

Spotlight on Selected Employers Career Services LSHTM

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Name/Title: Zoe Isaacs, Manager, Universal Health Coverage (UHC) Financing and Planning

Organization: Partners in Health (PIH)

LSHTM Alum: Yes

Based in: Vermont, US

Years at organization: 1.5 years

1. What's your background? Please share brief details of your previous education, prior work experience, LSHTM program, summer thesis, post-LSHTM career trajectory and overall career goals.

- **Education:** MSc. HPPF 2019-20
- **Prior Work Experience:**
 - Advertising for 3 years in private sector, 2.5 years at CHAI (Regional Senior Financing Associate in Central America) – Guatemala, Honduras, Haiti, Panama, the Dominican Republic
- **LSHTM Program and Summer Thesis:** Catastrophic health expenditure in households of people living with HIV: a systematic review in LMICs.
- **Post-LSHTM career trajectory:** Always wanted to work with PIH. Her brother lived in Rwanda and worked with PIH. PIH is a care delivery organization and she wanted to see how it is to deliver care directly to people in LMICs. She also wanted to work in UHC and got a similar opportunity at PIH.
- **Long-term Goals:** She wants to keep building her new team at PIH in next few years. Eventually she would like to do a PHD.

PIH started technical assistance (TA) (called Government Accompaniment) in last two years focused on health policy and financing. She reports to Director of Population Health and Planning team has a diagonal line of reporting to Director of Health Policy and Government Accompaniment.

2. Please share brief details about the organization – type of work, staff size, and presence in different geographies.

- PIH originally is a care delivery organization – operating in 11 countries. Programs include partnering with governments to implement healthcare delivery. Every country has hospital(s) and a network of clinics which are built and run by PIH in partnership with MoH. PIH's work is based on social justice for health and promoting equity and UHC. Some of the hospitals/clinics are completely financed by PIH and some are in partnership with the government. Focus areas in care delivery range from community health, primary care, to tertiary care (surgery, oncology emergency and critical care, mental health). In addition, PIH has set up 2-3 training universities (one in Rwanda, one in Haiti) to train local health staff (doctors/nurse/community health workers).
- PIH also works in the US - New Mexico, Boston. There is also a program in Canada. During the COVID-19 pandemic, PIH got hired by 4-5 state departments in the US to design their community-based contact tracing strategies.
- Recently, after Dr. Sheila Davis took up as CEO four years ago, PIH's strategy has expanded and they have entered the TA space – particularly oriented on health policies and strategic plans. Based on increasing requests from govt. about how they can replicate PIH work and scale it up on their own.
- There are 18,000 staff worldwide. 500 are in the US.

3. Please share details about the team you work in? (focus, size, presence, organizational hierarchy level)

Her team does the TA work and is a small team of three staff – Her immediate supervisor (director of population health and policy), she is the manager and she just hired a new analyst. Going forward (expected this year), they plan to hire more; some will be based out of Boston and some staff will be in Africa.

4. Please describe the kind of projects you work on? How does your average work day look like?

UHC and Financing Team has three main pillars of work

- Costing work – time-based micro-costing – for example, the cost of implementing surgeries with one method over the other. They did a project at maternal center of excellence in Sierra Leone to generate evidence for c-section procedure for policy-making. Similar project with National mental health program in Lesotho.
- Health Financing and Policy - Involves working with higher levels of Ministry and associated technical working groups on country's health financing – renewing the financing, raising or distribution across the country. For example, her team provided TA on the national costing of health programs such as national emergency and critical care program in Malawi, community health program in Liberia.
- UHC monitoring – PIH has a monitoring tool on website. It helps countries monitor and find out where there are in gaps in UHC. Its developed as an M&E tool.

She works remotely with teams in Africa – lot of calls in the early morning time. Travel could be week or longer – it's up to her. 30-40% of time is travel. With team growing, she may travel less in future. Her work is not in the US. She doesn't think that UHC and Health Financing team will focus on US in the near future.

5. What type of skills your team looks for in public health candidates?

a. Entry level (0-1 years of experience) –

- Coordinator (admin track)
- Associate (technical track) – have some experience with global health non-profit, government agency, or academic institution in public health. Writing, communicating and analytical skills are assessed. Ability to work with people from different backgrounds is valued. If no experience at all, show if some there has been interest in global health through course work.

b. Experienced (equal to or more than 4-5 years of experience) –

- Analyst (3-5 years) – master degree usually required, MPH or MSc in health policy/economics/financing.
 - Definitely some experience with an international non-profit, government or academic institution in public health. Experience in traveling for work in LMICs is preferred. A master's degree is usually required. Depending on the role, additional requirements may be some experience in management consulting if the job requires lot of analytics.
- For manager level – 6-7 years of experience minimum is needed. Criteria will be similar.

6. What is the advice you would like to give to public health candidates looking for job opportunities in your organization?

At higher-level hiring: HR does more active candidate search.

For lower-level hiring – careers portal and other external portals are used primarily. Hiring process is equity-based. There is strong focus on having a diverse workforce, preference to people who have had no opportunities. Process is typically a phone screening, technical exercise, two additional interviews.

a. Is there any competitive advantage for candidates with LSHTM education background?

LSHTM is considered great. But no special preference as they are very equity-based organization.

b. Are all positions (internships, country/global level fulltime roles, consultancies, etc.) advertised on the organization careers portal? If not, how can one apply or find out about these roles? Internships are offered at PIH – yes. Summer interns usually, but also throughout the year. These are mostly unpaid. Intern positions will start getting listed in Feb-Mar. Volunteer is also listed as intern or vice versa.

c. How strong is the opportunity for interns to continue in full-time roles after their internship ends? A lot of interns transition to full-time roles. Typically move to associate-level roles

d. What type of academic skills/courses you think are interesting and/or useful to work for your organization? Financing Healthcare at LSE (HPPF) is very useful. Health Economics courses are relevant. Economic Evaluation is not used directly at work but can reflect your ability to understand how costing can change over time and the ability to analyze data. Other good courses are decision modeling and economic policy analysis.

e. What type of work experience and application tips you have for candidates in following stage of career?

- **Early career candidates: what is the type of work experience they need to get in order to be considered?**
- **For career developers (experienced candidates), what is important to highlight in their application?** Highly recommended to submit a cover letter – it highlights dedication to health equity/UHC and highlights experience and/or interest in the field. Ability to communicate and prior experience of relevance to the role (examples of analytical work if the roles demands)
- **For career changers (experienced candidates who are looking to make a switch), what is important to highlight in their experience?** Private sector skills will matter – depend on hiring manager – for example, management consulting skills might be relevant. No LMIC experience could be a big hurdle though. Analyst role could be possible when switching. Manager role will be less likely without any non-profit/global health/LMIC experience. But also depends on hiring manager.

7. What are the possible career options after working at your organization?

Care Delivery organizations – for example MSF, US state health departments, Ministry of Health in LMICs.