Form Approved

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# PHAP Alumni Survey

## Introduction

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 Dr. Laura Colman at 404.498.1542 or PHAP\_evaluation@cdc.gov.

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.** *Please also select this response if you are extending your FELLOWSHIP NAME 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. (skip to 1.2a Additional Education)
	3. **I am** **employed and am furthering my education** at the same time. (continue to 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 FELLOWSHIP NAME (e.g., EIS, Public Health Informatics Fellowship Program, etc.) (continue to 1.2c. Additional Training)
	5. **I am seeking employment.** (Skip to question #29.)
	6. **I am not currently employed** and not seeking employment (Skip to question #29.)
	7. **Other** (please specify): (Year 1 only – skip to question #29. All other years skip to 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: skip to question #29 for all responses.

### 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 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: Preparedness for Post-Fellowship Position for all responses.

### 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. Location of Employment (e.g., Austin, TX):
3. Job title:
4. Salary Range (per year):
	1. Less than $30,000
	2. $30,000-$49,999
	3. $50,000-$69,999
	4. $70,000-$89,999
	5. $90,000 or more
5. 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)

### 1.3b. Employment Type

1. Which of the following best describes your current **type of employment**?
2. **Federal government** employee, national or international governments (e.g., CDC, FDA, European Centre for Disease Prevention and Control) *NOTE: if you are part of the USPHS Commissioned Corps, select this option.* (continue to 1.4 Federal government employment activity)
3. **Non-federal, government** employee (state, local, tribal, territorial; e.g., Georgia Department of Public Health) Note: if employed by non-federal international government agency, select this option (skip to 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 1.6. Government contractor employment)
5. **Non-governmental** employee, national or international clinical, community, or other organization employee (skip to 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 (Skip to Q14).
6. Other Federal government agency (e.g., State Department, USAID) (Skip to Q14)
7. International Government Agency (Skip to Q24)
8. Other (please specify) (Skip to Q14)

### 1.4a. Federal government employment activity

1. In which CIO are you located or primarily support? [dropdown of CIO options]
2. CDC Washington Office (CDC/W)
3. Center for Forecasting and Outbreak Analytics (CFA)
4. Global Health Center (GHC)
5. Immediate Office of the Director
6. National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
7. National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)
8. National Center for Environmental Health (NCEH)/ Agency for Toxic Substances and Disease Registry (ATSDR)
9. National Center for Health Statistics (NCHS)
10. National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)
11. National Center for Immunization and Respiratory Diseases (NCIRD)
12. National Center for Injury Prevention and Control (NCIPC)
13. National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce (NCSTLTPHIW)
14. National Center on Birth Defects and Developmental Disabilities (NCBDDD)
15. National Institute for Occupational Safety and Health (NIOSH)
16. Office of Communications (OC)
17. Office of Equal Employment Opportunity and Workplace Equity (OEEWE)
18. Office of Health Equity (OHE)
19. Office of Laboratory Science and Safety (OLSS)
20. Office of Policy, Performance, and Evaluation (OPPE)
21. Office of Public Health Data, Surveillance, and Technology (OPHDST)
22. Office of Readiness and Response (ORR)
23. Office of Science (OS)
24. Office of the Chief of Staff (OCoS)
25. Office of the Chief Operating Officer (OCOO)
26. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
27. 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
28. Which of the following best describes the employment statusfor your position?
29. USPHS Commissioned Corps
30. Civil Service, Full Time Equivalent (FTE) (e.g., Title 5, 38)
31. Temporary or term FTE (including Title 42 appointment or former fellowship extension)
32. Other (please specify)
33. What is your current job series?
	1. 0101- Social/Behavioral Scientist
	2. 0110 - Economist
	3. 0301 - Miscellaneous Administration and Program
	4. 0343 - Management and Program Analysis
	5. 0401- Biologist
	6. 0403 – Microbiology
	7. 0560- Budget Analysis
	8. 0601 - General Health Science
	9. 0602 - Medical Officer
	10. 0610 - Nurse
	11. 0660- Pharmacist
	12. 0685 - Public Health Program Specialist
	13. 0701 - Veterinary Medical Science
	14. 0801 - General Engineering
	15. 1001 - Health Communications Specialist
	16. 1035- Public Affairs
	17. 1083- Technical Writing and Editing
	18. 1102 - Contract Specialist
	19. 1515 - Operations Research
	20. 1529 - Mathematical Statistics
	21. 1530 - Statistics
	22. 1150 - Computer Science
	23. 1560 - Data Science
	24. Other (please specify):
34. What is your current pay grade?
	* GS-5
	* GS-6
	* GS-7
	* GS-8
	* GS-9
	* GS-10
	* GS-11
	* GS-12
	* GS-13
	* GS-14
	* GS-15
	* Senior Executive Service (SES)
	* Commission Corps 0-3
	* Commission Corps 0-4
	* Commission Corps 0-5
	* Commission Corps 0-6
	* Commission Corps 0-7
	* Commission Corps 0-8
	* Commission Corps 0-9
	* Commission Corps 0-10
	* Other (please specify):

All responses skip to Q24 1.5. 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. International non-federal governmental agency
7. Other (please specify)
8. Is your current work setting in the same agency or organization as your FELLOWSHIP host site?
	1. Yes
	2. No

All responses skip to Q24

### 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. I support or work at an international government agency.
10. Other (please specify):
11. Is your current work setting in the same CIO or division, agency, or organization as your FELLOWSHIP host site?
12. Yes
13. No

All responses skip to Q24

### 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. National or International non-governmental, community, or other organization
6. Tribal organization
7. Other (please specify):
8. Is your current work setting in the same CIO or division, agency, or organization as your FELLOWSHIP host site?
9. Yes
10. No

All responses continue to Q24

1. Have you received an increase in salary [since last alumni survey]?
	* Yes
	* No
2. Have you advanced in your career [since last alumni survey]?
	* Yes
	* No
3. Have you been given more responsibility in your job in the past year?
	* Yes (Skip to Q27)
	* No (Skip to Q28)
4. If you have been given more responsibility in your job, please explain: [Open Text]

### 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. Emergency Medical Services
15. Emergency Preparedness
16. Enforcement/Inspection/Licensing/Certification of Facilities (includes health care facilities, long-term care facilities, nursing homes, and child care facilities)
17. Environmental Health
18. Epidemiology Surveillance
19. Global Health
20. Health Education
21. Health Promotion/Wellness
22. Immunizations - Clinical Services
23. Immunizations - Non-Clinical
24. Informatics
25. Information Technology (IT) Services
26. Injury/Violence Prevention
27. Maternal and Child Health
28. Maternal and Child Health - Family Planning
29. Maternal and Child Health - WIC
30. Medical Examiner
31. Mental and Behavioral Health
32. Minority Health/Health Disparities
33. Non-Communicable Disease/Chronic Disease (including cancer, diabetes, heart disease, obesity, etc.)
34. Oral Health/Clinical Dental Services
35. Policy and Legislation
36. Program Evaluation
37. Public Health Genetics
38. Public health Laboratory
39. School Health
40. Substance Abuse (including tobacco control programs)
41. Training/Workforce Development
42. Vital Records
43. 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.

## 2: Preparedness for Post-Fellowship Position

1. Overall, to what extent did your PHAP experience prepare you for your current position?
	1. Not at all; my fellowship did not prepare me.
	2. A little; my fellowship had a small role in preparing me.
	3. Somewhat; my fellowship had a moderate role in preparing me.
	4. Very much; my fellowship had a large role in preparing me.
2. How influential has PHAP been to your career path?
3. Not at all influential
4. Slightly influential
5. Somewhat influential
6. Very influential
7. Extremely influential
8. Please explain your response [Free Text]
9. I consider myself to be a public health ambassador.
10. Strongly disagree
11. Disagree
12. Neither agree nor disagree
13. Agree
14. Strongly agree
15. I would recommend PHAP to others considering a career in public health.
	1. Strongly disagree
	2. Disagree
	3. Neither agree nor disagree
	4. Agree
	5. Strongly agree
16. Please explain your response [Free Text]
17. How frequently do you interact with individuals from your PHAP network? This could include (but not limited to) CDC PHAP staff, PHAP alumni, former host site supervisors and/or colleagues.
	1. Never
	2. Rarely
	3. Sometimes
	4. Often
	5. Frequently

## 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. 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*.
2. Yes (continue to Q34)
3. No (skip to 5: Conclusion)
4. 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 LColman@cdc.gov with any questions.

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