



Klingenstein Third Generation Foundation

A KLINGENSTEIN PHILANTHROPY

Evaluation of Klingenstein Third Generation Foundation Fellowship Program

Final Report

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Executive Summary

Klingenstein Philanthropies contracted with Dr. Judy Lee in December 2022 to conduct an evaluation of the Klingenstein Third Generation Foundation (KTGF) Fellowship Program. In collaboration with the leadership of Klingenstein Philanthropies and members of the KTGF Advisory Committee, Judy finalized the purpose, goals, and structure of three primary strategies to inform the evaluation: 1) an online survey administered to all fellows who ever received an KTGF award, 2) an online survey administered to all mentors who have worked with fellows, and 3) a focus group interview with mentors. Quantitative and qualitative data from fellows and mentors would answer three questions (listed in italics below).

Using data from a focus group interview with mentors in March 2023, surveys were constructed, iterated, and further refined after pilot testing with fellows and mentors. The surveys were administered to 80 fellows and 80 mentors between June 7 and 23, 2023. Both received excellent response rates: the fellows survey yielded a 68% response rate with solid representation from over 55% of fellows in each cohort (cohort 1: 1998-2006; cohort 2 2007-2014; cohort 3 2015-2022), and the mentors survey yielded a 54% response rate.

How important was the fellowship in advancing fellows' careers (what was the impact of the fellowship)?

Most fellows responding to the survey (85%) hold some type of professorship, and one-third have tenure. Among the eight fellows (17%) who changed fields or disciplines, three transitioned to the private sector, two transitioned to private practice, and two transitioned to clinical administration. Nearly all (96%) indicated that their current work aligns with the area of research for which they were funded.

Across cohorts, the majority of fellows indicated that financial support for research (74%) and flexibility to pursue independent research (40%) were the greatest benefits they derived from receipt of the KTGF Fellowship. All survey respondents provided sincere descriptions of the numerous and interrelated benefits derived from the program, specifying research opportunities, funding, grant and other non-financial supports, as well as the prestige, legitimacy, and network of connections that significantly impacted their careers.

Prior to or during the time of their KTGF Fellowship award, 70% of fellows were a Principal Investigator or Co-Investigator on other grants, whereas in the five years following their fellowship award, 96% of respondents were a Principal Investigator or Co-Investigator on other grants. Analysis by cohort reveals an upward trend over time, with a higher percentage of recent fellows having other grants prior to or during their time of the KTGF Fellowship.



What are fellows' contributions to the field of ADHD, depression, and related mental health areas?

Data from fellows address this question, and although each set of data has limitations, together they offer a clear representation of the numerous ways that KTGF fellows contribute to, and impact, the field of ADHD or depression.

Nearly all fellows who completed the program and responded to the survey (98%) indicated that their work, including basic research, led to insights into the cause or treatment of ADHD or depression; one fellow's work led to insights regarding Access to Care. More than half (55%) work in Child and Adolescent Depression, followed by those who work in other Child and Adolescent Mental Health (36%), and Child and Adolescent ADHD (34%). Fewer work in Adult ADHD (13%) and Adult Depression (11%). One-fifth of fellows reported work in other areas that span child, family, and adult mental health. Over time, the number of fellows working in Child and Adolescent Depression and Other Child and Adolescent Mental Health has increased.

The majority of fellows' contributions into the cause or treatment of ADHD or depression pertain to psychopathology/pathophysiology, followed closely by treatment and its neurobiological basis. The pattern of insights varies, however, by field: fellows responding to the survey had more insights into treatment and its neurobiological basis for depression, whereas those focused on ADHD reported more insights into psychopathology/pathophysiology.

Fellows described the most meaningful accomplishments in their career, indicating various achievements in the field of psychiatry and related research, including prestigious awards and grants such as the NIH Career Development Award, NIMH R01 award, and National Science Foundation Faculty Early Career Development Award. They also listed honors, awards, and leadership positions, all of which provide additional evidence of their contributions to the field.

Fellows are well published, with articles in eleven of the most rigorous, peer-reviewed journals in the field. H-index ratings (a metric for evaluating scholarly impact) of all KTGF fellows, not only survey respondents, mirror expected patterns across career stages and the indices of other successful scholars. Exemplary publications illustrate the transformative discoveries that contribute to advances in ADHD and depression.

What works well in the fellowship program, including mentoring, and what may be improved?

Data from surveys administered to fellows and mentors of the KTGF Fellowship Program, along with focus group interview data, inform this question.

KTGF fellows usually have at least two mentors, nearly all of whom are helpful. Three-quarters of fellows described their primary mentor as 'very helpful' versus half of fellows who described their secondary mentor as 'very helpful.' From a predetermined list of benefits, both fellows and mentors identified research guidance as the top benefit of mentoring. Fellows then selected connections to others in the field, whereas mentors selected career development. Fellows with two or more mentors reported an increased desire to mentor.

Mentoring relationships are sustained well beyond the KTGF Fellowship. Among fellows with only one mentor, 65% reported continuing to work with their mentor for four years or more post-award. Among fellows with two or more mentors, 46% reported continuing to work with their primary mentor for four years or more, and 37% worked with their secondary mentor for this amount of time. Data from mentors aligned with data from fellows.

Fellows described how their primary and secondary mentors helped them in their professional development and research. Mentors' advice and guidance, along with content knowledge, training, and connections to the field, provide critical supports as they navigate careers in academic research. Data from mentors aligned, as mentors described influencing grant writing, data analysis, project implementation, and career development.

When invited to describe their experience with the KTGF Fellowship Program (as a fellow or as a mentor), and to suggest improvements to the program, one-third of fellows offered no suggestions, using the opportunity to explain positive experiences only. Two-thirds suggested improvements including more networking opportunities with other fellows and mentors, increased funding, broadened program focus, and enhanced program operations.

Overall, mentor survey respondents, as well as focus group interview participants, also were very satisfied, describing the achievements of fellows, the forward-thinking approach of the program regarding Access to Care, and the validation, prestige, and recognition it affords fellows. Two-thirds of survey respondents and all focus group participants offered suggestions to strengthen it. The most common recommendation aligned with that of fellow survey respondents: to increase networking opportunities. Additional opportunities for improvement pertain to the application and selection process, funding, and program communications with and guidance for mentors.

Recommendations

Although the data are very positive, they offer the Klingenstein Philanthropies Board of Trustees and KTGF Advisory Committee concrete suggestions for enhancing the KTGF Fellowship Program. Recommendations include: *Consider the data from fellows and mentors regarding the greatest benefits derived from the KTGF Fellowship* and whether they align with the program's goals; *Evaluate the data from fellows regarding receipt of grants prior to and during their KTGF fellowship*, in conjunction with the suggestion from mentors and fellows to increase funding; *Review the areas, nature, and trends in fellows' work, along with their contributions and insights into the cause or treatment of ADHD or depression*; *Assess the honors, awards, and leadership positions reported by fellows*; *Determine if any reasons provided by fellows who did not continue work in a research-oriented setting may be addressed by the program*; *Identify potential areas of improvement for the mentoring aspect of the program*, using data from fellows and mentors; *Consider fellows' and mentors' recommendations to enhance the KTGF Fellowship Program* through increased networking opportunities, increased funding, broadened program focus, clearer application and selection process, and enhanced program operations and communications with fellows and mentors.

Introduction

Description of evaluation project

Klingenstein Philanthropies contracted with Dr. Judy Lee in December 2022 to conduct an evaluation of the Klingenstein Third Generation Foundation (KTGF) Fellowship Program. The primary strategies to inform this evaluation would be 1) an online survey administered to all fellows who ever received an KTGF award, 2) an online survey administered to all mentors who have worked with fellows, and 3) a focus group interview with mentors.

For four months, Judy collaborated with leadership of Klingenstein Philanthropies and members of the KTGF Advisory Committee¹ to refine and finalize the purpose, goals, and structure of both surveys. In addition to frequent email communications, there were two meetings on February 9 and April 17, 2023. On March 13, 2023, during the Inaugural KTGF Conference, Judy conducted a one-hour focus group interview with 8 mentors. All activities helped crystallize the purpose of the evaluation surveys, survey items for inquiry, and the intended use of findings. Team decisions were instrumental in developing communications to fellows and mentors, writing survey items and answer choices with proper technical language, and planning data analytic strategies.

From February through June 2023, both surveys were finalized, uploaded, pilot-tested, and administered. Between July and September 2023, data were downloaded, cleaned, and analyzed. Similar to the planning phase, there were ongoing communications through email and two large meetings on July 12 and September 5, 2023. Please see below for details about administration methodology and the remainder of this report for findings, analyses, and recommendations.

Evaluation Questions

The evaluation surveys of fellows and mentors, along with the focus group interview of mentors, collected data to answer three questions:

- 1) How important was the fellowship in advancing fellows' careers (what were the benefits and impact of award receipt)?
- 2) What are fellows' contributions to the field of ADHD, depression, and related mental health areas?
- 3) What works well in the fellowship program, including mentoring, and what may be improved?

¹ Throughout the project, Klingenstein Philanthropies leaders included Eliot Brenner and Kathleen Pomerantz. KTGF Advisory Committee members included Jeffrey Newcorn, Karen Wagner, and Hanna Stevens.

Methodology

The surveys were designed to be retrospective and include questions that could be answered by all fellows and mentors associated with the program between 1998 and 2022; in instances where questions were not relevant or details were likely to be difficult to recall, skip logic and ‘not sure’ options were employed. Surveys collected both quantitative and qualitative data; closed-ended and rating items were followed by open-ended questions that provided respondents the opportunity to explain and clarify multiple and force-choice items in their own words.

Throughout the survey design and analysis phases, the team acknowledged that some items were the best available proxies to answer complicated questions for which answers are of necessity subjective. Although commonly used in academia, these proxies nevertheless have limitations, which are explained below. Secondly, the team recognized that enlisting the guidance of the Advisory Committee was implicitly biased since they are the consumers of this survey data and serve on the selection committee of incoming fellows (analysis of fellows’ accomplishments could be viewed as a direct reflection of the effectiveness of their process).

While accepting these caveats, the team worked collaboratively to plan surveys and data analytic strategies that would inform the three evaluation questions above. The variety of items and multiple sources (fellows *and* mentors) allowed for descriptive reporting that provides a comprehensive picture of the breadth and depth of accomplishments achieved by fellows and the impact of the program.

After multiple survey revisions in Stage 1 (February—April 2023), True North Evaluation uploaded the surveys to its online platform *Survey Monkey*. Stage 2 (May—July 2023) involved survey administration, which would take place in two steps.

Pilot Testing

To ensure the accuracy, relevance, and feasibility of survey items, a small group of fellows and mentors were selected by Klingenstein Philanthropies leadership to pilot test each survey. In total, three fellows and three mentors were identified. Andy Klingenstein, Chairman and CEO of Klingenstein Philanthropies, and Eliot Brenner, Executive Director of Klingenstein Philanthropies, sent an alert email to pilot testers on May 8, 2023, which was followed on May 9 by emails containing a link to each survey.

All six pilot testers (3 fellows and 3 mentors) completed the survey and were invited to provide feedback about items that were confusing or difficult to answer. Overall feedback about the integrity of the survey was positive; fellows and mentors found the surveys straightforward and easy to complete. Minor edits were made to each survey to address feedback regarding clarity of instructions for fellows (e.g., to have their CV or resume at hand) and survey items.

Please see Appendix A for the final version of the survey sent to fellows and Appendix B for the final version of the survey sent to mentors.

Full Survey Administration

Prior to full survey administration, Klingenstein Philanthropies Administration and Administrative Assistant updated the initial respondent lists of fellows and mentors. In some cases, email addresses were updated, whereas in others, additional emails were found and used when necessary to reach respondents (e.g., if respondents opted out of Survey Monkey, if their emails bounced back from alerts or other communications).

On June 7, 2023, Andy Klingenstein and Eliot Brenner sent an alert email to 77 fellows who had received a KTGF Fellowship award, and to 77 mentors who had participated in the program (surveys were not re-administered to the 3 fellows and 3 mentors who pilot-tested surveys). The alert email was followed on June 8 by emails containing a link to each survey. After 3 reminders to non- and partial respondents, the surveys closed on June 23, 2023.



Evaluation Survey Findings from Fellows

Klingenstein Philanthropies identified 80 fellows (everyone who had received an award since the program began in 1998) for the evaluation survey. Three completed the survey through pilot testing, and 50 completed it through full survey administration, yielding an excellent survey response rate of 68% (53/78, as two did not receive or respond to emails). Please see Appendix A for the Survey of Fellows.

Respondent Demographics & Response Rate

All three cohorts of fellows were well represented among survey respondents. As indicated in Figure 1, and as expected, the largest percentage of respondents were from the most recent cohort, with decreasing representation by previous cohorts.

FIGURE 1. SURVEY RESPONDENTS BY COHORT
(N=53)

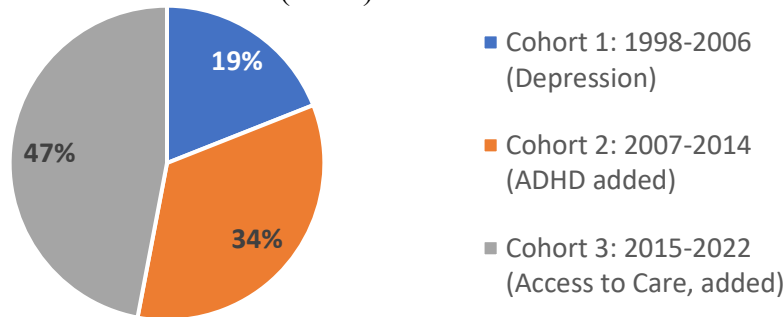


Table 1 displays the response rate by cohort, revealing the highest response rate among the most recent cohort, followed equally by the first two. According to best practices in survey administration, response rates of 50% or higher are most desirable, and as shown below, this was achieved across all three cohorts.

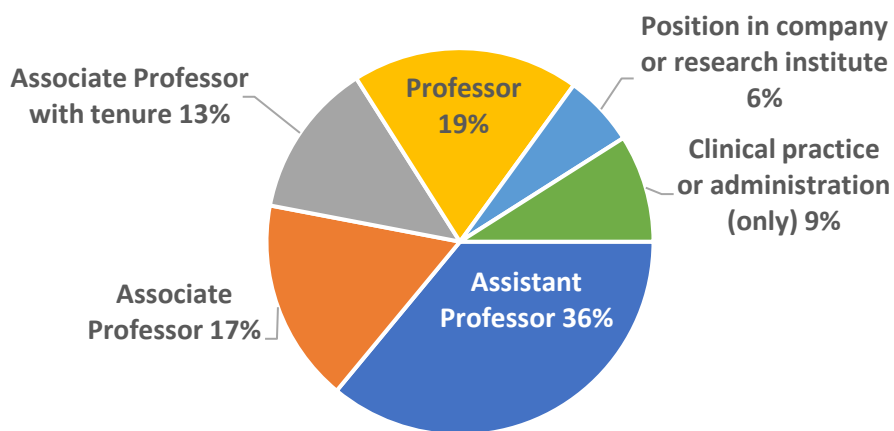
TABLE 1. SURVEY RESPONSE RATE BY COHORT

Cohort	Number of Potential Respondents ²	Number of Respondents	Response Rate
Cohort 1 (1998-2006)	18	10	56%
Cohort 2 (2007-2014)	33	18	55%
Cohort 3 (2015-2022)	27	25	93%
TOTAL	78	53	68%

² Numbers of potential respondents reflect those who received the survey. The original list had 80 fellows, but two did not receive any emails (automatic “out of office” responses were received to all correspondence).

Respondents identified their current position. As shown in Figure 2, most fellows³ (85%, n=45) hold a faculty position (full, associate, or assistant professor). Three respondents (6%) hold positions in a life science, pharmaceutical or biotechnology company, or a research institute. Five (9%) work strictly in clinical practice or administration, whereas another three work in clinical practice or administration *and* academia.

FIGURE 2. CURRENT APPOINTMENTS OF FELLOWS
(N=53)



Across all professorial ranks (n=45), eight (18%) had tenure and two (4%) were Endowed Professors; three (7%) also engaged in clinical practice or administration.

Thirty-eight respondents (83%) had not changed fields or disciplines (n=46, as seven were current fellows). Among the eight (17%) who had switched, three transitioned to the private sector (pharmaceutical, biotechnology, behavioral health), two transitioned to private practice, and two transitioned to clinical administration.

Fellowship Award

Respondents selected from a pre-determined list the three greatest benefits derived from receipt of the Klingenstein Third Generation Foundation (KTGF) Fellowship. As shown in Figure 3, the top two benefits were financial support for research (74%) and flexibility to pursue independent research (40%); the order and importance of these remained constant across cohorts. Benefits cited by one-third to one-quarter of respondents included encouragement and validation (32%), advanced career prospects/development (28%), mentoring (25%), additional funding

³ The term “fellows” is used interchangeably with “respondents” although data and insights reported are from survey respondents only.

opportunities (21%), and prestige (21%). Less common among the most valuable benefits cited were credibility, network of connections in the field, increased knowledge or understanding, new ideas for research, and collaborative partnerships.

FIGURE 3. GREATEST BENEFITS OF FELLOWSHIP
(N=53)



All respondents (100%) expanded on this multiple, limited-choice item and explained in their own words the single, most important benefit of their Fellowship.⁴ The select quotes in Figure 4 illustrate the numerous and interrelated benefits related to research opportunities, funding, grant, and other non-financial supports.

⁴ Current fellows described the most important, anticipated benefit.

FIGURE 4. MOST IMPORTANT BENEFITS OF FELLOWSHIP
(N=53)

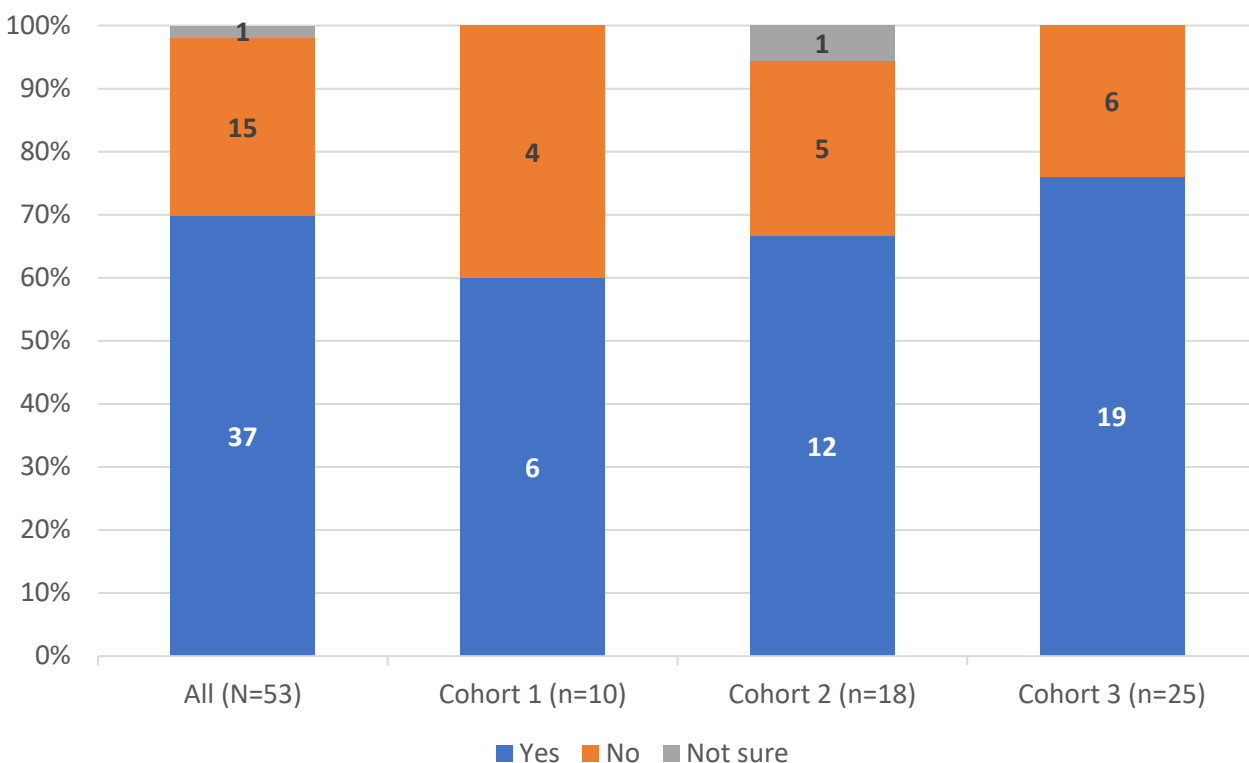
- ☞ *The fellowship has provided funding support for research at a critical early career stage when junior faculty careers are quite vulnerable.*
- ☞ *Provided collaborative opportunities to perform innovative research with senior scientists in the field.*
- ☞ *My KTGF fellowship allowed me to collect valuable data that supported my first R01 submission, which was successfully funded.*
- ☞ *My fellowship allowed me to launch an independent project that was critically important to my career development and complements the work I am doing through a K award.*
- ☞ *The KTGF Fellowship provided valuable encouragement and financial support at a career point involving true need.*
- ☞ *The KTGF Fellowship granted me access to a network of people and concepts that created a fascinating career path.*
- ☞ *It helped fund one of my most successful studies - and provided pilot data for me to get an NIH K01 on my first submission!*
- ☞ *The fellowship validated to my department that my research ideas would be fundable and worthy of investing more of their resources into.*
- ☞ *Confidence in and support for my independent research ideas.*
- ☞ *The fellowship allowed me to conduct a truly meaningful study, which served as critical pilot data and foundation for my NIH K award application, which was then funded and is forming the core of my research career.*
- ☞ *This award is prestigious and highly respected in my field, so it was my 'foot in the door' for being recognized as a promising early career scientist.*
- ☞ *Receiving the KTGF Fellowship was the springboard for all of the research I am now conducting in my independent lab (the data from this award has directly led to over \$5M worth of funding).*
- ☞ *This was my first "independent" grant as a new assistant professor. It provided critical legitimacy for my independence and laid the groundwork for a series of successful funding proposals.*
- ☞ *First grant I got. It taught me how to seek funding to pursue my own ideas.*

Additional Funding Supports

To understand receipt of other grants aside from their KTGF Fellowship award, respondents received a series of questions regarding other support.

Prior to or during the time of their KTGF Fellowship award, 70% of fellows were a Principal Investigator or Co-Investigator on other grants (Figure 5). Looking across cohorts reveals an upward trend over time: 60% of respondents from Cohort 1 reported being a Principal Investigator or Co-Investigator prior to or during the time of their award, as compared with 67% of respondents from Cohort 2, and 76% of respondents from Cohort 3.

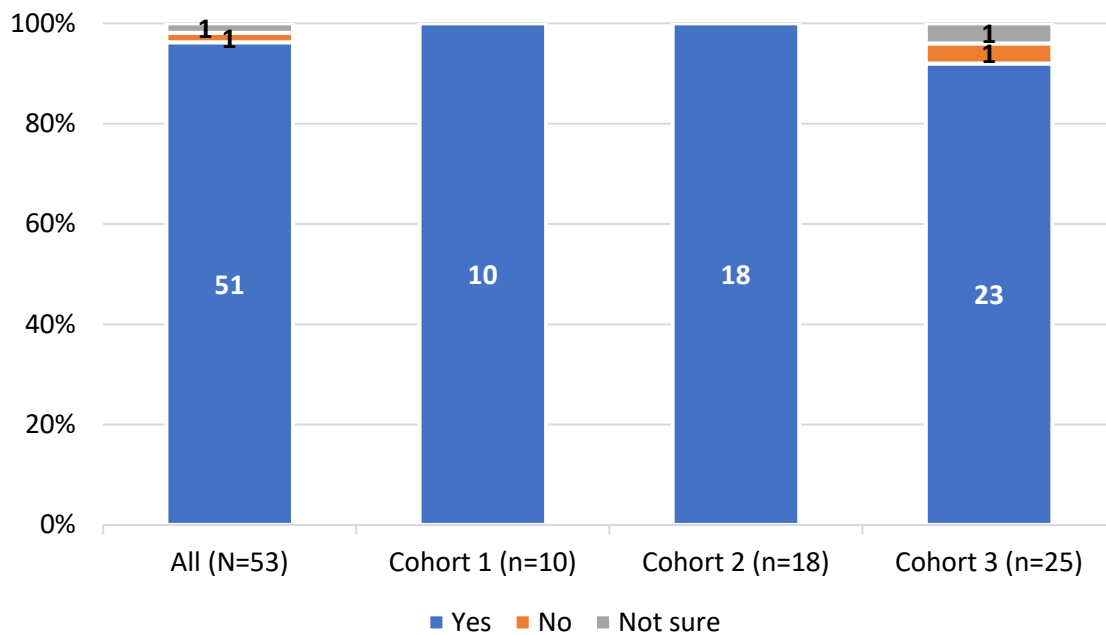
FIGURE 5. OTHER GRANTS PRIOR TO OR DURING KTGF FELLOWSHIP



In the five years following their KTGF Fellowship award, 96% of fellows were a Principal Investigator or Co-Investigator on other grants (Figure 6). Analysis by cohort reveals that 100% of KTGF fellowship recipients in cohorts 1 and 2 were Principal Investigators or Co-Investigators following their award, and as expected, slightly fewer (92%) in the most recent cohort (cohort 3) achieved the same status to date.

Respondents (n=51) indicated the types of grants received following their KTGF Fellowship award. Forty-six fellows (90%) received federal grants, and thirty-five fellows (69%) received funding from foundations (69%) in the five years following their KTGF Fellowship award. These two grant funding sources remained constant across all three cohorts. Other types of funding sources included university/donor funding (12%), the pharmaceutical industry (8%), state grants (6%), and contracts (4%).

FIGURE 6. OTHER GRANTS FOLLOWING KTGF FELLOWSHIP

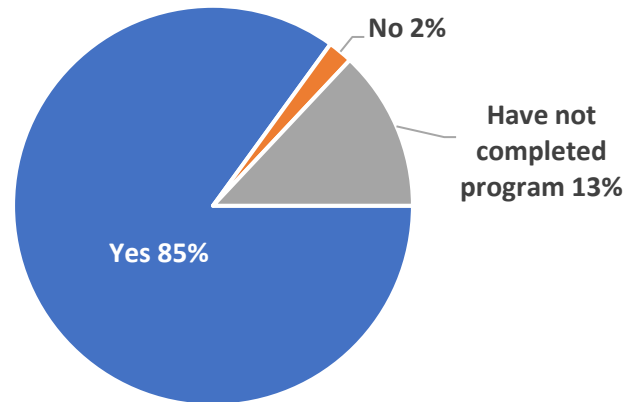


Contributions to the Field

The majority of fellows (85%) reported that their work (including basic research) led to insights into the cause or treatment of ADHD or depression, as shown in Figure 7. The respondent who selected “no” explained her work led to insights in other fields of mental health by advancing understanding of family engagement and increasing access to care.⁵

⁵ Only seven Access to Care grants have been awarded since 2016 when the Fellowship began. To have a more immediate, larger scale impact, the Foundation made a strategic decision to put this fellowship on hold in 2022 and focus its financial resources on the Transformation of Mental Health Care Request for Proposals.

FIGURE 7. INSIGHTS INTO CAUSE OR TREATMENT OF ADHD OR DEPRESSION
(N=53)

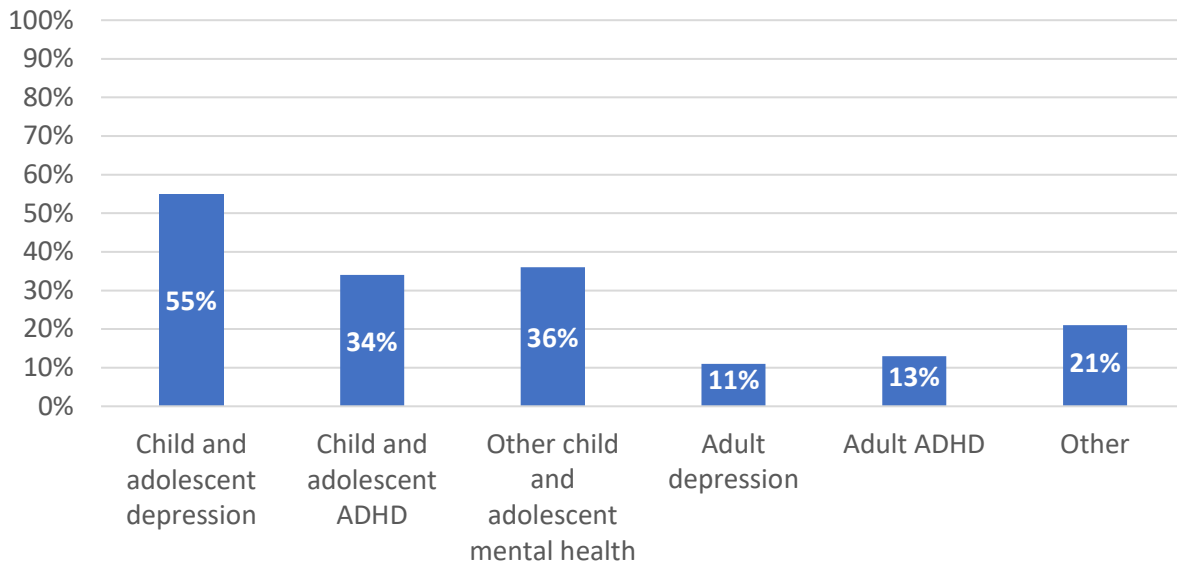


Respondents selected the category that best describes the nature of their work. As shown in Figure 8, over half (55%) work in Child and Adolescent Depression, followed by those who work in Child and Adolescent ADHD (34%). Fewer work in Adult ADHD (13%) and Adult Depression (11%). The only clear trends across cohorts were in two areas pertaining to children and adolescents: the number of fellows working in Child and Adolescent Depression and Other Child and Adolescent Mental Health rose steadily over time.

More than a third of those (36%) who indicated they work in “Other Child/Adolescent Mental Health” described work spanning all areas of mental health, psychiatry, and well-being among children and adolescents (e.g., anxiety, learning disorders, autism, neuro developmental disorders, bipolar disorder, emotion dysregulation, psychopathology, Tourette syndrome, access to care, post-traumatic stress).

The remaining respondents (21%) who selected “Other” work (and did not *also* select “Other Child and Adolescent Mental Health”) described work in medical writing, autism and intellectual disabilities, integrated biopsychosocial care for youth and families, substance use disorder, adolescent addiction/treatment, ADHD across the lifespan in families, borderline personality disorder, preclinical molecular and cellular neuroscience, precision medicine, suicidal behavior in youth, and bipolar disorder in youth and young adults.

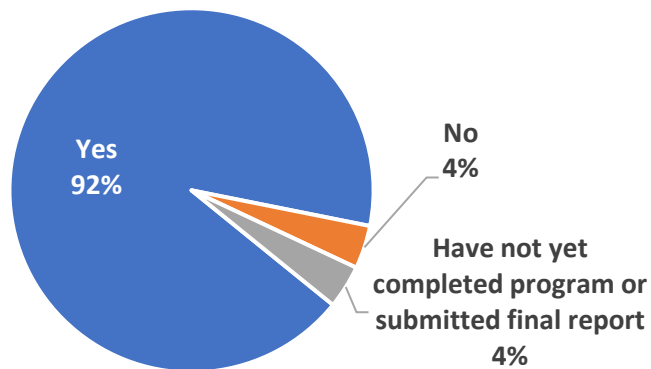
FIGURE 8. NATURE OF WORK
(N=52)⁶



Nearly all respondents (92%) indicated that their current work aligns with the area of research for which they received a KTGF Fellowship (Figure 9).

Two respondents (from Cohorts 1 and 2), whose current work does not align with their previous research, described their path from the research conducted during their KTGF Fellowship to the present. One pursued a career in medical writing, and the other established a community organization to address children and families needing acute care services.

FIGURE 9. FELLOWS WITH WORK ALIGNED TO KTGF FELLOWSHIP RESEARCH
(N=52)



⁶ Respondents could 'select all' categories that apply.

Through two open-ended questions, respondents described *how their work led to insights into the cause or treatment of ADHD or depression* (n=44) and *the most meaningful research or non-research accomplishments in their career* (n=43). Members of the Advisory Committee determined the most meaningful strategy for interpreting these data would be to categorize respondents' insights in the fields of depression and ADHD into three categories: psychopathology/pathophysiology, treatment and its neurobiological basis, and comorbidity/relation to other disorders. The number of fellows contributing to each of these dimensions is displayed in Table 2. The majority of fellows' contributions to the field pertain to psychopathology/pathophysiology, followed closely by treatment and its neurobiological basis, even though the pattern of most common insights varies by field (i.e., fellows had more insights into treatment and its neurobiological basis for depression, versus fellows focused on ADHD, who reported more insights into psychopathology/pathophysiology).

TABLE 2. TYPES OF CONTRIBUTIONS TO THE FIELD
(N=44)⁷

	Psychopathology/ pathophysiology	Treatment and its neurobiological basis	Comorbidity/relation to other disorders	TOTAL
Depression	13	16	2	31
ADHD	9	4	3	16
TOTAL	22	20	5	47

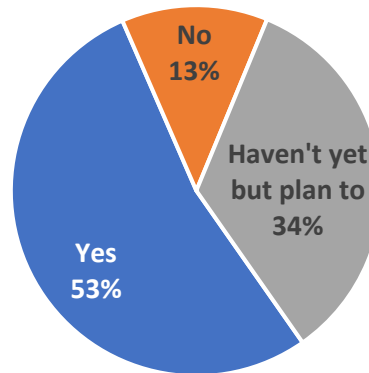
More than three-quarters of respondents (81%, n=43) described up to three most meaningful accomplishments in their career. Their responses indicate various achievements in the field of psychiatry and related research, including prestigious awards and grants such as the NIH Career Development Award, NIMH R01 award, and the National Science Foundation Faculty Early Career Development award. Other notable achievements include securing faculty positions, promotions, and conducting significant research studies. Some have contributed to the understanding of specific psychiatric disorders and played key roles in the development of computational psychiatry. Additionally, fellows have had the opportunity to mentor students who have continued in psychiatric research.

⁷ Some respondents offered more than one insight, which was then coded by the Advisory Committee.

Accomplishments

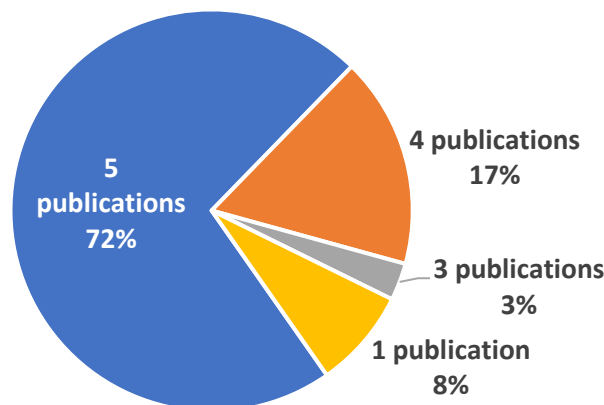
The majority of respondents published their Fellowship Project, as shown in Figure 10.

FIGURE 10. PUBLISHED FELLOWSHIP PROJECTS
(N=47)



Many respondents (n=36, 68%) listed up to five publications or research products that best highlight their accomplishments. As illustrated in Figure 11, nearly three-quarters of those answering the question (72%) listed 5 publications; 17% listed four publications; and 8% listed one publication. Only respondent listed 3 publications.

FIGURE 11. NUMBER OF PUBLICATIONS
(N=36)



Three strategies were used to evaluate the numerous and varied publications of fellows. First was an *analysis of fellows' publications in the most rigorous, peer-reviewed journals* (agreed upon by members of the Advisory Committee): American Journal of Psychiatry, Biological Psychiatry, Clinical Psychology Review, Clinical Psychological Science, Depression and Anxiety, JAMA Psychiatry, Journal of Child Psychology and Psychiatry, Journal of Consulting and Clinical

Psychology, Journal of the American Academy of Child and Adolescent Psychiatry, Lancet Psychiatry, and Nature Neuroscience. Table 3 presents the number of respondents who reported publishing in each journal⁸ and the impact factor of the journal.

Impact factors are a proxy for the prestige and reach of academic journals, as they reflect the average number of article citations published in a journal within a predefined time frame. While not exhaustive, the American Psychological Association lists impact factors for common psychological journals ranging from 1.1 to 22.4. The impact factors for the rigorous journals selected by the Advisory Committee and listed in Table 3 are from 2022, obtained directly from journals’ websites⁹.

It is important to note the limitations of interpreting accomplishments according to publications in “rigorous” journals. First, identifying “rigorous” journals is subjective. Second, the most prestigious journals receive substantially more submissions than they can accommodate in publication, regardless of merit. New areas of exploration may be less widely accepted or granted opportunities to publish in traditional, prestigious journals. At best, the prestige of publications should be interpreted as only one, rough estimation of accomplishment. Finally, it is hard to find unanimous metrics on impact factors (i.e., there is no single “reputable range”).

TABLE 3. COUNTS OF FELLOWS’ PUBLICATIONS IN MOST RIGOROUS JOURNALS
(N=36)

Journal	Impact Factor	# Fellows with Publication
American Journal of Psychiatry	19.2	7
Biological Psychiatry	10.6	7
Clinical Psychology Review	12.8	1
Clinical Psychological Science	5.8	2
Depression and Anxiety	7.4	5
JAMA Psychiatry	25.8	4
Journal of Child Psychology and Psychiatry	7.6	8
Journal of Consulting and Clinical Psychology	5.9	6
Journal of the American Academy of Child and Adolescent Psychiatry	13.3	13
Lancet Psychiatry	64.3	1
Nature Neuroscience	25	2

⁸ Not all respondents chose to answer this open-ended item, so it is possible that *more* fellows published in these rigorous journals than appear in the table.

⁹ Only the impact factor for Clinical Psychological Science was obtained from another website (scijournal.org) as this information was not listed on the journal’s website.

A second strategy for interpreting fellows' publications was the *calculation of an h-index for each potential survey respondent* (all fellows, n=80). The h-index is a sophisticated metric of productivity because it reflects not only the number of papers or the number of citations but takes both into account. From the Web of Science website¹⁰, "The h-index is based on a list of publications ranked in descending order by the Times Cited. This metric is useful because it discounts the disproportionate weight of highly cited papers or papers that have not yet been cited...and provides an interesting complement to other performance metrics, since it is not influenced by a single highly cited paper." Other online sources note the increasing significance and use of the h-index to assess the quantity and quality of a scientist's contributions and predict future productivity and influence.¹¹

Like all citation-based metrics, the h-index is not without biases and limitations. It can only be calculated on papers that are published, is based on 'times cited' data from a database that does not include citations from non-indexed sources, and is highly dependent on subject area. Thus, for fellows who conduct research in a small field, or a field where fewer publish, their h-index is likely small. As one advisor explained, "a superstar in a very small field will have a lower h-index than a mediocre investigator in a very large field." Recognizing that publication and citation patterns differ across disciplines and fields of study is critical when considering the h-index and other publication metrics (e.g., impact factor). Counting the prestige of a journal also diminishes the significant accomplishments of some scientists, particularly if their findings are novel or less readily 'accepted,' therefore posing barriers to publication and consequently a higher h-index.

Other limitations are also important to acknowledge.¹² The h-index does not account for publications with citation numbers far above a researcher's h-index or distinguish any difference between publications with a single author or many. Older publications are counted equally to new ones, such that older scholars benefit regardless of whether they have published anything recently. Finally, the h-index does not account for the length of a publication or the nature of citations (positive or negative). When considered by hiring or funding committees, the h-index is only one of many metrics evaluated.

Despite these caveats, with the recognition that the h-index is commonly considered to be a reliable, enduring, and robust metric¹³ commonly included in databases¹⁴ to inform academic appointments, research awards, and membership in academies, members of the Advisory

¹⁰ https://support.clarivate.com/ScientificandAcademicResearch/s/article/Web-of-Science-h-index-information?language=en_US

¹¹ <https://www.journal-publishing.com/blog/good-h-index-required-academic-position/>

¹² <https://www.journal-publishing.com/blog/good-h-index-required-academic-position/>

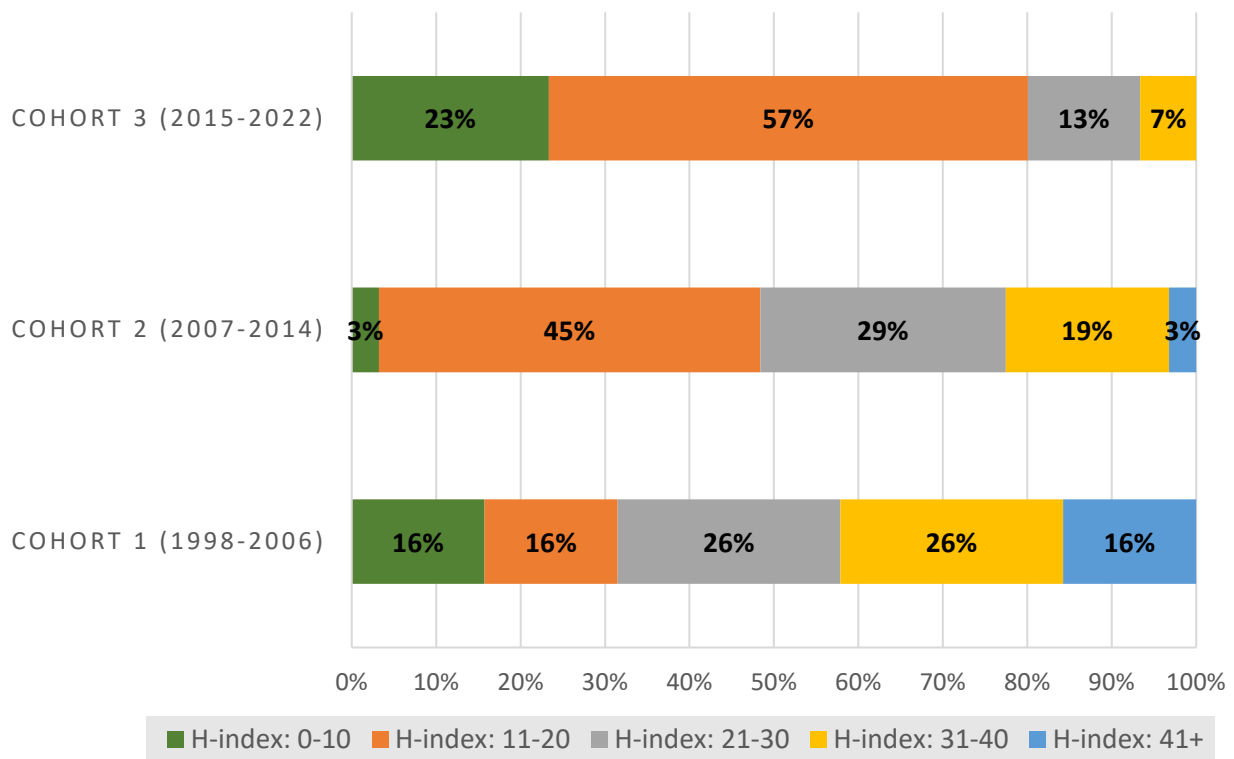
¹³ See rationale for study of h-index: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0253397>

¹⁴ Popular databases include Elsevier's Scopus, Clarivate Analytics' Web of Science, and Google Scholar.

Committee, leadership of Klingenstein Philanthropies, and this evaluator identified the h-index as one proxy for assessing the scholarly achievement of KTGF fellows. A research associate of an Advisory Committee member used the Web of Science to identify an h-index for *every recipient of a KTGF Fellowship award*.

A critical component of the h-index is the number of years in the field (i.e., it is strongly career-stage dependent). As such, interpretation is most meaningful when analyzed by cohort. As shown in Figure 12, fellows’ h-indices follow expected patterns over time, as indicated by the fellows in Cohort 1 having the greatest percentage with an h-index over 40 (in blue), and the fellows in Cohort 3 having the greatest percentage with an h-index under 10 (in green). Fellows’ scholarly achievement is also depicted: nearly half of fellows in Cohort 1 have an h-index over 30, one-fifth of fellows in Cohort 2 have an h-index over 30, and one-fifth of fellows in Cohort 3 (the most recent cohort which includes current fellows) have an h-index over 20. These results suggest that fellows match or exceed “typical” highly successful scholars in the social sciences where, on average, a “good” h-index for a new assistant professor ranges between 4-22, an associate professor between 17-35, and a full professor exceeds 30.¹⁵

FIGURE 12. DISTRIBUTION OF ALL FELLOWS’ H-INDEX BY COHORT (N=80)



¹⁵ <https://academiainsider.com/what-is-a-good-h-index-for-each-academic-position/>

The third strategy employed to interpret fellows' publications and their contribution to the field involved review of respondents' data by members of the Advisory Committee and *identification of exemplars for their significance to the field*. The 16 publications (with fellows' names in black bold) in Table 4 represent the kind of quality work and impact of KTGF grantees, although by no means present an exhaustive list. Rather, they represent the types of transformative discoveries that are key steps and contributors to subsequent investigations.¹⁶

¹⁶ Descriptions of the meaning of discoveries published were written by Advisory Committee members.

TABLE 4. EXAMPLES OF FELLOWS’ SIGNIFICANT PUBLICATIONS

Journal citation	Synopsis of Impact
Depression Fellowship	
<p>Novins D, Stoddard J, Althoff R, Charach A, Cortese S, Cullen K, Frazier J, Glatt S, Henderson S, Herringa R, Hulvershorn L, Kieling C, McBride A, McCauley E, Middeldorp C, Reiersen A, Rockhill C, Sagot A, Scahill L, Simonoff E, Stewart S, Szigethy E, Taylor J, White T, Zima B. Editors’ Note and Special Communication: Research Priorities in Child and Adolescent Mental Health Emerging From the COVID-19 Pandemic. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>. March 16, 2021. doi.org/10.1016/j.jaac.2021.03.005</p>	<p>This study documented the profound effect COVID-19 has had on the mental health and functioning of children and their families.</p>
<p>Morgan JK, Shaw DS, & Forbes EE. Maternal depression and warmth during childhood predict age 20 neural response to reward. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>. 2014; 53, 108-117.</p>	<p>This study demonstrates the long-term impact of maternal warmth and affection on neural reward system in young adults.</p>
<p>Ordaz, S., Foran, W., Velanova, K., Luna, B. (2013). Longitudinal growth curves of brain function underlying inhibitory control through adolescence. <i>Journal of Neuroscience</i>, 33(46), 18109-24. PMID24227721</p>	<p>This study illustrated how the developmental trajectories for brain regions subserving control of motor response, executive function and error processing work in concert to support the emergence of adult-like inhibitory control.</p>
<p>Tao R, Calley CS, Hart J, Mayes TL, Nakonezny PA, Lu H, Kennard BD, Tamminga CA, Emslie GJ. Brain activity in adolescent major depressive disorder before and after fluoxetine treatment. <i>Am J Psychiatry</i>. 2012 Apr;169(4):381-8. doi: 10.1176/appi.ajp.2011.11040615. PMID: 22267183; PMID: PMC4225078.</p>	<p>This is the first study to report changes in brain activity in adolescents after antidepressant treatment--the changes were a normalization of depression-associated brain signatures.</p>
<p>Auerbach, R. P., Lan, R., Galfalvy, H., Alqueza, K., Cohn, J. F., Crowley, R., Durham, K., Joyce, K., Kahn, L. E., Kamath, R., Morrency, L.-P., Porta, G., Srinivasan, A., Zelazny, J., Brent, D. A., & Allen, N. B. (in press). Intensive longitudinal assessment of adolescents to predict suicidal thoughts and behaviors. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>.</p>	<p>This is the first study to examine the use of smartphones to predict adolescents' suicide risk.</p>
<p>Michellini G, Lenartowicz L,¹⁷ Diego Vera J, Bilder RM, McGough JJ, McCracken JT, Loo SK. Electrophysiological and Clinical Predictors of</p>	<p>This study found both treatment-specific and shared clinical and EEG-based predictors of response to stimulants and guanfacine and illustrates how</p>

¹⁷ This author received a KTGF Fellowship for depression research, even though the topic of this publication pertains to ADHD.

Journal citation	Synopsis of Impact
Methylphenidate, Guanfacine, and Combined Treatment Outcomes in Children with Attention-Deficit/Hyperactivity Disorder. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i> 2023 Apr;62(4):415-426. doi: 10.1016/j.jaac.2022.08.001.	information from clinical and brain measures can be used together in a personalized treatment approach for children with ADHD.
Ho, T. C. , Shah, R., Mishra, J., May, A. C., & Tapert, S. F. (2022). Multi-level predictors of depression symptoms in the Adolescent Brain Cognitive Development (ABCD) study. <i>Journal of Child Psychology and Psychiatry</i> , 63(12), 1523-1533	This study demonstrated in a large cohort that risks for adolescent depression identified in much smaller studies were valid including parental mental health, family environment, and youth sleep quality.
Dwyer JB , Landeros-Weisenberger A, Johnson JA, Londono Tobon A, Flores JM, Nasir M, Couloures K, Sanacora G, Bloch MH. Efficacy of Intravenous Ketamine in Adolescent Treatment-Resistant Depression: A Randomized Midazolam-Controlled Trial. <i>American Journal of Psychiatry</i> . 2021 Apr 1;178(4):352-362. doi: 10.1176/appi.ajp.2020.20010018.	This is the first controlled (proof-of-concept) study to determine the efficacy of ketamine for treatment-resistant depression in adolescents.
Eckstrand KL , Forbes EE, Bertocci MA, Chase HW, Greenberg T, Lockovich J, Stiffler R, Aslam HA, Graur S, Bebko G, Phillips ML. Anhedonia reduction mediates relationship between left ventral striatal reward response and 6-month improvement in life satisfaction in young adults. <i>JAMA Psychiatry</i> . 2019, doi: 10.1001/jamapsychiatry.2019.0864	The study found that changes in brain activation in association with processing of reward information were related to improvement in life satisfaction, providing a potential target for novel treatment development.
Melhem NM , Porta G, Oquendo MA, Zelazny J, Keilp JG, Iyengar S, Burke A, Birmaher B, Stanley B, Mann JJ, Brent DA. Severity and Variability of Depression Symptoms Predicting Suicide Attempt in High-Risk Individuals. <i>JAMA Psychiatry</i> . 2019 Jun 1;76(6):603-613. doi: 10.1001/jamapsychiatry.2018.4513. PMID 30810713	This study confirms that high risk youth suicide attempts are predicted by characteristics that clinicians screen for, based on robust data from a 700-person cohort followed over 12 years.
King, L. S., Guyon-Harris, K. L., Valadez, E. A., Radulescu, A., Fox, N. A., Nelson, C. A., Zeanah, C. H., & Humphreys, K. L. A comprehensive multi-level analysis of the Bucharest Early Intervention Project: Causal effects on recovery from severe deprivation. <i>American Journal of Psychiatry</i> . https://doi.org/10.1176/appi.ajp.20220672	The most robust and comprehensive study that family foster care benefits children exposed to severe early psychosocial deprivation in IQ, physical growth, and social and mood problems.
Luking KR , Nelson BD, Infantolino ZP, Sauder CL, Hajcak G. Ventral Striatal Function Interacts with Positive and Negative Life Events to Predict Concurrent Youth Depressive Symptoms. (2019) <i>Biological Psychiatry: Cognitive Neuroscience and Neuroimaging</i> 3 (11), 937-946	This study incorporates both life events and neural response to reward and loss and its relationship to depressive symptoms in children and adolescents.

ADHD Fellowship	
Hoogman, M..... Douglas, PK , et al. Subcortical brain volume differences in participants with attention deficit hyperactivity disorder in children and adults: a cross-sectional mega-analysis. <i>Lancet Psychiatry</i> : 3(4): 310-319 (April 2017)	This study documented smaller size of several brain regions in children with ADHD vs controls, illustrating the neurobiological basis of ADHD.
Vogel AC , Jackson JJ, Barch DM, Tillman R, Luby JL. (2019): Excitability and irritability in preschoolers predicts later psychopathology: the importance of positive and negative emotion dysregulation. <i>Development and Psychopathology</i> , 31(3): 1067-1083, PMID: 31109387	This study examines excitability and irritability in preschoolers as predictors of later mood and externalizing disorders.
Sibley, M. H., Arnold, L. E., Swanson, J. M., Hechtman, L. T., Kennedy, T. M. , Owens, E., Molina, B. S. G., Jensen, P. S., Hinshaw, S. P., Roy, A., Chronis-Tuscano, A., Newcorn, J. H., & Rohde, L. A., for the MTA Cooperative Group (2022). Variable Patterns of Remission from ADHD in the Multimodal Treatment Study of ADHD. <i>American Journal of Psychiatry</i> 179, 142-151. https://doi.org/10.1176/appi.ajp.2021.21010032	This study demonstrates that most children with ADHD do not outgrow the disorder by adulthood.
Olfson E , ¹⁸ Lebowitz ER, Hommel G, Pashankar N, Silverman WK, Fernandez TV. Whole-exome DNA sequencing in childhood anxiety disorders identified rare de novo damaging coding variants. <i>Depression and Anxiety</i> 2022; 39(6):474-484. PMID: 35312124, DOI: 10.1002/da.23251	This is the first study to show that rare <i>de novo</i> damaging genetic variants may play a role in childhood anxiety, beyond any risk from common genetic variation.

¹⁸ This author received a KTGF Fellowship for ADHD research, even though the topic of this publication pertains to depression.

Most respondents (n=37, 70%) listed up to five honors, awards, or leadership positions of which they are most proud. Table 5 displays the variety of these accomplishments according to type (e.g., research award, fellowship, membership) or basis for recognition (e.g., teaching, early career), source (e.g., NIH, NARSD), position (e.g., Director, Chair), and name of award.

This data should be interpreted with caution, however, for several reasons. First, many respondents copied and pasted this data from their CV, so it is possible that the honors, awards, and leadership positions reported may not be their ‘highest,’ but their most or least recent (depending on the order of items on their CV). Some listed more than five accomplishments, in which case the evaluator selected the first five for inclusion in this report. Others listed the KTGF Fellowship award, which is not included in Table 5. Finally, data represents honors and awards received by all fellows across cohorts, including current fellows who are likely to have received fewer honors and awards.

TABLE 5. TYPES OF HONORS, AWARDS & LEADERSHIP POSITIONS
(N=37)

Honors, Awards & Leadership Positions	# Fellows
<i>By Type</i>	
Early career/new investigator/young scholar award	16
Member (ACNP, Biological Psychiatry Society, Health Promotion and Prevention Committee of the American Academy of Child & Adolescent Psychiatry, AACAP Research Committee, APA Research Colloquium, APA Division 53 Society for Clinical Child and Adolescent Psychology Emerging Adulthood Special Interest Group, World Psychiatric Association, CPDD Study Section)	14
Postdoctoral, research, or scholar award	13
Travel award	8
Mentorship or teaching	6
Fellow/Fellowship (not including Klingenstein)	6
NIMH award (K01, R01, Outstanding Resident, Child Intervention, Prevention and Services, Loan repayment program)	5
Keynote or symposium lecture (CoSyne Meeting, OHBM, Columbia University Center for the Prevention of Depression, Annual Meeting of the Society for Research in Psychopathology)	4
Reviewer (NIH, NIMH, Biological Psychiatry: Cognitive Neuroscience and Neuroimaging)	3
NIH award (Career Development, Ruth L. Kirschstein National Research Service)	2
<i>By Source</i>	
National Alliance for Research on Schizophrenia & Depression (NARSAD)	6
National Institute of Mental Health (NIMH)	6
Society of Biological Psychiatry	6
American College of Neuropsychopharmacology	6
National Institute of Health (NIH)	5
Career Development Institute (CDI) for Psychiatry, Bipolar Disorder	4

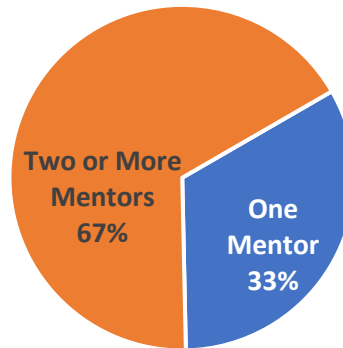
Honors, Awards & Leadership Positions	# Fellows
Anxiety and Depression Association of America	2
American Psychological Foundation	2
Association for Behavioral Cognitive Therapies (ABCT)	2
American Academy of Child and Adolescent Psychiatry (AACAP)	2
Society of Biological Psychiatry (SOBP)	1
Air Force Office of Scientific Research Cultural Champion Network (AFOSR CCN)	1
Brain & Behavior Research Foundation	1
Federation of Associations in Behavioral and Brain Sciences	1
Gold Foundation	1
Jacobs Foundation	1
Big Ten Academic Alliance	1
NIH mHealth Training Institute (mHTI)	1
Society for Psychophysiological Research	1
Society for Liaison Psychiatry (SLP)	1
Alpha Omega Alpha Honor Society	1
American Society of Clinical Psychopharmacology	1
American Academy of Pediatrics (AAP)	1
American Foundation for Suicide Prevention (AFSP)	1
American Psychiatric Association (APA)	1
World Congress of Psychiatric Genetics (WCPG)	1
<i>By Position</i>	
Director (of Telepsychiatry, Neuroimaging, Child and Adolescent Psychiatry, Pediatric Depression Clinic; at University Center, Clinic, or Department; at pharmaceutical company)	7
Chair or Co-Chair (Youth Suicide Research Consortium, 4th Annual National Conference; Anxiety and Depression Association of America, Career Development Leadership Program; Child Psychiatry; University Department)	5
Service Chief of Child & Adolescent Neuropsychiatry Unit	1
Program Coordinator, Master of Education Developmental Psychology and Education Program	1
<i>By Name</i>	
Association for Psychological Science Rising Star	7
NARSAD Young Investigator Award	5
AACAP Simon Wile Sherman Prize	1
NIH Career Development Award	1
NIH New Clinical Drug Evaluation Unit New Investigator's Award	1
Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) Young Scientist Award	1
ACNP Underrepresented Minority Travel Award	1
Constellation of Emerging and Rising Stars Award, University of Pittsburgh	1
Nominee, Governor's Young Scientist Award for Excellence in Scientific Research, South Carolina Academy of Science	1
ISMRM Magna Cum Laude Merit Award Recipient	1
Anxiety and Depression Association of America Donald F. Klein Early Career Award	1
New Investigator Award, American Society of Clinical Psychopharmacology	1
Alfred Pope Award for Young Investigators, McLean Hospital	1
Theodore Blau Early Career Award, American Psychological Foundation	1

Honors, Awards & Leadership Positions	# Fellows
David Shakow Early Career Award for Distinguished Scientific Contributions to Clinical Psychology	1
The Parker Young Investigator Award, Washington University School of Medicine, 2021	1
Taube Endowed Stanford Youth Addiction Initiative Fellowship	1
Tom Nesbitt Leadership & Advocacy Award (Vanderbilt University)	1
Department of Psychiatry Excellence in Diversity, Equity, and Inclusivity Award (University of Pittsburgh)	1
AACSP Presidential Scholar Award	1
Mt Sinai Lamport Award	1
Boyd McCandless Award American Psychological Association, Developmental Psychology Division	1
David Kucharski Young Investigator Award International Society for Developmental Psychobiology	1
Janet Taylor Spence Award for Transformative Early Career Contributions Association for Psychological Science	1
Chaim and Bela Danieli Early Career Award International Society for Traumatic Stress Studies	1
First place recipient of Seymour Lustman Resident Research Award, Department of Psychiatry, Yale School of Medicine	1

Mentorship

During their KTGF Fellowship, 33% (n=17) had one mentor and 67% (n=35) had two or more (Figure 13).

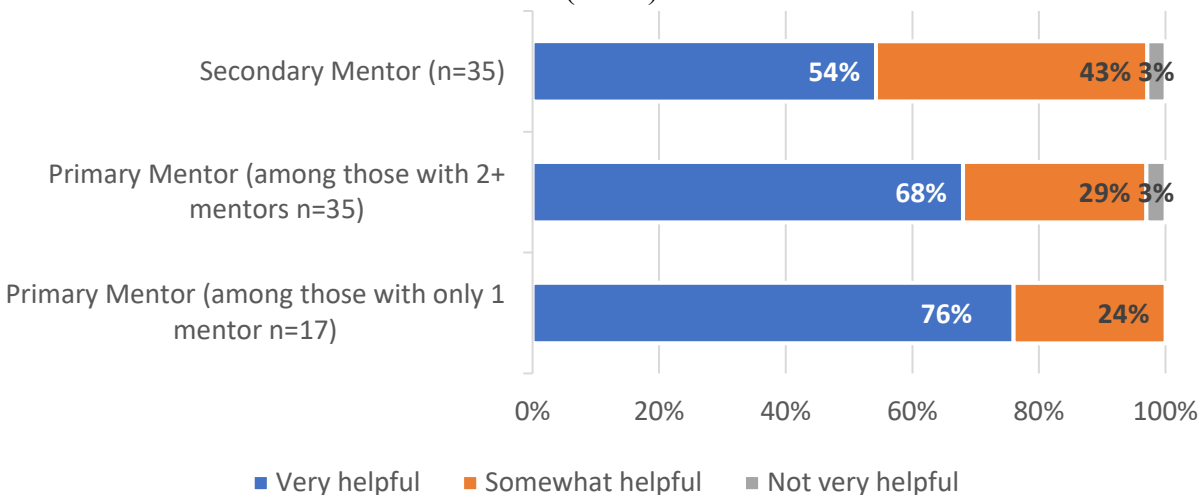
FIGURE 13. NUMBER OF MENTORS DURING KTGF FELLOWSHIP
(N=52)



Among those who had two or more mentors (n=35), 17% (n=6) indicated that having a secondary mentor was a requirement of their grant; 69% (n=24) said it was not a requirement, and 14% (n=5) were unsure.

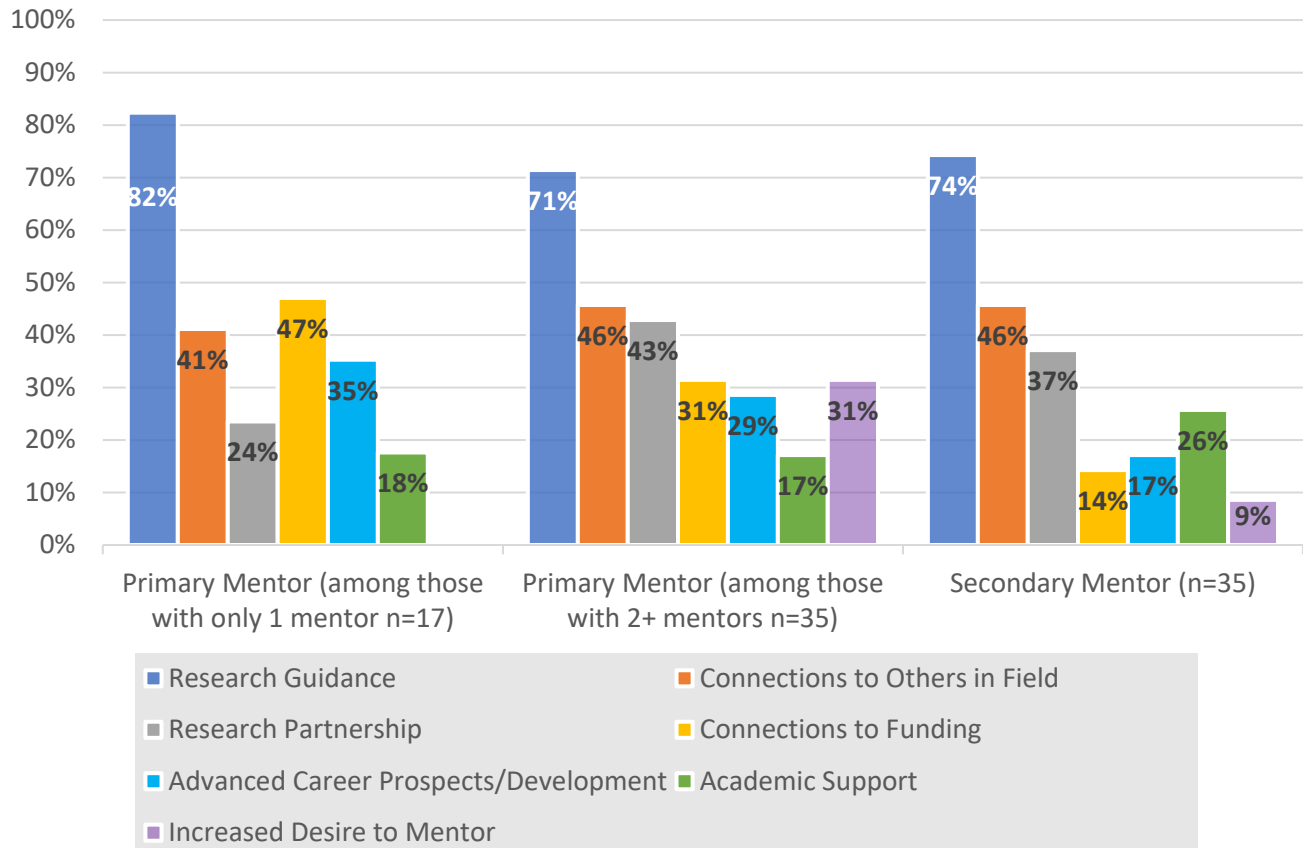
Respondents were then asked a series of questions about their primary and secondary mentors. Figure 14 illustrates that primary mentors were slightly more helpful than secondary mentors. Nearly three-quarters of fellows described their primary mentor as very helpful versus half of fellows who described their secondary mentor as very helpful.

FIGURE 14. HELPFULNESS OF MENTOR
(N=52)



Fellows identified up to three key benefits of working with their mentor(s). As shown in Figure 15, *research guidance* was the top benefit of working with a mentor, regardless of whether it was a primary or secondary mentor. Nearly half of all respondents then cited *connections to others in the field*. Some benefits varied across primary and secondary mentors. For example, 31%-47% of fellows reported *connections to funding* as a benefit of their primary mentor, whereas only 14% of fellows reported this benefit of their secondary mentor. Similarly, 29%-35% of fellows reported *advanced career prospects/development* as a benefit of their primary mentor, compared to only 17% of fellows who reported this of their secondary mentor. *Academic support*, on the other hand, was a more commonly reported benefit of secondary mentors. An *increased desire to mentor* was reported mostly by fellows with two or more mentors; more of these fellows also reported the benefit of *research partnership*.

FIGURE 15. BENEFITS OF WORKING WITH MENTOR
(N=52)

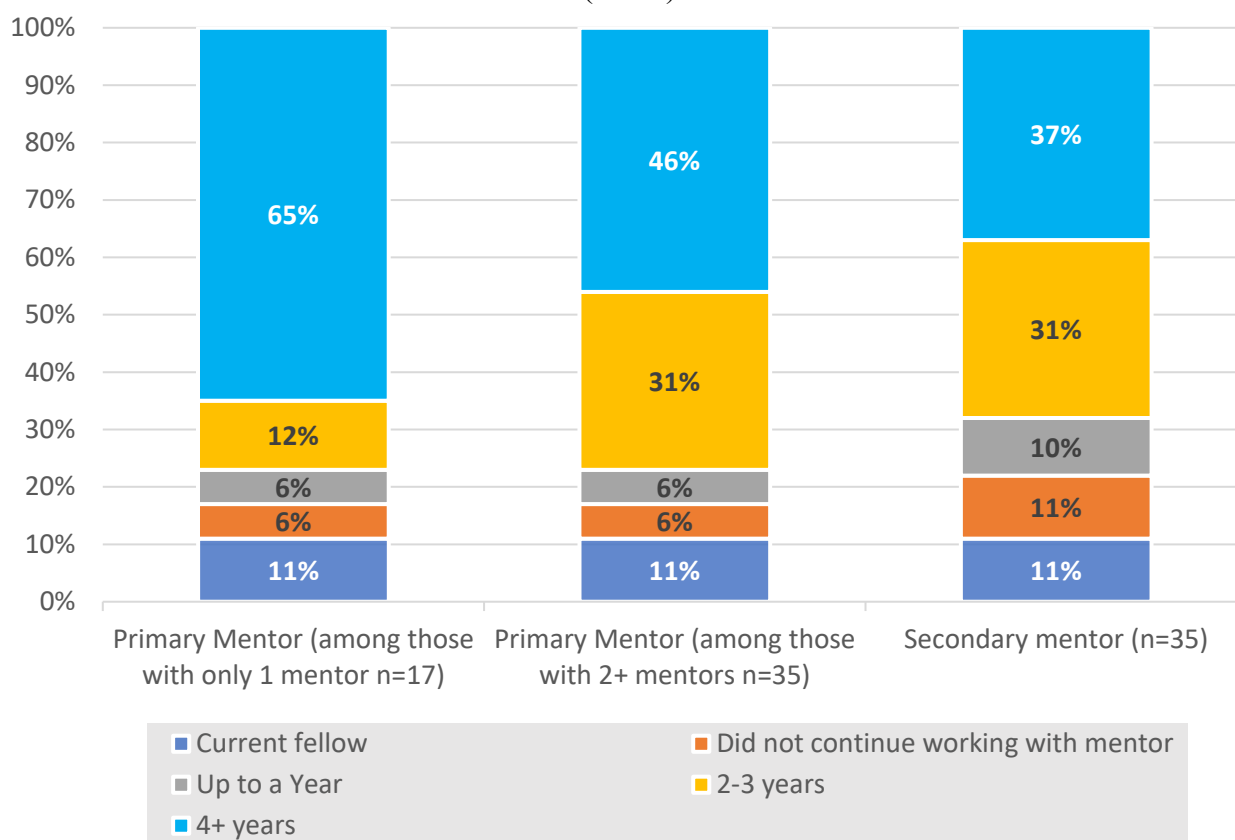


As shown in Figure 16, among fellows with one mentor (n=17), most (65%; n=11) worked with their primary mentor for 4 years or more. A smaller percentage (12%; n=2) worked with their mentor for 2 to 3 years. One worked with their mentor for up to one year, and one did not continue work with their mentor after the Fellowship ended. Two were current fellows (11%).

Among fellows with two or more mentors (n=35), nearly half (46%; n=16) worked with their primary mentor for 4 years or more. About one-third (31%; n=11) worked with their primary mentor for 2 to 3 years. Two worked with their mentors for up to one year, and two did not continue working with their mentors after the Fellowship ended. Four were current fellows (11%).

Regarding longevity with second mentors, over one-third of fellows (37%; n=13) worked with their secondary mentor for 4 years or more, and nearly one-third (31%; n=11) worked with their secondary mentor for 2 to 3 years. Three worked with their mentors for up to one year, and four did not continue to work with their mentors after the Fellowship ended. Four were current fellows (11%).

FIGURE 16. CONTINUED WORK WITH MENTOR POST KTGF FELLOWSHIP (N=52)



Fellows were invited to describe in their own words the single, most important benefit of their primary and secondary mentors; benefits across mentors were similar. Respondents who answered these open-ended questions described how their mentors helped them in their professional development and research. Advice and guidance, along with content knowledge,

training, and connections to the field, were critical supports to fellows in navigating a career in academic research. See Figure 17 for select quotes.

FIGURE 17. MOST IMPORTANT BENEFITS OF MENTORS
(N=32 for primary mentor; N=28 for secondary mentor)

- ☞ *Support, trust, commitment, and guidance to continue growing in my career. It also set an example to become a good mentor for others.*
- ☞ *Lifelong support and guidance.*
- ☞ *My KTGF mentor is now the primary mentor on my K award and continues to be a critical support of my research and career development.*
- ☞ *My mentor opened many doors, including support for research, assistance with networking, and providing a model for crafting a research career.*
- ☞ *An inside understanding of grantsmanship.*
- ☞ *A vision and enthusiasm for research, along with a supportive and understanding approach to helping me reach my scientific and career goals.*
- ☞ *My mentor provided both content expertise and guidance in the responsible conduct of research to ensure my first clinical trial was completed as rigorously as possible.*
- ☞ *A well-respected name that provided access to funding opportunities.*
- ☞ *My primary mentor has been invaluable in my career, both substantively providing staff support and office space as well as providing encouragement, knowledge, and advice in research directly as well as areas of professional development.*
- ☞ *My mentor created an environment that allowed me to focus on my science. Specifically, he provided me flexibility and independence and connected me to whoever he felt could best push my science forward.*
- ☞ *Unconditionally supportive of me.*
- ☞ *My primary mentor is an incredible role model, provides excellent research and clinical advice, and we now collaborate on several large-scale studies.*

Program Feedback

Respondents were invited to draw on their experience with the KTGF Fellowship Program, as well as on experiences they may have had with other fellowship programs, and to suggest improvements to the KTGF Fellowship Program. Nearly all respondents (96%, n=51) answered this open-ended question.

One-third of respondents (35%, n=18) offered no suggestions. Instead, they used the opportunity to explain positive experiences only, describing the program as “outstanding,” “great,” “well-run,” “supportive,” “very helpful,” and “perfect as is.”

The other two-thirds of respondents suggested improvements such as more networking opportunities with other fellows and mentors, increased funding, broadened program focus, and enhanced program operations. Please see Table 6 for specific illustrations of these suggestions.

Finally, respondents who indicated that they did not continue to work in a research-oriented setting were asked if there was anything the KTGF Fellowship Program could have done differently to change the outcome. Of the six respondents who answered this question, two explained that additional funding would have influenced this outcome; one suggested “increased contact during the fellowship”; one recommended the program “ensure that mentors are truly standing up for their mentees and helping to advocate for them to get academic positions”; and one suggested leadership training. One respondent said that their leaving a research-oriented setting was not the “fault” of the program.

Positive aspects

I am wholly indebted to the KTGF Fellowship Program. My Ph.D. was in a different field, and for many years it was difficult for me to receive postdoctoral funding from conventional sources because I was likely deemed too inexperienced in the clinical sciences. Without the KTGF and the data that I was able to generate from my fellowship award, I would not have been able to pursue the projects that I am now leading. I am extremely thankful to the foundation.

It is a very important program--keep it up and THANK YOU!

It was a great program and gave me the opportunity to obtain the training I need to launch my career. I don't see anything that needs improvement.

The program is really excellent; the program administrators and directors are flexible and understanding and really support fellows being as successful as possible in their projects.

TABLE 6. SUGGESTED IMPROVEMENTS (FROM FELLOWS) TO THE KTGF FELLOWSHIP PROGRAM
(N=51)¹⁹

Networking/ Sharing Opportunities (n=20)	• I think it would be great to have a periodic meeting/conference where Fellows could spotlight their work - it would make for a natural networking opportunity.
	• More post-award networking opportunities.
	• More opportunities to network with other trainees and mentors and share work.
	• More networking opportunities with fellows and career development seminars focusing on career next steps and funding opportunities.
	• It might have been nice to have a virtual meeting to allow fellows to connect and present short descriptions of their work. This might have also facilitated future collaborations.
	• Increased initial contact with KTGF.
	• I haven't been part of KTGF events to encourage interaction and updates among fellows, but that would have been valuable for research inspiration, informal mentoring, and network-building.
	• It would have been nice to have more connection to past and current fellows during my time as a fellow.
	• I really enjoyed the conference in May 2023; this was the best program I attended. I felt like I really made some positive connections. It was just the right size to get to talk to people on multiple occasions. The organizers were clearly very thoughtful in how they arranged the opportunities for connecting with mentors, committee members, and other fellows. Having this as a regular event and also potentially available to alumnae of the fellowship would be wonderful.
	• More interaction between all fellows and mentors would be valuable if it could be achieved.
	• Additional networking with current/former awardees.
	• Would love the opportunity for in-person gatherings and cultivating community within the KTGF.
	• My only suggestion would be to support fellows (past and present) in networking with one another and other mentors - e.g., through an annual or biannual meeting/conference (or perhaps a planned event or gathering at a specific conference each year, which hopefully wouldn't require lots of funding or coordinating), as well as an email list or virtual networking opportunities.
	• Connections with others in the field.
• Better connect the fellows with one another.	

¹⁹ Some respondents provided more than one explanation. Comments are verbatim, except for grammatical corrections, ease-of-understanding or to preserve anonymity.

	<ul style="list-style-type: none"> Exposure to the broad range of science and scientists supported by the KTGF, perhaps through in-person meetings or virtual poster sessions. I really benefited from KTGF advisors coming to my poster presentation, but it would be nice for there to be a systematic way for that benefit to occur. Networking with other KTGF fellows at a conference or virtually. I think the new KTGF meetings are a great opportunity for networking. I would have appreciated the opportunity for more connections with other fellows and researchers involved with KTGF. It would be helpful to have gatherings at conferences (e.g., AACAP or SOBP) to create and sustain community.
Funding (n=7)	<ul style="list-style-type: none"> Higher budgets that would allow for a more extensive project (larger sample size, full-time staff person). As is, I was only able to fund a small study which has been difficult to publish due to [small] sample size. Increase the funding amount. Larger sized awards would make the award more feasible. Many times, this is an award that cannot support the project, so the fellow must arrange for the mentor to cover major aspects of the project or contribute a research assistant. This makes it a difficult situation for the fellow and not enough support to have successful outcomes. It can also make it difficult for smaller universities to compete for the award and to support awardees. I think the scope of the project compared to the budget allowed was the most challenging aspect. Perhaps in an ideal world more grants could be awarded with more financial support/longer funding term. More support around how to get additional funding following the fellowship year. Increase amount of funds given the costs of research (I know this is no simple matter).
Program Focus (n=4)	<ul style="list-style-type: none"> In reviewing applications of potential fellows, please consider focusing on the feasibility of projects and the resources provided to the applicant by the mentor and/or institution. While ambitious proposals have great scientific potential, a more modest study that fits within the mentor's established projects/lab group may have a greater likelihood of success and be more appropriate for the fellow's career stage. Fellows need to 'think big' rather than be laser-focused on research. The field needs leaders that convey attitudes that can confidently move the needle on care gaps and sustainable careers. I am in a non-tenure track position. The Klingenstein Foundation group excluded me from follow-up funding opportunities due to the nature of my position. This is rather unfortunate and a challenge for folks like me - who are doing great work but are not in a traditional role in a university. The KTGF seeded my career, but the broader group would not support my subsequent development. Broaden the scope to more than just depression and ADHD, as few researchers define their mental health interests that narrowly.

Program Operations (n=3)	<ul style="list-style-type: none"> • Hold mentors accountable - e.g., perhaps interviewing them directly or having them fill out a survey requiring a login/password to ensure they are connecting their trainees to other professionals and truly supporting them (should you have the mentors submit a report, I suspect many mentors would have the trainee complete it for them).
	<ul style="list-style-type: none"> • Automated reminders/web-based system for submitting progress reports.
	<ul style="list-style-type: none"> • Guidance on how to launch the research started in the fellowship to the next level.

Evaluation Findings from Mentors

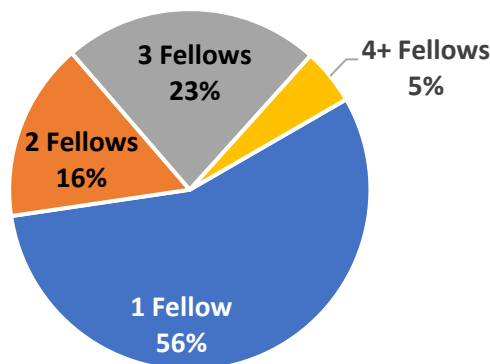
Klingenstein Philanthropies identified 80 potential mentors for the evaluation survey. Three completed the survey through pilot testing, and 40 completed it through full survey administration, yielding an excellent survey response rate of 54% (43/79, as one was on sabbatical). Please see Appendix B for the survey of mentors.

Eight mentors participated in a focus group interview on March 13, 2023. Please see Appendix C for the protocol. Interview questions mirrored and informed items on the Mentor Survey, so findings from the focus group interview are integrated with survey findings below.

Mentoring Relationships

As shown in Figure 18, among the 43 mentors who responded to the survey, 56% mentored one fellow, 16% mentored 2 fellows, 23% mentored 3 fellows, and 5% mentored 4 or more fellows.

FIGURE 18. NUMBER OF FELLOWS MENTORED IN KTGF FELLOWSHIP PROGRAM
(N=43)

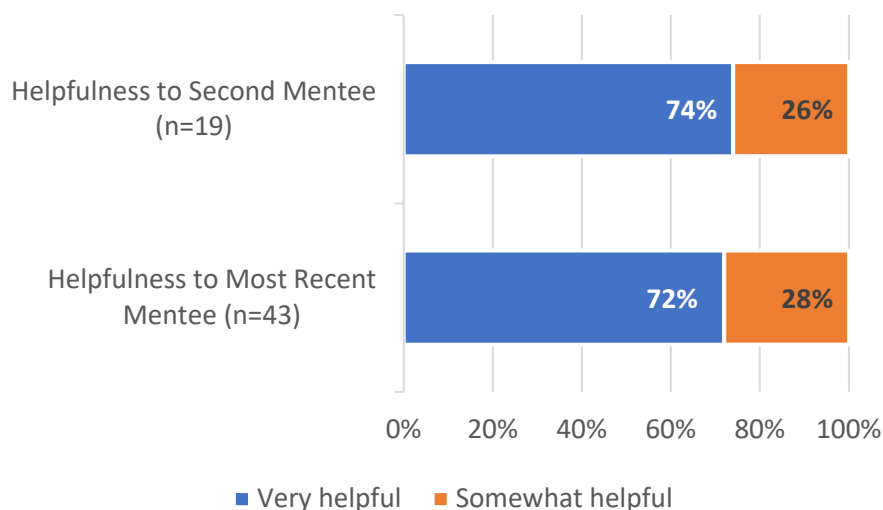


Respondents were asked to report how helpful they were to the fellows. Figure 19 illustrates that with most recent mentees as well as second mentees, nearly three-quarters of mentors reported being very helpful and over one-quarter reported being somewhat helpful. No respondent reported being ‘not very helpful.’

Mentors were offered the opportunity to explain their ratings about helpfulness, and their answers were very similar across mentees. Respondents who answered these open-ended

questions (n=35) described their mentorship role in a research or academic setting, providing guidance to mentees in grant writing, data analysis, project implementation, and career development—helping them transition from training positions to independent investigators. Respondents noted that sometimes they played a more secondary role depending on the stage of each mentee. Some described the long-term impact of their mentorship, facilitating mentees who go on to become leaders in their fields.

FIGURE 19. HELPFULNESS AS MENTOR
(N=43)



Mentors identified up to three key benefits that they offered their mentees. As shown in Figure 20, *research guidance* was the top benefit of working with a mentor. For their most recent mentee and their second mentee, about half or more of respondents (44% to 63%) cited *advancement of career prospects/development*. Other benefits varied, ranging from research partnership, connections to others in the field, and academic support. The least popular benefits of mentoring, for primary or secondary mentees, were connections to funding and increased desire to mentor.

Mentors' helpfulness

We spent a lot of time problem solving and examining ways to implement the project.

I made some aspects of data collection and analysis possible that would otherwise not have been feasible.

They obtained a K award related to their work on the KTGF.

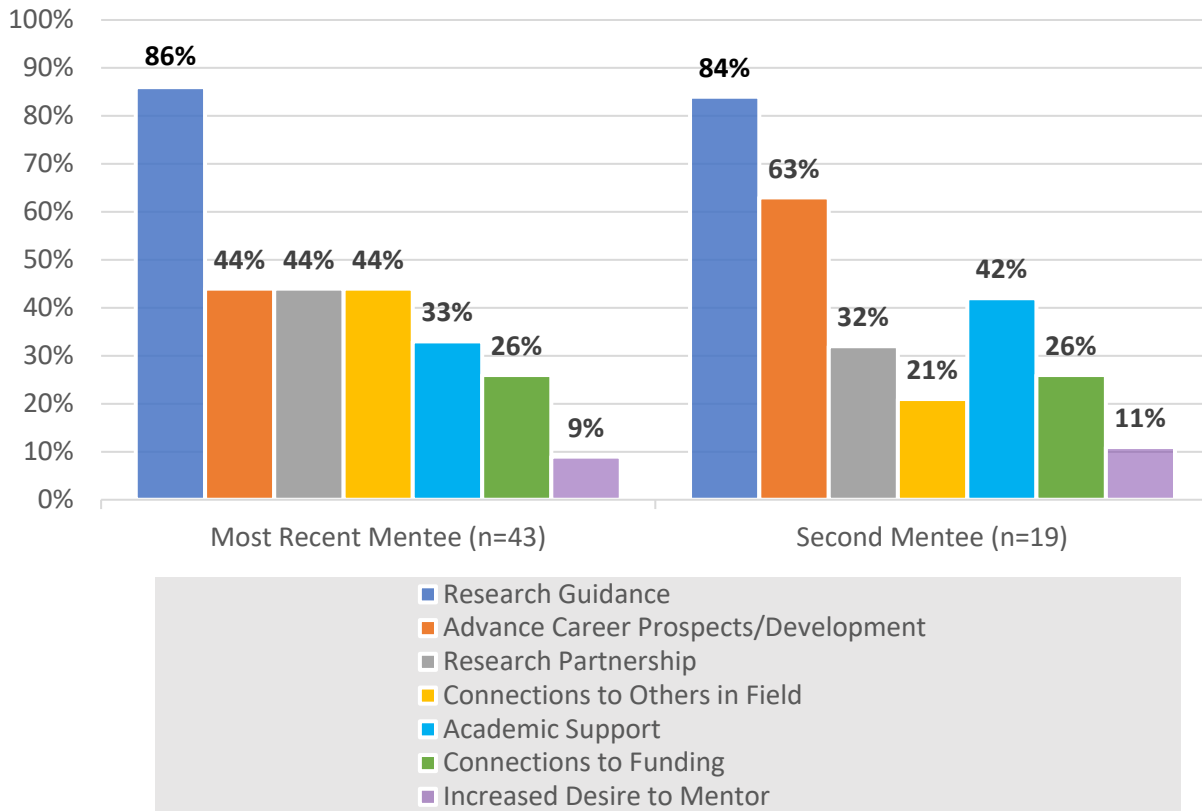
I conducted weekly meetings, provided career, project and scientific issues, and offered clinical supervision and consultation. I advocated for and provided resources to the mentee.

I provided mentorship and guidance on a collaborative project that launched a decade long data collection that still has us collaborating 15 years later!

I meet with my mentee weekly to provide career development guidance. I supported him in getting a K23 award from NIH. I have supported him in applications for professional societies and other opportunities.

My contributions as a mentor have proven to have had a long-term impact as the mentee has gone on to become a leader in academic medicine.

FIGURE 20. BENEFITS OF WORKING WITH MENTOR
(N=43)



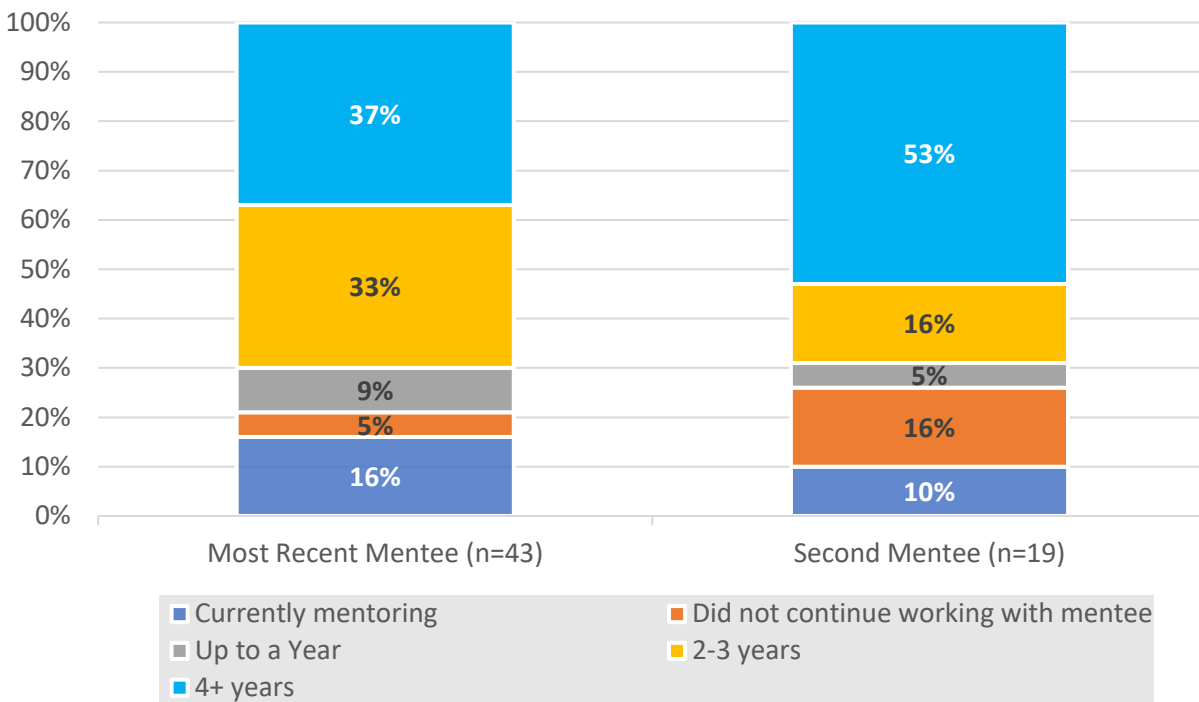
Mentors were invited to describe in their own words the most important benefits they provided their KTGF mentees (including any impacts on fellows’ receipt of subsequent awards). Similar to observations about helpfulness, respondents most frequently described impacting fellows’ research and development paths through collaborative opportunities, grants and funding, advice, technical guidance, and connections to the field (see Figure 21).

FIGURE 21. MOST IMPORTANT BENEFITS PROVIDED TO MENTEES
(N=39)

- ☛ *This mentorship relationship blossomed into a 15-year (and still going) research and professional collaboration (and deep friendship) that is one of the most meaningful in both of our careers.*
- ☛ *Helping them launch their career in the various ways that are required. Two of the three trainees I mentored went on to receive federal grants, and their success in this endeavor was enhanced by participation in the KTGF fellowship.*
- ☛ *My mentees have been women starting out in their academic careers trying to juggle the demands of early parenthood with developing as independent researchers. My contributions included support/encouragement that the career/family balance was doable and worthwhile, sharing professional opportunities (e.g., providing support from my grants, professional consultation about how to navigate the then/still heavily male dominated academic world, how to plot a course of moving forward--including developing partnerships, what to say yes to, grant applications, moving publications forward, etc.). My mentees have moved forward to K-Awards as well as R34 and RO1 grant mechanisms.*
- ☛ *I connected her to important members of the field by asking her if she would like to write a theoretical paper with us. I also consulted with her on the design of her project (providing the tasks I designed) and provided my lab staff when needed to aid in data collection.*
- ☛ *Career guidance, access to research resources, translational framing for research questions. Trainee was awarded an NIH R-series award after the KTGF fellowship, though she subsequently transitioned to a highly productive role in industry.*
- ☛ *I worked with the mentee to develop a research plan, think through the methodology and rationale, help make connections with new collaborators who had a different skill set than I had, help recruit the research participants and assist with funding to supplement the project. The mentee subsequently received NIH funding for their research.*
- ☛ *Provide guidance on specific issues in research, ease the anxiety that most young investigators experience, and help them think about next steps in developing a clear program of research.*
- ☛ *I was able to help both fellows successfully obtain career development awards and their first faculty positions. In spite of challenges, the fellowship provides critical funding in a training transitional period that is unmatched in terms of impact for successful career launch.*

Most mentors (37%) worked with their most recent mentee for 4 or more years. A slightly smaller percentage (33%) worked with their most recent mentee for 2 to 3 years. Similarly, most mentors (53%) worked with a second mentee for 4 or more years. Please see Figure 22.

FIGURE 22. CONTINUED WORK WITH MENTEES POST KTGF FELLOWSHIP (N=43)



Mentoring Experience

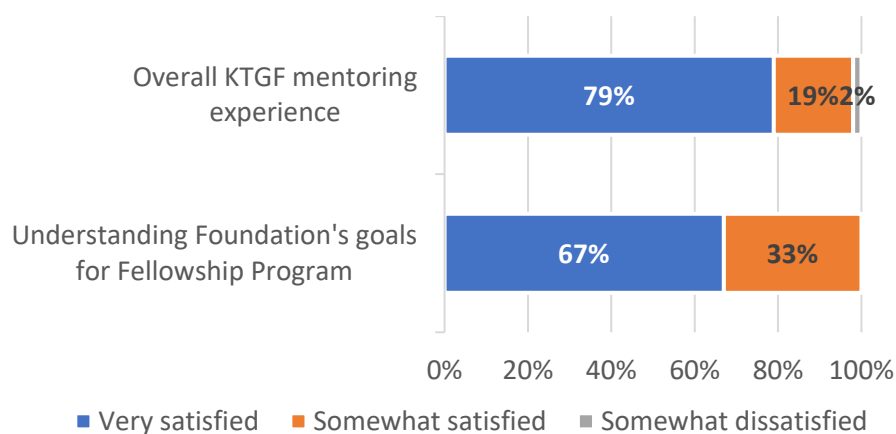
Mentors overall reported high satisfaction with understanding the Foundation’s goals for the KTGF Fellowship Program and with their overall mentoring experience, as shown in Figure 23. Through open-ended response items, most (n=29) explained their ratings. Nearly half (n=13) described the Fellowship Program positively, as an “excellent program” that provides “an important step along the way for successful careers for mentees.” One noted that “it has always been a pleasure to work with the Foundation--folks are helpful and accessible.”

Nine respondents offered constructive feedback to explain lower satisfaction with understanding of program goals. Some explained lack of clarity overall: “I’m not sure that I could say explicitly what the goals are other than the usual types of goals which are to support the fellow in their research skills and career development”; “The fellowship seemed to be more of a source of money for a project rather than a career development experience.” Others pointed more

specifically to ambiguities in research areas: “The extent to which the foundation prioritizes lifespan integration is unclear”; “I think it was not always clear what the program goals were with respect to depression”; and “I need a bit better understanding regarding how child oriented the fellowship needs to be.”

Others expressed frustration with the review process, noting it is “not always clear what is important to the KTGF review panel.” One noted that “the lack of feedback for unsuccessful applicants is disheartening for them and makes it difficult for them to know whether and how to reapply.” As a result of missing feedback, another respondent explained that despite a “wonderful” experience with one mentee over a decade ago, “several of my other mentees applied, but none were selected for funding. Over the past few years, I have explicitly told my mentees not to apply for funding to the KTGF as I do not think they will be selected and that they should instead try NIH.”

FIGURE 23. SATISFACTION WITH ASPECTS OF FELLOWSHIP PROGRAM (N=42)



Program Feedback

Similar to the fellows survey, mentor respondents selected from a pre-determined list the three greatest benefits for recipients of a KTGF Fellowship, shown in Figure 24. No mentor selected ‘increased knowledge or understanding of the field.’

Mentors’ satisfaction with program

KTGF awards have been essential to my mentees as well as other awardees—giving the support needed to typically buy enough time to focus on a research question that provides data to support next/larger grant applications.

The KTGF fellowship is and always has been a godsend to our field. To have a true champion of the importance of developing future clinician, scientist, educators in our wonderful field has inspired me for many years.

For all 3 mentees that received a KTFG, these prestigious awards have translated into a K award from NIMH (which have benefited from pilot data collected in the KTGF project) and the springboard for their scientific career.

This award makes a difference and lets fellows think, “Let me try.”

The fellowship helps fellows become semi-independent and provides a stepping-stone to a K Award or R Award.

Thank you for supporting post-docs! It is so important to have this funding.

FIGURE 24. GREATEST BENEFITS OF FELLOWSHIP
(N=42)



Respondents were invited to draw on their experience with the KTGF Fellowship Program, as well as on experiences they may have had with other fellowship programs, and to suggest improvements to the KTGF Fellowship Program. Two-thirds of survey respondents (67%, n=29) answered this open-ended question, along with eight focus group interviewees.

Most mentors were generally very satisfied with the fellowship program, describing how “all fellows have largely done well,” and how the KTGF is “way ahead and very forward thinking in looking at Access to Care.” They expressed gratitude for the program, citing the “positive reinforcement,” prestige, and recognition it affords fellows. In addition, they described how the award provides a “great experience” that is “incredibly encouraging” and offers fellows “semi-autonomous research with a mentor,” as well as “supervisory experience, grantsmanship, and career development.”

For the most part, mentors do not want significant changes to the Fellowship Program, yet they offered suggestions to strengthen it, such as offering more opportunities for connecting and sharing with other fellows and mentors, clarifying the application and selection process, increasing funding, and strengthening communications with mentors. Please see Table 7 for specific illustrations of these suggestions.

Finally, mentors were asked if there was anything that could have been done differently to change the outcome if their mentees left a research-oriented setting. Nearly all respondents explained this was not applicable: their mentees transitioned to research independence, lead their own group or lab, chair academic departments, or serve as tenured professors. Three explained that “the industry career decision was reasonable,” “Covid caused great difficulty for young mothers starting their careers,” and many factors shape fellows’ decisions, although the program could provide “a more active connection/community among the fellows to support their development of professional relationships.”



TABLE 7. SUGGESTED IMPROVEMENTS (FROM MENTORS) TO THE KTGF FELLOWSHIP PROGRAM
(N=29 respondents to survey; N=8 focus group interviewees)²⁰

Networking/ Sharing Opportunities (n=19)	<ul style="list-style-type: none"> • More group meetings and follow up.
	<ul style="list-style-type: none"> • The program is great actually. The integration with the NIH K-award stream is awesome. I might include encouragement to broaden/integrate the applicant's research with the broader community. The extent to which people can survive on small/independent science is diminishing. Training in doing research that can be integrated, working with other researchers, and setting up for collaborative data sharing would be helpful.
	<ul style="list-style-type: none"> • I like how it connects mentees to a larger network of potential collaborators.
	<ul style="list-style-type: none"> • Additional opportunities for cohorts to learn from and support one another.
	<ul style="list-style-type: none"> • The scientific meeting held this year was fantastic.
	<ul style="list-style-type: none"> • I also think we don't capitalize on building networks of investigators although the last meeting was a great start.
	<ul style="list-style-type: none"> • Perhaps have a remotely attended meeting once/year with prior awardees (or those from recent years) where flash talks are delivered and time for break-out groups planned.
	<ul style="list-style-type: none"> • Enhancing experience and opportunities for non-Klingenstein program students through opportunities already available in the fellowship.
	<ul style="list-style-type: none"> • More connecting of the fellows to each other.
	<ul style="list-style-type: none"> • It might be nice to send out an annual update to previous mentors and mentees regarding each new class of mentors/ mentees and where they are located. I suggest beginning this list as far back as you have the info and then sending that out with the newest awardees each year. It might also be important to ask each former mentee to state what they are currently doing professionally and where, so their trajectory can be monitored over time.
	<ul style="list-style-type: none"> • Fostering more connections between fellows and mentors across institutions would be great! I am very happy with the program though and honored to be a part of it.
	<ul style="list-style-type: none"> • We could build relations over time across mentees by enhancing communications.
	<ul style="list-style-type: none"> • With KTGF, it seems to be two years and done. After a two-year window, everyone forgets about others. We need more follow-up!
	<ul style="list-style-type: none"> • Maybe an annual mentor and mentee meeting on Zoom with two hours for presentations.

²⁰ Some respondents provided more than one explanation. Select comments are verbatim, except for grammatical corrections or ease-of-understanding edits.

	<ul style="list-style-type: none"> • There is virtually no correspondence between mentees and the Foundation once they receive money. There is no relationship with the Klingenstein Philanthropy, but there could be! They send the check and ask for a progress report (which is the same as the application). Maybe they only want to support research and not the relationship? • Perhaps the word 'fellowship' suggests more of a relationship? • Do they have to limit the gathering of mentors and mentees to this [Inaugural] conference, or could they spread out opportunities to meet? • ACAP is in NY this year! Tell fellows of the expectation to submit a poster and then help defray costs of their poster, travel, etc. • Have mentees talk about their experiences at international meetings beyond ACAP.
Application process (n=15)	<ul style="list-style-type: none"> • Maintain the relative ease of the application process, the accessibility of the staff to respond to questions, and the two-year funding model. • Maintain the flexibility in funding and breadth of ideas supported. • More feedback on applications. • How many applications are coming in? How many are they turning down? • More feedback on grant application and more scientific engagement from the board along the way. • One person just got a "no" with no direction. • What about a score on applications? There is no qualitative feedback or score. Can they give a sense of the approach or training setting? Let fellows know if they are in the ballpark? They may need to pay reviewers [scoring is burdensome]. • We need to pay attention to how the field changes over time and modify both our instructions and our expectations to reflect that. • Broaden the scope. • There are many women who receive the award but it's not very diverse, which is unfortunate because there is an amazing opportunity with Access to Care grants. Clinicians and experts from diverse backgrounds would greatly enrich the field. • I understand they accept only 1 applicant per university. This is a deterrent. • The "word on the street" is that the selection process is somewhat "political" in that it favors individuals who are already part of a network of prominent child psychiatrists, often based at Columbia. I do not know if there is any truth to this, but it seems to be a widespread perception. • The KTGF could use broader input from scientific leaders outside of the founder institutions (Yale and NYC programs), otherwise the program is spectacular. • The focus on adolescent depression should be maintained since this is a timely and growing issue in the US and elsewhere. • Does the announcement come out early and clearly? 6-12 months prior is necessary!

Funding (n=11)	<ul style="list-style-type: none"> • Increase funding as the amount offered is low compared to what our emerging scientists tend to require to support their salary and research currently.
	<ul style="list-style-type: none"> • One improvement could be to establish a second step--perhaps a small grant that would allow the fellowship work to move more fully to fruition.
	<ul style="list-style-type: none"> • Programs that sustain careers beyond early phases and recruitment of a diverse workforce remain significant challenges for the field. With the credibility and reputation that a KTGF award brings to a career, support across the career lifespan might be an opportunity to expand impact. While many fellows go on to obtain academic faculty positions and career development awards, many more don't successfully make the transition to independence. This sensitive window often needs bridge funding, grant writing workshops, and leadership development to facilitate continued success and engagement.
	<ul style="list-style-type: none"> • Perhaps increase funding to enhance salary support.
	<ul style="list-style-type: none"> • I think it may need to be increased.
	<ul style="list-style-type: none"> • Increase from \$35K to \$50K. Or consider 2 levels where after their first year, if fellows are good, give a bump in funding.
	<ul style="list-style-type: none"> • Fund more applicants.
	<ul style="list-style-type: none"> • Would it be possible for the KTGF to fund intermediate fellowships?
	<ul style="list-style-type: none"> • More awardees.
	<ul style="list-style-type: none"> • Offer travel awards to current and former fellows.
	<ul style="list-style-type: none"> • More grants.
Mentoring (n=10)	<ul style="list-style-type: none"> • Retain the mentorship model--essential for the success of most of the fellows.
	<ul style="list-style-type: none"> • If the foundation would like to have more emphasis on mentorship, then it might be helpful to include mentors in meetings.
	<ul style="list-style-type: none"> • I learned more about Access to Care today [at Inaugural Conference, March 2023] than in 3 years! They need to share information with mentors to guide mentees and improve the field.
	<ul style="list-style-type: none"> • Conversations could be generative if mentors had more interaction and engagement with Klingenstein Philanthropies.
	<ul style="list-style-type: none"> • More guidance for mentors and interactions with the foundation.
	<ul style="list-style-type: none"> • More interaction with the foundation would allow mentors to understand priorities.
	<ul style="list-style-type: none"> • It might have helped if it were a little more formalized. I was long distance, and I'm not sure she knew or understood what the structure of our communication should be.
	<ul style="list-style-type: none"> • To what extent do all mentors talk with mentees?
	<ul style="list-style-type: none"> • Just some clarification for us non-child people.
	<ul style="list-style-type: none"> • More scientific engagement from the board along the way.

Conclusion

Data from the evaluation surveys of Klingenstein Third Generation Foundation (KTGF) fellows and mentors suggest that the experiences of award recipients have been extremely positive, and that their accomplishments and contributions to the field have been substantial. The objective of the evaluation was to address three key questions which are listed below, along with the quantitative and qualitative survey findings and focus group interview data that inform them.

How important was the fellowship in advancing fellows' careers (what was the impact of the fellowship)?

Most fellows responding to the survey (85%) hold some type of professorship, and one-third have tenure. Among the eight fellows (17%) who changed fields or disciplines, three transitioned to the private sector (pharmaceutical, biotechnology, behavioral health), two transitioned to private practice, and two transitioned to clinical administration. Nearly all (96%) indicated that their current work aligns with the area of research for which they were funded.

Across cohorts, the majority of fellows indicated that financial support for research (74%) and flexibility to pursue independent research (40%) were the greatest benefits they derived from receipt of the KTGF Fellowship. Using their own words, 100% of respondents provided sincere descriptions of the numerous and interrelated benefits related to research opportunities, funding, grant and other non-financial supports. Aligned with the forced rating options, respondents described the financial support and flexibility, but they also described in depth the prestige, legitimacy, and network of connections that significantly impacted their careers.

Data from questions regarding additional funding supports also indicate the importance of the fellowship. Prior to or during the time of their KTGF Fellowship award, 70% of fellows were a Principal Investigator or Co-Investigator on other grants, whereas in the five years following their fellowship award, 96% of respondents were a Principal Investigator or Co-Investigator on other grants (mostly federal). Analysis by cohort reveals an upward trend over time, with a higher percentage of recent fellows having other grants prior to or during their time of the KTGF Fellowship, perhaps indicating the nature of available funding or the quality/experience of fellows entering the program.

Finally, the significance of excellent response rates to both surveys (68% for the fellows survey and 54% for the mentors survey) cannot be overlooked. The willingness of fellows and mentors to devote substantial time and effort to a survey for a program, in which some participated up to 25 years ago, alone indicates the importance of the fellowship.

What are fellows' contributions to the field of ADHD, depression, and related mental health areas?

Data from several items on the fellows survey address this question. Although each set of data has limitations and caveats, together they offer a clear representation of the numerous ways that KTGF fellows contribute to, and impact, the field of ADHD or depression.

Among fellow respondents who completed the program, 98% indicated that their work, including basic research, led to insights into the cause or treatment of ADHD or depression. The fellow who did not report contributing to these areas indicated providing insights related to Access to Care. More than half (55%) work in Child and Adolescent Depression, followed by those who work in other Child and Adolescent Mental Health (36%), and Child and Adolescent ADHD (34%). Fewer work in Adult ADHD (13%) and Adult Depression (11%). One-fifth of fellows responding to the survey (21%) selected “other” work that includes a range of insights spanning child, family, and adult mental health issues. Looking across cohorts, clear trends emerged in two areas pertaining to children and adolescents: the number of fellows working in Child and Adolescent Depression and Other Child and Adolescent Mental Health rose steadily over time.

Open-ended questions allowed fellows to describe how their work led to insights into the cause or treatment of ADHD or depression. Analysis of these data reveal that the majority of fellows' contributions pertain to psychopathology/pathophysiology, followed closely by treatment and its neurobiological basis. The pattern of insights varies, however, by field: fellows responding to the survey had more insights into treatment and its neurobiological basis for depression, whereas those focused on ADHD reported more insights into psychopathology/pathophysiology.

More than three-quarters of respondents (81%) described up to three most meaningful accomplishments in their career. Their responses indicate various achievements in the field of psychiatry and related research, including prestigious awards and grants such as the NIH Career Development Award, NIMH R01 award, and the National Science Foundation Faculty Early Career Development award. Other notable achievements include securing faculty positions, promotions, and conducting significant research studies.

As addressed previously, ‘meaningful’ is inherently a subjective term. However, the multiple metrics used to answer this question provide evidence of the breadth and depth of significant accomplishments achieved by KTGF fellows.

Fellows are well published, with 72% of survey respondents listing five publications that highlight their accomplishments. Fellows reported publications in eleven of the most rigorous, peer-reviewed journals in the field. Additionally, the h-index ratings of all KTGF fellows (not only survey respondents) mirror expected patterns across career stages (i.e., ratings increase over time) and match or exceed h-indices of “typical” highly successful scholars. Exemplary publications further illustrate the transformative discoveries that contribute to advances in the field of ADHD and depression.

Most fellows responding to the survey (70%) listed up to five honors, awards, or leadership positions. These accomplishments according to type (e.g., research award, fellowship, membership) or basis for recognition (e.g., teaching, early career), source (e.g., NIH, NARSD), position (e.g., Director, Chair), and name of awards provide additional evidence of fellows' contributions to the field.

What works well in the fellowship program, including mentoring, and what may be improved?

Data from surveys administered to fellows and mentors of the KTGF Fellowship Program, along with focus group interview data, inform this question.

KTGF fellows usually have at least two mentors, as reported by 67% of fellows and 56% of mentors responding to surveys. Almost all fellows rated their mentors as helpful, but when analyzed more closely, three-quarters of fellows described their primary mentor as 'very helpful' versus half of fellows who described their secondary mentor as 'very helpful.' Among mentors responding to the survey, nearly three-quarters reported being 'very helpful' to their most recent as well as their second mentees.

Fellows and mentors responding to surveys selected, from the same predetermined list, up to three benefits of mentorship. Both groups selected research guidance as the top benefit. Fellows then selected connections to others in the field, whereas mentors selected advancement of career prospects/development. Of interest is that increased experience with mentors relates to an increased desire to mentor, as only fellows with two or more mentors reported this benefit.

Mentoring relationships are sustained well beyond the KTGF Fellowship. Among fellows with only one mentor, 65% reported continuing to work with their mentor for four years or more post-award, suggesting a strong effect of this unique, 1:1 relationship. Among fellows with two or more mentors, slightly fewer (46%) reported continuing to work with their primary mentor for four years or more, and just over one-third (37%) worked with their secondary mentor for this amount of time. Data from mentors aligned with data from fellows, as 53% of mentors reported continuing to work with their mentee for four years or more.

Qualitative feedback complements the quantitative data about the benefits of mentoring. Fellows responding to the survey described how their primary and secondary mentors helped them in their professional development and research. Mentors' advice and guidance, along with content knowledge, training, and connections to the field, provide critical supports to fellows as they navigate careers in academic research. Open-ended response data from mentors aligned with descriptions from fellows about the benefits of mentorship, as they described influencing grant writing, data analysis, project implementation, and career development.

When invited to describe their experience with the KTGF Fellowship Program (as a fellow or as a mentor), and to suggest improvements to the program, the majority of fellow survey respondents (96%) and mentor survey respondents (67%) answered this open-ended question.

Among fellows, one-third (35%) offered no suggestions, using the opportunity to explain positive experiences only with program descriptors like “outstanding,” “great,” “well-run,” “supportive,” “very helpful,” and “perfect as is.” The other two-thirds suggested improvements (listed in decreasing order of popularity): more networking opportunities with other fellows and mentors, increased funding, broadened program focus, and enhanced program operations.

Mentor survey respondents, along with focus group interview participants, also provided qualitative feedback about the KTGF Fellowship Program. Overall, they were very satisfied, describing the achievements of fellows, the forward-thinking approach of the program regarding Access to Care, and the “positive reinforcement,” prestige, and recognition it affords fellows. In addition, they described how the award provides a “great experience” that is “incredibly encouraging” and offers fellows “semi-autonomous research with a mentor,” as well as “supervisory experience, grantsmanship, and career development.”

Although mentors do not want significant changes to the program, two-thirds of survey respondents and all focus group participants offered suggestions to strengthen it. The most common recommendation aligned with that of fellow survey respondents: increase networking opportunities with other fellows and mentors. Additional opportunities for improvement (listed in decreasing order of popularity) include clarifying the application and selection process, increasing funding, and strengthening program communications with and guidance for mentors.

Recommendations

Although the data from surveys and focus group interview are very positive, they offer the Klingenstein Philanthropies Board of Trustees and KTGF Advisory Committee concrete suggestions for enhancing the KTGF Fellowship Program. By considering the following recommendations, the program can strengthen its services to current and prior fellows and mentors and continue to impact the fields of ADHD, depression, and related mental health areas.

- 1) Share the findings in this report with mentors who participated in the focus group interview, fellows, and mentors (survey respondents and non-respondents).
- 2) Consider the data from fellows and mentors regarding the greatest benefits derived from the KTGF Fellowship and whether they align with the program’s goals.
- 3) Evaluate the data from fellows regarding receipt of grants prior to and during their KTGF fellowship, in conjunction with the suggestion from mentors and fellows to increase funding. Patterns in the number of awards over time may inform grant-making decisions about the size of awards, timing, and duration. Additional investigation about how the number of awards has changed over time may be warranted.
- 4) Review the areas, nature, and trends in fellows’ work, along with their contributions and insights into the cause or treatment of ADHD or depression. Do these align with or reflect current program expectations? How might they inform future program funding goals?

- 5) Assess the honors, awards, and leadership positions reported by fellows and the extent to which they align with the types of achievements expected by awardees. Additional investigation into the meaningful contributions and accomplishments of survey non-respondents may be warranted.
- 6) Determine if any reasons provided by fellows who did not continue work in a research-oriented setting may be addressed by the program.
- 7) Identify potential areas of improvement for the mentoring aspect of the program, using data from fellows and mentors regarding the mentoring experience, benefits of mentorship, helpfulness of mentors, longevity of relationship post-award, and satisfaction with aspects of the program (asked of mentors only).
- 8) Consider fellows' and mentors' recommendations to enhance the KTGF Fellowship Program through increased networking opportunities, increased funding, broadened program focus (e.g., support fellows beyond early phases; consider non-tenure track, less traditional candidates; widen scope in mental health beyond depression and ADHD), clearer application and selection process, and enhanced program operations and communications with fellows and mentors that promote mentors' accountability.

Appendix A: Survey of Klingenstein Third Generation Foundation Fellows

Survey of Klingenstein Third Generation Foundation (KTGF) Fellows

Introductory Welcome Screen

As a current or former fellow, we invite you to participate in this survey about your experience in the Fellowship Program. Your input will inform the Klingenstein Third Generation Foundation (KTGF) Trustees and Scientific Advisory Committee about your experiences and accomplishments. With your feedback, they will learn how the award may have contributed to your career and to the field of ADHD, depression, and related mental health areas. Most importantly, they will gain understanding of what works well in the Fellowship program and what may be improved to ensure the most productive experience possible for future award recipients.

This survey should take less than 10 minutes of your time, *especially with your CV or resume at hand*. All responses will remain confidential. If you have any questions, please contact Judy Lee, external evaluator for Klingenstein Philanthropies, at judy@truenorthevaluation.com.

We appreciate your time and look forward to receiving your response no later than June 23rd.

Thank you for your participation and valuable feedback,
Judy Lee, Ph.D. (external evaluator for Klingenstein Philanthropies)

Background

- 1) What is your current position? (*Select all that apply*)
 - a. Academia
 - b. Pharmaceutical or Biotechnology company
 - c. Research Institute (e.g., think tank, foundation)
 - d. Government
 - e. Clinical practice or administration
 - f. Other (*please specify*):

- 2) [*If Academia*] What is your position in Academia?
 - a. Instructor
 - b. Assistant professor
 - c. Associate professor
 - d. Associate professor with tenure
 - e. Professor
 - i. [*If yes*] Please describe your highest academic title as Professor (select all that apply):
 1. Professor with Tenure
 2. Endowed Professor
 3. Distinguished Professor
 4. Emeritus Professor
 5. Other:



- f. None of the above (*please specify*):
- 3) [*If Pharmaceutical or Biotechnology*] What is your position/nature of work in the pharmaceutical or biotechnology company?
 - 4) [*If Research Institute*] What is your position/nature of work in the research institute?
 - 5) [*If Government*] What is your position/nature of work in government?
 - 6) [*If Clinical*] What is your position/nature of work in clinical practice or administration?
 - 7) We are interested in the career pathways of fellows. Has your career pathway changed since your KTGF Fellowship?
 - a. Yes
 - b. No
 - c. I am a current fellow.
 - 8) [*If yes*] Please explain how your career pathway has changed.

Fellowship Benefits

- 9) What were the greatest benefits derived from receipt of the KTGF Fellowship (or for current fellows, what do you anticipate these will be)? (*Please select up to 3 benefits*)
 - Prestige
 - Credibility
 - Encouragement/validation
 - Financial support for research
 - Flexibility to pursue independent research
 - Mentoring
 - Additional funding opportunities
 - Network of connections in the field
 - Collaborative partnerships on scientific projects
 - Increased knowledge or understanding of the field
 - New ideas for research
 - Advanced career prospects/development
- 10) In your own words, please describe the single, most important benefit of your KTGF Fellowship. If you are a current fellow, please describe the most important, anticipated benefit of your Fellowship.

Additional Support

- 11) *Prior to or during* the time of your KTGF Fellowship award, were you a Principal Investigator or Co-Investigator on any other grants?
- Yes
 - No
 - Not sure
- 12) *In the five years following* your KTGF Fellowship award, were you a Principal Investigator or Co-Investigator on any grants?
- Yes
 - No
 - Not sure
- 13) *[If Yes]* Please specify the type of grants you received in the five years following your KTGF Fellowship award (*select all that apply*):
- Federal grant(s)
 - State grant(s)
 - Contract(s)
 - Pharmaceutical funding
 - Foundation funding
 - Other (*please specify*):

Contribution to Field

- 14) Has your work (including basic research) led to insights into the cause or treatment of ADHD or depression?
- Yes
 - [If yes]* Please describe briefly how your work has led to insights into the cause or treatment of ADHD or depression:
 - No
 - I have not yet completed the program or submitted my final report.
- 15) *[If no—that respondent’s work has not led to insights into ADHD or depression]* Has your work (including basic research) led to insights in other fields of mental health?
- Yes
 - [If yes]* Please describe briefly how your work has led to insights into other fields of mental health:
 - No
 - I have not yet completed the program or submitted my final report.

16) Since the conclusion of your fellowship, what are the *most meaningful accomplishments* (research or non-research) in your career? Please list up to three accomplishments, using one box per accomplishment (*please note that spaces permit up to xxx characters*).

17) Which category best describes the nature of your current work? (*select all that apply*)

- Child and adolescent depression
- Child and adolescent ADHD
- Other child/adolescent mental health area (*please specify*):
- Adult depression
- Adult ADHD
- Other (*please specify*):

18) Does the nature of your current work align with the area of research for which you received a KTGF Fellowship?

- a. Yes
- No

[*If no*] Please describe your path from the research you conducted during your KTGF Fellowship to the present:

- b. Yes, I am a current fellow.

Mentorship

19) During your KTGF Fellowship, how many mentors did you have?

- 1
- 2 or more

[If 1 mentor, Q20-23]

20) How helpful was your primary mentor?

- Very helpful
- Somewhat helpful
- Not very helpful

21) What were the key benefits you derived from working with your mentor (or for current fellows, what are the key benefits)? (*Please select up to 3 benefits*)

- Academic support
- Research guidance
- Connections to additional funding opportunities
- Connections to others in the field
- Collaborative partnership on research
- Advanced career prospects/development
- Enhanced your understanding of the value of mentoring (e.g., increased your desire or ability to mentor others)

22) How long did you continue to work with your mentor after the KTGF Fellowship ended?

- Up to 1 year
- 2-3 years
- 4 years or more
- I did not continue to work with my mentor after the KTGF Fellowship ended.
- I am a current fellow.

23) In your own words, please describe the single, most important benefit of your KTGF mentor.

[If 2 or more mentors, Q24-32]

24) How helpful was your primary mentor?

- Very helpful
- Somewhat helpful
- Not very helpful

25) What were the key benefits you derived from working with your primary mentor (or for current fellows, what are the key benefits)? *(Please select up to 3 benefits)*

- Academic support
- Research guidance
- Connections to additional funding opportunities
- Connections to others in the field
- Collaborative partnership on research or other projects
- Advanced career prospects/development
- Enhanced your understanding of the value of mentoring (e.g., increased your desire or ability to mentor others)

26) How long did you continue to work with your primary mentor after the KTGF Fellowship ended?

- Up to 1 year
- 2-3 years
- 4 years or more
- I did not continue to work with my mentor after the KTGF Fellowship ended.
- I am a current fellow.

27) In your own words, please describe the single, most important benefit of your primary mentor.

28) Was having a second mentor a requirement of your grant?

- a. Yes
- b. No
- c. Not sure

29) How helpful was your secondary mentor?

- Very helpful
- Somewhat helpful
- Not very helpful

30) What were the key benefits you derived from working with your secondary mentor (or for current fellows, what are the key benefits)? *(Please select up to 3 benefits)*

- Academic support
- Research guidance
- Connections to additional funding opportunities
- Connections to others in the field
- Collaborative partnership on research or other projects
- Advanced career prospects/development
- Enhanced your understanding of the value of mentoring (e.g., increased your desire or ability to mentor others)

31) How long did you continue to work with your secondary mentor after the KTGF Fellowship ended?

- Up to 1 year
- 2-3 years
- 4 years or more
- I did not continue to work with my mentor after the KTGF Fellowship ended.
- I am a current fellow.

32) In your own words, please describe the single, most important benefit of your secondary mentor, including the extent to which this mentorship enhanced your experience as intended.

Program Feedback

33) Drawing on your experience with the KTGF Fellowship Program, as well as on experience you may have had with other fellowship programs, what, if anything, could be done to improve the KTGF Fellowship Program?

34) *[If yes to Q7, that their career pathway changed since fellowship]* If you have not continued to work in a research-oriented setting, is there anything the KTGF Fellowship Program could have done differently to change that outcome?

Accomplishments

Using your current Curriculum Vitae, resume or a recent Biosketch, please complete the following questions. Feel free to copy and paste items into question fields.

35) Did you publish your Fellowship Project?

- Yes
 - [If yes] Please provide a citation for your publication:
- No
- I haven't yet, but plan to.

36) Please list up to five publications or research products that best highlight your career accomplishments:

37) Please list up to five honors, awards (e.g., membership in prestigious organizations, prizes, lectureships), or leadership positions of which you are most proud:

Thank you for your time and effort!

Appendix B: Survey of Klingenstein Third Generation Foundation Mentors

Survey of Klingenstein Third Generation Foundation (KTGF) Mentors

Introductory Welcome Screen

As a current or former mentor, we invite you to participate in this survey about your experience with the Klingenstein Third Generation Foundation (KTGF) Fellowship Program. Mentoring is an essential component of the program, and we welcome your input about your mentoring experience as well as the experiences of fellows. Your feedback will inform the KTGF Trustees and Scientific Advisory Committee about what works well in the Fellowship program and what may be improved to ensure the most productive experience possible for future award recipients and their mentors.

This survey should take about 5 minutes of your time. All responses will remain confidential. If you have any questions, please contact Judy Lee, external evaluator for Klingenstein Philanthropies, at judy@truenorthevaluation.com.

We appreciate your time and look forward to receiving your response no later than xxx.

Thank you for your participation and valuable feedback,
Judy Lee, Ph.D. (external evaluator for Klingenstein Philanthropies)

Mentoring Relationship

- 1) About how many fellows have you mentored in the KTGF Fellowship Program?
 - 1
 - 2
 - 3
 - 4 or more

- 2) Thinking about *your most recent* mentee, how helpful were you as a mentor?
 - Very helpful
 - Somewhat helpful
 - Not very helpful

- 3) Please explain your rating:

- 4) What do you think were the key benefits you offered *this* mentee? (*Please select up to 3 benefits*) [OPTIONS MATCH OPTIONS ON SURVEY OF FELLOWS]
 - Academic support
 - Research guidance
 - Connections to additional funding opportunities
 - Connections to others in the field
 - Collaborative partnership on research

- Advanced career prospects/development
- Enhanced their understanding of the value of mentoring

5) How long, on average, did you continue to work with *this* mentee after the KTGF Fellowship ended?

- Up to 1 year
- 2-3 years
- 4 years or more
- I did not continue working with this mentee beyond the KTGF Fellowship Program.
- I am currently mentoring this fellow, who is still in the KTGF Fellowship Program.

[If 2 or more mentees, Q6-Q9; otherwise, skip to Q10]

6) Thinking about *one other* mentee, how helpful were you as a mentor?

- Very helpful
- Somewhat helpful
- Not very helpful

7) Please explain your rating:

8) What do you think were the key benefits you offered *this* mentee? (*Please select up to 3 benefits*) [OPTIONS MATCH OPTIONS ON SURVEY OF FELLOWS]

- Academic support
- Research guidance
- Connections to additional funding opportunities
- Connections to others in the field
- Collaborative partnership on research
- Advanced career prospects/development
- Enhanced their understanding of the value of mentoring

9) How long, on average, did you continue to work with *this* mentee after the KTGF Fellowship ended?

- Up to 1 year
- 2-3 years
- 4 years or more
- I did not continue working with this mentee beyond the KTGF Fellowship program.
- I am currently mentoring this fellow, who is still in the KTGF Fellowship program.

10) **[All Mentors, regardless of number of mentees]** In your own words, please describe the most important benefits you provide/provided your KTGF mentee(s). If you feel you

contributed to their receipt of subsequent awards, please describe the nature of those awards as well.

Mentoring Experience

11) Using the following scale, please indicate how satisfied you are with:

- a) understanding the Foundation's goals for the KTGF Fellowship Program
- b) your overall KTGF mentoring experience

1-----2-----3-----4

1=Very dissatisfied

2=Somewhat dissatisfied

3=Somewhat satisfied

4=Very satisfied

12) Please explain your ratings:

Program Feedback

13) What do you perceive to be the greatest benefits for recipients of a KTGF Fellowship?

(Please select up to 3 benefits) [OPTIONS MATCH OPTIONS ON SURVEY OF FELLOWS]

- Prestige
- Credibility
- Encouragement/validation
- Financial support for research
- Flexibility to pursue independent research
- Mentoring
- Additional funding opportunities
- Network of connections in the field
- Collaborative partnerships on scientific projects
- Increased knowledge or understanding of the field
- New ideas for research
- Advanced career prospects/development

14) Drawing on your experience with the KTGF Fellowship Program, as well as on experience you may have had with other fellowship programs, what, if anything, could be done to improve the KTGF Fellowship Program, and what should be maintained?

15) If your mentee(s) left a research-oriented setting, is there anything the KTGF Fellowship Program could have done differently to change the outcome?

Thank you for your time and effort!

Appendix C: Protocol for Focus Group Interview with Mentors

**Focus Group Interview Protocol for
Mentors of Klingenstein Third Generation Foundation (KTGF) Fellowship Program
Monday March 13, 2023, 4:45-5:45 pm ET**

Introduction: Thank you for your time today. As current and former mentors of the Klingenstein Third Generation Foundation (KTGF) Fellowship Program, you are instrumental in shaping the experience of its fellows. Therefore, any evaluation of the program would be incomplete if we did not solicit your input. This focus group is part of a mixed methods approach to provide the KTGF Board of Trustees and Scientific Advisory Committee with information about fellows' and mentors' experiences in the Fellowship program, and to assess the program's impact on fellows and on the field of ADHD, depression, and related mental health areas. In our time today, I hope to hear from each of you about 1) what works well in the Fellowship Program, 2) what may be improved, and 3) what you perceive to be the key benefits of the Fellowship Program on fellows and mentors. This focus group interview will take no longer than one hour, and your answers will be kept confidential. Do you have any questions before we begin?

- 1) I'd like to open with a broad question and then I'll follow-up with a few specific ones. Overall, what has your experience been like serving as a mentor in the KTGF Fellowship Program? Please feel free to describe if your experience has varied over the years or across fellows you have mentored, and feel free to comment on administrative responsibilities as well as those related to mentoring.
- 2) Now, would you please describe what you think the experience is like *for fellows* in the KTGF Fellowship Program? Again, please feel free to describe if the experience seems to vary according to certain characteristics of fellows such as their experience, field of interest, age, or other factors.
- 3) We are interested in understanding the benefits of the KTGF Fellowship Program. So, I have a three-part question:
 - a. What are the key *benefits that fellows receive* from the mentoring experience?
 - b. What are the key *benefits that mentors receive* from serving in the program?
 - c. What are the *benefits overall for recipients* of a KTGF Fellowship?
 - d. [*Depending on time remaining and answers*] I'd like to add a fourth part to this question about benefits: What is the impact of the fellowship program on the field?
- 4) Finally, as I mentioned earlier, the Trustees and Scientific Advisory Committee members want to understand aspects of the Fellowship Program that work well and aspects that may be strengthened or improved. Thinking of your experience across the KTGF program as well as in other fellowship programs with which you are familiar or may have served in a similar capacity:
 - a. What are the strengths of the KTGF Fellowship Program?
 - b. What are the limitations of the KTGF Fellowship Program or aspects that may be improved?
- 5) Before we conclude, I'd like to provide you with the opportunity to make any additional comments about your experience serving as a mentor in the KTGF Fellowship Program.