GHSP - Market research to explore similar organizations to Seed Global Health

Health Volunteers Overseas

- Place health care professionals (nurses, physicians, physical therapists, etc.) overseas in 25 countries in Africa, Asia, Latin & South America with a mission to improve the availability and quality of health care in developing countries through the training and education of local health care providers
- Volunteer assignments from 1 week to 4 months (most typical 2-4 weeks)
- Some sites provide room, board, and transportation for volunteers
- Volunteers provide their own travel, living expenses, and related costs (average out of pocket expenses $2,800)
- No pre-departure orientation. On site coordinator to meet volunteers when they arrive and handle initial introductions
- No health care professionals on staff
- Donor funding (private and health organizations)

Summary – Volunteer program, but without the financial/logistical support of GHSP. More of an organization to process volunteers into the field as true volunteers (no compensation, even for living allowance). No technical support for the volunteers in terms of clinical or educational support.

American International Health Alliance – Volunteer Healthcare Corps

- Place health professionals in Ethiopia and South Africa (small programs in Tanzania, Mozambique) to mentor as clinical preceptors, pre-service faculty, and clinicians (or in public health) at health centers and hospitals
- Funding from USAID, HRSA, and GF. Primary project is a twinning center that links U.S. academic institutions with institutions overseas
- Place volunteers for 3-24 month assignments. 87 individuals from 2006 – 2011.
- They recruit primarily from the diaspora (Ethiopia mainly) due to recruitment challenges. They have met with us before to discuss recruitment strategies, because they have struggled in this area and are more successful with shorter term placements.
- The main DC office did not have a clinical team when I spoke with them around 2014.
- Benefits of transportation to and from country, housing, vaccinations, living stipend. No fundraising for additional debt repayment stipends.

Summary – similar volunteer program, but different model - lacking the technical support (clinical and educational) that would be needed as an additive to what Peace Corps is already able to provide. Also do not offer and additional financial incentive. Most funding appears to come from USG and GF. Largest additional input was ‘in-kind’ contributions from twinning centers in U.S.

Doctors Without Borders (MSF)

- Humanitarian organization that provides medical care to people around the world in need, usually related to armed conflict, epidemics, natural disasters, etc. Work is in many, many countries.
- 9-12 month assignments, < $2000/month living allowance, transportation to and from, medical coverage, psychological support, accommodations in the field.
- Primary role is to provide medical care and they do work to build capacity as well, but they are primarily filling the gap in clinical providers to serve the health needs of the population (not to serve as educators).
- They have their own processing and deployment and make their own decisions about where they work and how.

Summary – This is an organization with a long history of deploying medical professionals throughout the world. They primarily respond to crises, so the PC policies around not working during deadly epidemics, such as ebola, and evacuating during civil conflicts would be a conflict in principal. They also have their own system set up to provide all of the logistical support that PC provides as its piece in the partnership. They are a similar model as GHSP, but they do all of the work themselves, not in a partnership.

HRH Rwanda

- Place health care professionals in Rwanda as visiting faculty for 1 year placements to train physicians, nurses, midwives, dentists, health managers
- All placements made through a partner U.S. academic institution that is responsible for recruitment, vetting, processing, financial arrangements, and have MOUs with the Rwandan government. Rwandan MOH selects volunteers to fill faculty vacancies.
- On the ground logistics supported by the Rwandan government and academic institutions, as well as an in-country coordinator from the U.S. partner academic institution
- Health care professionals receive a salary of ~$90k plus (over $100k for physicians)
- Funding was through CHAI initially (may have or be changing to Gov't of Rwanda) who received funding from USG, Global Fund, and ELMA philanthropies. Academic institutions received a small overhead to coordinate the placements.
- At the high point were placing ~ 80 health care professional/year, but can send non-U.S. citizens. Each partner academic institution was responsible for fielding ~ 8-10 faculty

Summary – Not a volunteer model, so the salaries offered allow for much more rigorous recruiting, as well as placing a large burden of recruitment on the partner academic institutions. Also, the increased independence of the faculty (can bring dependents, identify own housing, no strict policies) allows for more rigorous recruiting and the ability to send non-U.S. citizens. The relationships that allow this program to flourish (partner U.S. academic institutions) that manage the logistics would likely not be possible with Peace Corps due to the control that we need to have over the process. No fundraising for

stipends done by CHAI who received funding from USG, GF, and ELMA philanthropies. CHAI played primarily a coordinating role (similar to Peace Corps role in the GHSP partnership now).

Based on the summaries of each organization, none are able to provide the type of support requested for GHSP, notably

- Fundraising for financial stipends that will approach and exceed $1 M/year
- A team of clinicians that can provide technical clinical and educational support for the volunteers in the field
- Independent recruitment abilities that don't depend on non-US citizens, high volunteer compensation (salaries) or assistance from U.S. academic institutions
- Experience working with a partner that would impose a foundational philosophy and mission that would have precedent over their own mission philosophy
- In-country partner relationships in multiple countries (that include the GHSP countries)