaining public health workforce standards (e.g., licensing, credentialing, use of public health competencies), and ensuring long-term learning opportunities for the public health workforce. (Essential Service 8)
- **Evaluating public health processes, programs and/or interventions,** including implementing performance management, quality improvement, and/or other evaluation activities to track the efficiency, effectiveness, quality, and impact of services and inform decision making. (Essential Service 9)
- **Public health research,** including identifying cutting-edge research, linking public health practice with academic research settings, and epidemiological studies, health policy analyses and public health systems research (Essential Service 10)
- **Not applicable; I am not working in public health or healthcare**
- **Other** (Identify):_____

18. *Which of the following best describes the primary focus of your education?
1. Public health (including population health)
2. Health care
3. Other (please identify)

19. ***Name of University:**
    (e.g., Johns Hopkins University)

20. **Area(s) of Study:**
    (e.g., Epidemiology, Informatics, Medicine, Microbiology, Educational Psychology)

21. ***Degree(s) Sought: (select all that apply)**
    - Bachelor of Arts (BA) **(1)**
    - Bachelor of Science (BS) **(2)**
    - Bachelor of Science in Nursing (BSN) **(3)**
    - Master of Arts (MA) **(4)**
    - Master of Business Administration (MBA) **(5)**
    - Master of Public Administration (MPA) **(6)**
    - Master of Public Health (MPH) **(7)**
    - Master of Science (MS) **(8)**
    - Master of Social Work (MSW) **(9)**
    - Doctor of Medicine (MD) or Doctor of Osteopathic Medicine (DO) **(10)**
    - Doctor of Philosophy (PhD) **(11)**
    - Doctor of Public Health (DrPH) **(12)**
    - Doctor of Veterinary Medicine (DVM) **(13)**
    - Juris Doctor (JD) **(14)**

SKIP TO IMPACT OF PHAP

EMPLOYMENT (FOR EMPLOYMENT & FURTHERING EDUCATION AT THE SAME TIME)

22. ***Employer/Organization Name:**
    (e.g., Centers for Disease Control and Prevention)

23. ***Location of Employment**
    (e.g., Austin, TX)

24. **Salary Range:**
    - Less than $30,000
    - $30,000–$49,999
    - $50,000–$69,999
    - $70,000–$89,999
    - $90,000 or more

We are interested in learning more about your career advancement over the past [insert timeframe]. Select the best option for the statement below.

25. **Have you advanced in your career within the past** [insert timeframe]**?**
    - No
    - Yes

26. **Have you received an increase in salary in the past** [insert timeframe, e.g., year, 2 years]?
    - No
    - Yes

27. **Have you been given more responsibility in your job in the past** [insert timeframe, e.g., year, 2 years]?
    - No
    - Yes

    If you have been given more responsibility in your job, please explain:

28. **We are interested in learning more about your <u>current</u> job responsibilities. Please select the best option for the statements below.**

	No	Yes
I lead one or more projects	1	2
I lead a team, but do not hold an official supervisory position	1	2
I hold a supervisory position	1	2

29. ***Which of the following best describes the primary focus of your job?**
    - Public health (including population health)
    - Health care
    - Other (Please identify)

*Required Question

TYPE OF EMPLOYMENT

30. ***Which of the following best describes your type of employment?**
   - I am working as a federal government employee (e.g., CDC) **SKIP TO FED JOB SERIES**
   - I am working as a non-federal government employee (e.g., state, local, tribal, territorial) **SKIP TO WORK SETTING NON-FEDERAL GOVERNMENT (EMPLOYMENT & ED AT THE SAME TIME)**
   - I am working as a contractor in support of federal, state, or local government (e.g., ORISE, Northrup Grumman) **SKIP TO WORK SETTING CONTRACTOR FOR GOVERNMENT (EMPLOYMENT & ED AT THE SAME TIME)**
   - I am not working for the government in any capacity **SKIP TO: WORK SETTING FOR NON GOVERNMENT**

JOB SERIES/GRADE LEVEL: FEDERAL GOVERNMENT

31. **What is your grade level / Commissioned Corps equivalent?**
   - GS-7/O-2
   - GS-8
   - GS-9/O-3
   - GS-10/O-3
   - GS-11/O-3
   - GS-12/O-3 or O-4
   - GS-13/O-4 or O-5
   - GS-14/O-6
   - GS-15/O-6
   - SES/O-7/8
   - I don't know
   - Other, please specify: _____

     SKIP TO WORK SETTING FEDERAL GOVERNMENT (EMPLOYMENT+ED AT SAME TIME)

WORK SETTING: FEDERAL GOVERNMENT (EMPLOYMENT+ED AT SAME TIME)

32. ***Which of the following best describes the setting in which you work?**
   - Centers for Disease Control and Prevention (CDC) <u>stationed at headquarters</u> - **SKIP TO: CDC WORK LOCATION (1)**
   - CDC <u>stationed in the field</u> - **SKIP TO: CDC WORK LOCATION (2)**
   - Other (non-CDC) Department of Health and Human Services (HHS) **(3)**
   - Other federal government agency (e.g., State Department, USAID) **(12)**
   - Other (please identify) **(13)**

WORK SETTING: NON-FEDERAL GOVERNMENT

*Required Question

- City or county government agency **(4)**
- State government agency **(5)**
- Territorial agency/organization/coalition **(6)**
- Tribal government/organization/coalition **(7)**
- Academic institution or university **(8)**
- Other (please identify) **(13)**

SKIP TO: TOPICAL AREAS

WORK SETTING: CONTRACTOR TO THE GOVERNMENT

33. *Which of the following best describes the setting in which you work?**
    - Centers for Disease Control and Prevention (CDC) **stationed at headquarters** - **SKIP TO: CDC WORK LOCATION (1)**
    - CDC **stationed in the field** - **SKIP TO: CDC WORK LOCATION (2)**
    - Other (non-CDC) Department of Health and Human Services (HHS) **(3)**
    - Other federal government agency (e.g., State Department, USAID) **(12)**
    - City or county government agency **(4)**
    - State government agency **(5)**
    - Territorial agency/organization/coalition **(6)**
    - Tribal government/organization/coalition **(7)**
    - Academic institution or university **(8)**
    - Other (please identify) **(13)**

WORK SETTING FOR NON-GOVERNMENT

34. *Which of the following best describes the setting in which you work?**
    - State or local nonprofit organization **(9)**
    - National nonprofit organization **(10)**
    - For-profit organization/company/industry **(11)**
    - Territorial agency/organization/coalition **(6)**
    - Tribal agency/organization/coalition **(7)**
    - Academic institution or university **(8)**
    - Other (**13**)

CDC CENTER, INSTITUTE, OR OFFICE (IF GOVERNMENT OR CONTRACTOR WORKING FOR CDC)

35. *What is your CDC Center, Institute, or Office (CIO)?**
    - CDC Washington Office **(1)**
    - Center for Global Health (CGH) **(2)**
    - National Institute for Occupational Safety and Health (NIOSH) **(3)**
    - CDC Office of the Director (OD) **(4)**
    - Office for State, Tribal, Local, and Territorial Support (OSTLTS) **(5)**
    - Office of Infectious Disease/Office of the Director (OID/OD) **(6)**
    - Office of Infectious Disease/ Influenza Coordination Unit (OID/ICU) **(7)**
    - Office of Infectious Disease/ National Center for Immunization and Respiratory Diseases (OID/NCRID) **(8)**

*Required Question

- Office of Infectious Disease/National Center for Emerging and Zoonotic Infectious Disease (OID/NCEZID) **(9)**
- Office of Infectious Disease/ National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- (OID/NCHHSTP) **(10)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ Office of the Director (ONDIEH/OD) **(11)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center on Birth Defects and Developmental Disabilities (ONDIEH/ NCBDDD) **(12)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Chronic Disease Prevention and Health Promotion (ONDIEH/ NCCDPHP) **(13)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Environmental Health (ONDIEH/ NCEH) **(14)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ Agency for Toxic Substances and Disease Registry (ONDIEH/ NCEH-ATSDR) **(15)**
- Office of Noncommunicable Disease, Injury, and Environmental Health/ National Center for Injury Prevention and Control (ONDIEH/ NCIPC) **(16)**
- Office of Public Health Scientific Services office of the Director (OPHSS/OD) **(17)**
- Office of Public Health Scientific Services/ Center for Surveillance, Epidemiology, and Laboratory Services (OPHSS/CSELS) **(18)**
- Office of Public Health Scientific Services/ National Center for Health Statistics (OPHSS/NCHS) **(19)**
- Office of Public Health Preparedness and Response (OPHPR) **(20)**
- I do not know what my CDC Center, Institute, or Office is **(21)**
- Other (please identify) **(22)**

EMPLOYMENT AREA OF FOCUS (EMPLOYED + EDUCATION AT SAME TIME)

36. **In which of the following topical areas have you been working for the past** [insert timeframe]**? Select all that apply.**
    - **Communicable disease control** (e.g., HIV, STDs, tuberculosis, influenza, healthcare-associated infections)
    - **Chronic disease** (e.g., diabetes, heart disease and stroke, nutrition, physical activity, obesity, smoking and tobacco use, cancer)
    - **Injury prevention** (e.g., motor vehicle injuries, violence prevention, prescription drug overdose)
    - **Environmental public health** (e.g., air pollution and respiratory health, asthma)
    - **Maternal, child, and family health** (e.g., reproductive health, teen pregnancy, birth defects)
    - **Access to and linkage with clinical care**
    - **Public health preparedness and response**
    - **Global migration and quarantine**
    - **Immunization**
    - **Not applicable**; I am not working in public health or healthcare
    - **Other:** _____

37. **Which of the following describe your work activities over the past** [insert timeframe]**? Select all that apply.**

- **Monitoring community health status,** including identifying health risks, conducting monitoring and surveillance activities, and using methods and technology (e.g., registries, graphic information systems) to collect, interpret, and communicate data. (Essential Service 1)
- **Investigating community health problems and/or hazards,** including disease screening, laboratory activities (e.g., testing), and epidemiologic investigations of disease outbreaks (Essential Service 2)
- **Health promotion and health education,** including designing and implementing programs that build knowledge, shape attitudes, and/or inform decision-making related to disease prevention (e.g., immunizations), healthy behaviors (e.g., nutrition, physical activity), and injury prevention. (Essential Service 3)
- **Mobilizing community partnerships,** including building and maintaining formal and informal community partnerships (e.g., not-for-profit, private sector, government partnerships) and building coalitions to tackle public health issues. (Essential Service 4).
- **Developing public health policies and plans** and aligning resources to ensure successful policy and plan development. (Essential Service 5)
- **Enforcing public health laws and/or regulations,** including educating about, advocacy for, and enforcing public health laws and regulations (e.g., child seat belt laws, protection of drinking water). (Essential Service 6)
- **Linking people to healthcare services,** including identifying populations that face barriers to accessing health services, linking these populations to health services, and developing and implementing interventions to address barriers. (Essential Service 7)
- **Public health workforce development,** including assessing whether the public health workforce meets the health needs of the population, maintaining public health workforce standards (e.g., licensing, credentialing, use of public health competencies), and ensuring long-term learning opportunities for the public health workforce. (Essential Service 8)
- **Evaluating public health processes, programs and/or interventions,** including conducting performance management, quality improvement, and/or other evaluation activities to track efficiency, effectiveness, quality, and impact of services and inform decision making. (Essential Service 9)
- **Public health research,** including identifying cutting-edge research, linking public health practice with academic research settings, and epidemiological studies, health policy analyses and public health systems research (Essential Service 10)
- **Not applicable;** I am not working in public health or healthcare
- **Other** (Identify):_____

EDUCATION (FOR EMPLOYMENT+EDUCATION AT SAME TIME)

38. *Which of the following best describes the primary focus of your education?

*Required Question

- Public health (including population health)
- Health care
- Other (please identify) **SKIP TO IMPACT OF PHAP**

39. ***Name of University:**
   (e.g., Johns Hopkins University)

40. **Area(s) of Study:**
   (e.g., Epidemiology, Informatics, Medicine, Microbiology, Educational Psychology)

41. ***Degree(s) Sought: (select all that apply)**
   - Bachelor of Arts (BA) **(1)**
   - Bachelor of Science (BS) **(2)**
   - Bachelor of Science in Nursing (BSN) **(3)**
   - Master of Arts (MA) **(4)**
   - Master of Business Administration (MBA) **(5)**
   - Master of Public Administration (MPA) **(6)**
   - Master of Public Health (MPH) **(7)**
   - Master of Science (MS) **(8)**
   - Master of Social Work (MSW) **(9)**
   - Doctor of Medicine (MD) **(10)**
   - Doctor of Philosophy (PhD) **(11)**
   - Doctor of Public Health (DrPH) **(12)**
   - Doctor of Veterinary Medicine (DVM) **(13)**
   - Juris Doctor (JD) **(14)**

SKIP TO IMPACT OF PHAP

TRAINING OR SERVICE PROGRAM

42. Name of training or service program:

43. Location of training or service program:
   (e.g., Washington, DC)

SKIP TO IMPACT OF PHAP

IMPACT OF PHAP (ALL RESPONDENTS)

44. I consider myself a public health ambassador
- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

45. I would recommend PHAP to others considering a career in public health.
- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

46. How influential has PHAP been to your career path?
- Not at all influential
- Slightly influential
- Somewhat influential
- Very influential
- Extremely influential

   Explain your response: _____

47. How frequently do you interact with individuals or groups from your PHAP network? This could include (but is not limited to) CDC PHAP staff, PHAP alumni, former host site supervisors or colleagues.

- Never
- Rarely
- Sometimes
- Often
- Frequently

THANK YOU FOR PARTICIPATING IN THIS SURVEY.