



COMMUNITY HEALTH PROMOTION

MPH Degree Program

Division of Epidemiology and Community Health

2018-2019

STUDENT GUIDEBOOK

SCHOOL OF
PUBLIC HEALTH

UNIVERSITY OF MINNESOTA

Welcome to the University of Minnesota School of Public Health!

All students are responsible for knowing the rules and policies that govern their academic program. To this end, we are providing you with this guidebook which covers your specific academic program requirements. Please refer to it often.

Many Graduate School processes are in transition. Please stay in touch with your Program Coordinator as some paper processes will convert to electronic processes.

In addition, you are responsible for knowing University of Minnesota and School of Public Health policies and procedures that pertain to all students. Links to these policies and procedures can be found by clicking on the "Current Students" link at <http://www.sph.umn.edu/current/resources/>.

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1. COMMUNITY HEALTH PROMOTION MPH DEGREE PROGRAM

1.1 FALL 2018 PROGRAM CURRICULUM

48 Semester Credit Minimum

The Community Health Promotion major requires the following courses be taken on an A-F grading basis: PubH 6050 Community Health Theory and Practice I; PubH 6051 Community Health Theory and Practice II; all intervention courses; PubH 6034 (or 6852) Evaluation; PubH 6035 Applied Research Methods; and all of the SPH Core Courses. Students must earn a grade of B- or higher in all of the courses listed above. Please pay close attention to the following notes to assist you with your course planning. Please also note that all of the Public Health Core Courses are offered online at least once each academic year.

- ① Few substitution petitions will be allowed in this curriculum area.
- ② PubH 6034 (or 6852), and 6450 are prerequisites.
- ③ For those students entering with strong quantitative skills and/or who are considering a doctoral-level degree, the advanced epidemiology course PubH 6341 may be taken in place of PubH 6320.

2018 CHP Curriculum – 48 cr. Minimum Required				
Theory (6 credits)				
Course	Notes	Title	Offered	Credits
PubH 6050	①	Community Health Theory and Practice I	Fall	3
PubH 6051	①	Community Health Theory and Practice II	Spring	3
Health Behavior and Policy Interventions (Minimum of 8 credits required)				
<i>Students must select at least two courses from the Intervention Approaches list and at least one course from the Critical Issues list. Any remaining required intervention credits may be taken from either list</i>				
Intervention Approaches				
<i>Select at least two courses from the following list:</i>				
Course	Notes	Title	Offered	Credits
PubH 6025	①	Designing e-Interventions for Public Health	Spring	2
PubH 6045	①	Skills for Policy Development	Spring	1
PubH 6049	①	Legislative Advocacy Skills for Public Health (prerequisite 6078)	Spring	3
PubH 6066	①	Building Communities, Increasing Health: Preparing for Community Health Work	Fall	2
PubH 6074	①	Mass Communication and Public Health	Fall	3
PubH 6078	①	Public Health Policy as a Prevention Strategy	Fall	2
Critical Issue Interventions				
<i>Select at least one course from the following list:</i>				
PubH 6000	①	Topics: Urban Health and Social Policy	Spring '20/'22	2
PubH 6010	①	Public Health Approaches to HIV/AIDS	Fall	3
PubH 6055	①	Social Inequalities in Health	Spring	2

PubH 6081	①	Sex, Sexuality and Sexual Health	Fall	2
PubH 6094	①	Obesity and Eating Disorders	Spring	2
Evaluation-related Methods (5-6 credits)				
PubH 6034 or PubH 6852		Evaluation Program Evaluation in Health and Mental Health Settings	Spring Fall/ Spr (online)	3 2
PubH 6035	②	Applied Research Methods	Fall	3
Evaluation-related Methods (2-4 credits)				
<i>Select one course from the following list:</i>				
PubH 6636		Qualitative Research Methods	Spring	2
PubH 6414		Biostatistical Literacy	Fall/Spring/ Summer	3
PubH 6451		Biostatistics II	Fall (online)/ Spring	4
PubH 6617		Practical Methods in Secondary Data Analysis	Fall	3
SPH Core Courses (14 credits)				
<input type="checkbox"/> Note: Courses designated as part of the Public Health Core must be taken for a letter grade and must obtain a grade of B- or better (A/F) <input type="checkbox"/>				
PubH 6101 or PubH 6102		Environmental Health (not offered after Fall 2018) Issues in Environmental and Occupational Health	Fall/Spring Every term	2 2
PubH 6250		Foundations of Public Health (online)	Fall/Spring	2
PubH 6320 or PubH 6341	③	Fundamentals of Epidemiology Epidemiologic Methods I	Every term Fall	3 3
PubH 6450		Biostatistics I	Fall/Spring	4
PubH 6741		Ethics in Public Health: Professional Practice and Policy	Every term	1
PubH 6751		Principles of Management in Health Services Organizations	Every term	2
Applied Practice Experience(APEX) and Integrated Learning experience (ILE) (2-3 credits)				
PubH 7094		Integrated Learning Experience (see section 2.4)	Any term	1-2
PubH 7096		Applied Practice Experience (see section 2.5)	Any term	1
Electives (7-11 credits)				

Recommended Competencies and Electives

Electives must be graduate level courses, relevant to your area of study, with a 5xxx number or higher. Under some circumstances, 4xxx - level courses can also be applied toward a MPH degree when they are taught by a member of a graduate faculty and are approved by the Program Director. Students should get approval for taking an elective from the ESS staff by emailing epichstu@umn.edu prior to taking the course. Elective courses can be found outside of the School of Public Health but students should pay attention to any listed prerequisites for taking courses. Students are permitted to take additional intervention or evaluation-related methods courses as electives.

CHP students may consider taking elective coursework to expand skills focused on: (1) developing, adapting or implementing policy or programmatic interventions that address significant public health issues or (2) conducting assessments and evaluations. CHP students will need to focus on one of these two areas as part of their Applied Practice Experience (APEX) (see section 7.4).

Elective credits can also be met by declaring a graduate level minor. Any CHP relevant graduate-level minor can be declared. You can look at available graduate-level minors at <http://www.catalogs.umn.edu/grad/>. There are graduate minors that are related to degree programs and there are free-standing minors. Contact the ESS staff at epichstu@umn.edu for more information.

Also, students interested in one of the areas below may wish to select their electives from the course lists:

Quantitative Research: PubH 6342 Epidemiologic Methods II (3 cr), PubH 6343 Epidemiologic Methods III (4 cr) PubH 6350 Epidemiologic Methods Lab, (1 cr), PubH 6420 Intro to SAS Programming, (1 cr), PubH 6325 Data Processing with PC SAS, (1 cr).

Qualitative Research: PubH 7250 Designing and Conducting Focus Groups, (1 cr), Nurs 8171 Qualitative Research Design and Methods, (3-4 cr), PA 5041 Qualitative Methods for Policy Analysts, (4 cr), Nurs 8185 Qualitative Data Analysis for Health Care Research (3-4 cr), FSoS 8013 Qualitative Family Research Methods, (3 cr), FSoS 8014 Qualitative Family Research Methods II, (3 cr).

Adolescent Health: PubH 6607 Adolescent Health Issues: Issues, Programs, and Policies, (2 cr), PubH 6907 Maternal, Infant, Child and Adolescent Nutrition, (3 cr), PubH 6627 Sexuality Education: Criteria, Curricula and Controversy, (1 cr), Nurs 5016 Critical Reading of Scientific Literature in Adolescent Health, (1 cr).

Child Health: PubH 6634 Advocacy and Children's Rights, (2 cr), PubH 6606 Children's Health: Issues, Programs and Policies, (2 cr), PubH 6907 Maternal, Infant, Child and Adolescent Nutrition, (3 cr), PubH 6613 Children and Youth with Special Health Care Needs, (2 cr).

Women's Health: PubH 6605 Reproductive and Perinatal Health, (2 cr), PubH 6627 Sexuality Education: Criteria, Curricula and Controversy, (1 cr), PubH 6675 Women's Health, (2 cr).

Nutrition: PubH 6914 Community Nutrition Intervention, (3 cr), PubH 6907 Maternal, Infant, Child and Adolescent Nutrition, (3 cr), PubH 6906 Global Nutrition, (2 cr), PubH 6904 Nutrition and Aging, (2 cr), PubH 6389 Nutritional Epidemiology, (2 cr), PubH 6933 Nutrition and Chronic Diseases, (2 cr), PubH 6905 Nutrition for Public Health Promotion and Disease Prevention, (2 cr), CSPH 5431 Functional Nutrition: An Expanded View of Nutrition, Chronic Disease, and Optimal Health, (2 cr).

1.2 OTHER MPH DEGREE REQUIREMENTS

Public Health Core Area Requirements

Students working toward an MPH degree must satisfy competency requirements in the seven core areas of public health – administration, behavioral science, biostatistics, environmental health, epidemiology, foundations of public health, and ethics – by completing one of the following in each core area:

- Satisfactorily pass one of the pre-approved courses in the core area (see pre-approved course list below); OR
- Pass an equivalency exam in the core area. OR
- Pass an advanced course in the core area as approved by the respective division head or the Educational Policy Committee, OR
- Complete a graduate level course, with a grade of B or better, at an accredited university or college that meets the competencies defined by CEPH. The Educational Policy Committee, upon petition of the student, will determine acceptance of a course for transfer.

Please note that CHP students meet the behavioral science requirement by taking PubH 6050. As a result, CHP students should not take PubH 6020, which is the required behavioral science course for other MPH programs.

Registration Requirement

Students are required to register for at least 2 semesters and 20 credits in the School of Public Health. (Note this requirement is subject to change pending any updated policies approved by the SPH Educational Policy Committee).

Course Numbers and Graduate Credit

5xxx, 6xxx, 7xxx and 8xxx-level courses are considered graduate-level. 1xxx and 3xxx-level courses are for undergraduates and will not receive approval for graduate credit. Under some circumstances – with approval of the student’s Program Director – 4xxx-level courses may also be applied toward a MPH degree as long as a member of the graduate faculty teaches them.

SPH Grading Policies

Grade Point Average

Students must achieve a cumulative grade point average of no less than 3.0 (B) to receive an MPH degree.

S-N Grade Option

MPH students may take no more than 20% of their coursework on an S-N grading basis, exclusive of those topics, seminars, and field experience courses offered only on an S-N basis.

Public Health Core Courses

Courses designated as part of the public health core must be taken for a letter grade (A-F). Students will be required to achieve no less than a B- grade in each course taken on an A-F basis. Students may retake public health core courses at their own expense until they achieve a grade of B- or better. However, a retaken course may be counted only once toward degree requirements in the student’s study plan.

MPH Study Plan

Students are required to submit a completed MPH Study Plan to the EpiCH Student Services staff, at least one semester prior to their anticipated completion of coursework. A call will go out via email from epichstu@umn.edu announcing deadlines for turning those in for review.

Time Frame

The maximum time allowed by the School of Public Health for completion of an MPH degree is five years. The five-year period begins with the first term of enrollment after admission to a degree program within the School.

Course Credit Transfer Policy

Course credits may be used to satisfy public health core or other program requirements as jointly approved by the Program Director and the Associate Dean for Academic Affairs for Learning Systems and Student Affairs. No course credits older than 5 years from the date of the student’s matriculation will be accepted for transfer. **A grade of “B-” or better is required for each course requested for transfer credit.**

SPH students who have completed graduate-level coursework at the University of Minnesota or another college or university may petition to transfer those courses toward their SPH degree. To be considered for transfer, graduate level coursework must have been taken at an accredited graduate institution.

Higher standards of achievement and stricter policies may be enforced by individual programs.

Students must:

1. Meet with their academic advisor to discuss the petitioning process. If the petition is acceptable to the advisor, the student will complete and sign the Academic Policy Petition form, and attach an official transcript on which the final grade has been posted.
2. Submit the Academic Policy Petition form to the Program Coordinator (EpiCH Student and Support Services staff) for processing. The Academic Policy Petition form can be found at <http://www.sph.umn.edu/current/resources/school-and-university-resources/>.
3. The Program Coordinator will forward the petition to the Program Director for approval and signature and then to the Student Services Center for the Associate Dean for Learning Systems and Student Affairs for final evaluation and/or approval.

The Academic Policy Petition forms may be used for other academic reasons. Students are encouraged to discuss petition issues with their academic advisor or Program Coordinator to determine the appropriate process and procedure.

Course Substitutions and Waivers

All student requests that deviate from the degree curriculum requirements outlined in this Guidebook must be made on a *Petition* form. The *Petition* form can be obtained at <http://policy.umn.edu/forms/otr/otr172.pdf>.

Students should note that the process for approving a course substitution or waiver could take several weeks, so plan accordingly.

Course Substitution Procedures:

The following process should be followed when requesting that a course substitute for a required course in your degree program. Students should apply for approval before they take the course whenever possible as permission could be denied. Students should:

1. Gather the course syllabi of the required course in your degree program and the proposed substitute course and a transcript on which the proposed course grade has been posted (if the proposed course has already been completed).
2. Complete the *Petition* form (<http://www.sph.umn.edu/current/resources/school-and-university-resources/>) with the following information in each section:
 - Briefly state the exception or approval to be considered: describe the course requested for substitution including the course title, number of credits, term and year taken (or planned to take), and the name of the institution offering the course. Also list the course/requirement in your degree program for which you are asking for the substitution.
 - Provide an explanation or reason to grant your request below: Indicate what skills and/or content overlaps between the required course(s) and the proposed substitute course(s). Note that the CHP Credentials Committee is unlikely to approve substitutions for CHP-required courses simply because content of other courses overlap with the required courses.
3. The student should submit these materials to the Epidemiology and Community Health Student Services staff at epichstu@umn.edu who will forward it to the appropriate Credentials Committee for review. The student will be notified via e-mail of the committee's decision.
4. If the substitute course is to replace a School of Public Health Core course (administration-PubH 6751/6752, behavioral/social science-PubH 6020 (or PubH 6050 for CHP students), biostatistics-PubH 6450, environmental health-PubH 6101/6102, epidemiology-PubH 6320/6341, ethics-PubH 6741/6742), foundations of public health (PubH 6250) there is an additional step to get School-level approval. All of those materials should be submitted to the ESS staff at epichstu@umn.edu. Upon receipt of those materials, the advising staff, will review the request with the Program Director and then if approved by the Program Director, all copies of the request will be forwarded to the Student Service Center to be presented to the appropriate SPH Educational Policy committee members. The student will be notified via e-mail of the committee's decision. If the Program Director does not approve of the request, the EpiCH Student Services staff will inform the student that the request will not be forwarded to the SPH Educational Policy Committee for review.

Application for Degree

MPH students are required to submit an *Application for Degree* form online. There are strict deadline dates before a student can be cleared for graduation. You must submit the form by the end of the first business day of the month in which you want your degree conferred. You must apply on-line by going to www.myu.umn.edu: ACADEMICS: DEGREE PROGRESS: APPLY TO GRADUATE

1.3 COURSE SCHEDULE

Our CHP program curriculum offers a great deal of choice, which makes it difficult to suggest a schedule that will work for most students. For this reason, students are encouraged to discuss their registration plans with the EpiCH Student Services staff if they would like assistance with planning their schedule. Some students prefer to check in before the start of registration each semester, other students find mapping out their registration for the entire program more useful.

1.4 APPLIED PRACTICE EXPERIENCE (APEX)

The Applied Practice Experience (APEX) is a hands-on opportunity to implement your public health knowledge and skills in a real-world setting. The requirements described below are designed to meet new Council on Education for Public Health (CEPH) requirements. These new requirements apply to students entering the Community Health Promotion MPH program Fall 2018 and later. The APEX requirement replaces what was previously called the Field Experience. The APEX may focus on one of two areas (Area 1 or Area 2 described below).

The goal of the APEx is to demonstrate the application or practice of at least five public health competencies, as required by the CEPH. At least three of the competencies must be foundational. The other two competencies may be specific to the Community Health Promotion program. When selecting your APEx, think about the competencies or skills that you want to work on and what content area you want to learn more about.

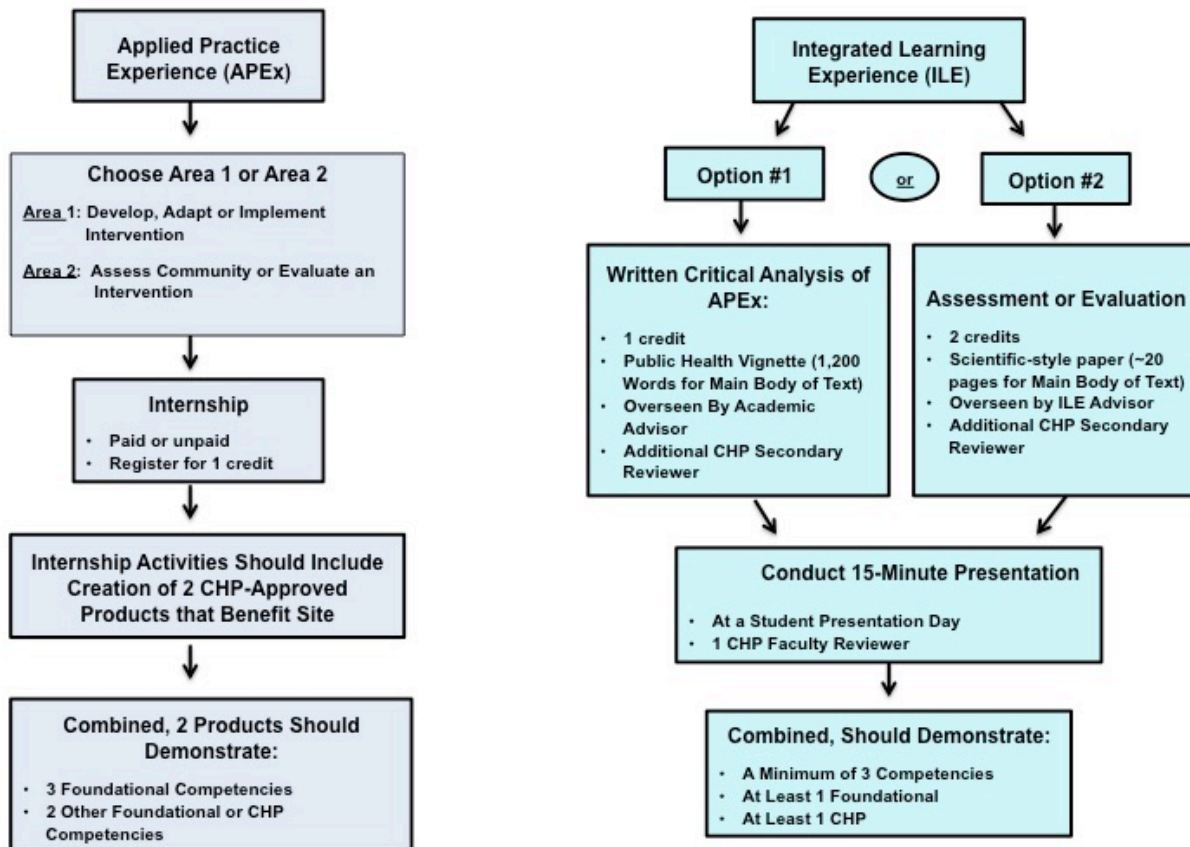
All MPH students must complete an APEx while enrolled in their degree program. **Prior work/volunteer activities or coursework that begins before the learning agreement is approved will not be accepted. Waivers are not accepted.**

- A student should work with their preceptor/supervisor and academic advisor to make sure that the APEx benefits both the practice site and student.
- Dual/Joint degree students (e.g. MPH/JD, MPH/MSW, etc.) should consult with their programs to determine if the APEx can fulfill requirements for both degree programs.
- The APEx may be completed at the student’s current workplace, if applicable, but must begin after the learning agreement is approved.
- An APEx can be paid or unpaid.

What are the requirements for the CHP APEx?

The CHP APEx should be a minimum of 120 hours. Students should register for PubH 7096 for 1 credit. The expectation is that students will complete the APEx through a single internship (either paid or unpaid), except for extraordinary situations. The APEx should typically be completed after students have completed PubH 6050/6051 and an evaluation course (PubH 6034 or PubH 6852). The APEx can be completed at governmental, non-governmental, non-profit, industrial, for-profit, and some university-affiliated settings. University-affiliated settings must be primarily focused on community engagement settings and can include University health promotion or wellness centers. Students will work with their academic advisor, the program director, and Career Services to help identify possible APEx experiences. Requirements for the APEx are described in the text below and in Figure 1.

Figure 1: APEx and ILE



The APEx must focus on one of the areas listed below (Area 1 or Area 2) and be relevant to Community Health Promotion. The student's role should be to help the organization assess the need for, define, plan, develop, implement and/or evaluate an intervention (programmatic or policy). The experience should reflect an expressed need of the organization. The student or the organization can initiate the consultation/collaboration, but the student should not work independently of the direction of the organization.

Three of the five competencies (the minimum number to fulfill this requirement) must be from the list of MPH Foundational Competencies listed under Area 1 or Area 2, as described below. The other two competencies can be from either the MPH Foundational Competencies list or the CHP competency list. Students must complete a minimum of two products that demonstrate that they have met all five competencies. For example, the first product may demonstrate that the student met the first two competencies and the second product may demonstrate that the student met the other three selected competencies. A range of products may be produced. The products should be beneficial to the APEx site. The approved CHP products are described below.

Area 1: Develop, Adapt, or Implement Policy and Programmatic Interventions that Address Significant Public Health Issues

Area 1 MPH Foundational Competencies

- F6:** Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels
- F9:** Design a population-based policy, program, project, or intervention.
- F8:** Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.
- F13:** Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
- F14:** Advocate for political, social or economic policies and programs that will improve health in diverse populations.
- F17:** Apply negotiation and mediation skills to address organizational or community challenges
- F11:** Select methods to evaluate public health programs (*as part of a pilot of a new intervention*)
- F19:** Communicate audience-appropriate public health content, both in writing and through oral presentation
- F21:** Perform effectively on inter-professional teams (*as part of intervention development/pilot testing*)
- F22:** Apply systems thinking tools to a public health issue.

Area 1 CHP Competencies

- CHP1:** Apply theories in the development of effective public health programs and policies.
- CHP2:** Critically review the research literature to identify individual- and/or environmental-level factors that can be changed through interventions to address significant public health issues.
- CHP3:** Use assessments to identify intervention needs.
- CHP4:** Critically assess existing interventions, evaluations, and/or public health organizations.
- CHP5:** Create effect theory conceptual models to guide intervention development.
- CHP6:** Develop implementation plans for public health interventions, including timelines, budgets, and resource requirements.
- CHP7:** Develop intervention skills and materials to use during development and/or implementation of public health interventions.
- CHP 8:** Understand importance of getting ongoing feedback from and engagement with targeted community and other stakeholders during intervention development and implementation.
- CHP17:** Communicate effectively using multiple frames and formats.
- CHP19:** Develop effective grant proposals to apply for funding to support public health interventions and evaluations.

Area 2: Assess Community or Evaluate Public Health Interventions

Area 2 MPH Foundational Competencies

- F1:** Apply epidemiological methods to the breadth of settings and situations in public health practice
- F2:** Select quantitative and qualitative data collection methods appropriate for a given public health context
- F3:** Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
- F4:** Interpret results of data analysis for public health research, policy or practice.
- F6:** Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels
- F7:** Assess population needs, assets and capacities that affect communities' health.
- F11:** Select methods to evaluate public health programs
- F15:** Evaluate policies for their impact on public health and health equity
- F19:** Communicate audience-appropriate public health content, both in writing and through oral presentation
- F21:** Perform effectively on inter-professional teams (*as part of an evaluation*)
- F18:** Select communication strategies for different audiences and sectors (*as part of an evaluation*)

Area 2 CHP Competencies

- CHP9:** Explain why evaluating interventions is important for public health.
- CHP10:** Develop and critique logic models for evaluations of public health interventions.
- CHP11:** Understand formative, process, and outcome evaluation and how to answer questions for each type of evaluation.
- CHP12:** Be able to identify, critique, and develop different types of evaluation (i.e., study) designs.
- CHP13:** Conduct analyses to assess intervention needs
- CHP 14:** Understand how to conduct analyses to evaluate effects of interventions.
- CHP15:** Develop evaluation material, such as protocols and data collection tools.
- CHP16:** Understand importance of getting ongoing feedback from and engagement with stakeholders during evaluation development and implementation.
- CHP17:** Critique evaluation reports and/or scientific papers.
- CHP18:** Communicate effectively using multiple frames and formats.
- CHP19:** Develop effective grant proposals to apply for funding to support public health interventions and evaluations.

Registration and Completion

Once a potential placement is identified, the student should make contact with the organization to define a specific project or area, determine the time commitment, and establish a site preceptor. The site preceptor must have a master's level degree or higher. If the most appropriate preceptor at the site does not hold an advanced degree, students may submit a petition to waive the advanced degree requirement. Petitions will need to demonstrate that the preceptor has significant related work experience. The site preceptor will supervise the APEx. The student, site preceptor, and APEx advisor should all agree upon the competencies that will be met and the products that the student will take the lead in developing. A Preliminary Learning Agreement should then be completed (request from epichstu@umn.edu) and approved by the site preceptor and APEx advisor. Once the Preliminary Learning Agreement has been approved, students should then complete and register their Learning Agreements online through the SPH website. The grading option is S/N. The faculty member designated to serve as the MCH APEx advisor is Dr. Mark Pereira.

Preliminary Learning Agreement

A Preliminary Learning Agreement that outlines the APEx activities, products, competencies, and other details should then be completed (request from epichstu@umn.edu) and approved by the site preceptor and APEx advisor. A Competency Assessment Tool is available to help you identify which competencies you plan to address through the APEx. Discuss the results with your advisor. The faculty member designated to serve as the Epidemiology APEx advisor is Dr. Mark Pereira. In the Preliminary Learning Agreement, you will document the five competencies and products and submit the agreement to EpiCh Student Services. The Preliminary Learning Agreement will then be forwarded to the APEx advisor for approval. After you have emailed your Preliminary Learning Agreement to Dr. Pereira, he may agree with your plan by email, or want to meet with you to further discuss your proposal, including the competencies and products. Once the

Preliminary Learning Agreement has been approved by the APEX Advisor, students should then complete and register their Learning Agreements online through the SPH website. The grading option is S/N.

The Learning Agreement

The APEX learning agreement (<http://www.sph.umn.edu/current/applied-practice/students/>) directs you to complete the required Competency Assessment Tool (CAT), and start a learning agreement for your APEX. In the APEX learning agreement, you will provide the demographic data: where, when, who, etc. and identify the competencies that will be fulfilled through the experience. At the completion of your APEX experience, you will upload your APEX product(s) for your APEX adviser to review.

Step by step instructions for starting the APEX:

1. Fill out the Competency Assessment Tool (CAT). This tool is designed to help you identify which competencies you plan to address through the APEX. Discuss the results with your advisor.
2. Discuss the five competencies you will address through the APEX and the two products that will result from the experience with your preceptor prior to starting the learning agreement. Meet with your APEX advisor to review the competencies and products you agreed on with your preceptor. It is important that you and your preceptor agree on the expectations for the APEX.
3. You will document the five competencies and products in the Preliminary Learning Agreement and submit the agreement to EpiCh Student Services. The Preliminary Learning Agreement will then be forwarded to the APEX advisor for approval.
4. Once the project has been approved by the APEX advisor, initiate and submit the online Learning Agreement prior to beginning the experience.
5. Your Preceptor approves the APEX learning agreement.
6. Your APEX Advisor approves the APEX learning agreement.
7. The EpiCH Student Services staff approves the APEX learning agreement.
8. Once the agreement is signed, register for 1 credit. Your registration will be set up by the EpiCH Student Services staff and you will be notified when you are eligible to register.
 - a. Note: You are required to enroll for the Applied Practice Experience credit and submit the agreement before beginning the APEX. You may only commence the APEX after you are registered for the credit and the transcript shows registration for the APEX credit. Ideally, you will complete the APEX during the term for which you are registered, but if necessary, a portion of your APEX can be done in another term.
 - b. Note: Some facilities require a background criminal background check. If students need a background check they can contact the Student Service Center at sph-ask@umn.edu.
9. Start the applied practice experience.

Products Approved for CHP Applied Practice Experience

The expectation is that students will complete the APEX by working closely with the site preceptor. Products completed to demonstrate that a student has met the five selected APEX competencies should benefit the field site. Students should take the lead in the development of these products. The description of approved CHP APEX products are listed below. Other types of products should be approved by the program director as well as the student's APEX advisor prior to completion of the APEX contract. If a product contains sensitive information (for example, datasets or interview audio recordings with personal information or other sensitive data the organization cannot release), the student should discuss alternatives with the APEX advisor; such an alternative may include a detailed written description of the product and the process through which it was developed.

● Intervention Products

- Effect theory conceptual model. A conceptual model can be developed to guide development of an intervention. An effect theory conceptual model should indicate the relationship among risk and protective factors and the targeted behavior(s) and outcome(s). The model should be based on theory, research literature, and/or assessments.

- Logic model: A standard logic model that includes the resources/inputs, activities, and outcomes for an intervention planned or being implemented by the preceptor organization. The logic model can be used to guide *intervention planning, development, or evaluation* by the preceptor organization.
- Literature review table: A summary (in either written or table form) of representative scientific evidence on a given topic, such as published interventions similar to that which the organization is attempting to implement. A literature summary table will typically include a row for each major scientific study on a given topic and outline study characteristics (sample size, location, study design) and findings in the columns. In contrast, a written literature summary may be in full-sentence, paragraph form. Studies to include in a literature review are identified using library search tools and databases.
- Implementation plan. An implementation plan is useful for identification of time and resources needed to implement an intervention. An implementation plan can be helpful with grant writing, hiring, and program management. An implementation plan usually will include a timeline; staffing, material, and equipment needs; incentives; locations of intervention activities; recruitment strategies, etc.
- Budget. A budget for an intervention can be used to determine whether an intervention will be feasible, how many participants can be included, etc. A budget is also needed to identify and request sufficient funds to implement an intervention. A budget should include a spread sheet and a corresponding budget justification.
- Training manual. A training manual may be developed to train intervention staff (e.g., recruiters, community health workers, educators) to consistently implement intervention recruitment, activities, procedures. The training manual could include intervention objectives, intervention protocols, safety protocols, etc.
- Curriculum. A curriculum provides structure to an educational intervention and increases consistency in implementation. The curriculum includes session objectives, a description of activities that should be conducted within each session, and a description of what the trainer or educator should communicate within each session.
- Recruitment material. For an intervention to be successful, often times participants, key stakeholders, and/or community partners need to be recruited. Examples of recruitment material that may be needed include: introductory letters, brief summaries of the intervention, recruitment scripts, advertisements, etc.
- Participant materials. As part of an intervention, educational brochures or other participant materials may be developed to explain risk factors, recommendations to improve health, etc. The expectation is that these types of materials would have a professional appearance and yet be written simply for the general public using lay language.
- Poster or similar displays. Posters, bulletin boards or other informational displays may be used as part of some interventions, such as an awareness campaign. The expectation is that a display will include simple messaging and a professional layout.
- Videos. Videos may be created as part of educational or advocacy campaigns. They may be videos that provide education, provide opportunities for community members to share their stories, etc.
- Website: A website can be used as part of an intervention to educate or promote behavior change among the general public or program participants. A student may take the lead in designing a website (e.g., creating wireframes), developing the website, or creating material to populate the website.
- Policy brief. A two- to four- page document that focuses on a single policy. The document will have an Executive Summary, an Introduction (what is the public health problem), Approach (what is the policy solution), Conclusion, and Recommendations or Call to Action.
- Talking points. Two to four brief facts or points that can be used to guide media interviews, testimony, fact sheets, etc. Talking points are used as part of advocacy campaigns to stay on message. The main points should each be a very brief sentence. Supporting information can be included for each talking point.
- Testimony. Public health professionals often volunteer to testify or are requested by the legislature to testify if they work for a governmental agency. Testimony can be presented orally or in a written format. Oral testimony is often also prepared in a written format prior to it being presented. Testimony could be given in support or opposition of a specific policy proposal or it could be to educate policy makers about public health issues that have policy relevance. Testimony is usually four to five minutes long.
- Fact sheet/Infographic. Fact sheets/infographics are 1-2 page documents that may be used to educate the general public or key stakeholders (e.g., policy makers) about an issue or used as part of an advocacy campaign to move the general public or stakeholders to take a specific action. The fact sheet/infographics should include simple language, have a professional appearance and target an 8th grade reading level (or lower)._References should be included.

- Op Ed. As part of a media or advocacy campaign, the preceptor organization may ask the student to draft an op ed document that may be edited and submitted by the organization, one of the organization's members, or one of the organization's community partners. An op ed is typically 200-300 words and is usually printed in a hard copy of a newspaper opposite the page on which the editorial is printed.
- Letter to Editor. A letter to the editor is a very brief opinion piece submitted to newspapers or other publication to express readers' opinions about an issue. A student may write a model letter to the editor that the organization sends out to members throughout the state; members can then modify and submit their own letters to the editor.
- Photo Voice. A qualitative process through which people can record and represent the strengths in and concerns about their community. The goal of using this technique is to promote discussion and influence policymakers. A photo voice product may include a collection of photos collected by a student, a collection of photos that the student facilitated collection of with community members, or a protocol or training manual on how to effectively use the photo voice method.
- Policy resolution. As part of an advocacy campaign, a policy resolution may be written and then submitted to organizations to have them officially support a policy recommendation or action. A resolution is typically one to two pages, includes references, and appropriately uses Whereas and Resolved statements/clauses.
- Social media campaign. A preceptor organization may be interested in developing or continuing to implement a social media campaign to educate specific populations about a public health issue and/or to advocate for policy changes. Products relevant to a social media campaign may include a protocol or strategic plan for developing a social media campaign or specific products used as part of such a campaign (e.g., blogs, tweets, Facebook ads, a strategic plan for developing a social media campaign, etc.).

• Assessment/Evaluation Products

- Surveys/other data collection instruments. As part of an assessment or evaluation, preceptor organizations may ask students to develop a data collection instrument (e.g., survey, observation form, coding form, etc.). This data collection instrument can be developed for quantitative and/or qualitative data collection.
- Data collection protocol. As part of an assessment or evaluation, preceptor organizations may ask students to develop a data collection protocol. This tool can be developed for quantitative and/or qualitative data collection.
- Training Manual: A training manual can be developed to assist with training of field data collectors or data coders. The manual may include coding definitions, data collection protocols, confidentiality agreements, safety protocols, etc.
- In-service plan or planning materials. Students leading staff in-service trainings through their APEx may develop an in-service plan, handouts and/or PPT slides to support the in-service.
- Analysis code: As part of an assessment or evaluation, students may conduct statistical analyses. The analysis code can be submitted as an APEx product. The analysis code could be written using any major analytical software, including SAS, STATA, and R.
- Data Codebook: A codebook includes definitions of all variables in an analytical database. A codebook helps ensure that the database can be consistently accessed and used across analysts and time.
- Logic model: A standard logic model that includes the resources/inputs, activities, and outcomes for an intervention planned or being implemented by the preceptor organization. The logic model can be used to guide intervention planning, development, or *evaluation* by the preceptor organization.
- Evaluation plan: An evaluation plan may focus on an assessment to plan for an intervention or formative, process, and or outcome evaluation to evaluate an intervention (i.e., how promising is the intervention, how well is the intervention being implemented, or effects of the intervention). The evaluation plan should propose an evaluation design, data collection methods and timelines, and key measures.
- Section of an assessment or evaluation report. Preceptor organizations may conduct assessments or evaluations and then write a report summarizing the results and implications. Students may write a section(s) of a report or write the entire report.
- Site-specific report or case study. Through a review of documents and/or interviews of key stakeholders, the story of challenges faced, solutions to overcome barriers, etc. can be documented and written up for dissemination.

- **Maps.** An effective way to quickly convey geographical information is through maps. Mapping assessment information can demonstrate whether specific geographic areas are in need of intervention (programmatic or policy), need different resources, etc.
- **Fact Sheet/Infographics.** A brief document (1-2 pages) can be used to convey results of assessments or evaluation to the general public, key stakeholders, policymakers, etc. The fact sheet/infographics should include simple language, have a professional appearance and target an 8th grade reading level (or lower).

● **Additional Communication Materials Related to Interventions & Evaluations**

- **Grant proposal:** A grant proposal asking for funding for an intervention and corresponding evaluation. The proposal should be written to obtain funding for the field site or partner organization. If the student takes the lead on a major section of a grant proposal, this could also be considered an acceptable APEX product.
- **White paper:** A systematic review that provides justification for a specific policy or program or intervention approach.
- **PowerPoint Presentation:** One way for organizations to disseminate information about their interventions and evaluations is to do formal presentations at community meetings or conferences. A student may be asked to create and/or do the presentation for their preceptor organization.
- **Conference Poster:** One way for organizations to disseminate information about their interventions and evaluations is to participate in a poster session. A student may be asked to create a poster for their preceptor organization.

1.5 INTEGRATED LEARNING EXPERIENCE

All CHP MPH students must complete an integrated learning experience (ILE) that demonstrates synthesis of foundational and CHP program competencies. The requirements described below are designed to meet new Council on Education for Public Health (CEPH) requirements. These new requirements apply to students entering the Community Health Promotion MPH program Fall 2018 and later. The ILE requirement replaces what was previously called the Culminating Experience. Students in consultation with a faculty academic advisor should select experiences and competencies that are appropriate for the student's educational and professional goals. CHP students must select one of the two options described below to meet the ILE requirement.

Option #1: Written Critical Analysis of APEX

Students choosing this ILE option should register for PubH 7094 for 1 credit. Students who select this option will create a written document that is based on the Public Health Practice (PHP) Vignette that is one type of manuscript accepted by the *American Journal of Public Health* (<http://ajph.aphapublications.org/userimages/ContentEditor/1432646399120/authorinstructions.pdf>) that is written for a public health audience. The ILE must address at least three competencies that include both foundational and program-specific competencies. These competencies could include competencies focused on for the APEX as well as the following communication-related foundational and CHP competencies:

- **F19:** Communicate audience-appropriate public health content, both in writing and through oral presentation
- **CHP18:** Communicate effectively using multiple frames and formats.

The student and academic advisor should agree upon the ILE competencies prior to the student beginning the ILE.

The PHP Vignette should be a critical analysis of the APEX. The double-spaced document should have a maximum of 1,200 words and can include up to two tables and/or figures, which are not included in the word limit. An 80-word abstract should also be included (also not as part of the 1,200 word limit). The following sections should be included if relevant to the APEX: "(1) Intervention/Assessment: describe the goals and objectives of the program/assessment; (2) Place and Time: provide the geographic location and the years when the program/assessment was implemented; (3) Person: define the population subject to the

intervention/assessment [include a description of recruitment, participation rates, characteristics of participants]; (4) Purpose: explain the motivation behind the program/assessment (5) Implementation: describe how the program/assessment was implemented in practice; (6) Evaluation: provide evidence on whether the program worked or not [include a brief description of design, measures, analyses, results]; (7) Adverse Effects: describe whether the implementation of the program had adverse or other unintended consequences; (8) Sustainability: if it is desirable for the practice to continue, describe the factors that indicate why the intervention is felt to be sustainable; and (9) Public Health Significance: describe the importance of this program for public health, locally and/or more generally [include a rationale based on the research literature/theory].” Students should also include a section that briefly describes the organization that they worked with for the APEX. References should be included but are not part of the 1,200 word limit. The order of the sections can be determined by the student and the academic advisor.

If students want to meet additional competencies, students also have the option of creating a supplementary fact sheet/infographic written for a lay audience that communicates key information described in the PHP Vignette. The fact sheet/infographic should be 1-page with an additional page for references. The document should look professional. The targeted reading level for the fact sheet/infographic should be 8th grade or lower.

The academic CHP advisor (the primary reviewer) and students must identify one additional CHP faculty member (the secondary reviewer) to review and approve the final versions of the written document(s) and complete the ILE evaluation form. The expectation is that the academic advisor will complete multiple reviews of the documents, working closely with the student, before submission to the secondary reviewer for a final review.

CHP Students must also give an oral presentation that summarizes the ILE during one of the scheduled Student Presentation Days held multiple times during the academic year. See below for more details. Students may only sign up to present during a Student Presentation Day once their academic advisor has completed the ILE evaluation form and given approval to move forward with the presentation.

Option #2: Assessment or Evaluation

Students choosing this option must either use an existing data source or collect data to assess an organization, community or state or evaluate a program or policy. Students should register for PubH 7094 for 2 credits. An assessment or data analysis may focus on: (1) health outcomes, (2) behaviors that contribute to health outcomes, (3) individual-level or environmental-level risk/protective factors, (4) community/state resources or deficits, or (5) current policies or programs addressing a specific public health problem. An evaluation should focus on a program or policy being implemented by an organization, community-, state-, or national-level organization. An assessment or evaluation may use existing data sources or the student can conduct original data collection. The ILE must address at least three competencies that include both foundational and program-specific competencies. The student and ILE project advisor should agree upon these competencies prior to the student beginning the ILE.

Students selecting this option must identify a CHP faculty member willing to serve as the ILE advisor and another CHP faculty member willing to serve as a secondary reviewer. Students choosing this option need to create a written scientific report that is approximately 20 double-spaced pages that includes the following sections: Introduction, Methods, Results, and Discussion (see below for a suggested outline). If students need to meet additional competencies, they also have the option of creating a supplementary fact sheet/infographic that summarizes the results of the report and is written for a lay audience. The fact sheet/infographic should be 1-page with an additional page for references. The document should look professional. The targeted reading level for the fact sheet/infographic should be 8th grade or lower.

Both the ILE advisor and secondary reviewer must approve the final version of the paper and complete the ILE evaluation form. The expectation is that the ILE advisor will complete multiple reviews of the documents, working closely with the student, before submission to the secondary reviewer for a final review.

CHP Students must also give an oral presentation that summarizes their ILE project during one of the scheduled Student Presentation Days held multiple times during the academic year. See below for more details. Students may only sign up to present during a Student Presentation Day once their ILE advisor has completed the ILE evaluation form and given approval to move forward with the presentation.

Student Presentation Day Overview

Students must register their intent to present on one of the scheduled presentation days. Students should prepare a 15-minute, high-quality PowerPoint presentation that must be submitted to the student coordinator at least two weeks before the presentation day. Students will also have 5 minutes to answer questions following their presentation. Your PHP vignette (Option #1) or scientific report (Option #2) and PowerPoint slides must be approved by your academic advisor (if completing ILE Option #1) or ILE advisor (if completing ILE Option #2) prior to submitting them to the EpiCH Student Services staff. Students are expected to attend the entire Student Presentation Day in which they are presenting.

One designated faculty member (typically the Program Director) will assess each student's presentation and assign one of the following scores:

- Pass with Distinction
- Pass
- Fail (student is required to complete a new presentation on a different Student Presentation Day)

A high-quality presentation includes both professional-looking slides and a clear and professional delivery of the presentation. The faculty evaluator will consider the following questions for each when completing the presentation evaluation:

- a. *PowerPoint Slides*: Did the information flow well and in a logical and clear manner? Did the slide presentation use color and design well, avoid crowded or wordy slides? Were interesting pictures or graphics used? Were the slides easy for all attendees to read?
- b. *Presentation Delivery*: Does the student clearly and deeply describe the main points of the presentation? Was the information delivered effectively, with good vocal projection and inflection, eye contact, and body language? Was time used appropriately (i.e., was the presentation delivered without rushing, using the allotted time)? Did the student present a professional manner?

The evaluation rubric for the ILE Presentation is as follows:

	Pass with distinction	Pass	Fail*
Presentation delivery	<ul style="list-style-type: none"> • Presented in a highly professional manner, with a notable level of clarity and depth. • Good vocal projection and inflection throughout the entire presentation. • Good eye contact with audience, seldom referring to notes. • Presentation delivered without rushing or running over the allotted time. • Very few 'ums,' 'uhs' or other fillers. 	<ul style="list-style-type: none"> • Presented in a generally professional manner. • A majority of the points made in the presentation were clear, though there may have been minor gaps in clarity and/or depth (i.e., where more detail was needed). • Vocal projection and inflection was generally satisfactory, though may have not been consistent throughout presentation. • Some eye contact with audience, but some reliance on notes. • Presentation may have been delivered with some rushing. • A few 'ums,' 'uhs' or other fillers. 	<ul style="list-style-type: none"> • Presentation lacked the professionalism expected from an entry-level professional. • Several major points made in the presentation were not clear. Key details were lacking. • Vocal projection and inflection was poor. • Eye contact was limited with excessive reliance on notes. • Presentation was rushed and/or had to end abruptly due to time running out. • Presentation not professionally concluded. • Many 'ums,' 'uhs' or other fillers.
Presentation slides	<ul style="list-style-type: none"> • Slides were well designed and included interesting/helpful pictures or graphics. 	<ul style="list-style-type: none"> • Slides were interpretable, but some may have been crowded and/or wordy. 	<ul style="list-style-type: none"> • Slides were challenging to interpret. • Many slides were wordy (i.e., too much text).

	<ul style="list-style-type: none"> • Slides were easy for all attendees to read. 		<ul style="list-style-type: none"> • Multiple slides included tables or figures that were difficult to read.
Presentation content	<ul style="list-style-type: none"> • Content flowed very well and in a highly logical and clear manner. • Clearly conveyed the public health relevance of the topic and how the topic is based on the scientific literature. • Clearly described the APEX experience, activities completed, and /or methods used. • Provided a thorough and thoughtful analysis of the findings, including implications for future public health work or research. 	<ul style="list-style-type: none"> • Content flowed reasonably well, though there may have been limited gaps in logic and clarity. • Gave an adequate, though perhaps limited, description of the public health relevance of the topic and how the topic is based on the scientific literature. • Provided a description of the methods/activities, analysis of the findings, and/or implications that was reasonable but may have benefitted from additional detail, clarity and/or depth. 	<ul style="list-style-type: none"> • Content did not flow well and in a clear and logical progression. • Did not adequately describe (or incorrectly described) the public health relevance of the topic and how the topic is based on the scientific literature. • Provided an insufficient or unclear description of the methods/activities, analysis of the findings, and/or implications of their work.

*Fail: Student is required to complete a new presentation on a different Student Presentation Day

Integrated Learning Experience Advisor

All students must work with an advisor to guide and approve the steps in the ILE process. Students selecting Option #1 will work with their assigned academic advisor. Students selecting Option #2 will need to find a CHP faculty member willing to mentor them through the project. The ILE advisor for Option #2 could be a student's academic advisor (if the advisor agrees), but students are welcome to ask any CHP faculty member to serve in this role. Students who do not have a specific faculty member in mind by the time they are ready to start on the project should discuss potential ILE advisors with fellow students, their academic advisor, the EpiCH Student Services staff, and/or the CHP Program Director. When a faculty member agrees to serve as their ILE advisor, students should inform their academic advisor of the name of the ILE advisor and the subject or working title of their ILE.

Students can expect their advisor to:

- Be available for consulting with the student at all stages of the project.
- Review and approve all project protocols and methods.
- Provide guidance about the format and content of the written document.

Approval Process and Registration for Option #2

Students are required to submit a 1-2 page proposal describing their project's objectives, evaluation or assessment questions, and design. Plans for analyzing data from the project should also be included and stated in general terms. The proposal should reflect the agreement between student and ILE advisor on the project scope and tasks to be accomplished.

Students should register for two credits.

The proposal should be submitted to the ILE advisor for approval prior to initiating work on the project. Students must have this form completed and submitted to EpiCH Student Services staff before they can start work on their ILE. Students also need permission to register and will not be issued permission until EpiCH Student Services staff have this form. The outline should include a detailed description of the scope of the ILE. A proposed timeline should also be included in the description. Students then will be given registration information for ILE credits under PubH 7094.

Human Subjects Information for Option #2

All students at the University of Minnesota who conduct any research using human subjects or secondary data are required to submit their research proposal to the University of Minnesota Institutional Review Board

(IRB) for approval prior to conducting their study. This includes research that would be considered exempt from IRB review if submitted outside of the MPH degree program. This submission is an academic requirement of all academic programs in the Division of Epidemiology and Community Health, and the IRB is prepared to review our students' proposals, even if they return a review of exempt. There are a few situations where an IRB application is not required. If you have any doubt, contact your Program Director or ILE advisor for advice.

No contacts with data or potential or actual study participants, including recruitment, may occur until final IRB approval. Please consult with your ILE or academic advisor for information on IRB procedures.

Guidelines for Writing a Paper for ILE Option #2 Projects

Most students who choose Option #2 write a final paper for their ILE that follows the format of scientific publications. Occasionally students will work with an organization that would like a project summary in a report format. In this document, we provide guidelines for the scientific format. If you are using a report format, work with your ILE advisor and your organization to make sure you are meeting the needs for the organization and for your degree.

Scientific Paper Format Outline:

- A. Abstract: A 250- to 500- word summary of the paper.
- B. Introduction:
 - a) Define the problem, what does the current research literature suggest about this topic area? (**Note**: you do not have to do an exhaustive literature search but should include a balanced summary of the research that provides justification for your project.)
 - b) Describe the holes in the research literature that your project will address
 - c) Explain the theoretical basis for your project
 - d) End your introduction with a summary of your assessment or evaluation questions
- C. Methods: Create major subsections; common subsections are:
 1. Participants
 - a. How were potential participants identified and recruited?
 - b. Were participants randomly selected or did you use a convenience sample?
 - c. What is your final sample size?
 - d. What is the response rate (i.e., what percentage of individuals recruited to participate agreed to participate)?
 - e. What are the characteristics of your sample (e.g., % male, % different age groups, race/ethnic characteristics)?
 - f. How similar is your sample to the targeted population (i.e., if you have a sample from a local clinic – how well does your sample resemble all patients at that clinic)?
 2. Study Design: Describe your design, for example, is it:
 - a. Cross-sectional
 - b. Pre/post (with or without a comparison group)
 - c. Observational
 - d. Experimental
 3. Intervention/Program (for Evaluation and Intervention projects)
 - a. What are the goals of the intervention/program?
 - b. Who does the intervention/program target?
 - c. What approach was used (education, coalition, etc.)?
 - d. What was the intensity or dose (e.g., number of sessions, length of the session, etc.)?
 - e. Who implemented the intervention/program?
 - f. Where/when was it implemented?
 4. Data Collection
 - a. What type of data were collected (e.g., survey, archival, observational, focus group discussions)?
 - b. How were data collected?
 1. Who collected data?
 2. Protocol
 3. Reliability/validity of data collection instrument
 5. Measures
 - a. Describe your dependent, independent, and control variables, including the psychometric properties of your variables
 - b. How many of each are you using in your analyses? Can they be grouped by construct (e.g., “We used three categories of independent variables, including demographic, family, and community-level variables”)?
 - c. Describe each variable
 1. Wording
 2. Response categories (e.g., age (<30, ≥ 31))
 6. Analyses
 - a. Describe the quantitative or qualitative analyses you conducted

- b. For quantitative analyses:
 1. Did you calculate frequencies?
 2. Did you conduct bivariate analyses?
 - a) Chi-squares
 - b) Correlations
 - c) Other?
 3. Did you conduct multivariate analyses?
 - a) Linear regression
 - b) Logistic regression
 - c) Hierarchical models
 - d) Other?
 - e) What variables did you control for?
 - f) Were all variables retained in the final model, or did you create a parsimonious model? (If so, how did you create this final model?)
 4. What level of statistical significance did you select (e.g., $p = 0.05$)?
 5. What statistical package did you use for your analyses (e.g., SAS, Excel, SPSS)?
- c. For qualitative analyses:
 1. What type of analyses are you conducting?
 2. Are you identifying major themes and sub-themes? If so, how?
 3. Are you using a software program?
 4. How many coders? How was reliability determined?

C. Results:

1. Results should be stated simply and clearly. Do not provide a discussion of the results (e.g., compare with results of other studies, talk about implications, strengths and limitations, plans for future studies) in this section. You are simply describing what you found.
2. Use well-labeled and organized tables and figures where appropriate to describe your results. The reader should be able to understand a figure or table without having to read the text. Always refer to tables and figures in the text (e.g., "Table 1 describes the demographic characteristics of the sample.").
3. When you use figures and tables, point out in the text the information in the tables and figures that you particularly want the reader to notice. This is often information directly related to your research question or results that you plan to discuss in the Discussion section. You generally don't need to describe fully in the text ALL of the information presented in the table or figure.
4. When providing the results of statistical tests, be sure to mention both whether a difference is statistically significant and, if it is significant, the direction of the difference. Example: "At follow-up, students who had participated in the exercise program were significantly more likely to have lost weight at follow-up assessment than those who had not participated in the program."
5. Use headers to organize your results section and guide the reader through your presentation of results.
6. Resources that provide information about presenting results include the APA Style Manual¹ and the Chicago Guide to Writing about Numbers:

D. Discussion:

1. Start this section with a discussion of the most important finding(s).
 - a. Was this finding expected or unexpected? Why or why not?
 - b. How does this finding relate to the previous research literature?
 - c. What were other important findings and how do these findings fit expectations based on the previous research literature?
 - d. What recommendations do you have for policies or programmatic interventions based on your findings?
 - e. What were the limitations of your project?
 - f. What are your final conclusions? Why should the reader think your project is important despite its limitations?

g. Have a header for each of these subsections

E. The final paper should include a copy of the approval letter for the project from the University of Minnesota Institutional Review Board.

Copies of former students' Option #2 culminating experience papers are located near cubicle 398E on the third floor of WBOB. Students may browse through these papers but cannot take them from the student study area.

Useful Tips for Completing an Option #2 Project

A. Unless your ILE advisor advises otherwise, you should format your paper (including citations, headers, etc.) using the American Psychological Association guidelines.

B. Your paper should be approximately 20-25 double-spaced pages in length, excluding tables, figures, and references.

C. How long your project will take to complete depends on a few factors:

1. What type of project you choose (e.g., original data collection versus secondary data analysis),
2. External factors you cannot control, such as timing of access to a dataset or timing of an organization's intervention
3. Your level of motivation and discipline.

D. Some students take more than one year to complete a project while others take three or four months. In general, projects always take longer to complete than you initially expect.

E. If you have a specific end date in mind, work backwards from that date to figure out when you need to get started. Here are some things to consider in your timeline:

- Finding project
- Reading research literature to determine research questions
- Developing data collection forms (for original data collection) or obtaining clean dataset ready for analyses (for secondary data analysis)
- Applying for funding, if available
- Obtaining human subjects approval from the U of MN Institutional Review Board (usually takes 2-4 weeks from the time of submission of the application)
- Collecting data
- Creating analytical data file
- Conducting analyses
- Writing draft of paper
- Obtaining comments from project advisor/revising draft of paper (this phase is usually repeated multiple times!)

F. Break your paper into manageable parts.

G. Focus on introduction or specific subsections of Methods section rather than worrying about writing the entire paper.

H. Create a reasonable plan – e.g., write one Methods sub-section per week or per night.

I. As you work on Methods and Results, make a bulleted list of ideas for the Discussion section—you won't remember these brilliant ideas weeks later!

J. Review the chapter in the Publication Manual of the American Psychological Association on "Expressing Ideas and Reducing Bias in Language (Chapter 2 in the 2001 version).

K. Use active versus passive tense.

- L. When starting, don't worry about perfection, just get a rough draft. You and your ILE advisor will go through multiple edits. Build in these multiple edits/revisions into your timeline.
- M. **Pay attention to all of the edits recommended by your advisor.** Advisors have considerable writing experience and will be frustrated if they have to make the same edits multiple times.
- N. **Be careful to cite the literature that you are mentioning in your paper and make sure that citations provided in your Reference section are correct.**

Costs Associated with an Option #2 Integrated Learning Experience (ILE)

Students are responsible for costs associated with completing their ILE. Costs are sometimes offset in part by the organization with which the student is working. Funds may also be available from the Division of Epidemiology and Community Health by applying for the J. B. Hawley Student Research Award; see section 2.6. Students whose ILE is connected to a research project (e.g., a study may provide access to secondary data) may find the research project with which they are associated can cover the costs of their ILE. There are also resources available for statistical computing. The Division of Epidemiology and Community Health will provide their MPH, MS and PhD students working on research projects free access to the Division's research computers. This policy is addressed for those students who need computer access for faculty-sponsored research that is part of their Master's or PhD Project. Computers with SAS and STATA can be found in the Student Lounge in room 466 WBOB.

The following rules apply if students need access to the specialized analysis software available only on the EpiCH main system:

- A sponsoring faculty member should initiate access for the student and specify the time period that the access is needed.
- Access beyond the initial time period is renewable at the request of the faculty member and subject to approval by the Computer Resources committee.
- To be courteous, the student should run only one job at a time.
- The computer may not be used for other coursework.
- This access is limited to the main research computers.
- Any technical problems should be reported to the faculty sponsor, not the computer support staff or Program coordinators.

1.6 CAREER SURVEY

Students must submit the Career Survey prior to receiving their degree or certificate. Students may complete the process online at the appropriate link at <http://secure.ahc.umn.edu/PublicHealth/CareerSurvey>.

All graduates will receive a three-month and six-month e-mail message asking them to update survey information (e.g., employment). This is through secure access and EpiCH Student Services staff will not be able to input on students' behalf.

1.7 PROGRAM FACULTY LIST

PRIMARY FACULTY	Area code 612 unless indicated		
Name	Phone	E-mail	Research Expertise
Zobeida Bonilla, PhD, MPH	626-1733	zbonilla@umn.edu	Maternal Child & Health, Latino/a health, qualitative health research and program evaluation, global health (Caribbean region), health disparities.
Sonya Brady, PhD	626-4026	ssbrady@umn.edu	Health risk behavior during adolescence and young adulthood; Developmental influences on risk taking; Mechanisms linking stressful life circumstances to health risk behavior and factors promoting resiliency; Promotion of health protective behavior; Public policies affecting adolescent health.
John Finnegan, Jr., PhD	625-1179	finne001@umn.edu	Media communication and public health; community campaigns; the "Knowledge Gap" and health outcomes; digital information technology and its impact on public health
Simone French, PhD	626-8594	frenc001@umn.edu	Social and environmental influences on eating and physical activity behaviors; Community-based strategies for eating behavior change; Adolescent nutrition and physical activity
Eileen Harwood, PhD	626-1824	harwo002@umn.edu	Social Epidemiology; Health Program and Policy Evaluation Alcohol; Tobacco and Illicit Drugs
Keith Horvath, PhD	626-1799	khorvath@umn.edu	Online assessment and intervention; Mobile assessment and intervention; Secondary HIV prevention
Rhonda Jones-Webb, DrPH	626-8866	jones010@umn.edu	Alcohol studies; Alcohol policy as a prevention strategy; Minority health issues; Behavioral epidemiology
Harry Lando, PhD	624-1877	lando001@umn.edu	Global issues in tobacco reduction; Smoking cessation; Treatment of medically compromised smokers
Alan Lifson, MD, MPH	626-9697	lifso001@umn.edu	HIV/AIDS, International Health, Infectious Diseases
Jennifer Linde, PhD	624-0065	linde074@umn.edu	Obesity prevention and intervention; Weight control behaviors; Weight loss goals; Public health messages
Russell Luepker, MD, MS	624-6362	luepk001@umn.edu	Cardiovascular disease epidemiology and prevention; Health behavior; Community trials; Clinical trials
Toben F. Nelson, ScD	626-9791	tfnelson@umn.edu	Health policy; organizational change; health behavior during developmental transitions; influence of sports participation on health; social determinants of health; program evaluation; prevention of alcohol-attributable harm; physical activity promotion; obesity prevention; motor vehicle safety
Dianne Neumark-Sztainer, PhD, MPH	624-0880	neuma011@umn.edu	Adolescent health and nutrition; Obesity and eating disorder prevention; Health behavior change; Nutrition education program design and evaluation
Ruby Nguyen, PhD	626-7559	nguy0082@umn.edu	Women's Health; Reproductive and Perinatal Epidemiology.
J. Michael Oakes, PhD	624-6855	oakes007@umn.edu	Quantitative Methods; Social Epidemiology; Research Ethics

Theresa Osypuk, SD, SM	625-8279	tosypuk@umn.edu	Research examines why place influences health and health disparities, including the roles of racial residential segregation, neighborhood context, and social policies. Her research explores how seemingly “non-health related” social policies (including those directly concerned with housing or neighborhoods) may reduce racial/ethnic health disparities. She researches racial/ethnic, socioeconomic, and nativity/immigrant disparities in health, their geographic patterns, and causes.
Simon Rosser, PhD, MPH, LP	624-0358	rosser@umn.edu	HIV/STI prevention; sexual health; sex; male homosexuality; prevention for HIV+ persons; religious and sexual identity formation; Internet sex; Internet-based-Public Health surveys and interventions; virtual community health
Nancy Sherwood, PhD	625-4567	sherw005@umn.edu	Obesity prevention and treatment in children and adults
Traci Toomey, PhD, MPH	626-9070	toome001@umn.edu	Policy research; Community organizing; Prevention of alcohol and tobacco-related problems; Intentional and unintentional injury prevention
Boris Volkov, PhD	624-7176	volk0057@umn.edu	Domestic and international surveillance and evaluation
Rachel Widome, PhD, MHS	612-629-7726	widom001@umn.edu	Adolescent health; Tobacco use
ADJUNCT FACULTY			
Name	Phone	E-mail	Research Expertise
Sara Axtell, PhD	625-0252	axtel002@umn.edu	Community organizing
Donald B. Bishop, PhD	651- 201-5402	don.bishop@state.mn.us	Diabetes; obesity; asthma; physical activity; nutrition; tobacco use
Marla Eisenberg, Sc.D, MPH	626-2942	eisen012@umn.edu	Influences on adolescent sexual behaviors; health issues of gay, lesbian and bisexual youth; body image and weight control behaviors; teasing and bullying
Steven S. Foldes, PhD	952-201-0849	ssfoldes@umn.edu	Data analytics, health services research, policy research, quantitative and qualitative research, tobacco control, disease management, reporting, community-based participatory research
Pamela Jo Johnson, PhD, MPH	624-1406 or 952-992-2195	johns245@umn.edu	Epidemiologist and health survey methodologist with broad interests in health services epidemiology and population health focusing on social disparities in health and healthcare. Research emphasizes health disparities; neighborhood effects on health; access to healthcare; and complementary and alternative medicine (CAM)/integrative healthcare. The populations about which she is most passionate are mothers and infants, American Indians, and those that tend to be disenfranchised from the formal healthcare system.
Oswald, John W., Jr. PhD, MPH	612-623-5187	oswal007@umn.edu	Safety net hospital performance for cost, quality and access; applied research supporting federal health statistics and epidemiologic surveillance; population studies using vital statistics and surveys
Cheryl Robertson, PhD, MPH, RN	624-5412	rober007@umn.edu	Refugee family health; trauma, stress and coping; community-based interventions
Julie Sanem, PhD, MPH	624-1940	sanem006@umn.edu	College student health; policy; prevention of alcohol- and tobacco-related problems

1.8 GRADUATION CHECKLIST

General steps for all MPH majors

1. Student submits completed *Study Plan* **at least one semester** prior to the anticipated completion of coursework.
 2. Student submits the on-line *Application for Degree* form by the end of the first business day of the month in which they intend to graduate.
 3. Student completes all coursework and requirements by noon on the last business day of the month in which they wish to have their degree conferred.
 4. Student completes the integrated learning experience paper and receives final review from two CHP faculty members. After receiving approval from academic (Option #1) or ILE (Option #2) advisor, student should sign up for one of the Presentation days with EpiCH Student Services staff. Schedules the oral exam at least two weeks before the scheduled oral examination date.
 5. Students must receive a pass or higher complete the ILE presentation requirement.
 6. Student submits the Integrated Learning experience paper via email at epichstu@umn.edu as a Word document.
 7. Student submits the *Career Survey*.
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All Division of Epidemiology and Community Health students who fulfill, or anticipate fulfilling, the above requirements and deadlines for Fall 2018 through Summer Session 2019 are eligible to participate in the School of Public Health commencement ceremony on May 12, 2019. We encourage you to attend!

It is considered highly unethical and inappropriate to use or include in your title or professional signature any degree that you have not completed. This means you cannot use the MPH title prior to completing all your degree requirements and the conferring of your degree. The School does not recognize or confer the title "MPH Candidate".

2. DIVISION OF EPIDEMIOLOGY AND COMMUNITY HEALTH (EPICH)

2.1 WELCOME

Epidemiology and Community Health is one of four Divisions that make up the School of Public Health at the University of Minnesota. The Division of Epidemiology and Community Health is home to six majors in the School of Public Health:

- Clinical Research MS
- Community Health Promotion MPH
- Epidemiology MPH
- Epidemiology PhD
- Maternal and Child Health MPH
- Public Health Nutrition MPH

The Division Head is Dr. Dianne Neumark-Sztainer

Epidemiology and Community Health Student Services (EpiCH ESS):

Kathryn Schwartz-Eckhardt: *Director of Epidemiology and Community Health Student Services* – Primary contact for prospective students, and curriculum development in master's and PhD level programs

Christine Vu: *Admissions Coordinator* – Primary contact for prospective students in master's and PhD level programs

Shelley Cooksey, *Student Advising Manager*– Primary contact for current students in master's and PhD level programs

Marlin Farley, *Student Advising Coordinator*– Primary contact for prospective students in master's and PhD level programs

Laurie Zurbey: *Academic Support Coordinator* – course scheduling, data management, staff support

E-Mailepichstu@umn.edu

Phone612-626-8802

Fax612-624-0315

Campus MailWBOB, #300, Delivery Code 7525

US Mail.....1300 South Second Street, Suite 300, Minneapolis, MN 55454

2.2 THE WEST BANK OFFICE BUILDING (WBOB)

The offices are located in the West Bank Office Building (WBOB) at 1300 South 2nd Street in Minneapolis. Students can find directions to WBOB at <http://www1.umn.edu/twincities/maps/WBOB/>.

Forms

We have PDF versions of forms at <http://www.isph.umn.edu/epich/current-student-forms-and-policies/>. Microsoft Word documents of all the forms are also available upon request. Contact the EpiCH Student Services Staff at epichstu@umn.edu to obtain the Word documents via e-mail.

Evening and Weekend Access

Division graduate students who do not have a paid appointment in the Division can have access to the student computer lab and student mailboxes after work hours and on weekends. Students obtain access by filling out a form to have their UCard programmed for access to the third and fourth floors of WBOB. Students are given the option to sign up for building access at Orientation. After orientation, contact the EPICH Student Services staff for information at epichstu@umn.edu.

NOTE: There is approximately a one-week turnaround time to get a student's UCard programmed, so please plan accordingly.

Computer Lab

The Division computer lab in WBOB includes several PC's available for student use. The computer lab is located in the student lounge in room 466. The general policy for use of these computers is that they are for Division graduate students for work pertaining to their degree program. All of the computers have SAS and two of them have STATA. Printers are available.

Copier and Fax Access

The Division does not allow copy machines or fax machines to be used for personal use. Personal copies can be made for a cost at various locations throughout campus. Unfortunately, there is not a copier for use in WBOB.

2.3 DIVISION COMMUNICATION WITH STUDENTS

The Division communicates information to students in the following ways:

- **E-mail:** Students are expected to check their U of M email regularly. Communication between the Division and students regarding changes in programmatic requirements or announcements, as well as advisor, faculty, and student-to-student contacts is usually through e-mail. If you do not register for courses for two full academic years you will lose access to your e-mail account and will need to contact the Technology Helpline to restore your access. Alumni maintain lifetime access to their University e-mail account as long as the account is accessed on a regular basis.
- **My U Portal:** This is a form of communication and information exchange within the University. Students are expected to check their portal regularly. Access to the portal is available at <https://www.myu.umn.edu/>.
- **Weekly SPHere:** A weekly electronic publication for students. This publication contains important deadline reminders as well as updates on students and faculty research and activities.
- **Division Newsletter:** The Division administrative staff produces a more extensive monthly newsletter titled EpiCHNews. EpiCHNews is available on the Epi web site at <http://www.isph.umn.edu/epich/>.
- **University News:** The University of Minnesota student newspaper is called The Daily and is available campus-wide.

2.4 SEMINARS

The Division of Epidemiology and Community Health sponsors scientific seminars between September and June to exchange ideas and research findings pertinent to the field. Because the Division has a large faculty, staff and student body, the seminar provides a forum for exchange of information among people who may not otherwise meet or work together. All faculty and students are strongly encouraged to attend regularly.

Division faculty members and other scientific staff are asked to present at least one seminar every two years. Each year, the seminar brings in about 10 scientists from outside the Division.

Notices are posted in the Division's third floor reception area as well as sent out electronically. Most seminars are held 10:00-11:00 a.m., Fridays, in Room 364 of WBOB. Seminars by visiting scientists may be at other times. Students can check the EpiCH Web site for seminar information by going to <http://www.isph.umn.edu/epich/>

2.5 ACADEMIC CREDIT FOR INDEPENDENT OR DIRECTED COURSEWORK

Independent and directed coursework can be taken to fulfill elective credits and can take many forms depending upon the student's interests and needs. All independent/directed coursework needs the support of a Division of EpiCH faculty member who agrees to serve as an "instructor/advisor" for the independent or directed course. The expectation is that the student has something specific to propose prior to approaching a faculty member.

To fulfill the course requirements, the student and instructor should agree on the type, scope, and length of a final academic "product" whether it is a paper(s), an annotated bibliography, curriculum, training modules, media piece(s), etc. It is expected that the faculty member and student will meet regularly during the term.

It is very unusual for students to take more than four credits total of independent or directed coursework (over and above any credits earned for the Applied Practice Experience (APEX) or Integrated Learning Experience (ILE)/thesis requirement). Students are expected to fulfill the majority of their elective credits through regularly-scheduled courses.

Examples of Independent and Directed Coursework

1. Students interested in a theory, an evaluation method, or a skill not covered in depth in a specific course could arrange for an independent study course with a faculty member knowledgeable in that area and/or willing to work with the student.
2. The student wants to attend a conference, workshop, or mini-course, but there is no academic credit involved. The student must find a faculty member willing to work with the student to develop academic work over and above the actual event to fulfill some elective credits. This must be arranged ahead of time, not after the event has occurred.

Additional comments

Arranging an independent/directed course depends upon the student putting together an academically rigorous proposal and finding a faculty member to serve as an instructor. The faculty instructor does not have to be the student's academic advisor or Integrated Learning Experience (ILE) advisor. The instructor must be a member of the major associated with the course number; see below.

The student should also receive prior approval from the EPICH Student Services staff to count the independent/directed work as an elective course.

Choosing Course Numbers

Independent study, directed study, and readings courses are available within the Division of Epidemiology and Community Health. The student and instructor should agree on the course number/title that most closely matches the work being proposed. Course options are:

- PubH 7091 Independent Study: Community Health Promotion (only CHP faculty can serve as instructor)
- PubH 7391 Independent Study: Epidemiology (only Epi MPH or Epi PhD faculty can serve as instructor)
- PubH 7392 Readings in Epidemiology (only Epi MPH or Epi PhD faculty can serve as instructor)
- PubH 7691 Independent Study: Maternal and Child Health (only MCH faculty can serve as instructor)
- PubH 7991 Independent Study: Public Health Nutrition (only PHN faculty can serve as instructor)
- PubH 8392 Readings in Clinical Research (only Clinical Res. graduate faculty can serve as instructor)
- PubH 8393 Directed Study: Clinical Research (only Clinical Res. graduate faculty can serve as instructor)

NOTE: Other majors in the School of Public Health may have independent/directed coursework opportunities in their areas. Check with the Divisions of Environmental Health Sciences, Health Policy Management, and/or Biostatistics. You could also do an independent/directed course with another graduate-level program. Remember that the EPICH Student Services staff has to approve it as an elective.

Procedures

1. Student meets with the faculty member to discuss the requirements for the independent/directed course.
2. Student fills out an *Independent/Directed Study Contract* form outlining the requirements for the course and has the form signed by their academic advisor and Independent/Directed Study instructor. This information is vital to receive proper credit for this course (i.e., a grade). The instructor needs to agree to work with the student and both need to agree on the requirements. The form can be downloaded from the web at <http://www.isph.umn.edu/epich/current-student-forms-and-policies/>.

3. Student gives the completed/signed *Independent/Directed Study Contract* to the EPICH Student Services staff. Once the completed form is received you will be sent registration information.
4. At the end of the semester, the instructor assigns a final grade. The grade will then be entered on the official transcript. It is the student's responsibility to make sure that all requirements are completed so a grade can be submitted.

2.6 DIVISION RESOURCES AND POLICIES

Incomplete Grades

For MPH students, all required courses (with the exception of Applied Practice Experience (APEX), internship, or Integrated Learning Experience (ILE)/thesis credits must be completed during the term of registration. Students must complete all course requirements by the end of the registered term so that faculty can submit a grade by the appropriate due date. A grade of incomplete "I" shall be assigned at the discretion of the instructor when, due to extraordinary circumstances, the student was prevented from completing the work of the course on time. The assignment of an incomplete grade requires an electronic contract between the instructor and student specifying a deadline by which the student will complete the course requirements. In no event may the written agreement allow a period of longer than one year to complete the course requirements. If the requirements of the contract are not met by the contract deadline a final grade will be submitted based on the work submitted to date. Applied Practice Experience (APEX), internship, and Integrated Learning Experience (ILE) projects that are not completed by the end of the term of graduation will receive a grade of "K" indicating "work in progress."

PhD Students only: The symbol "I" may be assigned by an instructor to indicate "incomplete," in accordance with the provisions announced in class at the beginning of the semester and outlined on the course syllabus, when in the instructor's opinion there is a reasonable expectation that the student can successfully complete the work of the course. An "I" remains on the transcript until the instructor replaces it with a final A-F or S-N grade. Course instructors are encouraged to establish a time limit for the removal of incomplete grades.

Six Credit Minimum Exemption

The University of Minnesota has a policy that students must register for a minimum of six credits in order to hold a Graduate Assistant position. The policy states that "exemption from [this requirement] is determined on a semester by semester basis" and that "eligibility criteria are to be determined by each graduate program...these criteria will be well publicized and administered equitably among all Graduate Assistants in the program."

The Division Training Committee (DTC) approved the following policy: "Students will almost always be granted a one semester exemption so they can finish their work toward the end of their degree program, but must petition the DTC for more than one semester's exemption and this would be given under only extraordinary, extenuating circumstances. Extending coursework in order to remain a graduate assistant will not be sufficient reason." Students who wish to request an exemption should contact Kathryn Schwartz-Eckhardt. It may take several weeks for this request to be reviewed so please submit your request at least one month prior to the start of the term.

Graduate Assistants who wish to be exempt from FICA withholding must register for at least three credits per term (one credit for PhD candidates working on a dissertation).

Sitting in on a Class

Students are not permitted to attend a class for which they are not registered. This means that if you are unable to register for a class before it begins for any reason you may not attend the class.

Support for Student Travel (effective 5/2017)

1. The Division will provide up to \$600 per student in a 12 month period [a maximum of \$3,200 available for all students during the fiscal year] for travel to a scientific meeting under the following conditions:
 - The student is currently enrolled in the Epi PhD/MS/MPH, CHP MPH, MCH MPH, PubH Nutr MPH, or Clinical Research MS program and must be the presenter of the paper or poster. The student has been enrolled in their program as least one term at the time of the conference; the work was done during the time the student was in their program.

- The meeting can be local, regional, national or international but must have relevance to the student's field of study.
 - There are no other sources of support specifically allocated for such travel. For example, whenever a training grant provides funds for travel for its fellows, those fellows will not be eligible for travel support under this policy. However, students whose work was supported by a research grant with no funds specifically for student travel will be eligible for travel support under this policy. Principal Investigators are encouraged to provide support for student travel from their grants since their grants benefit as well as the students.
2. All requests for travel support must be in writing. The request should be addressed to the Chair of the Division Training Committee and given to Kathryn Schwartz-Eckhardt, who will process the request. The request should include:
- The dates, location and purpose of the meeting and describe the student's role. A link to information about the conference should also be included.
 - A copy of the abstract and letter of acceptance must be attached to the request. In addition, a letter from a member of the Division's faculty indicating that he/she is familiar with the student's work, judges it to be of good quality, and supports the student's request. The faculty letter should also provide any necessary clarifications on the student's role to ensure that the role of the student in the presentation is clear. The student must be the primary author. If the student is not also the first author, we need a reason why the student is presenting.
 - The request must be made in advance of the scientific meeting. Since the DTC only meets once per month, it is suggested that complete requests be submitted at least six weeks prior to the scientific meeting.
 - A summary of the travel expenses (cost of air fare, hotel price, registration fees, etc.).
 - Students need to include information about any other sources of funding they have applied for, even if the funds have not been awarded yet, including SPH Student Senate funds.
3. Allocations under this policy will of course be subject to the availability of funds for this purpose.

Payment for TA English Program

If a nonnative English-speaking Division student is required by their degree program to fulfill a teaching assistantship position (i.e. Epidemiology PhD students), the Division will pay one-half the cost of instruction the first time the student takes the course (the University's Office of Academic Affairs pays the other half). Students not passing the exam must pay the costs of any additional instruction.

SAS Access

Students can purchase the SAS program for a fee if it is necessary for them to complete research. Additional information on ordering the software is available at <http://it.umn.edu/sas-sas-inc>. Please note that all of the computers in the student computer lab (466 WBOB) have SAS.

J.B. Hawley Student Research Award

The Division has established the J.B. Hawley Student Research Award, a small grant mechanism to support research projects. This is a wonderful opportunity for students and post-doctoral fellows to obtain funds for their research, gain experience in grant proposal writing, and receive faculty feedback on their ideas. During the academic year, we will have two separate award categories. The standard award is open to all students and post-doctoral fellows; the doctoral award is only open to doctoral students in Epidemiology. We anticipate two rounds of requests for proposals (one per semester). The chair of the Research Awards Committee will distribute detailed e-mail solicitations for applications.

STANDARD AWARD

Who May Apply?

Students currently enrolled in degree programs in Epidemiology, Community Health Promotion, Maternal and Child Health, Clinical Research, or Public Health Nutrition or post-doctoral fellows in Epidemiology. Proposed projects do not have to be thesis or Integrated Learning Experience (ILE) projects, and may be for any research that involves the applicant (e.g., evaluation of a program for an Applied Practice Experience (APEX)). Those who have received previous funding from a Hawley Award will not be eligible for further support until they have submitted the required one-page report for their prior award (see below).

How Much?

\$3,500 maximum, including fringe benefits when applicable. PhD students may request a maximum of \$7,500 to support thesis research.

How Can It Be Used?

The award may be used to support research activities including supplies and equipment. It cannot be used for stipends or salary support for the applicant.

Please note that before making any expenditure with the award (i.e., ordering, purchasing, hiring, or contracting for services) the applicant must meet with accounting personnel in the Division to ensure that procedures are followed.

How Long?

Normally projects are funded for one year.

DOCTORAL AWARD

Who May Apply?

Students currently enrolled in the doctoral program in Epidemiology. Proposed projects do not have to be thesis projects, and may be for any research that involves the applicant. Those who have received previous funding from a Hawley award will not be eligible for further support until they have submitted the required one-page report for their prior award (see below).

How Much?

\$7,500 maximum, including fringe benefits when applicable.

How Can It Be Used?

The award may be used to support research activities including supplies and equipment. It cannot be used for stipends or salary support for the applicant.

Please note that before making any expenditure with the award (i.e., ordering, purchasing, hiring, or contracting for services) the applicant must meet with accounting personnel in the Division to ensure that procedures are followed.

How Long?

Normally projects are funded for one year.

What is the Format for the Proposal?

1. Cover Letter
Please indicate in the letter whether the project will help support an Integrated Learning Experience (ILE), master's thesis, PhD thesis, or Applied Practice Experience (APEX).
2. Face Page (1 page)
 - a. Title
 - b. Investigator information, including name, address, telephone, and e-mail address
 - c. Your degree program
 - d. Collaborating investigators (faculty, staff, students), if any

3. Research Proposal (4 pages maximum; font: 12-point Times or larger)
 - a. Background and Significance (1 page maximum):
Describe the background and justification for the study and state the research questions/hypotheses.
 - b. Research Methods (2 pages maximum):
Describe the study design and detailed methods. Be sure to include information on each of the following issues (and others, as appropriate):
 - Study population
 - Sample selection and recruitment
 - Measurements
 - Data analysis plan (required for both quantitative and qualitative research)
 - Timeline
 - Sample size (justified by formal statistical calculations or other means)
 - c. Human Subjects (no page limit):
All proposals must address protection of human subjects and have the project approved by the University of Minnesota's Institutional Review Board (IRB) prior to receiving funds. However, a project will be reviewed by the Research Awards Committee prior to receiving final IRB approval.
 - d. References (no page limit):
Citations for articles referenced in the background and significance and research methods portions of the proposal should be listed after the Human Subjects section of the proposal.

4. Detailed Budget (2 page maximum):
The proposed budget should include precise amounts requested in various categories (e.g., postage, supplies, printing, personnel, etc.). Provide a brief justification for the amount requested in each category and state why these funds are needed to conduct the proposed research. The budget should clearly itemize and justify expenditures. If the request is part of a larger project, the proportion to be supported by this award and the rationale and need for this funding mechanism, should be specified clearly.

The following items are NOT allowed: stipends or salary for the applicant, computer purchase, publication costs (e.g., page charges, reprints), and presentation costs (e.g., travel to a conference, conference fee).

5. Letter of Endorsement from Faculty Advisor (1 page):
A primary or adjunct faculty member in the Division of Epidemiology and Community Health must provide a brief letter to accompany the proposal, specifically endorsing the applicant's request. First, applicants must discuss their proposals with the faculty advisor, who must review the proposal before it is submitted. Then, the faculty advisor's letter of funding endorsement must state that the faculty member has read and provided input on the proposal. The faculty member must also indicate his/her opinion of the quality and importance of the research.

6. Appendices, if needed (no page limit)

Submission

Submit your proposal to the Chair of the Research Awards Committee, Division of Epidemiology and Community Health, Suite 300, 1300 South Second Street, Minneapolis, MN 55454-1015

Review Process

All applications will be reviewed by the Division of Epidemiology and Community Health Research Awards Committee, which includes faculty members representing the major fields. Each proposal will be evaluated according to its scientific and technical merits and public health implications. The most important criteria are (1) importance of the area, (2) quality of proposed research, (3) investigator's experience and resources to accomplish the project, and (4) relevance to public health.

If you have questions regarding preparation of a proposal, please contact the Chair of the Research Awards Committee. Information regarding the status of human subjects (IRB) applications must be provided to the Committee. Award funds will not be released until Division of Epidemiology and Community Health accounts administration has received notification of Human Subjects Committee approval.

Final Report

A one-page report to the Research Awards Committee on progress and outcome is due on the one-year anniversary date of the award.

Martinson-Luepker Student Travel Award

The Martinson-Luepker Student Travel Award will support Division of Epidemiology and Community Health students pursuing an international Applied Practice Experience (APEX) placement in fulfillment of curriculum requirements for an Applied Practice Experience (APEX) or Integrated Learning experience (ILE) project. Funds will be provided to help support the cost of air fare to the international location. Students may request up to \$1500 U.S. Students must apply for this award. As part of this application, students should fully describe their proposed Applied Practice Experience (APEX) project, including location, populations to be worked with and proposed program activities. The application form can be obtained from EPICH Student Services staff epichstu@umn.edu.

Division of Epidemiology and Community Health Student Support Policies

Doctoral Student Support Policy, for those matriculating Fall 2003 or later

1. Students can be accepted to the program with varying levels of support including no guaranteed support, guaranteed support for the initial year, or support for multiple years.
2. Support levels will be set at the level of an NIH Pre-Doctoral Fellow or, if not an NIH Fellow, not more than 50% RA/TA position. This means that those who accept a pre-doctoral fellowship may not also accept an RA or TA position in the Division. Scholarship or block grant awards are not included.
3. Students on fellowships perform their TA requirement as part of the fellowship, with terms to be negotiated with the training director.
4. Requests may be made to the DGS for levels of RA/TA support up to 75% for students who have passed their preliminary examinations and are working on their thesis. These requests are required to show that such additional work does not delay the thesis defense and graduation.
5. Physicians who are licensed to practice medicine in the United States will have an RA/TA stipend set at the doctoral level. Those who are not licensed to practice will be paid at the Masters level RA/TA position stipend.
6. There is no limit on the number of years of support; however, adequate progress toward degree completion is required for continued support.
7. Students may increase support to 75% during the Summer term.
8. This policy only applies to positions held within the Division. For example, a student with a 50% research assistantship in the Division would also be able to hold a 25% research assistantship in the Medical School.

Approved 7/1/03, revised 06/08

Doctoral students matriculating prior to Fall 2003 should see the EpiCH Student Services staff to discuss their student support policy.

Master's Student Support Policy

No one may hold a graduate assistantship of more than 50% (75% in the Summer) in the Division of Epidemiology and Community Health. Adopted 12/17/03, and applies to students matriculating Fall 2004 and after. This policy only applies to positions held within the Division. For example, a student with a 50% research assistantship in the Division would also be able to hold a 25% position in Medical School because that is not in the Division.

Policy for Graduate Assistant Pay Scale for Post-Baccalaureate Professional Students

Post-baccalaureate professional students in doctoral-level programs (e.g. dental, medical, law, veterinary students) who have completed two years of their professional studies will be paid at the rate of those who have completed a master's degree. Those who have not completed the first two years will be paid at the rate of those whose highest degree is a bachelor's degree. This policy is effective beginning Spring semester, 2004. Adopted 12/17/03.

Requesting Letters of Support - 10 Tips for Students

The following tips may help you get a positive—and productive—response when you request a letter of support from a faculty member for a fellowship, an internship, a scholarship, graduate school admission, or a professional position.

1. FIRST CONTACT: E-MAIL IS OK. Make the e-mail brief. Mention the opportunity for which you are applying, the deadline, what you are requesting, and what you are willing to send for further information (e.g., CV, bullet points, a draft letter). If there is a chance the faculty member will not remember you, mention where you have met.

2. THINK AHEAD. Many faculty members in EpiCH have 10 or more advisees, so they may not be able to respond immediately to student requests. If they receive a request with short notice, they may not be able to respond positively, so contact them well ahead of deadlines so they can schedule your request.

Deadlines: Clearly convey the deadline for the materials you are requesting. It is also fine to re-contact the faculty member a week before the deadline as a gentle reminder. Such contact should include, in addition to the reminder about the deadline, your reiteration that you are happy to provide additional information about yourself, or the opportunity and details about where and how to submit the reference (in case the original contact information was misplaced).

3. REQUEST LETTERS FROM PEOPLE WHO KNOW YOU. A letter from someone who does not know you well may not be a strong letter, as the lack of familiarity is usually reflected in the text. Many requests for references also require individuals to specifically indicate how well they know an applicant. Reviewers may not give much weight to a referral from someone who does not know the applicant well—and they may wonder why the applicant did not select someone who knows her/him well. For example, they could think that either the applicant does not know anyone well OR everyone who knows the applicant well would write a lousy letter—both imagined scenarios are bad.

Try to gauge if the person can write a “good” letter for you. A strategy is to ask this question directly: don’t ask “will you write a letter for me?” Instead, ask “will you write a supportive letter for me?” A hard life lesson is that some faculty members may be unable to strongly recommend you, and it is best to find that out—and respect it—before you agree that the person will write a letter. Most faculty members will reveal any hesitation they have and it is important to listen to it and accept it. A tentative, or a poor, letter can have a strong negative impact on an application.

4. IF YOU CONTACT SOMEONE WHO DOES NOT KNOW YOU WELL, BE PROFESSIONAL. An exception to item #3 is when you have to ask Program Directors or Division Heads for letters of support because their support is required by the applicant organization. If you don’t know such people well, and must request a favor, use his/her last, rather than first, name (i.e., Dr. Smith instead of Judy) when you make your first approach. In EpiCH, you will likely be told to use his/her first name, but your professionalism will be noted and appreciated.

5. DON’T ASSUME THAT FACULTY MEMBERS KNOW ANYTHING ABOUT THE APPLICANT ORGANIZATION. There are hundreds of fellowships, scholarships, etc. for which faculty members are asked to write letters. Faculty members have little or no connection with many organizations beyond writing letters for students. They often receive what, to them, are garbled messages, with acronyms instead of full organization names, and find them incomprehensible. Don’t rely on acronyms or assume any knowledge about the opportunity for which you are applying, even if it is at the SPH or UMN.

To inform faculty members, it is fine to e-mail them URLs and PDFs about the applicant organization, but also include a 1-page synthesis of relevant information. You are asking the faculty member to volunteer time: don’t ask him/her to also go to a website and/or open multi-page PDFs. Those materials can be optional—your one-pager should be all your letter writer needs, along with your CV and some guidance about the text of the letter.

6. DON’T ASSUME FACULTY MEMBERS KNOW YOU WELL ENOUGH TO WRITE A GREAT LETTER OR THAT THEY HAVE TIME FOR A 1-HOUR INTERVIEW TO PREPARE FOR THE LETTER. A great strategy is to offer to provide bullet points about your qualities, eligibility, and interest in the opportunity that can be used by the faculty member to frame the letter. You may even offer to write a draft letter. You are in the **best** position to draft a successful letter and it is not uncommon to provide such help for letters of reference.

- 7. MAKE SURE FACULTY MEMBERS HAVE CONTACT INFORMATION.** Clearly indicate where the letter or rating sheet should be sent! One of the most common—and frustrating—mistakes made by students is to omit this information, resulting in unnecessary contacts, delays, and poor impressions.
- 8. MAKE SURE YOU ARE ELIGIBLE FOR THE OPPORTUNITY AND THAT YOU INTEND TO APPLY BEFORE YOU ASK FOR A LETTER.** Unfortunately, it is common for faculty members to write letters, only to be told by students that they found out they were ineligible or decided not to apply after all.
- 9. MAKE SURE THE MATERIALS YOU PROVIDE DO NOT HAVE TYPOS AND GRAMMATICAL ERRORS.** The written word is influential: we often base our impressions about someone’s intellectual qualities on the quality of his/her writing. While this may not be fair, it is what academics (and others) do. You are asking for a laudatory letter of reference, so make sure that your CV, 1-pager, bullet points/draft letter, are clearly and properly written.
- 10. THANK THE FACULTY MEMBER FOR WRITING THE LETTER AND FOLLOW-UP.** It is surprisingly common for students to not thank a faculty member after an application is complete and even less common for students to let faculty members know if they received the scholarships, fellowships, internships, jobs, etc. for which they applied. Faculty members commit time to letters of reference because they want students to succeed—they are rewarded with thanks and updates.

Division of Epidemiology and Community Health Websites

EpiCH website.....	http://www.sph.umn.edu/academics/divisions/epich/
EpiCH Student Guidebook and Forms	www.isph.umn.edu/epich/current-student-forms-and-policies/
Course syllabi.....	http://www.sph.umn.edu/academics/syllabi/
EpiCH faculty information.....	http://sph.umn.edu/faculty1/ech/
EpiCH seminar	http://www.isph.umn.edu/epich/
EpiCH telephone directory	http://www.isph.umn.edu/epich/faculty-staff-directory/

2.7 DIVISION ADVISING INFORMATION

Team approach to Advising at the Master’s level

At the master’s level students are advised by a team which includes their academic advisor, staff from the EpiCH Student Services office, an APEX advisor, and the Program Director for their major. The role of the academic advisor is to advise students on things like their career goals and objectives, provide advice for securing an Applied Practice Experience (APEX), and help students with their initial Integrated Learning Experience (ILE) planning. The role of the EpiCH Student Services staff is to assist students with course planning, petitions, and to provide general procedural advice. The role of the APEX advisor is to guide the student in the learning agreement process and to help determine appropriate competencies that will be met as well as what products will be acceptable for that placement. The Program Director will meet with students as a group to discuss issues related to the entire major and is also available to assist students with any issues they might be having with the program.

Guidelines for Faculty/Student Interactions

Faculty members often develop close working relationships with students, especially advisees. Often a relationship is formed that provides benefits to both the faculty member and the student. Faculty should be cognizant of the power differential in these types of relationships and set appropriate boundaries. Although faculty members may not intend that a request of a student be an obligation, they should be aware that such requests might place a student in a difficult position. Some students are intimidated by faculty members and may not feel free to decline such requests. Since faculty/student interactions often are situations that are ambiguous, included below are examples to help you think through a variety of situations that you may encounter:

- **A faculty member asking you to drive them somewhere, including the airport, home, or main campus.** Such a request does not fall under a student's duties. A situation when this may be acceptable is when the student has the same destination.
- **A faculty member asking you to work extra hours or late hours.** Students should be expected to work the hours for which they are paid. Students may volunteer to work extra hours to gain more experience (e.g. grant writing), gain authorship on a paper or help meet a deadline – but should not be expected to work these extra hours.
- **Your advisor asking you to housesit, take care of your children or pets, or help you move.** While some students may not mind house sitting, taking care of children or pets, or helping someone move, others may only agree to do these jobs because they feel obligated or worry that saying no will somehow affect their relationships with faculty members. To avoid problematic situations, a faculty member may post a flyer requesting a sitter or mover for pay without the faculty member's name attached to the request – ensuring that respondents really want the job.

Faculty members who are uncertain about the appropriateness of requests they have for students should consult with the DTC Chair. Students should talk with their Program Director, DGS, or EpiCH Student Services staff if they have concerns about the appropriateness of requests from faculty members.

The University of Minnesota's Board of Regents policy on Nepotism and Consensual Relationships (including student and faculty relationships) can be found at <http://regents.umn.edu/sites/regents.umn.edu/files/policies/Nepotism%26Personal.pdf>.

Confidentiality

Student records—including materials related to advisees—are protected under Federal Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99; 1974) and the Student Data Privacy Act. Student information should be secure – not left in an unlocked location. If advisors have a concern about a particular student, only EPICHSASS staff, appropriate Program Director/DGS, or DTC Chair should discuss the situation and have access to records. Any confidential information shared by a student with a faculty member must remain confidential – whether the student approaches you as an advisor, instructor, Program Director, DGS, or DTC Chair. Talking about individual students in hallways and other public areas should be avoided.

If a faculty member feels he/she must consult with another faculty member about a student, consider talking about the issue without providing the name of the individual student. If the student's name must be shared, tell the student ahead of time that you intend to talk with the Program Director (or other appropriate person) about the issue in question. Some issues, such as sexual harassment, are governed by law and require faculty members to report the problem to the Division Head. In these situations, explain to the student that you are required to report the incident/problem.

Sexual Harassment Policy

In the Division of Epidemiology and Community Health we take harassment and sexual misconduct very seriously. We have all completed the sexual harassment training and therefore we want to let you know that:

- As a University employee, we are required to share information that we learn about possible sexual misconduct with the campus Title IX office that addresses these concerns. This allows a Title IX staff member to reach out to those who have experienced sexual misconduct to provide information about the personal support resources and options for investigation that they can choose to access.
- You are welcome to talk with our staff about concerns related to sexual misconduct. You can also or alternately choose to talk with a confidential resource; the University offers victim-advocacy support professionals, health services professionals and counselors that will not share information that they learn about sexual misconduct.

Guidelines for Changing Advisors

Master's Students

At the master's level, students may change academic advisors if they have serious personality or other conflicts with their assigned advisor. In that case, they should discuss their reasons and their preferences for a different advisor with the program director or the EpiCH Student Services staff. The change will be finalized at the discretion of the program director.

PhD Students

Many PhD students shift their courses of study and focus over their graduate careers, but doing so does not necessarily require a change in advisors. Faculty advisors can facilitate students' academic development, by working directly with them or by encouraging them to gain experience with other faculty members (e.g., through research or teaching assistantships or grant-writing opportunities). Sometimes students work more closely with one (or more) members of their committees than with their advisors. Faculty advisors can also suggest changes in committee membership to accommodate a change in dissertation focus.

Once PhD students have begun work on their dissertation, changing advisors should be rare, and limited to circumstances of personality conflicts, major ethical problems, or substantial shifts in areas of interest. Students wishing to change graduate advisors should consult with the Director of Graduate Studies (DGS). Likewise, faculty who are considering a change in their role as an advisor should consult with the DGS. Changes in graduate advisors should be approved by the DGS and forwarded to the EpiCH Student Services staff who will file the change with the Graduate School.

Guide to Mission, Definitions and Expectations of Advising

Mission Statement

The School of Public Health strives to provide advising that promotes collaboration among students, staff and faculty to enhance students' academic and professional development in the field of public health. The School's goal is educational and experiential excellence that prepares students for successful careers improving the health of populations.

Defining Advising

The School of Public Health is committed to creating and sustaining high quality advising in the following four areas:

1. **Administrative Advising:** advising on course planning and scheduling, policies, procedures and benchmarks/milestones of the degree program/major, SPH, and the University.
2. **Academic Advising:** general guidance on topics related to program/major including, but not limited to program focus (may include identifying appropriate course work options), Integrated Learning Experience (ILE) project selection and career planning.
3. **Applied Practice Experience (APEX) /Internship/Practicum Advising:** specific and targeted advising for Applied Practice Experience (APEX) /internship/practicum development, placement and completion.
4. **Integrated Learning Experience (ILE)/Thesis/Plan A&B/Dissertation Advising:** specific and targeted direction on the Integrated Learning Experience project or a PhD dissertation including, but not limited to development, completion and in some cases publication.

Advising Expectations for Students

SPH students are expected to...

- Regularly read and respond to University email (ideally once per day); email is the official mode of communication at the University of Minnesota
- Review program objectives and educational documents at least once per semester, (i.e. Student Guidebook, etc.), or when directed by EPICH Student and Support Services staff or Program Director/DGS; students are responsible for knowing the requirements of the degree program
- Actively contribute to a welcoming and supportive SPH climate
- Initiate meetings with advisor(s) at least once per semester; regularly communicate with faculty advisor(s) and/or EPICH Student Services staff about program progress
- Respond to inquiries from faculty or staff in a timely manner (ideally within 5 – 7 business days)
- Behave in a professional and courteous manner; fulfill educational and advising commitments, such as appointments, project deadlines, etc.

Advising Expectations for Faculty

Faculty advisors are expected to...

- Refer advisee to EPICH Student Services staff for course planning/scheduling, policy and procedural information
- Review program objectives and educational documents at least on an annual basis, (i.e. Student Guidebook, etc.), or when directed by EPICH Student Services staff or Program Director/DGS
- Actively contribute to a welcoming and supportive SPH climate
- Initiate meetings with advisee at least once per semester; regularly communicate with students on program progress
- Respond to student inquiries in a timely manner (ideally within 5 – 7 business days)
- Provide reasonable office hours and/or appointments and be generally available to student inquiries; communicate with students about extended absences or travel
- Serve as a model and example of respectful behavior
- Provide referrals to school and university resources when appropriate (e.g. Student Mental Health Services)