#  Form Approved

 OMB No. 0920-1078 Expiration Date: 03/31/2027

# Alumni Survey

## Introduction

You are being asked to complete this survey because of your previous participation in CDC’s Prevention Effectiveness Fellowship (PEF). The purpose of this survey is to learn about fellowship alumni career progression and how alumni contribute to the public health workforce.

Your participation is completely voluntary. Your individual responses will be kept secure and not shared. Only CDC Public Health Workforce Branch (where PEF resides), PEF staff, and CDC Division of Workforce Development evaluation staff with have access to your responses. Results from the survey will be reported in aggregate(e.g., 75% of alumni are employed in public health).

We estimate that it will take approximately 8 minutes to complete this survey. This survey link is unique to you, so please don’t forward it to others. You will be able to return to the survey to edit or update your responses at any time prior to the survey closing date on DATE.

Please contact PEF@cdc.gov if you have any questions regarding this survey.

The 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 the collection of 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 OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to **CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329 ATT: PRA (0920-1078).**

## 1: Post-Fellowship Activity

### 1.1 Professional Status:

*Please select the response option that best describes your current professional status. Please read all response options before selecting your response.*

1. Professional Status:
	1. **I am employed.** (Year 1: include “*Please also select this response if you are extending your PE fellowship or if you are an ORISE fellow*.”) (skip to 1.3 Employer Details)
	2. **I am furthering my education** at an academic institution (e.g., masters or doctoral) or through a clinical training program or medical residency. (continue to section 1.2a Additional Education)
	3. **I am** **employed and am furthering my education** at the same time. (skip to section 1.2b. Additional Education and Employed)
	4. **I am participating in a training or service program** (e.g., internship, AmeriCorps, Peace Corps) or **a different public health fellowship program** than the Prevention Effectiveness Fellowship (e.g., EIS, Public Health Informatics Fellowship Program) (skip to section 1.2c. Additional Training)
	5. **I am seeking employment.** (Year 1: skip to question #32. All other years: skip to section 3. General Information.
	6. **I am not currently employed** and not seeking employment (Year 1: skip to question #32. All other years: skip to section 3. General Information.)
	7. **Other** (please specify): (Year 1: skip to question #32. All other years: skip to section 3. General Information.)

### 1.2a. Additional Education

1. Which of the following best describes the **primary** focus of your current education?
	1. Public health (including population health) - *Select if your education focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.*
	2. Health care - *Select if your education focuses on diagnosing and treating individual patients; managing clinical services, hospitals; etc.*
	3. Other (please specify):

All responses: Year 1: skip to question #32. All other years: skip to section 3. General Information.

### 1.2b. Additional Education and Employment

1. Which of the following best describes the **primary** focus of your current education?
	1. Public health (including population health) - *Select if your education focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.*
	2. Health care - *Select if your education focuses on diagnosing and treating individual patients; managing clinical services, hospitals; etc.*
	3. Other (please specify):

All responses continue to section 1.3. Employer Details.

### 1.2c. Additional Training or Service

1. Which of the following best describes the training, service program, or fellowship you are pursuing?
2. CDC public health fellowship, educational, or training program (including EIS, Public Health Informatics Fellowship Program, etc.)
3. Non-CDC fellowship or training program
4. Service organization (e.g., Peace Corps; AmeriCorps)
5. Which of the following best describes the **primary** focus of your current training or service program?
6. Public health (including population health) - *Select if your program focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.*
7. Health care - *Select if your program focuses on diagnosing and treating individual patients; managing clinical services, hospitals; etc.*
8. Other (please specify):

All responses: Year 1: skip to section 2. Preparedness for Post-Fellowship Position for all responses. All other years: skip to section 3. General Information.

### 1.3a. Employer Details

*Note: If you have more than one job, please provide employment information for what you consider to be your* ***primary*** *job and employer.*

1. Employer name:
2. Job title:
3. Which of the following best describes the **primary** focus of your current job?
	1. Public health (including population health) - *Select if your work focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.*
	2. Health care - *Select if your work focuses on diagnosing and treating individual patients; managing clinical services, hospitals; etc.*
	3. Other (please specify):

If responses “A” or “B” are selected, proceed to section 1.3b (Employer Type).

If response “C - Other” is selected:

* If Year 1 survey – continue to question 9.
* All other years – skip to section 3. General Information.
1. Which of the following influenced your decision to **not** take job in public health or at CDC? Select all that apply.
	1. My PE fellowship host site was unable to hire me because of a lack of funds.
	2. My PE fellowship host site was unable to hire me because of a lack of an FTE position.
	3. My PE fellowship host site was unable to hire me because of visa challenges.
	4. I applied for CDC positions but “did not make the cert.”
	5. Salaries for available CDC positions were too low.
	6. Salaries for available public health positions were too low.
	7. Available public health or CDC positions do not match my interests or skills.
	8. I was unable to find any positions in public health or at CDC because of visa challenges.
	9. There were personal or family considerations.
	10. Other (please specify):

All responses: Skip to section 2. Preparedness for Post-Fellowship Position

### 1.3b. Employment Type

1. Which of the following best describes your current **type of employment**?
2. **Federal government** employee (e.g., CDC, FDA) *NOTE: if you are part of the USPHS Commissioned Corps, select this option.* (continue to section 1.4 Federal government employment activity)
3. **Non-federal, government** employee (state, local, tribal, territorial; e.g., Georgia Department of Public Health) (skip to section 1.5. Non-federal, government employment)
4. **Contractor** in support of federal, state, tribal, territorial, or local government (e.g., ORISE fellow, Northrup Grumman) (skip to section 1.6. Government contractor employment)
5. **Non-governmental**, academic, clinical, community, or other organization employee (skip to section 1.7. Non-government employment)

### 1.4. Federal government employment activity

1. Which of the following best describes your current **federal employer**? *Note: If you are a PHS Officer, select the agency to which you are assigned.*
2. Centers for Disease Control and Prevention (CDC). I am **stationed or work primarily at CDC headquarters or other CDC domestic office**.
3. Centers for Disease Control and Prevention (CDC). I am **stationed domestically** in the field (e.g., state, local, or tribal health department).
4. Centers for Disease Control and Prevention (CDC). I am **stationed internationally** in the field (including CDC country offices).
5. Other (non-CDC) Department of Health and Human Services (HHS) agency (Year 1: skip to question #13. All other years: skip to question #14).
6. Other Federal government agency (e.g., State Department, USAID) (Year 1: skip to question #13. All other years: skip to question #14)
7. Other (please specify): (Year 1: skip to question #13. All other years: skip to question #14)

### 1.4a. Federal government employment activity

1. In which CIO are you located or primarily support? [dropdown of CIO options]
2. N/A – I do not work in or support a specific CDC CIO
3. CDC Washington Office
4. Center for Forecasting and Outbreak Analytics (CFA)
5. Global Health Center (GHC)
6. Immediate Office of the Director
7. National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
8. National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)
9. National Center for Environmental Health (NCEH)
10. National Center for Health Statistics (NCHS)
11. National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)
12. National Center for Immunization and Respiratory Diseases (NCIRD)
13. National Center for Injury Prevention and Control (NCIPC)
14. National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce (NCSTLTPHIW/PHIC)
15. National Center on Birth Defects and Developmental Disabilities (NCBDDD)
16. National Institute for Occupational Safety and Health (NIOSH)
17. Office of Communications (OC)
18. Office of Equal Employment Opportunity and Workplace Equity (OEEWE)
19. Office of Health Equity (OHE)
20. Office of Laboratory Science and Safety (OLSS)
21. Office of Policy, Performance, and Evaluation (OPPE)
22. Office of Public Health Data, Surveillance, and Technology (OPHDST)
23. Office of Readiness and Response (ORR)
24. Office of Science (OS)
25. Office of the Chief of Staff (OCoS)
26. Office of the Chief Operating Officer (OCOO)
27. Other (please specify):
28. **[Year 1 survey only]** Is your current work setting in the same division, agency, or organization as your FELLOWSHIP site? *Note: If your host site was not in a division but in a CIO OD, select “Yes” if you are staying in the same CIO.*
	1. Yes
	2. No
29. Which of the following best describes the employment statusfor your position?
30. USPHS Commissioned Corps
31. Civil Service, Full Time Equivalent (FTE) (e.g., Title 5, 38)
32. Temporary or term FTE (including Title 42 appointment or former fellowship extension)
33. Other (please specify):
34. What is your current job series?
	1. 0110 - Economist
	2. 0301 - Miscellaneous Administration and Program
	3. 0343 - Management and Program Analysis
	4. 0403 - Microbiology
	5. 0601 - General Health Science
	6. 0602 - Medical Officer
	7. 0610 - Nurse
	8. 0685 - Public Health Program Specialist
	9. 0701 - Veterinary Medical Science
	10. 0801 - General Engineering
	11. 1001 - Health Communications Specialist
	12. 1102 - Contract Specialist
	13. 1515 - Operations Research
	14. 1529 - Mathematical Statistics
	15. 1530 - Statistics
	16. 1150 - Computer Science
	17. 1560 - Data Science
	18. Other (please specify):
35. What is your current pay grade?
	1. GS-5
	2. GS-6
	3. GS-7
	4. GS-8
	5. GS-9
	6. GS-10
	7. GS-11
	8. GS-12
	9. GS-13
	10. GS-14
	11. GS-15
	12. Senior Executive Service (SES)
	13. Commission Corps 0-3
	14. Commission Corps 0-4
	15. Commission Corps 0-5
	16. Commission Corps 0-6
	17. Commission Corps 0-7
	18. Commission Corps 0-8
	19. Commission Corps 0-9
	20. Commission Corps 0-10
	21. Other (please specify):

All responses: skip to section 1.8a Support of Essential Public Health Services1.5. Non-federal government employment

1. Which of the following best describes your current **employer**?
2. City or county government agency
3. State government agency or public health laboratory
4. U.S. territorial and freely associated state government agency
5. Tribal government equivalent organization/coalition
6. Other (please specify):
7. **[Year 1 survey only]** Is your current work setting in the same agency or organization as your Prevention Effectiveness Fellowship host site?
	1. Yes
	2. No

All responses: skip to section 1.8a Support of Essential Public Health Services

### 1.6. Government contractor employment

1. Which of the following best describes the **primary focus or setting** of your contract work?
2. I support or work at the Centers for Disease Control and Prevention (CDC).
3. I support or work at the Department of Health and Human Services (HHS) or other HHS agency (not CDC).
4. I support or work at another Federal government agency (e.g., State Department, USAID).
5. I support or work at a city or county government agency.
6. I support or work at a state government agency or public health laboratory.
7. I support or work at a US territorial or freely associated state agency.
8. I support or work at a tribal governmental equivalent organization/coalition.
9. Other (please specify):
10. **[Year 1 survey only]** Is your current work setting in the same CIO or division, agency, or organization as your Prevention Effectiveness Fellowship host site?
11. Yes
12. No

All responses: skip to 1.8a Support of Essential Public Health Services

### 1.7. Non-government employment

1. Which of the following best describes your current **employer**?
2. College or university
3. Industry (private, non-clinical business)
4. Clinical (hospital or other clinical care)
5. Non-governmental, community, or other organization
6. Tribal organization
7. Other (please specify):
8. **[Year 1 survey only]** Is your current work setting in the same CIO or division, agency, or organization as your Prevention Effectiveness Fellowship host site?
	1. Yes
	2. No

All responses continue to 1.8a Support of Essential Public Health Services

### 1.8a: Support of Essential Public Health Services

1. Which of the following describe your work activities in your current job? Select all that apply.
2. **Assess and monitor population health status**, **factors that influence health, and community needs and assets.**
3. **Investigate, diagnose, and address health problems and hazards affecting the population** (e.g., anticipating, preventing, and mitigating health threats through epidemiologic identification; using public health laboratory capabilities and modern technology for testing, screening, etc.; responding to acute outbreaks, emergencies, and other health hazards; identifying, analyzing, and distributing information on population health, outbreaks, etc.)
4. **Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.**
5. **Strengthen, support, and mobilize communities and partnerships to improve health.**
6. **Create, champion, and implement policies, plans, and laws that impact health.**
7. **Utilize legal and regulatory actions designed to improve and protect the public’s health** (e.g., licensing and monitoring the quality of healthcare services; reviewing new drug, biologic, and medical device applications; licensing and credentialing the healthcare workforce; conducting enforcement activities).
8. **Assure an effective system that enables access to the individual services and care needed to be healthy** (e.g., addressing and removing barriers to care; ensuring access to high-quality and cost-effective healthcare and social services; building relationships with payers and healthcare providers).
9. **Build and support a flexible and skilled public health workforce** (e.g., providing education and training; building active partnerships with academia and other professional training programs; forecasting workforce needs; incorporating public health principles in non-public health curricula).
10. **Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.**
11. **Build and maintain a strong organizational infrastructure for public health** (e.g., designing and maintain information and data systems; managing financial and human resources; strategic planning).
12. **Other** (please specify):

### 1.8b: Program Focus Area(s)

1. Please specify your current program area(s). Select all that apply.

*Note: Some programs are listed differently than you would expect. For example, WIC can be found under “Maternal and Child Health – WIC.”*

1. Administration/Administrative Support
2. Animal Control
3. Children and Youth with Special Health Care Needs
4. Clinical Services (excluding TB, STD, family planning)
5. Communicable Disease - HIV
6. Communicable Disease - Influenza
7. Communicable Disease - STD
8. Communicable Disease - Tuberculosis
9. Communicable Disease - Viral Hepatitis
10. Other Communicable Disease
11. Community Health Assessment/Planning
12. COVID-19 Response
13. Disability Services (including disability determinations)
14. Economic analysis, mathematical modeling, and analytics
15. Emergency Medical Services
16. Emergency Preparedness
17. Enforcement/Inspection/Licensing/Certification of Facilities (includes health care facilities, long-term care facilities, nursing homes, and child care facilities)
18. Environmental Health
19. Epidemiology Surveillance
20. Global Health
21. Health Education
22. Health Promotion/Wellness
23. Immunizations - Clinical Services
24. Immunizations - Non-Clinical
25. Informatics
26. Information Technology (IT) Services
27. Injury/Violence Prevention
28. Maternal and Child Health
29. Maternal and Child Health - Family Planning
30. Maternal and Child Health - WIC
31. Medical Examiner
32. Mental and Behavioral Health
33. Minority Health/Health Disparities
34. Non-Communicable Disease/Chronic Disease (including cancer, diabetes, heart disease, obesity, etc.)
35. Oral Health/Clinical Dental Services
36. Policy and Legislation
37. Program Evaluation
38. Public Health Genetics
39. Public health Laboratory
40. School Health
41. Substance Abuse (including tobacco control programs)
42. Training/Workforce Development
43. Vital Records
44. Other Program Area (specify)

### 1.9: Supervision and Leadership

1. Select the response that **best describes** the supervisory status of your position?
2. I do not supervise/manage other employees.
3. I supervise/manage one or more employees.
4. I supervise/manage one or more supervisors/managers.

Year 1 survey – continue to 2: Preparedness for Post-Fellowship Position. All other years – Skip to 3: General Information

## 2: Preparedness for Post-Fellowship Position

1. **[Year 1 survey only]** Overall, to what extent did your fellowship experience prepare you for your current position?
	1. Not at all
	2. A little
	3. Somewhat
	4. Very much
2. To what extent did each of the following parts of your fellowship experience prepare you for your current position?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all | A little | Somewhat | Very much | Not applicable |
| Fellowship performance requirements |  |  |  |  |  |
| Fellowship training |  |  |  |  |  |
| Peer-to-peer learning |  |  |  |  |  |
| Learning from mentors or supervisors |  |  |  |  |  |
| Developing a professional network |  |  |  |  |  |

1. Are there skills or topic areas that were not addressed during the Prevention Effectiveness Fellowship but that would have been helpful in your current position? (free text)
2. **[Year 1 survey only]** How influential has the Prevention Effectiveness Fellowship been to your career path?
3. Not at all influential
4. Slightly influential
5. Somewhat influential
6. Very influential
7. Extremely influential
8. If you are currently working at CDC: To what extent do you agree with this statement, “I chose to remain at CDC because of my participation in the Prevention Effectiveness Fellowship.”
	1. Strongly disagree
	2. Do not agree
	3. Somewhat agree
	4. Agree
	5. Strongly agree
	6. N/A – I did not remain at CDC

## 3: General Information

*The following questions on this page are optional.*

1. What is your race and/or ethnicity? *Select all that apply.*
	* American Indian or Alaska Native

*For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.*

* + Asian

*For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.*

* + Black or African American

*For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.*

* + Hispanic or Latino

*For example, Mexican Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.*

* + Middle Eastern or North African

*For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.*

* + Native Hawaiian or Other Pacific Islander

*For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.*

* + White

*For example, English, German, Irish, Italian, Polish, Scottish, etc.*

## 4: Fellowship Recruitment and Promotion

1. What kind of engagement would you like as an alumnus of the PE Fellowship? Select all that apply.
	1. Receive notices of program activities and fellowship accomplishments
	2. Invitations to seminars and trainings
	3. Opportunities to deliver seminars and trainings
	4. Opportunities to mentor fellows
	5. Not interested
2. Alumni are a great way to get the word out about CDC's fellowship programs**. Are you interested in participating in any future efforts to recruit or promote your fellowship?** *If “Yes,” you may be contacted by CDC Division of Workforce Development staff. Your contact information will not be shared with anyone outside of DWD*.
3. Yes
4. No (skip to 5: Conclusion)
5. If you reside in the United States and are interested in participating in a recruitment event near you, please share your location information.

City:

State/Territory:

## 5: Conclusion

Thank you for taking the time to complete this survey. Please contact PEF@cdc.gov with any questions.

*Redirect close of survey to:* [*https://www.cdc.gov/fellowships*](https://www.cdc.gov/fellowships)