PURDUE UNIVERSITY

MASTER OF PUBLIC HEALTH PROGRAM
FINAL SELF STUDY

PREPARED FOR THE
COUNCIL ON EDUCATION FOR PUBLIC HEALTH
SITE VISIT: SEPTEMBER 14-15, 2023
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Introduction

1) **Describe the institutional environment, which includes the following:**

   a. year institution was established and its type (e.g., private, public, land-grant, etc.).

   Purdue University is a public land-grant research institution in West Lafayette, Indiana, and is the flagship campus for the Purdue University system. In 1869, the Indiana General Assembly passed a bill establishing Purdue University as the land-grand institution. The Board of Trustees named the school after John Purdue in honor of his generous donation of cash and land.

   b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees).

   Across Indiana, regional campuses within the Purdue University system offer distinct educational opportunities. These regional campuses include the flagship campus in West Lafayette, Purdue University Fort Wayne, Purdue University in Indianapolis, Purdue University Northwest, Purdue Polytechnic Institute, Purdue University Online, and Purdue University Global.

   There are 201 undergraduate majors and more than 160 graduate programs (85 master's programs, 78 doctoral degrees) on the West Lafayette campus alone. The Schools and Colleges at Purdue are:

   - College of Agriculture
   - College of Education
   - College of Engineering
   - Exploratory Studies
   - College of Health and Human Sciences
   - College of Liberal Arts
   - Krannert School of Management
   - College of Pharmacy
   - Purdue Polytechnic Institute
   - College of Science
   - College of Veterinary Medicine
   - Honors College
   - The Graduate School

   c. number of university faculty, staff, and students.

   As of Fall 2022, total student enrollment on the West Lafayette was 50,884. This includes 37,949 undergraduate students, 12,017 graduate students, and 918 students enrolled in professional degree programs. The University also employs over 16,000 individuals, including faculty and staff at the West Lafayette campus.

   d. brief statement of distinguishing university facts and characteristics.

   Purdue University has a rich and robust history of discovery, innovation, learning, and persistence. The West Lafayette campus was ranked #49 in the 2022 edition of the US News and World Report’s Best Colleges and National Universities and was named a Top 10 Public University in America by the Wall Street Journal/ Times Higher Education (2021). Under current University administration, tuition has been frozen at the 2012-13 rates for 12 years, supporting accessible and affordable education.
Research and partnerships are valued and encouraged at Purdue. There are currently 135 University approved research centers and institutes at Purdue, including Discovery Park and Purdue Research Park, which are designated areas of the Purdue campus set aside to foster collaborative interdisciplinary research.

Purdue has acquired the nickname “the Cradle of Astronauts” due to its esteemed School of Aeronautics and Astronautics and distinguished alumni Neil Armstrong, Gus Grissom, Roger Chaffee, Buzz Aldrin, and Eugene Cernan. Other notable alumni include Charles Alton Ellis, Golden Gate Bridge Engineer; Brian Lamb, Founder of C-SPAN; Elwood Mead, Hoover Dam Engineer; R. Games Slayter, Fiberglass Developer; Herbert C. Brown and Ei-ichi Negishi; Nobel Prize-winning chemists; Orville Redenbacher; of the American popcorn brand; and Ruth Siems, creator of Stove Top stuffing, to name a few.

e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the institutional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds.

Purdue University has been continually accredited since 1913 by the Higher Learning Commission of the North Central Association of Colleges and Schools (HLF-NCA). The most recent accreditation visit was in October of 2019.

Across the University, 67 degree programs are overseen by a specialized accreditor. A complete list of individual accrediting agencies is provided in ERF Intro1.E, Accrediting Bodies.

f. brief history and evolution of the public health program (PHP) and related organizational elements, if applicable (e.g., date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.).

The Indiana Commission for Higher Education approved the request to award a Master of Public Health (MPH) degree at Purdue University, West Lafayette campus, on October 5, 2006. The first students were admitted to the program for the 2007 fall semester. At that time, the public health program was housed in the Department of Health and Kinesiology. However, with a reorganization of units (departments) at the university and the formation of the College of Health and Human Sciences in July of 2010, the decision was made to grow the program and to seek accreditation.

With support from all nine individual unit heads in the College of Health and Human Sciences, as well as the college strategic plan, the Dean of the college committed additional fiscal, space, and administrative resources to the Public Health Graduate Program (PHGP) in 2014. The first PHGP Director was appointed on July 1, 2014, which the Department of Public Health views as the official launch date of the MPH Program as it exists today. While training of students enrolled in the initial program was completed during the 2014–2015 academic year, the inaugural class of the new program was enrolled in August of 2015.

The Department of Public Health was established in 2019 and has seen tremendous development. With this structural change, the Public Health Graduate Program evolved into the Master of Public Health Program (MPH Program). The inaugural Department Head for the Department of Public Health transitioned to a different role in July 2021. After a year of working with an interim head, a new Department Head started in July 2022.

In consultation with the university’s Graduate School, four tracks for obtaining the MPH degree are available. One is an accelerated master’s option in which students are admitted to an undergraduate program and, in their junior year, have the option to apply to the MPH Program (4+1 program). Those accepted follow a special undergraduate curriculum that allows concurrent completion of the requirements for the bachelor’s and MPH degrees in one additional year (five years total). A second option is for those who hold a bachelor’s degree and wish to further their
training in public health. Those individuals can apply to the College of Health and Human Sciences’ stand-alone, two-year MPH Program. The third track is an online learning option. In collaboration with Purdue University Online, the digital education arm of Purdue University, and Wiley Education Services, LLC, an online training opportunity became available in January 2018 for students not able to attend courses on campus. Finally, students completing a graduate degree (MA, MS, PhD) in a different area of study may add the MPH degree to their Plan of Study. The standard MPH curriculum is followed unless approved by the Graduate Academic Committee. PhD students may share up to 30 credits of coursework between their PhD and one master’s plan of study. Master’s students may share up to 9 credits with another master’s plan of study. Students may not share credits between their PhD and their MPH degree if they have already shared one or more credits between their PhD and another master’s degree. Students who wish to share credits must have those credits reviewed and approved by the Graduate Academic Committee.

It should be noted that in March 2018, Purdue University acquired Kaplan University. This endeavor resulted in Purdue Global, which is an online university that operates as a public-benefit corporation and is part of the Purdue University system. Purdue Global currently offers an online MPH degree. However, this has no impact on the online track of the MPH Program offered by the faculty of the Purdue University West Lafayette campus. There is no mixing of students, faculty or governance between the Global program and the Purdue University Online program, either currently or for the foreseeable future.

The MPH Program at Purdue University has drawn on its existing strengths to offer two concentrations: Family and Community Health and Biostatistics. Environmental Health, which was previously offered, was discontinued in 2021. In fall 2021, the Office of the Provost announced a cluster hire of 14 new faculty members across four colleges, which resulted in the addition of six new faculty to the Department of Public Health. These new faculty specialize in the areas of Public Health, Health Policy, and Health Equity. New concentrations will be developed based on the strengths of the current faculty, the needs of the public health workforce regionally and nationally, and the interests of the student body.

Other degrees currently offered within the Department of Public Health include a Bachelor of Science in Public Health, a Master of Science in Public Health (began AY 2021-2022), a Master of Health Administration (began AY 2021-2022), and a PhD in Public Health (began AY 2021-2022).
2) **Organizational charts that clearly depict the following related to the program:**

All Organizational charts can be found in ERF Intro2, Organizational Charts.

a. the program's internal organization, including the reporting lines to the dean/director.

Figure 1. MPH Organizational Structure
b. the relationship between program and other academic units within the institution. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting lines.

The MPH Program is located within the Department of Public Health, which is in the College of Health and Human Sciences. Other degree programs within the Department of Public Health include a Bachelor of Science in Public Health, Master of Science in Public Health, PhD in Public Health, and a Master of Health Administration.

Figure 2. Purdue University Colleges and Deans
c. the lines of authority from the program’s leader to the institution’s chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost).

Figure 5. Lines of Authority from MPH Program to Institution’s Chief Executive Officer

![Diagram of lines of authority]

- Board of Trustees
- University President
- Provost
- Dean, College of Health and Human Sciences
- Head, Department of Public Health
- Director, Online MPH Track
- Director, Residential MPH Track

Not Applicable.

d. for multi-partner programs (as defined in Criterion A2), organizational charts must depict all participating institutions.

Not Applicable.

3) An instructional matrix presenting all of the program’s degree programs and concentrations including bachelor’s, master’s and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.
### Instructional Matrix - Degrees and Concentrations

<table>
<thead>
<tr>
<th>Master's Degrees</th>
<th>Academic</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>MPH</td>
<td>MPH</td>
</tr>
<tr>
<td>Family and Community Health- Online Track</td>
<td>MPH</td>
<td>MPH</td>
</tr>
<tr>
<td>Family and Community Health- Residential Track</td>
<td>MPH</td>
<td>MPH</td>
</tr>
</tbody>
</table>

#### Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)

<table>
<thead>
<tr>
<th>2nd Degree Area</th>
<th>Public Health Concentration</th>
<th>Academic</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>MA/MS</td>
<td>any MPH concentration</td>
<td>MA or MS</td>
<td>MPH</td>
</tr>
<tr>
<td>PhD</td>
<td>any MPH concentration</td>
<td>PhD</td>
<td>MPH</td>
</tr>
<tr>
<td>4+1 Accelerated</td>
<td>any MPH concentration</td>
<td>BA or BS</td>
<td>MPH</td>
</tr>
</tbody>
</table>

Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.

4) Enrollment data for all of the program's degree programs, including bachelor’s, master’s and doctoral degrees, in the format of Template Intro-2.

### TEMPLATE INTRO-2

<table>
<thead>
<tr>
<th>Degree</th>
<th>Current Enrollment^</th>
</tr>
</thead>
<tbody>
<tr>
<td>Master's MPH</td>
<td>193</td>
</tr>
<tr>
<td>Residential Biostatistics</td>
<td>6</td>
</tr>
<tr>
<td>Family and Community Health- Online</td>
<td>133</td>
</tr>
<tr>
<td>Family and Community Health- Residential</td>
<td>54</td>
</tr>
</tbody>
</table>

^Data from Spring 2023. This is the most recent verified data available at time of submission.
A1. Organization and Administrative Processes

The program demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The program establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The program ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional program (e.g., participating in instructional workshops, engaging in program specific curriculum development and oversight).

1) List the program’s standing and significant ad hoc committees. For each, indicate the formula for membership (e.g., two appointed faculty members from each concentration) and list the current members.

The Department of Public Health has the following standing committees or subcommittees to address different aspects of the MPH Program:

- Primary Committee
- PUBH Executive Council
- Diversity, Equity, and Inclusion (DEI) Committee
- Graduate Academic Curriculum Committee
- MPH Residential Curriculum Committee
- MPH Online Curriculum Committee
- Professional Development Committee
- Community Advisory Board (CAB) and External Advisory Board (EAB)

Membership formula varies by committee and is reviewed annually. Except for the Professional Development Committee, each committee has a chair that is a faculty member, either tenure track or clinical, and representation from junior and senior faculty, with at least two faculty per committee. Each committee has at least one staff representative. The DEI, Graduate Academic, MPH Residential Curriculum, and MPH Online Curriculum Committees all have two student representatives, who are volunteers. The Directors of the academic teaching programs are automatically on the committee that corresponds to their program, and each committee has representation from faculty who teach Core MPH courses. A sample of meeting minutes from each committee listed can be found in ERF A1.1, Committee Meeting Minutes.

Primary Committee
The Primary Committee reviews faculty members for promotion and tenure. This Committee meets once a semester, twice an academic year.

Composition
Members are comprised of departmental faculty who have tenure. The Department Head is automatically chair of the Department’s Primary Committee. The Lead Administrative Assistant to the Head provides staff support to this Committee.

Current Membership
M. Garrison (chair)
C. Ladisch
R. Mattes
R. Hubach
S. Chang Alexander
Y. Ruiz
N. Gunaratna
A. DeMaria
L. Schwab Reese
J. Moss (staff support)

**PUBH Executive Council**
The Executive Council reviews and coordinates policies and actions for all degree programs within the Department of Public Health. They set the agenda and priorities for full faculty meetings, review award nominations, appoint committees, and are the ultimate decision-making body for the Department. When meetings are centered on the teaching programs of the Department, the agenda focuses on overarching issues that impact multiple degree programs, plans and initiatives to increase synergy and interaction across degree programs, and the efforts needed to maintain consistency across the residential and online MPH tracks.

**Composition**
Members include the Department Head, Program Directors for each degree program, chairs of the standing committees, and additional faculty as needed to ensure representation across faculty tracks, ranks, and tenure. The Council alternates between meeting as a whole committee versus a subcommittee comprised of only the Department Head and Program Directors.

**Current Membership**
M. Garrison (chair)
R. Hubach
C. Ladish
A. DeMaria
C. Mullen
K. Bailey
S. Chang Alexander
J. Jabson Tree
S. Stapleton (staff support)
J. Moss (staff support)

**DEI Committee**
The purpose of the DEI Committee is to ensure a welcoming, supportive, and inclusive environment for all students, faculty, staff, and visitors. The DEI Committee reviews policies at the Departmental, College, and University levels and makes recommendations as necessary. They also undertake initiatives to ensure students and staff have access to the support they need to be successful, for example, establishing a space within the Department where students, faculty, and staff can access free meals and snacks should they have inadequate access to food.

**Composition**
This Committee is comprised of faculty, staff, and student representation.

**Current Membership**
J. Jabson Tree (chair)
M. Garrison
K. LaRoche
N. Rodriguez
Staff TBD
M. Meyer McCarty (staff support)
Student TBD
Student TBD

**Graduate Academic Curriculum Committee**
The Graduate Academic Committee, along with the MPH Residential Curriculum Committee and MPH Online Curriculum Committee, plays a central role in degree requirements, curriculum design, student assessment policies and processes, and admissions policies and decisions.
Any proposed changes to degree requirements for any graduate program within the Department would need to be approved through the Graduate Academic Committee.

Composition
This Committee is comprised of faculty, staff, and student representation.

Current Membership
C. Ladisch (chair)
N. Gunaratna
Y. Ruiz
A. Bhadelia
J. Jabson Tree
S. McPhail (staff support)
S. Stapleton (staff support)
Student TBD
Student TBD

MPH Residential Curriculum Committee
The MPH Residential Curriculum Committee plays a central role in determining and reviewing degree requirements, curriculum design, student assessment policies and processes, and admissions policies and decisions for the Residential MPH track. Effective August 2023, the MPH Residential Curriculum Committee and the MPH Online Curriculum Committee will hold a joint meeting once a semester. This joint meeting will allow both tracks of the MPH Program to synchronize decision making efforts and allow for continuity in quality improvement that will benefit the MPH Program as a unit.

Composition
Chaired by the Residential MPH Director, and comprised of faculty members, staff, and student members. Two staff members serve on the MPH Online Curriculum Committee in addition to this Committee, which provides consistency between both delivery tracks. It should be noted that the Online MPH Program Director and the Residential MPH Program Director serve on multiple Committees together (Primary Committee and PUBH Executive Council), which helps to ensure uniformity between the two program tracks.

Current Membership
R. Hubach (chair)
R. Duncan
E. Wells
L. Schwab Reese
Staff TBD
S. McPhail (staff support)
A. Houlihan (staff support)
Student TBD
Student TBD

MPH Online Curriculum Committee
The MPH Online Curriculum Committee plays a central role in determining and reviewing degree requirements, curriculum design, student assessment policies and processes, and admissions policies and decisions for the Online MPH track. Effective August 2023, the MPH Online Curriculum Committee and the MPH Residential Curriculum Committee will hold a joint meeting once a semester. This joint meeting will allow both tracks of the MPH Program to synchronize decision making efforts and allow for continuity in quality improvement that will benefit the MPH Program as a unit.
Composition
Chaired by the Online MPH Program Director; online lecturers, students, and staff comprise the remaining members. Two staff members serve on the MPH Residential Curriculum Committee in addition to this Committee, which provides consistency between both delivery tracks. It should be noted that the Online MPH Program Director and the Residential MPH Program Director serve on multiple Committees together (Primary Committee and PUBH Executive Council), which helps to ensure uniformity between the two program tracks.

Current Membership
A. DeMaria (chair)
B. B. Hall
M. Kenzig
S. Malcolm
Staff TBD
A. Zblewski (staff support)
A. Houlihan (staff support)
Student TBD
Student TBD

Professional Development Committee
The Professional Development Committee is a new committee for Fall 2023. The goal of this committee is to create strong experiential learning opportunities within the Department’s degree programs and to develop continuing education opportunities for professionals within the field of public health.

Composition
This committee is comprised of faculty and staff and is chaired by the Student Affairs Administrator.

Current Membership
S. Stapleton (chair)
J. Adams
Y. Ruiz
N. Rodriguez
L. Schwab Reese
Staff TBD
M. Meyer McCarty
A. Zickmund

Community Advisory Board and External Advisory Board
The Department of Public Health utilizes a Community Advisory Board (CAB) and an External Advisory Board (EAB). While both boards serve to provide guidance aimed at promoting the mission and vision of the Department of Public Health, operation of degree programs, and the research and outreach activities of the Department, there are key differences between the two boards in scope and membership.

The Community Advisory Board (CAB) serves the MPH Program by providing ongoing review and advice on policies and practices and allows community partners and local public health professionals an opportunity to offer input on changing workforce needs, curriculum, procedures, and other topics as relevant. The MPH Program initially utilized a Community Advisory Board, but under prior Department leadership, the Program moved away from the CAB and utilized an EAB model. Based on faculty and community feedback, the Department is returning to the CAB model for community feedback and guidance. The Board reconvened in Summer 2023.

By comparison, the External Advisory Board (EAB) is distinguished from the Community Advisory Board by its membership, which is more national in scope. The EAB seeks to engage experts in
the field, both academic scholars and professionals, as well as key public health leaders from the region and beyond. The EAB's primary function is to provide scientific and administrative advice and guidance aimed at promoting the ethics, quality, and operation of the field of public health within an academic setting. This Board is in the process of recruiting new members and will meet again in Fall 2023.

Community Advisory Board Composition
The Community Advisory Board is comprised of local and regional public health professionals, healthcare and social service administration professionals, health policy advocates, leaders of community partner organizations, and representatives from health profession programs that a subset of students commonly matriculate into after graduation from the Department's undergraduate or MPH programs. The Department Head is chair.

Community Advisory Board Current Membership
- M. Garrison (chair)
- R. Hubach
- A. DeMaria
- Gregory Loomis, M.D - Health Officer for Tippecanoe County Health Department
- Jill Stowers, MSW, LSW- Director of Positive Link HIV Services, Indiana University Health
- Angela Abbott, EdD- Associate Director for Purdue Extension and Assistant Dean for Outreach and Engagement in the College of Health and Human Sciences
- Amy O’Shea- Director of Community Impact at United Way of Greater Lafayette
- Cara Veale, DHS, FACHE- CEO at Indiana Rural Health Association
- Allison Aultman, MPH- Program and Policy Manager at Indiana Public Health Association

External Advisory Board Composition
The External Advisory Board (EAB) is more national in scope and includes academic leaders, healthcare professionals, and corporate partners. Membership is also open to Purdue alumni with current or past public health or healthcare leadership positions.

External Advisory Board Current Membership
- Jamie Street, Sr Field Medical Director for AstraZeneca (chair)
- Pamela Aaltonen, Professor Emeritus of Nursing and national office holder in the American Public Health Association
- Scott Ryan Hutton, President & Chief Executive Officer at Biodesix, Inc.
- Dr. R. Elaine Turner, Dean & Professor, College of Agricultural and Life Sciences, University of Florida
- Dr. Mark Gregory Lewis, D.O., FACOG, Physician, OB/GYN
- Steven Braun, Ph.D. Consultant, Former Senior Vice President, Health Research and Development, Reckitt Benckiser
- Michael Budd, CEO, Indiana United Way
- Jennifer Sullivan, MD, Enterprise SVP, Strategic Operations, Atrium Health
- Robert M. Lubitz, MD, MPH, FACHE, MACP, Chief Medical Officer, 3Oe Scientific

2) Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

a. degree requirements

Degree requirements are set forth by the MPH Online and MPH Residential Curriculum Committees in conjunction with the Graduate School. Any proposed changes to degree requirements need to be approved through the Graduate Academic Committee, Executive Council, and finally the Purdue University Graduate Council.
Ongoing completion of program requirements is monitored by program staff, namely the Academic Affairs Administrator and Graduate Program Coordinator for the Residential MPH track and the Online Program Manager and Online Academic Advisor for the Online MPH track. Each student must submit a Plan of Study in order to become a Candidate for graduation. The Plans of Study are reviewed and approved by the Academic Affairs Administrator (Residential MPH) or the Online Program Coordinator (Online MPH), the Program Director for the appropriate program track, and the Graduate School. The conferral of each degree is governed by University policies as described in the University Catalog.

b. curriculum design

The Online MPH Curriculum Committee and the Residential MPH Curriculum Committee are responsible for curriculum design and development, and the Program Directors ensure that all courses are appropriately designed. These committees make recommendations to the Graduate Academic Committee on changes to the curriculum and degree requirements. The Graduate Academic Committee then moves the proposed changes to the Department’s Executive Council. All final approvals must be attained through the appropriate University means, such as new courses being approved by the Purdue University Graduate Council.

c. student assessment policies and processes

The Online MPH Curriculum Committee and the Residential MPH Curriculum Committee review, alter, and implement changes to student assessment policies and processes. Proposed changes are reviewed and approved by the Executive Council as appropriate.

d. admissions policies and/or decisions

The Online MPH Curriculum Committee and the Residential MPH Curriculum Committee set admissions policies and decisions for their own degree tracks, within the bounds of admission policies set forth by the Graduate School. Proposed changes are reviewed and approved by the Executive Council as appropriate.

e. faculty recruitment and promotion

Faculty recruitment is handled via ad hoc search committees, via open and widely advertised searches. At the end of the interview process, the search committee prepares an unranked list of acceptable candidates with lists of strengths and weaknesses, and from this, the Department Head then prepares a ranked list. Final approval for faculty appointments comes from the Dean for the College of Health and Human Sciences, as well as the University Provost.

The Primary Committee reviews faculty members for promotion and tenure. Faculty who receive a positive vote from the majority of the Primary Committee move on to the College level Area Committee for review. Those who did not receive a majority positive vote, but received the endorsement of the Department Head, also move on to the College level Area Committee. A similar process happens during the Area Committee, in which a majority positive vote can move a candidate forward to the University Committee, which is chaired by the Provost, or the Dean can elect to move a candidate forward to the University Committee. This process helps provide checks and balances as all parties seek to ensure an equitable review. The final approval for promotion and tenure comes from the Board of Trustees.

f. research and service activities

No specific committee oversees research activities for faculty. In conjunction with the Department Head, individual faculty largely determine their own research activities and have
input into their service assignments. Service assignments are discussed within the Primary Committee but are conferred by the Department Head.

3) A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty, and students in governance of the program.

**ERF A1.3. Bylaws-Policy Documents** contains the following documents:

- Bylaws of Trustees
- University Policies
- Integrity and Code of Conduct
- Purdue Faculty and Staff Handbook
- Purdue Student Conduct
- MPH Student Handbooks (Online and Residential)
- Department of Public Health Faculty Bylaws

4) Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

All faculty, both clinical and tenure track, and lecturers attend department and college level faculty meetings and contribute to the decisions made within. Faculty members also hold courtesy appointments and affiliations, serve on doctoral committees for students in other departments, review grant and Fellowship applications, and serve on College and University level search committees for open positions. Examples of PIF faculty who contribute to decision-making activities in the broader institutional setting include:

- Dr. Andrea DeMaria serves on the Faculty Senate Sustainability Committee
- Dr. Nilupa Gunaratna represents the Department on the Graduate Council, is a member of the HHS Diversity, Equity, and Inclusion Committee, and a convenor of the Campus Food Security Working Group.
- Dr. Carlos Mahaffey serves on the department Faculty Affairs Committee and is a member of the university's Black Caucus of Faculty and Staff
- Dr. Natalia Rodriguez is a member of the Purdue University Latino Faculty and Staff Association and has served as the Professional Development Chair (2021-2022)
- Dr. Yumary Ruiz serves as the Co-President of the Latino Faculty and Staff Association (LAFASA)
- Dr. Laura Schwab-Reese serves on the college level Faculty Affairs Committee and Research Advisory Council
- Dr. Ellen Wells is a member of the School of Health Sciences Primary Committee for Faculty Promotion and Tenure, and served on the Purdue University Research Integrity Office (RIO) Faculty Committee from 2021-2022

5) Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

Courses within the Residential MPH track are instructed by full-time faculty, including both tenured/tenure-track and clinical faculty. The use of part-time/term-limited lecturers for this track is rare, occurring less than once per year, and takes place in an effort to accommodate situations such as parental leave when no other faculty are able to cover a course.

Courses within the Online MPH track are instructed by a mix of full-time faculty, full-time lecturers, and part-time/term-limited lecturers. These full-time and part-time instructors regularly interact in the context of trainings, meetings, and social events.

At the Department level, full-time lecturers, whether remote or local, are included in faculty meetings, retreats, committee work, research seminars, trainings, and other departmental
activities, such as a monthly teaching practices group. Likewise at the Department level, part-time/term-limited lecturers are included in research seminars, trainings, and a monthly teaching practices group.

Meeting minutes and examples of departmental invites are included in the ERF A1.5, Faculty Interaction.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
Since the last accreditation cycle, the MPH Program has moved from an interdisciplinary program across multiple departments to being housed within the newly formed Department of Public Health. Doing so has allowed for the Department to streamline committees and infrastructure to best meet the needs of MPH students, faculty, and staff.

Weaknesses
Due to the COVID-19 pandemic and changes in academic leadership, the Community Advisory Board and External Advisory Board have not met as frequently as planned.

Remote instructional staff, including both full-time lecturers and part-time/limited term lecturers, have fewer meaningful opportunities to engage with the Department intellectually, to contribute to curriculum and process change, and to interact socially.

Plans for Improvement
The Department recently reinstated the Community Advisory Board, and likewise for the External Advisory Board, which is targeting a Fall 2023 meeting.

The Department is increasing the opportunities for remote lecturers and part-time/limited term lecturers to participate together and with faculty in the Online MPH track, via trainings, meetings, and socials. The Department is also working to develop opportunities for faculty, instructional staff, postdocs, students, and alumni to connect remotely on a regular basis in interest area groups (Women’s Health, Cancer Prevention and Treatment, Harm Reduction, etc.). These will be opportunities to discuss new and needed work in research, teaching, and outreach, with the leads of each group charged with bringing emerging ideas and suggestions back to regular faculty meetings.

A2. Multi-Partner Programs (applicable ONLY if functioning as a “collaborative unit” as defined in CEPH procedures)

Not Applicable.

A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the program, and the program engages students as members on decision-making bodies whenever appropriate.
1) Describe student participation in policy making and decision making at the program level, including identification of all student members of program committees over the last three years, and student organizations involved in program governance.

Students mainly participate in policy and decision making by serving on Department Committees, and occasionally by working with the Program to coordinate town hall events. Students regularly serve on the following committees:

- DEI Committee
- Graduate Academic Curriculum Committee
- MPH Residential Curriculum Committee
- MPH Online Curriculum Committee

Student membership on program committees for the last three years can be seen in ERF Criterion A3.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
The Department and MPH Program have implemented processes to ensure that student representation, including MPH students, are present on key committees. During each cycle of Committee assignment, the Department receives more applications from students to sit on each committee than can be added, demonstrating interest of the study body to be part of these processes.

Weaknesses
Student engagement on these committees is unpaid labor. The Department is aware that some peer institutions have begun compensating students for this work.

Plans for Improvement
The Executive Committee will work to clarify the roles and boundaries of student representatives on all Department committees.

A4. Autonomy for Schools of Public Health
Not applicable.

A5. Degree Offerings in Schools of Public Health
Not applicable.

B1. Guiding Statements
The program defines a vision that describes how the community/world will be different if the program achieves its aims.
The program defines a mission statement that identifies what the program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the program’s setting or community and priority population(s).

The program defines goals that describe strategies to accomplish the defined mission.

The program defines a statement of values that informs stakeholders about its core principles, beliefs, and priorities.

1) The program’s vision, mission, goals, and values.

The Department of Public Health and the MPH Program operate under the following guiding statements, adopted in April 2023:

**Vision:** Advancing health equity through science and innovation.

**Mission:** Purdue’s Department of Public Health is committed to improving the health of populations worldwide, through excellence and innovation in discovery, learning, and engagement.

Health is for all people, all the time, and it starts right here with the work we do every day within the Department of Public Health, including:

**Discovery**
- Developing and evaluating community-engaged and person-centered solutions to improve health and dismantle drivers of health disparities both locally and globally.
- Discovering, advancing, and mobilizing interdisciplinary knowledge to tackle the world’s most pressing public health issues.

**Learning**
- Training the next generation of innovative and ethics-driven public health and healthcare leaders via student-centered teaching and hands-on mentoring from excellent, accessible faculty and staff.
- Expanding the public health pipeline so that our future workforce and colleagues better represent the communities and populations we strive for.
- Offering timely, effective, and engaging professional development activities to upskill our alumni and the broader public health workforce.

**Engagement**
- Intentionally, accountably, and sustainably pursuing partnerships at the local, national, and global level.
- Expanding the capacity of communities to sustainably improve health outcomes that matter to them.

**Values:** Professional integrity; respect for diversity; multidisciplinary and collaborative training, research, and practice; and excellence in research, learning, and service

**Goals:** These goals guide the MPH program toward accomplishing the Department’s defined mission and vision. The goals are aligned with three areas: education/training, scholarship, and community engagement.

**Education/Training**
**Goal #1:** Cultivate a public health community of talented and diverse faculty, staff, students, and alumni.
Goal #2: Deliver an innovative and timely high-quality public health curriculum rooted in experiential learning and focused on reducing health disparities and improving health equity.

Goal #3: Foster an inclusive departmental environment where all are able to freely and respectfully express ideas, opinions, and beliefs.

Scholarship
Goal #4: Produce scholarship that promotes health equity, informs public health programs and policies, and is accessible to scholars, practitioners, and community members.

Community Engagement
Goal #5: Foster local and global partnerships that leverage local stakeholder expertise, create opportunities to grow the next generation of public health leaders, and strive to improve community conditions.

2) If applicable, a program-specific strategic plan or other comparable document.

The MPH Program does not have a program-specific strategic plan. The Program and Department have experienced a great deal of change over a short period of time. As the Program and Department continue to evolve, consideration will be given to the development of a program-specific strategic plan with the goal of implementing and maintaining such a plan before the next reaccreditation cycle.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
The Department of Public Health’s mission and vision was developed through collaborative processes which engaged faculty, staff, students, and other stakeholders. Each was created to be in alignment with the overall goals of Purdue University. The development and implementation of the online MPH offering furthers the Department’s goals of increasing the public health workforce to meet the needs of those in Indiana and beyond.

Weaknesses
The MPH Program does not have a program-specific strategic plan.

Plans for Improvement
Beginning in Fall 2023, the MPH Program Directors will convene a committee to develop program-specific strategic plans for both the residential and online degree offerings.
B2. Evaluation and Quality Improvement

The program defines and consistently implements an evaluation plan that fulfills the following functions:

- includes all measures listed in Appendix 1 in these Accreditation Criteria
- provides information that allows the program to determine its effectiveness in advancing its mission and goals (as defined in Criterion B1)
  - Measures must capture all aspects of the unit’s mission and goals. In most cases, this will require supplementing the measures captured in Appendix 1 with additional measures that address the unit’s unique context.
- defines a process to engage in regular, substantive review of evaluation findings, as well as strategic discussions about their implications
- allows the program to make data-driven quality improvements e.g., in curriculum, student services, advising, faculty functions, research and extramural service, and operations, as appropriate

1) Present an evaluation plan in the format of Template B2-1 that lists the following for each required element in Appendix 1:
   a. the specific data source(s) for each listed element (e.g., alumni survey, student database)
   b. a brief summary of the method of compiling or extracting information from the data source
   c. the entity or entities (generally a committee or group) responsible for reviewing and discussing each element and recommending needed improvements, when applicable
   d. the timeline for review (e.g., monthly, at each semester’s end, annually in September)

<table>
<thead>
<tr>
<th>Measures</th>
<th>Criteria or Template</th>
<th>Data source &amp; method of analysis</th>
<th>Who has review &amp; decision-making responsibility?</th>
<th>Does it measure Goal 1?</th>
<th>Does it measure Goal 2?</th>
<th>Does it measure Goal 3?</th>
<th>Does it measure Goal 4?</th>
<th>Does it measure Goal 5?</th>
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</thead>
<tbody>
<tr>
<td>Student enrollment</td>
<td>Intro-2</td>
<td>Data Source: Cognos Report- MPH Census Analysis: Data and Accreditation Specialist analyzes Report and tracks this metric at three various points throughout the Academic Year (Fall Census, Spring)</td>
<td>Reviewed each term by the Online MPH Curriculum Committee, Residential MPH Curriculum Committee. Executive Council has final review and decision-making responsibility.</td>
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<td>Number of faculty with professional experience in settings outside of academia</td>
<td>B2-1</td>
<td>Data Source: Faculty CVs / Faculty Form 36's</td>
<td>Analyzed by MPH Program Directors and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees.</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
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<tr>
<td>Diversity of faculty/staff/students (e.g., racial/ethnic, rurality, gender, Veteran status, age)</td>
<td>B2-1</td>
<td>Data Source: Faculty CVs / Faculty Form 36's; Staff Files; Student Application materials</td>
<td>Analyzed: Once a year, the MPH Program Directors provide Data and Accreditation Specialist with faculty CVs and Form 36's, relevant staff files, and</td>
<td>Reviewed each term by the Online MPH Curriculum Committee, Residential MPH Curriculum Committee. Executive Council has final review and decision-making responsibility.</td>
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</tbody>
</table>
| Number of courses integrating experiential learning activities | B2-1 | **Data Source:** Course Syllabi; Course Evaluations  
**Analysis:** Data and Accreditation Specialist tracks this metric by collecting and reviewing syllabi and end-of-term course evaluations three times a year. Data collected is shared with MPH team and relevant Committees. | Reviewed each term by the Online MPH Curriculum Committee, Residential MPH Curriculum Committee. Executive Council has final review and decision-making responsibility. | x |
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<tbody>
<tr>
<td>Number of courses revised based on feedback from EAB/ CAB</td>
<td>B2-1</td>
<td><strong>Data Source:</strong> Course Syllabi; Online MPH Curriculum Committee, Residential MPH Curriculum Committee, EAB and CAB Meeting</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
<td>x</td>
</tr>
</tbody>
</table>
| Number of community partners engaged in research | B2-1 | **Data Source:** Faculty CVs / Faculty Form 36’s
**Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36’s annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x |
| Number of internal/external grants submitted by faculty and students | B2-1 | **Data Source:** Faculty CVs / Faculty Form 36’s; Staff Files  
**Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs, Form 36’s, and other files as appropriate annually, who then reviews and tracks this metric. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. |  | x |
| --- | --- | --- | --- | --- | --- |
| Number of publications by faculty and students | B2-1 | **Data Source:** Faculty CVs / Faculty Form 36’s; Staff Files  
**Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs, Form 36’s, and other files as appropriate annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. |  | x |
<table>
<thead>
<tr>
<th>Number of community-academic partnerships for research/engagement activities</th>
<th>B2-1</th>
<th><strong>Data Source:</strong> Faculty CVs / Faculty Form 36's; Staff Files</th>
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<tbody>
<tr>
<td></td>
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<td><strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs, Form 36's, and other files as appropriate annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees.</td>
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<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
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<tr>
<td>At least three specific examples of improvements undertaken in the last three years based on the evaluation plan. At least one of the changes must relate to an area other than the curriculum</td>
<td>B2-2</td>
<td></td>
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<tr>
<td>Graduation rates</td>
<td>B3-1</td>
<td><strong>Data Source:</strong> Cognos Report-Degrees Conferred Term End</td>
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<td></td>
<td></td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist analyzes Report and tracks this metric at</td>
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<td></td>
<td></td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
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</tbody>
</table>
Post-graduation outcomes (e.g., employment, enrollment in further education) | B4-1 | **Data Source:** Exit Survey, Alumni Survey, web-search  
**Analysis:** Data and Accreditation Specialist conducts an Exit Survey to collect this information at three various points throughout the Academic Year (Fall Census, Spring Census, Summer Census). Data for students who do not complete and Exit Survey is found via web search. Alumni surveys are conducted every three to five years by the Data and Accreditation Specialist. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x
| Actionable data (quantitative and/or qualitative) from recent alumni on their self-assessed preparation for post-graduation destinations | **B5** | **Data Source:** Alumni Survey, Alumni Employer Survey **Analysis:** Data and Accreditation Specialist surveys alumni every three to five years to collect and analyze this information. Data collected is shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Budget table** | **C1-1** |  |  |  |  |  |  |  |  |  |  |
| **Student perceptions of faculty availability** | **C2** | **Data Source:** Current Student Survey, Exit Survey **Analysis:** Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year and a Current Student Survey annually in the | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| Student perceptions of class size & relationship to learning | C2 | **Data Source:** Current Student Survey, Exit Survey  
**Analysis:** Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year and a Current Student Survey annually in the Spring term. Data on this metric is collected and shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x |
| List of all faculty, which concentrations they support & their FTE allocation to the unit as a whole | C2-1, E1-1, E1-2 | | | | |
| Ratios for student academic advising (all degree levels) | C2-2 | Data Source: Staff Files Analysis: Data and Accreditation Specialist works with MPH Program Directors to collect and track advising ratios. Data on this metric is shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x |  |
| Ratios for supervision of MPH ILE | C2-2 | Data Source: Staff Files Analysis: Data and Accreditation Specialist works with MPH Program Directors to collect and track supervision ratios. Data on this metric is shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x | x | x |
| Count, FTE (if applicable), and type/categories of staff resources | C3-1 |  |  |  |  |  |  |
| Faculty participation in activities/resources designed to improve instructional effectiveness (maintain ongoing list of exemplars) | E3 | **Data Source:** Faculty CVs / Faculty Form 36's | **Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |

<p>| Peer/ internal review of syllabi/ curricula for currency of readings, topics, methods, etc. | E3 | <strong>Data Source:</strong> Online MPH Curriculum Committee, Residential MPH Curriculum Committee | <strong>Analysis:</strong> Data and Accreditation Specialist tracks this metric by reviewing Committee meeting minutes throughout the Academic Year. Data collected is shared with MPH team and other relevant Committees | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| Student satisfaction with instructional quality | E3 | Data Source: Current Student Survey, Exit Survey, End of Term Course Evaluations | Analysis: Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year and a Current Student Survey annually in the Spring term. End of Term Course Evaluations are coordinated by the Data and Accreditation Specialist for the Department. Data on this metric is collected and shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| Courses that integrate community-based projects | E3 | <strong>Data Source:</strong> Course Syllabi, Online MPH Curriculum Committee, Residential MPH Curriculum Committee | <strong>Analysis:</strong> Data and Accreditation Specialist tracks this metric by collecting and reviewing syllabi three times a year and Committee meeting minutes throughout the Academic Year. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| Faculty research/scholarly activities with connections to instruction (maintain ongoing list of exemplars) | E4 | <strong>Data Source:</strong> Faculty CVs / Faculty Form 36's | <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. | x | x | x | x | x | x |
| Number of community-based research projects | E4-1 | <strong>Data Source:</strong> Faculty CVs / Faculty Form 36’s <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36’s annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. |   |   |   |   |
| Number of articles published in peer-reviewed journals | E4-1 | <strong>Data Source:</strong> Faculty CVs / Faculty Form 36’s <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36’s annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. |   |   |   |   |</p>
<table>
<thead>
<tr>
<th>Number of grant submissions</th>
<th>E4-1</th>
<th><strong>Data Source:</strong> Faculty CVs / Faculty Form 36's <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees.</th>
<th>Executive Council, Faculty Affairs Committee, and Primary Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility.</th>
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<tbody>
<tr>
<td>Faculty extramural service activities with connections to instruction (maintain ongoing list of exemplars)</td>
<td>E5</td>
<td><strong>Data Source:</strong> Faculty CVs / Faculty Form 36's <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees.</td>
<td>Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility.</td>
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</table>
| Percent of faculty (specify primary instructional or total faculty) participating in extramural service activities | E5 | **Data Source:** Faculty CVs / Faculty Form 36's  
**Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. |
|---|---|---|---|
| Number of community-based service projects | E5 | **Data Source:** Faculty CVs / Faculty Form 36's  
**Analysis:** MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. | Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility. |
<table>
<thead>
<tr>
<th>Public/private or cross-sector partnerships for engagement and service</th>
<th>E5</th>
<th><strong>Data Source:</strong> Faculty CVs / Faculty Form 36's <strong>Analysis:</strong> MPH Program Directors provide Data and Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees.</th>
<th><strong>Executive Council and Faculty Affairs Committee are responsible for reviewing this annually. Executive Council has final review and decision-making responsibility.</strong></th>
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</thead>
<tbody>
<tr>
<td>Actionable data (quantitative and/or qualitative) from employers on graduates’ preparation for post-graduation destinations</td>
<td>F1</td>
<td><strong>Data Source:</strong> Alumni Employer Survey <strong>Analysis:</strong> Data and Accreditation Specialist surveys alumni every three to five years to collect employer information and other metrics. Employers of alumni are surveyed two to four weeks after data collection from the Alumni survey concludes. Data collected is shared with</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
</tr>
<tr>
<td>Feedback from external stakeholders on changing practice &amp; research needs that might impact unit priorities and/or curricula</td>
<td>F1</td>
<td><strong>Data Source:</strong> Alumni Survey, Alumni Employer Survey, Community Advisory Board, External Advisory Board</td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist reviews Committee meeting minutes throughout the Academic Year and surveys alumni every three to five years to collect employer information and other metrics. Employers of alumni are surveyed two to four weeks after data collection from the Alumni survey concludes. Data collected is shared with MPH team</td>
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</table>
Feedback from stakeholders on guiding statements and ongoing self-evaluation data

<table>
<thead>
<tr>
<th>F1</th>
<th><strong>Data Source:</strong> Current Student Survey, Exit Survey, Alumni Survey, Alumni Employer Survey, Department Retreats, Community Advisory Board, External Advisory Board</th>
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<tbody>
<tr>
<td></td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist gathers this feedback by conducting three Exit Surveys throughout the Academic Year, a Current Student Survey annually in the Spring term, and Alumni and Alumni Employer Surveys every three to five years. Data collected is shared with MPH team and relevant Committees.</td>
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<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
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Meeting minutes are reviewed throughout the Academic Year to gather additional feedback.

### Data Source

*Staff Files, Current Student Survey, Exit Survey*

### Analysis

*Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year, and a Current Student Survey annually in the Spring term to collect and track this metric. Data collected is shared with MPH team and relevant Committees.*

Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.

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<tr>
<th>Activity</th>
<th>F2</th>
<th>Data Source:</th>
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<tr>
<td></td>
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<td>Staff Files, Current Student Survey, Exit Survey</td>
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<td><strong>Analysis:</strong> Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year, and a Current Student Survey annually in the Spring term to collect and track this metric. Data collected is shared with MPH team and relevant Committees.</td>
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<tr>
<th>Reviewed by</th>
<th>MPH Program Directors</th>
<th>Executive Council</th>
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<p>| Decision-Making Responsibility | x | x | x | x | x | x |</p>
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<thead>
<tr>
<th>Current educational and professional development needs of self-defined communities of public health workers (individuals not currently enrolled in unit’s degree programs)</th>
<th>F3</th>
<th><strong>Data Source:</strong></th>
<th>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Alumni Survey, Alumni Employer Survey, Community Advisory Board, External Advisory Board</td>
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<td></td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist gathers this feedback by conducting Alumni and Alumni Employer Surveys every three to five years. Data collected is shared with MPH team and relevant Committees. Committee meeting minutes are reviewed throughout the Academic Year to gather additional feedback.</td>
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</tr>
<tr>
<td>Continuing education events presented for the external community, with number of non-student, non-faculty attendees per event (maintain ongoing list)</td>
<td>F3-1</td>
<td><strong>Data Source:</strong> Faculty CVs / Faculty Form 36’s</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Analysis:</strong> MPH Program Directors provide Data</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
<td></td>
</tr>
</tbody>
</table>
| | | | x | x | x | x
Accreditation Specialist with CVs and Form 36's annually, who then reviews and tracks this metric. Data collected is shared with MPH team and relevant Committees. making responsibility.

Quantitative and qualitative information that demonstrates unit's ongoing efforts to increase representation and support success of self-defined priority underserved populations—Black or African American, Hispanic/Latino, and non-traditional aged (30 years or older) students.

<table>
<thead>
<tr>
<th>G1</th>
<th>Data Source: Current Student Survey, Exit Survey, Alumni Survey, Alumni Employer Survey, Department Retreats, Community Advisory Board, External Advisory Board, Staff Files, Student Application materials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Reviewed each term by MPH Program Directors and DEI Committee. Executive Council has final review and decision-making responsibility.</td>
</tr>
</tbody>
</table>

|     | x | x | x | x | x | x |

43
Survey annually in the Spring term, and Alumni and Alumni Employer Surveys every three to five years. Data collected is shared with MPH team and relevant Committees. Meeting minutes are reviewed throughout the Academic Year to gather additional feedback. Staff files and application materials are also reviewed to track metrics.

| Student AND faculty (staff, if applicable) perceptions of unit’s climate regarding diversity & cultural competence | G1 | Data Source: Current Student Survey, Exit Survey, Department Retreat Analysis: Data and Accreditation Specialist gathers this feedback by conducting three Exit Surveys throughout the Academic Year and a Current | Reviewed each term by MPH Program Directors and DEI Committee. Executive Council has final review and decision-making responsibility. | x | x | 44 |
| Student satisfaction with academic advising | H1 | **Data Source:** Current Study Survey, Exit Survey  
**Analysis:** Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year and a Current Student Survey annually in the Spring term. Data on this metric is collected and shared with MPH team and relevant Committees. | Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility. | x | x |
<table>
<thead>
<tr>
<th>Event Description</th>
<th>H2</th>
<th><strong>Data Source:</strong></th>
<th>Review Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student satisfaction with career advising</td>
<td>H2</td>
<td>Current Student Survey, Exit Survey</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist conducts three Exit Surveys throughout the Academic Year and a Current Student Survey annually in the Spring term. Data on this metric is collected and shared with MPH team and relevant Committees.</td>
<td><strong>X</strong> <strong>X</strong></td>
</tr>
<tr>
<td>Events or services provided to assist with career readiness, job search, enrollment in additional education, etc. for students and alumni (maintain ongoing list of examplars)</td>
<td>H2</td>
<td>Staff Files, MPH Professional Development Series, Department Newsletters</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Analysis:</strong> Data and Accreditation Specialist tracks and reviews this metric. Data collected is shared with MPH team and relevant Committees.</td>
<td><strong>X</strong> <strong>X</strong> <strong>X</strong> <strong>X</strong> <strong>X</strong></td>
</tr>
<tr>
<td>Metric</td>
<td>Data Source</td>
<td>Analysis</td>
<td>Data collected and how shared</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-------------</td>
<td>----------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Number of student complaints filed (and info on disposition or progress)</td>
<td>Staff Files</td>
<td>Data and Accreditation Specialist tracks and reviews this metric. Data collected is shared with MPH team and relevant Committees.</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
</tr>
<tr>
<td>Percent of priority under-represented students (as defined in Criterion G1) accepting offers of admission^</td>
<td>Student Application materials</td>
<td>Data and Accreditation Specialist reviews and tracks this metric via University databases (i.e., Banner and Slate). Data collected is shared with MPH team and relevant Committees.</td>
<td>Reviewed each term by MPH Program Directors. Executive Council has final review and decision-making responsibility.</td>
</tr>
</tbody>
</table>

^Due to the recent Supreme Court ruling, race and ethnicity data will no longer be collected. Data presented is prior to the Summer 2023 ruling.

2) Provide evidence of implementation of the plan described in Template B2-1. Evidence may include reports or data summaries prepared for review, notes from meetings at which results were discussed, etc.

Evidence of implementation for the evaluation plan described in Template B2-1 can be found in ERF B2.2, Evidence for Evaluation Plan.
3) Provide at least three specific examples of improvements undertaken in the last three years based on the evaluation plan in the format of Template B2-2. At least one of the changes must relate to an area other than the curriculum.

**TEMPLATE B2-2**

<table>
<thead>
<tr>
<th>Measure that informed change</th>
<th>Data that indicated improvement was needed</th>
<th>Improvement undertaken</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Example 1</strong></td>
<td>Student satisfaction with instructional quality</td>
<td>Qualitative student feedback over numerous terms indicated that students enrolled in the Online MPH track, as well as Residential students participating in Online MPH courses, were unhappy with the services offered by the Learning Management System (LMS) used for the first five years of the program (“Engage”). Instructors have also indicated their dissatisfaction with the services offered by Engage.</td>
</tr>
<tr>
<td><strong>Example 2</strong></td>
<td>Student perceptions of faculty availability</td>
<td>Course Evaluations, along with the annual Current Student Survey and Exit Surveys, showed that students within the Online track were concerned with the amount of time instructors took to respond to questions and emails, and to grade submitted work.</td>
</tr>
<tr>
<td><strong>Example 3</strong></td>
<td>Events or services provided to assist with career readiness, job search, enrollment in additional education, etc. for students and alumni (maintain ongoing list of examples)</td>
<td>Current Student Surveys and Exit Surveys over numerous terms indicated that students wanted more information on what sort of careers alumni were pursuing, and wanted more information on faculty research, experience in the field, etc. The Program previously offered a Public Health Journal Club, which students indicated could be more useful.</td>
</tr>
</tbody>
</table>

Supporting documentation for these improvements can be found in ERF B2.3, Data for Improvement Needed.
4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The Department remains responsive to the needs of students, particularly regarding training needs. This has included the implementation of an LMS identified as being preferred by students and converting the Public Health Journal Club to the current Professional Development Seminar.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
### B3. Graduation Rates

The program collects and analyzes graduation rate data for each degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The program achieves graduation rates of 70% or greater for bachelor's and master's degrees and 60% or greater for doctoral degrees.

1) Graduation rate data for each degree in unit of accreditation. See Template B3-1.

**TEMPLATE B3-1**

**Students in MPH Degree, by Cohorts Entering Between 2018-19 and 2022-23**

*Maximum Time to Graduate: 5 years*

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td># Students entered</td>
<td>58</td>
<td>92</td>
<td>116</td>
<td>94</td>
<td>60</td>
</tr>
<tr>
<td># Students withdrew, dropped, etc.</td>
<td>6</td>
<td>14</td>
<td>17</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td># Students graduated</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Cumulative graduation rate</td>
<td>1.72%</td>
<td>17.24%</td>
<td>60.34%</td>
<td>74.14%</td>
<td>77.59%</td>
</tr>
</tbody>
</table>

*Maximum Time to Graduate: 5 years*
2) Data on doctoral student progression in the format of Template B3-2.

Not Applicable.

3) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion’s expectations and plans to address these factors.

The MPH Program has a five-year maximum time to graduate, and three distinct program start dates (Fall, Spring, and Summer). Cohorts are organized by Academic Year, which include Fall, Spring, and Summer terms, with each cohort including all start dates for that particular timeframe.

As of Spring 2023, the 2018-2019 cohort had a cumulative graduation rate of 77.59% with zero students still enrolled in the program. The 2019-2020 cohort has a cumulative graduation rate of 69.57%. As of Spring 2023 Census, which is a distinct University sanctioned enrollment point, six students from this cohort are still enrolled within the MPH Program. The 2020-2021 cohort currently has a cumulative graduation rate of 63.79% with 24 students still enrolled at the Spring 2023 Census. 76 students from the 2021-2022 cohort were still enrolled as of the Spring 2023 Census. These additional numbers are not reflected in Template B3-1 due to the Program’s five-year maximum time to graduate.

A student who notifies the Program that they would like to withdraw from the Program is counted as “withdrawn”. Typically, these withdrawals are attributed to personal reasons, such as medical concerns, or a change in family or job circumstances. Occasionally, a student will withdraw to pursue academic interests that are outside of the field of public health. Students who are dismissed from the Program and/or University for poor academic performance or violation of other University standards are also considered “withdrawn” for the purpose of Template B3-1.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
Academic reviews are routinely conducted by the Program for all graduate students at both the beginning and the end of the semester. This helps to account for student needs and experiences, while also monitoring academic progress.

Graduation rates for the MPH Program consistently meets CEPH criteria, and the data in the table suggests that trend will continue.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
B4. Post-Graduation Outcomes

The program collects and analyzes data on graduates’ employment or enrollment in further education post-graduation, for each degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The program achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B4-1.

<table>
<thead>
<tr>
<th>Post-Graduation Outcomes</th>
<th>2020 Number and Percentage</th>
<th>2021 Number and Percentage</th>
<th>2022 Number and Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed</td>
<td>11 (78.57%)</td>
<td>40 (86.96%)</td>
<td>64 (92.75%)</td>
</tr>
<tr>
<td>Continuing education/ training (not employed)</td>
<td>3 (21.43%)</td>
<td>4 (8.67%)</td>
<td>3 (4.35%)</td>
</tr>
<tr>
<td>Not seeking employment or not seeking additional education by choice</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Actively seeking employment or enrollment in further education</td>
<td>0</td>
<td>0</td>
<td>1 (1.45%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>1 (2.17%)</td>
<td>1 (1.45%)</td>
</tr>
<tr>
<td>Total graduates (known + unknown)</td>
<td>14</td>
<td>46</td>
<td>69</td>
</tr>
</tbody>
</table>

2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion’s expectations and plans to address these factors.

For the past three graduating cohorts, encompassing all Fall, Spring, and Summer graduations within an academic year, the MPH Program has exceeded 80% or greater employment or enrollment in further education placement rate.

Post-graduation outcomes are largely collected via the MPH Exit Survey. This survey is collected about a month prior to graduation at three different points throughout the academic year (Fall, Spring, and Summer), and inquires about the graduate’s next steps, including job placement, continuing education, or other plans. Non-Purdue emails are also collected within this survey, which allows the Program and the Department to maintain contact post-graduation. While the MPH Exit Survey is not mandated by the Program, students are strongly encouraged to respond.

If post-graduation outcomes cannot be obtained via the MPH Exit Survey, i.e., if a student chose to not respond, web searches and social media profiles (i.e., LinkedIn) are utilized to confirm employment or enrollment in further education.

There have been two students over the last three years with unknown outcomes. The Program has attempted to reach these alumni by direct email, phone, and through contact with former classmates, in addition to the other methods mentioned above. The Program will continue attempts to connect with these individuals to reduce unknown outcomes.

Full copies of the MPH Exit Surveys can be found in ERF B4.2, Data on Post-Graduation Outcomes.
3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The MPH Program Exit Survey has been a successful initiative to collect current employment data at the time of graduation. The survey is routinely updated to ensure the most up-to-date metrics are being captured based on guidance from the Department, CEPH, and ASPPH. Use of ancillary methods (e.g., LinkedIn, Google searches) to identify current employment and/or enrollment in further education has proven to be successful in the event students either do not complete the Exit Survey and/or do not indicate their post-graduation outcome.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
B5. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their preparation for the workforce (or for further education, if applicable). Data collection must elicit information on what skills are most useful and applicable in post-graduation destinations, areas in which graduates feel well prepared, and areas in which they would have benefitted from more training or preparation.

The program defines qualitative and/or quantitative methods designed to provide useful information on the issues outlined above. “Useful information” refers to information that provides the unit with a reasonable basis for making curricular and related improvements. Qualitative methods may include focus groups, key informant interviews, etc.

The program documents and regularly examines its methodology, making revisions as necessary, to ensure useful data.

1) Summarize the findings of alumni self-assessment of their preparation for post-graduation destinations.

Within the MPH Alumni Survey, alumni are asked to respond via a Likert Scale to the prompt, "The MPH coursework (including practicum and culminating experience) at Purdue provided me with the basic competencies and skills required for working in public health." The results are summarized below:

<table>
<thead>
<tr>
<th></th>
<th>Summer 2022 MPH Alumni Survey n = 23</th>
<th>Spring 2023 MPH Alumni Survey n = 79</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>8</td>
<td>39</td>
</tr>
<tr>
<td>Agree</td>
<td>11</td>
<td>36</td>
</tr>
<tr>
<td>Neutral</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Disagree</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of responses: 102
Total number of students invited to respond: 337
Response rate: 30.27%

Alumni are given the opportunity to elaborate on their answer. Selected responses are provided below:

- “The MPH provided incredible context to the lens through which I viewed healthcare in medical school.”
- “Working with community and health education are an essential part of what I do every day, so it was very helpful to go through the practicum”.
- “The curriculum of the first year provided a comprehensive review of public health principles, including a strong foundation in data analysis, epidemiology and the theories underlying the field. Throughout this curriculum, the program prepares students to understand the literature and fundamentals principles of the field.”
- “Practicum and culminating project were most useful. I also liked that most of the courses were project-based!”
- “Within my PhD program I realize the value of public health theory and intervention courses. This course training is something I value daily. The ability to apply my MPH curriculum through research is what set me up for success leaving Purdue.”
• “The program gave me the foundation—program implementation on paper is much easier than real world program planning and implementation. However, I still agree I was prepared with the tools needed to complete the task at hand.”
• “I strongly believe that my coursework, practicum, and culminating experience have prepared me with the skills and competencies I need to be successful at my job. The hands-on experiences I was afforded were invaluable to my ability to apply public health competencies to real-life situations.”
• “My MPH has been in many ways more useful than my PhD. Having the MPH, along with my practicum experience, really gives me a competitive edge.”

2) Provide full documentation of the methodology and findings from quantitative and/or qualitative data collection.

The inaugural cohort for the Public Health Graduate Program, the precursor to the current MPH Program, began their studies Fall 2015. Alumni were first surveyed in Spring 2022, five years after completion of the established Plan of Study for most students in the initial cohort. This initial MPH Alumni Survey included all MPH graduates up to the most recent graduates, who completed the program in December 2021 (N=132). This electronic survey was distributed to alumni emails via Qualtrics with additional prompting through LinkedIn. A total of 24 responses were received with a survey response rate of 18.18%.

As the initial MPH Alumni Survey resulted in an unsatisfactory survey response rate, a secondary Alumni survey was released in February 2023 (N = 206). The initial survey was revised based on feedback from the Executive Council. The original survey had 51 comprehensive questions, and the revised survey had 17 essential questions. To improve response rates, the Program offered $10 electronic incentives to all who completed the survey at 85% or higher. A total of 98 responses were received with a response rate of 47.57%.

Full documentation can be found in ERF B5.2, Data Collection Methodology.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
The Department and Program modified the MPH Alumni Survey in early 2023 to increase participation, including limiting the number of required questions and providing a small incentive.

Weaknesses
Prior to 2023, the MPH Alumni Survey had a response rate of less than 20%.

Plans for Improvement
The Department and Program will continue to utilize strategies implemented in early 2023 to increase participation in future MPH Alumni Surveys. Going forward, all alumni of the MPH Program will be surveyed every five years. This survey will include questions on broader topics, such as Departmental climate, changing needs in the field, and professional development needs for alumni. Recent alumni will be surveyed every three years. Recent alumni will be defined by all alumni who have completed the MPH Program within the last three academic years. This survey will specifically include questions on preparation for post-graduation outcomes and unaddressed needs.
C1. Fiscal Resources

The program has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

1) Describe the program’s budget processes, including all sources of funding. This description addresses the following, as applicable:

a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.

Salaries for tenured/tenure track (T/TT) faculty and clinical/professional (C/P) faculty are paid by the Department via a line-item for faculty salaries in the annual operational budget from the College. For T/TT or C/P faculty who teach in the Residential or Online MPH tracks during the academic year, 10% of their salary is credited back to the Department by the budget for the Residential or Online track, accordingly. The exception to this is if a C/P faculty member is hired solely for the Residential and/or Online track, 100% of their salary is paid by the Residential and/or Online MPH budget, accordingly.

For T/TT or C/P faculty who teach in the Online MPH track during the summer, their summer pay is funded directly via the Online MPH budget.

Faculty (whether T/TT or C/P) who have leadership roles within the Residential and/or Online MPH track negotiate some combination of course buyout, summer salary (if in an academic year rather than fiscal year position), and/or administrative supplement, which is then funded via the Residential and/or Online MPH budget, accordingly.

Salaries for continuing lecturers who teach entirely in the Online MPH track are funded directly by the revenue generated from the Online MPH program. Likewise, salaries for limited term lecturers (LTLs, often described as adjunct lecturers at other institutions) teaching in the Online MPH or Residential MPH track are paid directly by the revenue generated from the Online or Residential MPH, accordingly.

b) Briefly describe how the program requests and/or obtains additional faculty or staff (additional ≠ not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.

New faculty lines (including both T/TT and C/P) are allocated by the Provost to the colleges and from there by the Dean to the departments / schools within the College of Health and Human Sciences. Existing faculty lines (T/TT and C/P) are returned to the College upon becoming vacant. Each spring, the Department Head submits a proposal to the Dean requesting faculty lines for the coming year’s hiring cycle, specifying the need that the position(s) will fill within the Department, its degree programs, and research. The Dean notifies the Heads each summer regarding which lines have been authorized, so that search committees can be commissioned, and position descriptions crafted and advertised.

Proposals for new lecturer positions which will be entirely funded via other sources than recurring operational funds can be submitted by Heads to the Dean for review at any time. That review considers a variety of factors, including whether the Department has a sustainable source of funds for the position, such as the budget of the Online or Residential MPH track), and University policies regarding the proportion of lecturers vs faculty.
Likewise, proposals for new staff positions can be submitted by Heads to the Dean for review at any time. The Dean considers a variety of factors, including whether the position is long-term or project-based, whether existing staff members could take on the proposed work and whether the Department has a sustainable source of funds for the position, such as the budget of the Online or Residential MPH program.

c) Describe how the program funds the following:

a. operational costs (programs define “operational” in their own contexts; definition must be included in response).

Operational costs of the Residential and Online MPH tracks include elements maintained and funded at the University or College levels via state funds as well as F&A (such as IT services, facilities and maintenance, etc.), elements maintained and funded at the Department level using recurring operational funds received from the College (core faculty, lecturer, and staff positions supporting the department and its degree programs, office supplies, Teaching Assistantships for PhD students who TA in the undergrad and Residential MPH courses, etc.), and elements maintained and funded at the level of the Residential and Online MPH tracks and associated budgets (program marketing costs, accreditation costs, program share of faculty, lecturer, and staff salaries as described in Criterion C.1.a, etc.).

b. student support, including scholarships, support for student conference travel, support for student activities, etc.

The Department operational budget funds Graduate Program Coordinators and Academic Advisors to support students in the Residential MPH track. The Online MPH budget funds this support via the contract with Wiley. Both the Residential MPH and Online MPH fund a variety of student events and activities using their program budgets, and the Department Operational Fund allocates resources each year to the Department’s student conference travel scholarship (open to MPH students as well as PhD and undergraduate students) and also allocates funds annually to the Public Health Student Association for their activities.

The Graduate School also supports and funds a variety of opportunities for students, university-wide, which includes support groups, recreational events, professional development and networking opportunities, etc.

The Department is currently soliciting donor funding to support scholarships for MPH students, as by University policy they are not eligible to receive tuition-remitting Research Assistantship or Teaching Assistantship positions.

c. faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples.

Faculty and Lecturer development activities (including trainings, webinars, discussion groups, etc.) occur at the University, College, and Department level, and are funded accordingly.

Faculty participation in external faculty development opportunities (including conference travel) are most often funded via faculty start-up funds (which in turn are funded centrally by the College via both college level and university level funds) or via external grant funding when applicable.
Those in lecturer positions (which receive no startup funding) or in C/P faculty positions (which typically receive minimal startup funding) are able to apply to the Department for coverage of the expenses of participating in such external faculty development opportunities, as can T/T faculty who have exhausted their initial startup allocation and do not currently have relevant grant funding.

d) In general terms, describe how the program requests and/or obtains additional funds for operational costs, student support and faculty development expenses.

Each year the Dean and the Director of Financial Affairs for the College of Health and Human Sciences reviews the past year's income and expenditures with the Department Head and preview the proposed budgets for the coming year (including the operational budget and the budgets for the Residential and Online tracks) and to consider any proposed changes. There is also flexibility throughout the year to work with the Business Office in reallocating within the budget across categories.

e) Explain how tuition and fees paid by students are returned to the program. If the program receives a share rather than the full amount, explain, in general terms, how the share returned is determined. If the program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

After expenses are paid, the residual income from tuition and fees is reinvested by the University and shared between the degree program and the College, with 90% to the Department and 10% to the College to fund administrative functions and new programming.

f) Explain how indirect costs associated with grants and contracts are returned to the program and/or individual faculty members. If the program and its faculty do not receive funding through this mechanism, explain.

When faculty salary is covered in part by grants and contracts, 25% of the faculty salary saved (less any departmental cost share, if over the NIH budget cap) is returned to the faculty member and deposited into their faculty allocation account for discretionary spending.
2) A clearly formulated program budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

**TEMPLATE C1-1**

### Sources of Funds and Expenditures by Major Category, 2021 to 2022

<table>
<thead>
<tr>
<th>Source of Funds</th>
<th>FY2018</th>
<th>FY2019</th>
<th>FY2020</th>
<th>FY2021</th>
<th>FY2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition &amp; Fees</td>
<td>475,493</td>
<td>1,117,961</td>
<td>1,626,387</td>
<td>2,481,894</td>
<td></td>
</tr>
<tr>
<td>State Appropriation</td>
<td></td>
<td>9,144</td>
<td></td>
<td>9,144</td>
<td></td>
</tr>
<tr>
<td>University Funds</td>
<td>453,294</td>
<td>335,386</td>
<td>1,906,209</td>
<td>1,990,702</td>
<td>2,028,736</td>
</tr>
<tr>
<td>Grants/Contracts</td>
<td>186,792</td>
<td>659,249</td>
<td>1,277,959</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gifts</td>
<td>1,225</td>
<td>2,600</td>
<td>16,570</td>
<td>1,348</td>
<td></td>
</tr>
<tr>
<td>Other fees (Study Abroad) - Tuition</td>
<td></td>
<td></td>
<td></td>
<td>201,351</td>
<td></td>
</tr>
<tr>
<td>Other (Liability Insurance)</td>
<td></td>
<td>949</td>
<td></td>
<td>988</td>
<td></td>
</tr>
<tr>
<td>Other (non-recurring transfers)</td>
<td>18,523</td>
<td>862,077</td>
<td>391,872</td>
<td>574,601</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>453,294</td>
<td>793,581</td>
<td>4,075,639</td>
<td>4,694,872</td>
<td>6,576,021</td>
</tr>
</tbody>
</table>

### Expenditures

<table>
<thead>
<tr>
<th>Expenditures</th>
<th>FY2018</th>
<th>FY2019</th>
<th>FY2020</th>
<th>FY2021</th>
<th>FY2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty Salaries &amp; Benefits</td>
<td>358,101</td>
<td>480,353</td>
<td>2,201,687</td>
<td>2,698,477</td>
<td>3,553,986</td>
</tr>
<tr>
<td>Staff Salaries &amp; Benefits</td>
<td>110,336</td>
<td>118,953</td>
<td>231,615</td>
<td>299,164</td>
<td>513,014</td>
</tr>
<tr>
<td>Operations</td>
<td>16,340</td>
<td>87,734</td>
<td>496,443</td>
<td>1,061,923</td>
<td>1,458,582</td>
</tr>
<tr>
<td>Travel</td>
<td>5,439</td>
<td>11,787</td>
<td>41,308</td>
<td>10,892</td>
<td>193,249</td>
</tr>
<tr>
<td>Student Support</td>
<td>48,300</td>
<td>40,638</td>
<td>45,619</td>
<td>363,121</td>
<td>355,000</td>
</tr>
<tr>
<td>Other (Overhead)</td>
<td>22,867</td>
<td>109,560</td>
<td>290,731</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Sub contracts - Grants)</td>
<td></td>
<td></td>
<td>42,980</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>538,516</td>
<td>739,464</td>
<td>3,039,539</td>
<td>4,543,136</td>
<td>6,407,542</td>
</tr>
</tbody>
</table>

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The Department and the MPH Program have the full support of Purdue University and the College of Health and Human Sciences. Departmental and Program leadership work in collaboration with College and University leadership to ensure financial adequacy of fiscal resources.

**Weaknesses**
None noted.

**Plans for Improvement**
The Department is currently soliciting donor funding to support scholarships for MPH students, as by University policy they are not eligible to receive tuition-remitting Research Assistantship or Teaching Assistantship positions.
C2. Faculty Resources

The program has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

1) A table demonstrating the adequacy of the program's instructional faculty resources in the format of Template C2-1 (single- and multi-concentration formats available).

**TEMPLATE C2-1**

<table>
<thead>
<tr>
<th>CONCENTRATION</th>
<th>FIRST DEGREE LEVEL</th>
<th>SECOND DEGREE LEVEL</th>
<th>THIRD DEGREE LEVEL</th>
<th>ADDITIONAL FACULTY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PIF 1</td>
<td>PIF 2</td>
<td>FACULTY 3</td>
<td>PIF 4</td>
</tr>
<tr>
<td>Biostatistics</td>
<td>Nilupa Gunaratna</td>
<td>Laura Schwab-Reese</td>
<td>Shandey Malcolm</td>
<td>N/A</td>
</tr>
<tr>
<td>MPH</td>
<td>FTE = 1.0</td>
<td>FTE = 0.85</td>
<td>FTE = 0.75</td>
<td></td>
</tr>
<tr>
<td>Family and Community Health- Online</td>
<td>Melissa Kenzig</td>
<td>Landrus Burress</td>
<td>Afsan Bhadelia</td>
<td>N/A</td>
</tr>
<tr>
<td>MPH</td>
<td>FTE = 1.0</td>
<td>FTE = 1.0</td>
<td>FTE = 0.75</td>
<td></td>
</tr>
<tr>
<td>Family and Community Health- Residential</td>
<td>Andrea DeMaria</td>
<td>Natalia Rodriguez</td>
<td>Yumary Ruiz</td>
<td>N/A</td>
</tr>
<tr>
<td>MPH</td>
<td>FTE = 1.0</td>
<td>FTE = 0.85</td>
<td>FTE = 0.75</td>
<td></td>
</tr>
</tbody>
</table>

**TOTALS:**

<table>
<thead>
<tr>
<th>Named PIF</th>
<th>Total PIF</th>
<th>Non-PIF</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>13</td>
<td>10</td>
</tr>
</tbody>
</table>
2) Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method’s implementation. Programs must present calculation methods for primary instructional and non-primary instructional faculty.

Effort in the MPH program is calculated for primary and non-primary instructional faculty based on teaching, service, and research expectations.
For faculty with an appointment 100% within the Department of Public Health, the calculation is computed by adding:
- 0.5 for Public Health Research/Service
- 0.15 Teaching a graduate course which regularly has MPH Students
- 0.10 per department committee (up to two)
- 0.15 committee chair or program director
- 0.10 mentorship/advising/other

For faculty with an appointment in the Department of Public Health that is less than 100%, FTE is computed by adding:
- 0.042 FTE per credit hour taught in the MPH Program
- 0.05 FTE for serving as an MPH committee chair
- 0.025 FTE for MPH committee membership
- 0.4 FTE for research

Limited Term Lecturers (LTLs) receive 0.5 FTE for every course taught within the MPH program, plus 0.10 FTE for serving on a department committee. Courtesy faculty receive 0.4 FTE for service and research, plus 0.125 FTE per course taught within the MPH program.

3) If applicable, provide a narrative explanation that supplements reviewers’ understanding of data in the templates.

Not Applicable.

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

**TEMPLATE C2-2**

<table>
<thead>
<tr>
<th>General advising (per academic advisor)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree level</td>
</tr>
<tr>
<td>Master's</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General career counseling (per faculty mentor)**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree level</td>
</tr>
<tr>
<td>Master's</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Advising in MPH integrative experience**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
</tr>
<tr>
<td>30</td>
</tr>
</tbody>
</table>

*General advising is performed by two staff advisors who advise all MPH students (one housed in the Department of Public Health, and the other employed by Wiley Education, LLC).
**The Directors of Experiential Learning provide general career counseling in addition to advising in the MPH Integrative Experience (Culminating Project).
In addition to the advising mentioned, numerous faculty provide informal mentorship to numerous students, specifically when it comes to careers and potential pursuing additional education.

5) Quantitative data on student perceptions of the following for the most recent year:

a. Class size and its relation to quality of learning (e.g., The class size was conducive to my learning)

A question on class size and its relation to quality of learning is asked within the MPH Exit Survey. The results to the question, “Which statement best describes your perception of class size and learning”, are summarized below:

<table>
<thead>
<tr>
<th></th>
<th>Fall 2022 MPH Exit Survey</th>
<th>Spring 2023 MPH Exit Survey</th>
<th>Summer 2023 MPH Exit Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class size was just right for maximizing my learning</td>
<td>28 (100%)</td>
<td>31 (91.18%)</td>
<td>23 (100%)</td>
</tr>
<tr>
<td>Class size was too large and prevented me from maximizing my learning</td>
<td>0</td>
<td>3 (8.82%)</td>
<td>0</td>
</tr>
<tr>
<td>Class size was too small and prevented me from maximizing my learning</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of responses: 85
Total number of students invited to respond: 104
Response rate: 81.73%

b. Availability of faculty (i.e., Likert scale of 1-5, with 5 as very satisfied)

A question on faculty availability is asked within the MPH Exit Survey. Students are asked, “How satisfied were you with the following aspects of the program?” and are provided a Likert Scale. The results for “availability of instructors” are summarized below:

<table>
<thead>
<tr>
<th>Availability of Instructors</th>
<th>Fall 2022 MPH Exit Survey (n = 28)</th>
<th>Spring 2023 MPH Exit Survey (n = 32)</th>
<th>Summer 2023 MPH Exit Survey (n = 23)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Dissatisfied</td>
<td>2 (7.14%)</td>
<td>0</td>
<td>1 (4.35%)</td>
</tr>
<tr>
<td>Somewhat Dissatisfied</td>
<td>5 (17.86%)</td>
<td>1 (3.13%)</td>
<td>0</td>
</tr>
<tr>
<td>Neither Satisfied nor Dissatisfied</td>
<td>0</td>
<td>2 (6.25%)</td>
<td>3 (13.04%)</td>
</tr>
<tr>
<td>Somewhat Satisfied</td>
<td>13 (46.43%)</td>
<td>8 (25.00%)</td>
<td>10 (43.48%)</td>
</tr>
<tr>
<td>Extremely Satisfied</td>
<td>8 (28.57%)</td>
<td>21 (65.62%)</td>
<td>9 (39.13%)</td>
</tr>
</tbody>
</table>

Total number of responses: 85
Total number of students invited to respond: 104
Response rate: 81.73%
6) Qualitative data on student perceptions of class size and availability of faculty.

Within the MPH Exit Survey, graduating students are asked, “What do you feel are strengths of the MPH program?”. Responses pertaining to class size and faculty availability include:

- “The small classes.”
- “Availability of faculty and staff, high number of opportunities to get involved including research, jobs, internships, clubs, etc.”
- “Most the online instructors were nice and accommodating and available when necessary.”
- “The strength is that the instructors are extremely responsive.”
- “Class sizes and availability of most professors.”
- “Smaller classes, engaging processors that want you to succeed, clear course options/paths.”
- “Strengths of the MPH program are that the faculty are available to assist at any time, the price of tuition is reasonable, the information learned in each class solidified my understanding of what public health entails, and the individual and group projects helped me to understand the importance of teamwork and individual work in a potential real world setting.”
- “Good instructors who are willing to work with you through difficult times.”
- “The course instructors were knowledgeable, had impressive backgrounds in public health and provided effective support and guidance throughout the program.”
- “The strengths of the MPH Program are the connection and mentorship we obtain from professors/ faculty/ advisors.”
- “The availability of class instructors and promptness to questions and instruction clarification.”

Within the same survey, graduating students are also asked, “What suggestions do you have for improving the MPH program?”. Responses pertaining to class size and faculty availability include:

- “The availability of professors requiring them to be more supportive.”
- “More interaction with instructor.”
- “Require professors to have weekly office hours. Require professors to return grades in a timely manner within the following week. Require professors to be engaged in the class discussion boards and posts. Require professors to communicate weekly with students through the online learning platform.”

These MPH Exit surveys can be found in ERF C2.6, Faculty Resources on Qualitative Data.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**

MPH Program faculty bring a wide range of public health experiences to the Program and to the classroom. Students have positive perceptions of availability of faculty and class size. Purdue University remains committed to the growth of faculty with various expertise as evident by the recent Health Equity Cluster Hire Initiative which led to four new faculty being hired in 2022.

Given the growth of students in both the Residential and Online offerings, the College has remained committed to approving the hire of tenure-track and clinical faculty to limit the number of Limited Term Lecturers utilized within the program.

**Weaknesses**

None noted.

**Plans for Improvement**
Historically, the MPH Program has only utilized a staff-advising model. Future plans include exploring faculty-advising models. Two approaches under current discussion for this are 1) matching each incoming student to a faculty member or lecturer for 1:1 advising, with all faculty and full-time lecturers participating and 2) identifying a smaller number of faculty and full-time lecturers who have evidenced strong advising and mentoring skills and match them with a group of students (i.e., 10-20) on the basis of interest areas or career goals. In either model, staff advising would still play a central role in addressing common logistical and student support questions.

C3. Staff and Other Personnel Resources
The program has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

1) A table defining the number of the program’s staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation. Individuals whose workload is primarily as a faculty member should not be listed.

**TEMPLATE C3-1**

<table>
<thead>
<tr>
<th>Role/function</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Affairs Administrator</td>
<td>1.0</td>
</tr>
<tr>
<td>Administrative Assistant</td>
<td>0.25</td>
</tr>
<tr>
<td>Administrative Assistant to the Head</td>
<td>0.25</td>
</tr>
<tr>
<td>Community Outreach and Engagement Coordinator</td>
<td>0.50</td>
</tr>
<tr>
<td>Data and Accreditation Specialist</td>
<td>0.50</td>
</tr>
<tr>
<td>Graduate Program Coordinator</td>
<td>0.50</td>
</tr>
<tr>
<td>Online Program Manager</td>
<td>0.50</td>
</tr>
</tbody>
</table>

1) Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel.

Purdue contracts with Wiley Education Services to administer various pieces of the Online track, including marketing, recruiting, admissions, enrollment, registration, and advising. Wiley Education Service members who provide support to the Online MPH include:

1) Partnership Director- owns the relationship between Purdue and Wiley Education Services.
2) Retention Manager- manages Student Service Coordinators.
3) Student Service Coordinators (2)- first line in student support.
4) Director of Enrollment- oversees the admissions and recruitment functions.
5) Director of Services- oversees the application process.
6) Senior Application Advocate- supports admissions operations functions.
7) Program Strategy Manager- manages course development, revisions, and maintenance.
8) Instructional Support Specialist Team Lead- provides technical assistance to faculty.
9) Brand Manager- manages and executes delivery of marketing initiatives.

2) Provide narrative and/or data that support the assertion that the program’s staff and other personnel support is sufficient or not sufficient.

At this time, the Department of Public Health is sufficiently staffed. There are seven full-time staff members who support the operations of the MPH Program, in addition to the other degree programs within the Department. One of these staff members is a Purdue University Online employee, but solely serves the Department. The Department of Public Health employs two administrative assistants who help monitor emails, coordinate classes, manage events and correspondence, and provide general student, staff, and faculty support. While several staff members provide direct support to students, others alleviate some of the responsibilities of established faculty and staff members who provide direct student support.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

65
**Strengths**
The Department and Program have highly qualified staff with extensive experience in student affairs, advising and career counseling, development, marketing and communication, and community engagement.

In 2022, the Department hired a Community Outreach and Engagement Coordinator to help build and enhance relationships between the Department and key stakeholders throughout the state.

**Weaknesses**
None noted.

**Plans for Improvement**
The Department is currently building a proposal to hire an additional staff person to provide greater program and student support within the Online MPH track as well as the Online MHA Program.
C4. Physical Resources

The program has physical resources adequate to fulfill its stated mission and goals and to support instructional programs. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the program's narrative.)

- Faculty office space

The Department of Public Health is primarily located in Matthews Hall, which is home to classrooms, laboratories, and other administrative offices within the College of Health and Human Sciences. Faculty have their primary offices in this space. All offices are private and workstations are equipped with phone, internet, and office furniture. Courtesy Faculty and faculty with joint appointments in other Departments have their office space located outside of Matthews Hall.

Substantial renovations to Matthews Hall are being planned for future Academic Years. In preparation for these renovations, the Department of Public Health began utilizing space leased by the Provost's office 3.4 miles off campus in West Lafayette. The Vistech Building is home to laboratory and meeting space. It is large enough to be leased by other Departments, namely Human Development and Family Sciences and Nursing, and supports cross-disciplinary equity research with shared human subjects’ space, an administrative coordinator, copy/scan machine, conference and training rooms, and free parking. As with the space in Matthews Hall, Vistech offices are private and equipped with phone, internet, and office furniture. The Vice Provost for Academic Facilities is working with the Dean of the College of Health and Human Sciences and the Department Head for the Department of Public Health to determine future space for the Department. Current plans are to utilize the Vistech Building and Matthews Hall until an integrated permanent space can be identified, ideally by 2027.

- Staff office space

Staff office space is distributed between Matthews Hall and Vistech and varies between open work areas and private offices, depending on the role. Hoteling space is available at each building for staff to easily serve students and faculty at both locations. Each staff workstation is equipped with phone, internet, and office furniture.

- Classrooms

On the West Lafayette campus, the Office of the Registrar Academic and Classroom Scheduling works directly with each Department to coordinate the scheduling of classes, which includes the assignment of over 300 classroom and/or other learning spaces, such as large lecture halls, active learning rooms, computer labs, and other specialized rooms. Each Department has a Schedule Deputy who communicates with faculty on their preferred room. The Schedule Deputy synthesizes this information for the Department and relays it to the Office of the Registrar, who works to optimize teaching spaces for the benefit of students and the University's academic mission. All classrooms and learning spaces are equipped with desktop computers and are supported by Purdue IT. Computer projection, speakers, document camera, webcam, Blu-ray players, and internet are standard in all classrooms, and most classrooms are equipped with either a wired mic connection or wireless mic system.
• Shared student space

Students have access to a variety of spaces on campus where they can study and collaborate. Purdue IT operates multiple computer labs across campus, one of which is located within Matthews Hall. A new student lounge has opened in Stone Hall, which is adjacent to Matthews Hall, for HHS students use. In addition to these spaces, Purdue has a variety of libraries, cultural centers, and student accessible open spaces that do not need to be reserved.

• Laboratories, if applicable to public health degree program offerings

Purdue is home to more than 135 University-recognized research centers and institutes. 19 faculty within the Department of Public Health operate research labs, which are located throughout campus. Students can participate in faculty’s research through assistantships, volunteering, and/or other paid positions.

2) Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient.

Physical space available to the Department and MPH Program is deemed sufficient for the size and needs of the program. In terms of capacity and resources, classrooms dedicated to public health are more than adequate to accommodate current and projected enrollment numbers. The Provost has secured extra research laboratory space off campus for those faculty with growing research needs.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
Physical resources for the Department and Program are sufficient for faculty and staff.

**Weaknesses**
Due to space limitations, faculty are currently operating laboratory space across multiple buildings.

**Plans for Improvement**
None noted.
C5. Information and Technology Resources

The program has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional programs), faculty access to hardware and software (including access to specific software required for the instructional programs offered) and technical assistance for students and faculty.

1) Briefly describe, with data if applicable, the following:
   - library resources and support available for students and faculty

There are nine distinct libraries on the West Lafayette campus, including six subject-oriented libraries. Library staff total nearly 150, of which 81 are faculty and professionals. The campus library system includes over 3 million printed volumes and electronic books. Students and faculty have access to over 200,000 electronic and print journals, as well as government documents and microforms. In addition, any item in the Big Ten Academic Alliance libraries can be requested directly and typically arrives within a few days. Interlibrary Loan services are available free of charge. Other services offered by Purdue Libraries include equipment rental for items like webcams and microphones; GIS support; copyright guidance; and publishing support.

Instructors are encouraged to utilize the Library Reading Lists tool for electronic course reserves, which is integrated with Brightspace, the MPH Program’s LMS. Instructors can assemble electronic resources, including ebooks, digitized book chapters, scholarly articles, videos, newspaper articles, websites, etc. to simplify student access to resources. Instructors can also submit a purchase request for all materials, including course textbooks, which are made available to students free of charge.

The MPH Program has an assigned liaison librarian who manages the content of the Program’s library guide and is available to assist faculty and staff with their research and studies. The liaison maintains an MPH webpage through Purdue Libraries: https://guides.lib.purdue.edu/publichealth.

- student access to hardware and software (including access to specific software or other technology required for instructional programs)

Purdue Information Technology (Purdue IT) is the University’s central computing support unit. In addition to supporting Purdue’s major operational systems, Purdue IT also maintains major academic systems, such as the Brightspace learning management system, and implements and develops innovative learning and classroom technologies, along with supporting an advanced research cyberinfrastructure across campus.

Purdue IT maintains over 30 Instructional Labs throughout the West Lafayette campus. These Labs provide students and instructors with facilities equipped with desktop computer systems, installed software packages, and printing services.

Purdue IT Software Licensing and Distribution provides services associated with the establishment and retention of software agreements between Purdue University and software vendors, and the distribution of the resulting licensed software under the terms of these agreements. Many software products, including those needed by students in the MPH Program, are available for immediate download through the Software Download Storefront, which is accessed via Purdue credentials (BoilerKey Authentication). The Storefront allows students to download and receive troubleshooting support for programs like SPSS, SAS JMP, Office 365, and other software packages needed for their studies and research to their personally-owned machines.
• Faculty access to hardware and software (including access to specific software or other technology required for instructional programs)

The installation and service of both software and hardware for faculty is overseen through Purdue IT and College and unit-level IT-support offices. Purdue negotiates the availability of several software packages for faculty and staff on either their personally owned machines or University-owned machines. Faculty have access to Purdue IT supported instructional technologies throughout campus classrooms and via remote work technology and a Virtual Private Network (VPN).

• Technical assistance available for students and faculty

The Purdue IT Customer Service Center is the first point of contact for students, faculty, and staff seeking assistance with Purdue IT services. They are available 24 hours a day, 7 days a week, except during University holidays. In addition to offering a Self-help Knowledge Base for common issues, Purdue IT is readily available through phone and email, and walk-in help at certain locations throughout the West Lafayette campus.

Individual colleges and units receive additional support through specialized IT units that collaborate with Purdue IT and other distributed campus IT organizations.

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

Purdue Information Technology adequately supports the whole University community. The Department of Public Health has found the resources and services offered by Purdue IT to be sufficient and accessible to all students, faculty, and staff within the MPH Program, regardless of proximity to campus.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
The Department and Program are well supported by a dedicated IT staff and the College- and University-level IT Help Desks. Interactive technologies for use in course instruction are continually reviewed, piloted, evaluated, and implemented.

Purdue University provides substantial free access to learning and research software (e.g., Adobe Suite, SPSS, SAS, STATA, Zotero, Box) to support student learning and research teams.

Weaknesses
None noted.

Plans for Improvement
None noted.
D1. MPH & DrPH Foundational Public Health Knowledge

The program ensures that all MPH and DrPH graduates are grounded in foundational public health knowledge.

The program validates MPH and DrPH students’ foundational public health knowledge through appropriate methods.

1) Provide a matrix, in the format of Template D1-1, that indicates how all MPH and DrPH students are grounded in each of the defined foundational public health learning objectives (1-12). The matrix must identify all options for MPH and DrPH students used by the program.

**TEMPLATE D1-1**

<table>
<thead>
<tr>
<th>Content</th>
<th>ONLINE Course number(s) &amp; name(s)</th>
<th>RESIDENTIAL Course number(s) &amp; name(s) or other educational requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Explain public health history, philosophy, and values</td>
<td>PUBH 535: Fundamentals of Epidemiology</td>
<td>HSCI 547: Fundamentals of Epidemiology</td>
</tr>
<tr>
<td>2. Identify the core functions of public health and the 10 Essential Services*</td>
<td>PUBH 535: Fundamentals of Epidemiology</td>
<td>HSCI 547: Fundamentals of Epidemiology</td>
</tr>
<tr>
<td>3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population’s health</td>
<td>PUBH 601: Introduction to Quantitative Methods in Public Health</td>
<td>PUBH 601: Introduction to Quantitative Methods in Public Health</td>
</tr>
<tr>
<td>4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program</td>
<td>PUBH 535: Fundamentals of Epidemiology</td>
<td>HSCI 547: Fundamentals of Epidemiology</td>
</tr>
<tr>
<td>5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.</td>
<td>PUBH 602: Theoretical Foundations of Health Behavior</td>
<td>HSCI 547: Fundamentals of Epidemiology</td>
</tr>
<tr>
<td>7. Explain effects of environmental factors on a population’s health</td>
<td>PUBH 585: Introduction to Environmental Health</td>
<td>HSCI 575: Introduction to Environmental Health</td>
</tr>
<tr>
<td>8. Explain biological and genetic factors that affect a population’s health</td>
<td>PUBH 585: Introduction to Environmental Health</td>
<td>HSCI 575: Introduction to Environmental Health</td>
</tr>
</tbody>
</table>
9. Explain behavioral and psychological factors that affect a population’s health

<table>
<thead>
<tr>
<th>Course</th>
<th>PUBH 602: Theoretical Foundations of Health Behavior</th>
</tr>
</thead>
</table>

10. Explain the social, political, and economic determinants of health and how they contribute to population health and health inequities

<table>
<thead>
<tr>
<th>Course</th>
<th>PUBH 604: Public Health Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PUBH 602: Theoretical Foundations of Health Behavior</td>
</tr>
</tbody>
</table>

11. Explain how globalization affects global burdens of disease

<table>
<thead>
<tr>
<th>Course</th>
<th>PUBH 585: Introduction to Environmental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HSCI 575: Introduction to Environmental Health</td>
</tr>
</tbody>
</table>

12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)

<table>
<thead>
<tr>
<th>Course</th>
<th>PUBH 585: Introduction to Environmental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HSCI 575: Introduction to Environmental Health</td>
</tr>
</tbody>
</table>

Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.

2) Provide supporting documentation that clearly identifies how the program ensures grounding in each area. Documentation may include detailed course schedules or outlines to selected modules from the learning management system that identify the relevant assigned readings, lecture topics, class activities, etc. For non-course-based methods, include web links or handbook excerpts that describe admissions prerequisites.

A copy of the syllabus and other supporting materials for each course referenced in the above Template is provided in ERF D1.2, Supporting Documentation.

3) If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The MPH Program ensures that all MPH students are grounded in Foundational Public Health Knowledge Objectives through Core classes in the curriculum. All Objectives are covered in more than one course to ensure student’s attainment of this knowledge is confirmed through assessment activities such as projects, papers, quizzes, and exams.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (e.g., teaching assistants or other similar individuals without official faculty roles working under a faculty member’s supervision) validate the student’s ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the program must assess all MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (e.g., joint, dual, concurrent degrees).

Since the unit must demonstrate that all students perform all competencies, units must define methods to assess individual students’ competency attainment in group projects. Also, assessment should occur in a setting other than an internship, which is tailored to individual student needs and designed to allow students to practice skills previously learned in a classroom. Additionally, assessment must occur outside of the integrative learning experience (see Criterion D7), which is designed to integrate previously attained skills in new ways.

These competencies are informed by the traditional public health core knowledge areas, (biostatistics, epidemiology, social and behavioral sciences, health services administration and environmental health sciences), as well as cross-cutting and emerging public health areas.

1) List the coursework and other learning experiences required for the program’s MPH degrees, including the required curriculum for each concentration. Information may be provided in the format of Template D2-1 (single- and multi-concentration formats available) or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

**TEMPLATE D2-1**

<table>
<thead>
<tr>
<th>Foundational requirements for MPH degree</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course number</strong></td>
</tr>
<tr>
<td><strong>Foundational courses for all MPH students regardless of concentration</strong></td>
</tr>
<tr>
<td>PUBH 601</td>
</tr>
<tr>
<td>PUBH 602</td>
</tr>
<tr>
<td>PUBH 535 -or- HSCI 547</td>
</tr>
<tr>
<td>PUBH 604</td>
</tr>
<tr>
<td>PUBH 585 -or- HSCI 575</td>
</tr>
<tr>
<td>PUBH 606</td>
</tr>
<tr>
<td><strong>TOTAL FOUNDATIONAL CREDITS</strong></td>
</tr>
</tbody>
</table>
### Part B: Concentration requirements for MPH degree in Biostatistics

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 607</td>
<td>Public Health Practicum</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 608</td>
<td>Culminating Project</td>
<td>3</td>
</tr>
</tbody>
</table>

#### Concentration courses for Biostatistics concentration

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>STAT 512/ HDFS 590</td>
<td>Applied Regression Analysis OR Linear Regression</td>
<td>3 OR 4</td>
</tr>
<tr>
<td>STAT 506</td>
<td>Statistical Programming and Data Management</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 526</td>
<td>Statistical Methods for Public Health Evaluation</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 526</td>
<td>Design and Analysis of Randomized Trials in Public Health</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Concentration Selective</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Concentration Selective (see list in ERF D2.5, Residential Syllabi, Selective and Elective List)</td>
<td>3</td>
</tr>
</tbody>
</table>

#### Electives

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Students select their elective with Academic Advisor</td>
<td>3</td>
</tr>
</tbody>
</table>

Requirements for degree completion not associated with a course

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 600</td>
<td>Professional Development in Public Health Seminar</td>
<td>0</td>
</tr>
</tbody>
</table>

**TOTAL CONCENTRATION CREDITS** 24

### Part B: Concentration requirements for MPH degree in Family and Community Health- Online

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 607</td>
<td>Public Health Practicum</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 608</td>
<td>Culminating Project</td>
<td>3</td>
</tr>
</tbody>
</table>

#### Concentration courses for FCH-O concentration

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 590</td>
<td>Public Health Program and Policy Evaluation</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 590</td>
<td>International Health Systems: A Comparative Approach</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 590</td>
<td>Public Health and Nutrition</td>
<td>3</td>
</tr>
<tr>
<td>COM 676</td>
<td>Strategic Healthcare Communication</td>
<td>3</td>
</tr>
<tr>
<td>HDFS 590</td>
<td>Families and Health</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Electives</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 590</td>
<td>Global Health Security</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 590</td>
<td>Public Health Law</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 570</td>
<td>Healthcare in the United States</td>
<td>3</td>
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</tbody>
</table>

**TOTAL CONCENTRATION CREDITS** 24
### Part B: Concentration requirements for MPH degree in Family and Community Health- Residential

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 607</td>
<td>Public Health Practicum</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 608</td>
<td>Culminating Project</td>
<td>3</td>
</tr>
</tbody>
</table>

#### Concentration courses for FCH-R concentration

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 547</td>
<td>Public Health Program and Policy Evaluation</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 590</td>
<td>Health Counseling</td>
<td>3</td>
</tr>
<tr>
<td>PUBH 546 OR HDFS 600</td>
<td>Family and Child Health Policy OR Families and Health</td>
<td>3 OR 3</td>
</tr>
<tr>
<td>PUBH 511 OR PUBH 501</td>
<td>Introduction to Global Health OR Introduction to Health Equity</td>
<td>3 OR 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Concentration Selective (see list in ERF D2.5, Residential Syllabi, Selective and Elective List)</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course number</th>
<th>Course name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 600</td>
<td>Professional Development in Public Health Seminar</td>
<td>0</td>
</tr>
</tbody>
</table>

**TOTAL CONCENTRATION CREDITS** 24

**TOTAL CREDITS FOR MPH DEGREE** 42

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Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.

2) List the required curriculum for each combined degree option in the same format as above, clearly indicating (using italics or shading) any requirements that differ from MPH students who are not completing a combined degree.

For the 4+1 Accelerated track, students begin taking graduate level courses as undergraduates, which allows them to complete both degrees in five years total. The MPH course work is not altered in this track; the student’s undergraduate plan of study is modified to fit their graduate coursework.

For joint Graduate degrees (MA or MS plus MPH, PhD plus MPH), students complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track unless approved by the Graduate Academic Committee. PhD students may share up to 30 credits of coursework between their PhD and one master’s plan of study. Master’s students may share up to 9 credits with another master’s plan of study. Students may not share credits between their PhD and their MPH degree if they have already shared one or more credits between their PhD and another master’s degree. Students who wish to share credits must have those credits reviewed and approved by the Graduate Academic Committee.
3) Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies listed above (1-22). If the program addresses all of the listed foundational competencies in a single, common core curriculum, the program need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the program must present a separate matrix for each combined degree. If the program relies on concentration-specific courses to assess some of the foundational competencies listed above, the program must present a separate matrix for each concentration.

Foundational Competencies are assessed in the MPH Core. All Core Courses are required.

**TEMPLATE D2-2, Assessment of Competencies for MPH (all concentrations)**

<table>
<thead>
<tr>
<th>Competency</th>
<th>ONLINE Course number(s) and name(s)</th>
<th>ONLINE Describe specific assessment opportunity</th>
<th>RESIDENTIAL Course number(s) and name(s)</th>
<th>RESIDENTIAL Describe specific assessment opportunity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Apply epidemiologic al methods to settings and situations in public health practice</td>
<td>PUBH 535: Fundamentals of Epidemiology</td>
<td>Proposal Project: The Proposal Project requires students to develop an observational epidemiologic study of their choosing. The purpose of this project is to have students apply their knowledge of study design to a unique proposal of interest to them, while thinking through many of the procedural steps and ultimately limitations to their study design of choice.</td>
<td>HSCI 547: Fundamentals of Epidemiology</td>
<td>Problem Sets #1-5: Students reinforce their understanding of basic principles and methods of epidemiology, including measurements of disease occurrence and association, determination and causality (e.g., measurements of morbidity/mortality, relative risk, odds ratio, confounding, bias, casual inference). Also, students identify and utilize the appropriate epidemiologic study design to solve public health problems (e.g., randomized trials, cohort study, case-control studies, cross-sectional studies).</td>
</tr>
<tr>
<td>2. Select quantitative and qualitative data collection methods appropriate for a given public health context</td>
<td>PUBH 535: Fundamentals of Epidemiology</td>
<td>Discussion board #4: Designing a field investigation. Discussion board #4 asks the students to design a field investigation of an infectious disease outbreak. The students each choose the infectious disease and have it approved by the instructor so that no topics are repeated by other classmates. The purpose of this discussion board is to have the students learn the 12 steps in conducting a field investigation and then apply the knowledge by designing their own field investigation and serving as an expert in the field investigation in the discussion board.</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Intervention Evaluation- Students design an intervention evaluation process, including tools (e.g., survey, interview guide, focus group), and submit a paper with details of the evaluation process, such as goals and objectives, detailed timeline and budget, outcomes statement and report (detailing data collected), and a summary of future directions. Students must have at least one quantitative measure and one qualitative measure (this could be an open-ended survey question).</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>PUBH 600: Professional Development Seminar in Public Health (Qualitative)</td>
<td>Qualitative Research Methods and Analysis Assignment 1: Students must choose the most appropriate qualitative data collection method for two given populations, justify their decision, and discuss potential limitations of other methods.</td>
</tr>
<tr>
<td>3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate</td>
<td><strong>PUBH 601:</strong> Introduction to Quantitative Methods in Public Health</td>
<td><strong>Quantitative:</strong> Lab Assignments (Weekly) - Students select appropriate statistical techniques to investigate and analyze health problems. Students perform quantitative analyses (e.g. t-test, ANOVA, linear and logistic regressions) of a public dataset using SPSS and interpret the findings. <strong>Qualitative:</strong> Discussion Board 8 - Students will review and analyze qualitative interview data. Students will comment on the similarities and/or differences between their analysis and two other students'.</td>
<td><strong>PUBH 601:</strong> Introduction to Quantitative Methods in Public Health</td>
<td>Lab Assignments- Students select appropriate statistical techniques to investigate and analyze health problems. Students perform quantitative analyses (e.g., T-test, ANOVA, linear and logistic regression, odds ratio) of the class dataset (collected together) using SPSS and interpreting the findings.</td>
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</tr>
<tr>
<td>4. Interpret results of data analysis for public health research, policy or practice</td>
<td><strong>PUBH 601:</strong> Introduction to Quantitative Methods in Public Health</td>
<td>Final Project - Students prepare a final presentation of their data analysis project. Students must list the following in their final presentation: An Introduction to the topic/content area of focus; key descriptive/frequency information with a figure, graph, or summary table; estimates from the two models; summary of the findings; future directions and limitations. Students are expected to interpret their findings and explain the Impact for public health within the future directions/limitations section.</td>
<td><strong>PUBH 601:</strong> Introduction to Quantitative Methods in Public Health</td>
<td>Qualitative Research Methods and Analysis Assignment 2: Students utilize DeDoose to code and analyze qualitative focus group data and qualitative interview data.</td>
</tr>
</tbody>
</table>

**Public Health & Health Care Systems**
5. Compare the organization, structure, and function of health care, public health, and regulatory systems across national and international settings

<table>
<thead>
<tr>
<th>PUBH 604: Public Health Administration</th>
<th>Reflection and Analysis Paper and Discussion Board- Students complete a reflection and analysis paper during week 2. This includes providing examples of policy levers that state government can use to integrate public health and healthcare. Students also complete a discussion in week 2 on the public health cross-sector collaboration. This includes answering questions like “how does the affordable care act provide the legal and policy framework from which multiple sectors and community partners generate collective impact?”</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 604: Public Health Administration</td>
<td>Students will complete three individual assessments for this competency. 1) Public Health in 21st Century-this assignment will assess students understanding between public health, population health, and healthcare. Students will also discuss Public Health 3.0. 2) International Health-This assessment students will assess the difference between the United States and a developed country in healthcare delivery. 3) Domestic Health-Students will choose to analyze the US Healthcare System related to organization or finance.</td>
</tr>
</tbody>
</table>

6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and systemic levels

<table>
<thead>
<tr>
<th>PUBH 602: Theoretical Foundations of Health Behavior</th>
<th>Video Activity: A Gardener's Tale/ Final Thoughts- Students watch a video and read a corresponding article before reflecting on the theoretical framework of how racism impacts health.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH 602: Theoretical Foundations of Health Behavior</td>
<td>Final Paper: Students describe a health behavior and population from an ecological perspective (i.e., examining larger context, considering social and physical environments), discuss theories used to understand the behavior and develop interventions, and propose a theory-based intervention to address the issue. The proposed intervention must include a discussion on potential ethical concerns. Students must consider how social inequities and structural bias affect the health of populations and create challenges to achieving health equity.</td>
</tr>
</tbody>
</table>

Planning & Management to Promote Health
<p>| 7. Assess population needs, assets, and capacities that affect communities’ health | PUBH 604: Public Health Administration | Accreditation Plan/Report- Students work in a group to design an Accreditation Plan targeted at an actual Health Department that is not currently accredited. This work requires an in-depth knowledge of a community, its issues, and the resources available to address these issues. The plan must describe and assess a population’s health factors and use best practices and cross-sector collaboration strategies that will benefit a community and the associated public health agency. | PUBH 604: Public Health Administration | Students will complete one group assessment, the Population Needs, Assets, and Capacities assignment. The goal for this assignment is to complete a needs and asset assessment for a chosen community and then identify the mission/vision of a non-profit. |
| 8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs | PUBH 602: Theoretical Foundations of Health Behavior | BHTP Final Paper- Students describe a health behavior and population from an ecological perspective (i.e., examining larger context, considering social and physical environments), discuss theories used to understand the behavior and develop interventions, and propose a theory-based intervention to address the issue. The proposed intervention must include a discussion on potential ethical concerns related to proposed intervention strategy(ies), specifying how cultural values and/or practices of the population might relate to the design and implementation. | PUBH 602: Theoretical Foundations of Health Behavior | Final Paper: The proposed intervention must include a discussion on potential ethical concerns related to proposed intervention strategy(ies), specifying how cultural values and/or practices of the population might relate to the design and implementation. |
| 9. Design a population-based policy, program, project, or intervention | PUBH 606: Design and Analysis of Public Health Interventions | Intervention Project- Students work over the term of the course to create a proposed intervention program that includes a needs assessment of an identified problem; the rationale and theoretical foundation for the program; program outcomes and objectives; program design, components, materials, and interventions; and the evaluation questions and design. | PUBH 606: Design and Analysis of Public Health Interventions | Intervention Plan- Upon completing a needs assessment, students determine the best intervention type to address an identified health issue. The Intervention Plan must include: long-term and short-term SMART goals, stakeholder details, a detailed intervention plan including materials list, impact statement, budget, and timeline. |</p>
<table>
<thead>
<tr>
<th>10. Explain basic principles and tools of budget and resource management</th>
<th>PUBH 604: Public Health Administration</th>
<th>Budget Building and Resource Management Justification- In this activity, students will have the opportunity to gain practical experience in budget building and resource management justification. Students will be required to review program budget templates as examples, create a budget for their group project, and individually reflect on the process and challenges faced. Additionally, students will learn the importance of resource management for program effectiveness and draft a final budget justification outlining how their group chose to allocate available resources.</th>
<th>PUBH 604: Public Health Administration</th>
<th>Students will complete one individual assessment, the Budgetary Management assignment, for this competency. Students will create a budget and write a budget justification. Students will have to consider concepts around personnel need, personnel salary/fringe package, and resources necessary to successfully complete the grant.</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Select methods to evaluate public health programs</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Intervention Evaluation Week 8 Discussion- Students write evaluation questions based on their program's SMART objectives. For each evaluation question, students then describe an evaluation design and methods that effectively answer the question.</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Intervention Evaluation- Students design an intervention evaluation process, including tools (e.g., survey, interview guide, focus group), and submit a paper with details of the evaluation process, such as goals and objectives, detailed timeline and budget, outcomes statement and report (detailing data collected), and a summary of future directions.</td>
</tr>
</tbody>
</table>

Policy in Public Health
<table>
<thead>
<tr>
<th></th>
<th>PUBH 604: Public Health Administration</th>
<th>Reflection and Analysis Papers: Students analyze a scientific publication and write a reflection paper on the selected topic. Week 2: Students discuss and provide examples of the policy levers that state government can use to integrate public health and healthcare. Week 3: Students reflect on how a public health administrator might create and implement policy in their community. Week 8: Students reflect on public health systems (from the U.S. and other countries) and their implications for public health practice and policy, compare and contrast frameworks used in these systems, and explain how these systems are moderated by political system contexts.</th>
<th>PUBH 604: Public Health Administration</th>
<th>Students will complete the Policy and Letter to Congress and Evidence-Based Policy Making Assignment. This assignment is broken into three different parts. Students will look at the evidence-based policy making process, write a letter to Congress, and complete a brief reflection.</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Discuss the policy-making process, including the roles of ethics and evidence</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Intervention Project Community Health Needs Assessment- Students conduct a community health needs assessment to determine the scope of a health issue in a specific population and determine the behavioral and environmental causal factors and personal determinants of the health issue.</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Identify A Community Partner &amp; Signed MOU: Students will identify a community organization to partner with for this project. They should build on their group’s network connections (e.g., work, volunteer, internship, previous partnership with student club). Upon establishing a community partner, students will draft an MOU detailing the expectations and tentative timeline for the partnership and have all parties sign.</td>
</tr>
<tr>
<td>13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes</td>
<td>PUBH 604: Public Health Administration</td>
<td>Letter to a member of the US Congress- Students write a letter to a US Congressperson advocating for or against a policy impacting the health of diverse populations.</td>
<td>PUBH 604: Public Health Administration</td>
<td>Students will complete the Policy and Letter to Congress and Evidence-Based Policy Making Assignment. This assignment is broken into three different parts. Students will look at the evidence-based policy making process, write a letter to Congress, and complete a brief reflection.</td>
</tr>
<tr>
<td>14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations</td>
<td>PUBH 585: Introduction to Environmental Health</td>
<td>Week 7 Assignment - Students are asked to discuss the effectiveness of a given environmental health policy for health promotion and health equity in a particular (specified) community setting. Consider how communities are affected by environmental health.</td>
<td>HSCI 575: Introduction to Environmental Health</td>
<td>Presentation: Students choose a topic in environmental health and discuss in a 13-15 minute oral presentation the population at risk, current controversies on the topic, as well as the actions to remediate the problem. Students are also tasked with evaluating the policies and...</td>
</tr>
<tr>
<td>Leadership</td>
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<tr>
<td><strong>16. Apply leadership and/or management principles to address a relevant issue</strong></td>
<td>PUBH 604: Public Health Administration</td>
<td>Accreditation Plan Report- Students work in a group to design an Accreditation Plan targeted at an actual Health Department that is not currently accredited. Through the design of the plan, students must show leadership in creating a vision and guiding decision making to get the work done. Additionally, students also complete the Leadership and Management in Public Health Administration Assignment- Students will apply leadership and/or management principles to address a relevant issue in public health administration. Students select a specific issue within the realm of public health administration and propose a plan to address it using leadership and management principles.</td>
<td>PUBH 604: Public Health Administration</td>
<td>Students will complete two group assessments for this competency. 1) Board Packet- Groups will assemble a board packet for a board meeting that will occur on the last day of class. This includes financials on their organization, HR updates, intervention delivery updates, and needs for advice from their board members. 2) Board Minutes- After the board meeting is completed team members will write up a summary of the board meeting in minute format and respond to board members advice on situation. An individual team member assessment will be completed by each team member at the end of the semester.</td>
</tr>
</tbody>
</table>

| 17. Apply negotiation and mediation skills to address organizational or community challenges | PUBH 604: Public Health Administration | Negotiating Public Health Solutions Amidst a Public Health Emergency- Students play the role of a public health professional tasked with addressing organizational or community public health challenges related to a public health emergency using negotiation and mediation skills. Students are required to navigate complex situations, conflicting interests, and diverse stakeholders to find feasible and sustainable solutions. | PUBH 604: Public Health Administration | Board Packet Assignment, Part 4 and Financial Negotiations Assignment- Students prepare a packet to be presented to a Board of Directors. They create three problems or issues for the Board to help address. For each problem, students outline the issue, what solution/support they're seeking from the Board, where the information on the problem can be found, and who will lead the discussion on the problem with the Board. These three problems are then orally discussed between two groups (one posing as the organization group and one posing as the Board) during a mock board meeting. Financial challenges are evaluated at the group level in written form by responding to an audit response/financial negotiation. This allows students the ability to show mediation skills at the organizational level. |

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Communication
<table>
<thead>
<tr>
<th>Section</th>
<th>Course</th>
<th>Activity</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Select communication strategies for different audiences and sectors</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Presenting Health Information to a Target Audience (Week 6 Discussion)</td>
<td>Students will develop a strategy to communicate, both orally and visually, health information to a target population. Students create a health communication campaign around a specific piece of health information to a priority population as it relates to their Intervention Project. Both print and audio/video components must be included.</td>
</tr>
<tr>
<td>19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation</td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Presenting Health Information to a Target Audience (Week 6 Discussion)</td>
<td>Students will develop a strategy to communicate, both orally and visually, health information to a target population. Students create a health communication campaign around a specific piece of health information to a priority population as it relates to their Intervention Project. Both print and audio/video components must be included.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Intervention Materials</td>
<td>Students are taught options for communicating health information to different audiences. Then, students are tasked with identifying the best communication strategy for their intervention. This includes at least two printed materials and three original intervention materials (social media campaign, PowerPoint presentation, flyer, infographic, hands-on activity, etc.) to address the health problem.</td>
</tr>
<tr>
<td></td>
<td>PUBH 606: Design and Analysis of Public Health Interventions</td>
<td>Intervention Implementation, White Paper, and Oral Presentation</td>
<td>Students design and implement an intervention plan, which includes their audience-appropriate public health content. Students compile components of the intervention (i.e., Needs Assessment, Program Plan, Intervention Materials, Intervention Evaluation) into a formal White Paper report to be presented to their community partner and, orally, in class. The report is submitted to their community partner. The presentation is given during a class period, which is open to the public. Students are encouraged to invite their community partners to this presentation, as well as other campus (e.g., professors, club advisors) and community (e.g., preceptors, family) supporters.</td>
</tr>
<tr>
<td>20. Describe the importance of cultural competence in communicating public health content</td>
<td>PUBH 602: Theoretical Foundations of Health Behavior</td>
<td>BHTP Final Paper- Students describe a health behavior and population from an ecological perspective (i.e., examining larger context, considering social and physical environments), discuss theories used to understand the behavior and develop interventions, and propose a theory-based intervention to address the issue. The proposed intervention must include a discussion on potential ethical concerns. Students must discuss the importance of cultural competence in communicating their proposed health intervention. They must explain how cultural values and practices of the population might relate to the design and implementation of the intervention.</td>
<td>PUBH 602: Theoretical Foundations of Health Behavior</td>
</tr>
</tbody>
</table>

**Interprofessional Practice**

| 21. Integrate perspectives from other sectors and/or professions to promote and advance population health | PUBH 608: Culminating Experience | Non-Public Health Stakeholder Interview- Students will interview two key non-public health stakeholders (e.g., Faith leaders, K-12 educators, shop owners, community gatekeepers, neighborhood leaders, etc.) to provide perspective on a grant proposal. Students then incorporate these perspectives into their grant proposal and discuss lessons learned from the interviews. | PUBH 600: Professional Development Seminar in Public Health | Interprofessional Education and Training Seminar 3 and Reflection- A panel comprised of public health and non-traditional public health stakeholders are invited to address salient public health issues within the community. Panel members field general questions from students on the issue, their perspective, how their field has responded to the issue and challenges they have encountered. Students are then broken into smaller groups to identify potential intervention opportunities and write a reflection to discuss knowledge gained from non-traditional public health sectors, how this differs from information presented from panelists in traditional public health sectors, and how non-traditional public health sectors are vital to community buy-in, intervention effectiveness, and program sustainability. |

**Systems Thinking**
| 22. Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative | PUBH 585: Introduction to Environmental Health | Week 5 Discussion: Zoonotic Disease Investigation - Students will investigate a zoonotic disease occurrence in the US (case study). In their written discussion of the case student must include all relevant elements of the disease pathology, spread, and control measures implemented. Students must also include a causal loop diagram (i.e., a non-narrative demonstration) for the zoonotic disease to include relevant public health systems involved and any relevant policies/programs/control plans that were or could have been implemented to address the issue from a systems level perspective. | HSCI 575: Introduction to Environmental Health | Presentation and Abstract Summary: Students choose a topic in environmental health and discuss in a 13-15 minute oral presentation the population at risk, current controversies on the topic, as well as the actions to remediate the problem. Students evaluate the issue using a causal loop. Students are also tasked with evaluating the policies and regulations in place that impact the environmental health issue they are studying and describing the implications the policies have on health equity in that area. Students also create a causal loop diagram to be included in their presentation via an abstract/summary. |

Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.

4) Provide supporting documentation for each assessment activity listed in Template D2-2. Documentation should include the following, as relevant, for each listed assessment:
   - assignment instructions or guidelines as provided to students
   - writing prompts provided to students
   - sample exam question(s)

Supporting documentation for each assessment activity listed in Template D2-2 is in ERF D2.4, Supporting Documentation.

5) Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus.

Syllabi for each course listed in Template D2-1 are located in ERF D2.5, Syllabi.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   **Strengths**
   The MPH Program provides a broad foundation in public health knowledge and competencies, with assessment opportunities continually revisited to ensure public health relevance.

   **Weaknesses**
   None noted.

   **Plans for Improvement**
   The Department and Program expect to re-evaluate curriculum continuously and seek external feedback from the Community Advisory Board, External Advisory Board, current students, alumni, and employers.
D3. DrPH Foundational Competencies

Not Applicable.
D4. MPH & DrPH Concentration Competencies

The program defines at least five distinct competencies for each concentration or generalist degree at each degree level. These competencies articulate the unique set of knowledge and skills that justifies awarding a degree in the designated concentration (or generalist degree) and differentiates the degree offering from other concentrations offered by the unit, if applicable.

The list of competencies may expand on or enhance foundational competencies, but, in all cases, including generalist degrees, the competency statements must clearly articulate the additional depth provided beyond the foundational competencies listed in Criteria D2 and D3.

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals validate the student’s ability to perform the competency.

Except for cases in which a program offers only one MPH or one DrPH concentration in the unit of accreditation, assessment opportunities must occur in the didactic courses that are required for the concentration.

If the program intends to prepare students for a specific credential (e.g., CHES/MCHES) that has defined competencies, the program documents coverage and assessment of those competencies throughout the curriculum.

1) Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the program will present a separate matrix for each concentration.

**TEMPLATE D4-1, Assessment of Competencies for MPH in Family and Community Health Concentration**

<table>
<thead>
<tr>
<th>Competency</th>
<th>ONLINE Course number(s) and name(s)</th>
<th>ONLINE Describe specific assessment opportunityª</th>
<th>RESIDENTIAL Course number(s) and name(s)</th>
<th>RESIDENTIAL Describe specific assessment opportunityª</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Critically evaluate the social determinates of health and how they affect families and communities</td>
<td>HDFS 590: Families and Health</td>
<td>Week 3 - Blog Post 1: Health Disparities and Family Health. The purpose of this assignment is to understand and evaluate the relationship between health disparities and family health. The blog post assignments are designed to help students develop the skills necessary to delve deeper into a health issue and communicate that information to the public.</td>
<td>PUBH 546: Child and Family Health Policy</td>
<td>Three writing assignments throughout the semester that focus on intersection of policy and research based on a topic of the student’s choosing. Additionally, weekly discussions occur in class based on readings on a survey of topic areas connected to child and family health/social policies.</td>
</tr>
<tr>
<td>-or- HDFS 600: Families and Health Across the Life Course</td>
<td></td>
<td></td>
<td></td>
<td>1) Reading Reflection - identify a theme or idea from the set of readings each week and describe how that theme is addressed in at least two of the assigned readings 2) Lead Class Discussion - summarize assigned reading and generate class discussion</td>
</tr>
<tr>
<td>2. Evaluate health programs and policies through the application of appropriate quantitative and qualitative methods, models, theories, and best practices</td>
<td>PUBH 590: Public Health Program and Policy Evaluation</td>
<td>Final Project Evaluation Plan: For this assignment, students select a community and program and create an evaluation plan for it. Final Project Part 1: Program Needs Assessment: For this assignment, students conduct a needs assessment for a target community or population using various resources, and utilize peer-reviewed databases for literature gathering</td>
<td>PUBH 547: Public Health Program and Policy Evaluation</td>
<td>Evaluation Final Report: Students are required to complete a final evaluation report. To guide students in designing and executing a program evaluation based upon best practices there will be in class discussions, small group activities, and assignments that help students work through the process from scoping the evaluation and applying theory to evaluation designs to the use of qualitative, quantitative, and mixed methods evaluation method to community-based participatory evaluation methods.</td>
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</tr>
<tr>
<td>3. Prioritize community needs, concerns, and resources when addressing family and community health issues</td>
<td>PUBH 590: Public Health and Nutrition</td>
<td>Final Project Part 2: Intervention Description, Plan, and Resources: For this assignment, students propose a program/intervention to address the nutrition-related issue among the chosen priority population.</td>
<td>PUBH 547: Public Health Program and Policy Evaluation</td>
<td>Evaluation Final Report: Students are required to complete a final evaluation report. To guide students in designing and executing a program evaluation that priorities community needs, concerns and resources there will be in class discussions, small group activities, and assignments that help students work through the process from scoping the evaluation to managing constraints to making the evaluation useful.</td>
</tr>
<tr>
<td>4. Critically evaluate the factors that create, perpetuate and ultimately eliminate health disparities</td>
<td>PUBH 590: Public Health and Nutrition</td>
<td>Week 1 Assignment: Community Food Availability Maps- Students will create a community food availability map of their chosen location and consider how demographics of the community relate to food access.</td>
<td>PUBH 511: Foundations of Global Health</td>
<td>Discussion boards: Students will be required to participate in analytical discussions with their peers where they evaluate factors that influence health disparities in vulnerable populations, with a focus on social determinants of health, cultural factors, race, sex, and gender (sessions 6-11).</td>
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<tr>
<td>5. Demonstrate communication skills and strategies for promotion of family and community health</td>
<td>HDFS 590: Families and Health</td>
<td>Week 7 Final project #3 and Week 8 Assignment-These two assignments are linked. Students write this persuasive letter and then they make a video recording as if they were speaking to the recipient of the letter. Week 7 Final project #3 The purpose of this assignment is for the students to write a persuasive letter and to learn how to identify relevant health issues and communicate the key points of that issue to stakeholders in a succinct way. Week 8 Assignment- In this assignment, the students review their classmate’s video presentations and then respond to these presentations.&quot;</td>
<td>PUBH 590: Health Counseling</td>
<td>Final Project and Presentation: Students utilize Motivational Interviewing with a client of their choosing. Students will make regular reports on their client interactions, conduct a literature review, and present on the progression of their client over the semester.</td>
</tr>
</tbody>
</table>

Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.
<table>
<thead>
<tr>
<th>Competency</th>
<th>Course number(s) and name(s)</th>
<th>Describe specific assessment opportunity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrate the ability to properly design variables, validate, manipulate, store, and maintain public health data sets</td>
<td>STAT 506: Statistical Programming and Data Management</td>
<td>Homework and Final Project – students use SAS to access data, explore data, prepare data, analyze and report on data, and export results for both assigned data sets (homework) and a self-chosen data set (final project).</td>
</tr>
<tr>
<td>2. Demonstrate mastery of at least one statistical software package commonly used to assess public health issues</td>
<td>PUBH 526: Design and Analysis of Randomized Trials in Public Health</td>
<td>Exam 1, Question 1L: This exam question asks students about an appropriate test for continuous vs. categorical data.</td>
</tr>
<tr>
<td>3. Select and apply the most appropriate statistical approaches to address public health issues</td>
<td>PUBH 526: Design and Analysis of Randomized Trials in Public Health</td>
<td>Exam 1, Question 5: Students must discern between parametric and non-parametric tests.</td>
</tr>
<tr>
<td>4. Evaluate the limitations of statistical evidence (e.g., validity, reliability, sample size, bias, generalizability)</td>
<td>PUBH 526: Design and Analysis of Randomized Trials in Public Health</td>
<td>Homework 2, Question H: Students are assigned a paper to read and analyze. They are then asked to describe limitations of the study.</td>
</tr>
<tr>
<td>5. Communicate data and quantitative information to professionals and the public using a variety of approaches</td>
<td>PUBH 525: Statistical Methods for Public Health Evaluation</td>
<td>Evaluation Final Presentation: Students will present their work as if they were delivering an evaluation report to an audience of community members. They will include their evaluation methods, implications, and recommendations.</td>
</tr>
</tbody>
</table>

Note: Students completing joint degrees (MA or MS plus MPH, PhD plus MPH, 4+1 Accelerated) complete the same experiences and curriculum with the same expectations and requirements as standalone MPH students in the Residential track.

2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the program must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

Not Applicable.

3) Provide supporting documentation for each assessment activity listed in Template D4-1. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

Syllabi, written guidelines, and instructional documents for all assessment activities listed in Template D4-1 are located in ERF D4.3, Syllabi and Supporting Documentation.
4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The concentration-specific competencies and assessment opportunities represent those skills and proficiencies deemed most important by faculty in each associated track.

**Weaknesses**
None noted.

**Plans for Improvement**
The faculty will continue to monitor trends about competencies in their respective topic areas and update, as needed.

Assessment content will be updated regularly to reflect current public health priority areas.
D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The program assesses each student's competency attainment in practical and applied settings through a portfolio approach, which reviews practical, applied work products that were produced for the site's use and benefit. Review of the student's performance in the APE must be based on at least two practical, non-academic work products AND on validating that the work products demonstrate the student's attainment of the designated competencies.

Examples of suitable work products include project plans, grant proposals, training manuals or lesson plans, surveys, memos, videos, podcasts, presentations, spreadsheets, websites, photos (with accompanying explanatory text), or other digital artifacts of learning. Reflection papers, contact hour logs, scholarly papers prepared to allow faculty to assess the experience, poster presentations, and other documents required for academic purposes may not be counted toward the minimum of two work products.

1) Briefly describe how the program identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.

The purpose of the Applied Practice Experience is to test the ability of public health students to apply core public health competencies, skills, tools, and knowledge to the workplace. Students are expected to have a basic understanding of core public health knowledge before beginning their practice experience. All MPH students are required to complete a 200-hour applied practice experience, also referred to as the Practicum. The design of the Practicum experience is based on the individual student's interests, experience and training, and professional goals. Students must earn 80% or higher to pass their Applied Practice Experience.

To be eligible for the Practicum experience, students must meet the following criteria:

- Adequately trained through coursework on all core MPH competencies.
- Completed the six core courses prior to the start of the Practicum.
- Submission and approval of all application materials by the designated deadlines (signed Practicum Overview, Competencies, Projects Form, Execution of a Memorandum of Understanding with their chosen partner site).
- Enrollment in PUBH 607: Public Health Practicum.
- Securement of liability insurance through Purdue University.
- If a student meets most, but not all of the above requirements, due to extraordinary circumstances, they may petition the track-specific Director of Experiential Learning to begin their applied practice experience. These requests are considered on an individual basis. A petition consists of a formal letter addressed to the track-specific Director of Experiential Learning from the student.

The Practicum requires completion of an internship experience directed by an approved on-site supervisor, also referred to as a preceptor, and overseen by the Directors of Experiential Learning. Students take an active role in identifying potential practicum settings that are then approved by the Directors of Experiential Learning. The Directors of Experiential Learning begin advising students the academic term prior to the start of the Practicum, which allows students to identify goals and potential preceptors based on the advising received.
The Practicum is designed so students can complete their practicum within one academic term. If a student cannot complete the 200-hour requirement within one term, they may appeal to extend the experience over two consecutive terms.

Students must identify 5 competencies to cover during their Applied Practice Experience. At least three of these competencies must be Core Competencies. The remaining two may be a mixture of Concentration and Core Competencies.

All MPH Practicum activities will be approved by the site supervisor and the Directors of Experiential Learning. Students are required to complete a unique experience. There is no waiver of the MPH Practicum, and hours may not be applied retrospectively from a different experience. The Practicum may take place in the same setting as the student’s current or past employment, but the experience must be:

A. Different from their current or past employment responsibilities.
B. Directed by a site supervisor who is not immediately responsible for their employment evaluations.

Students develop and execute one primary project and lead or assist on one or two additional projects (minimum of two deliverables are required). These deliverables must demonstrate competency attainment. These competencies are identified during the pre-practicum process and are described in detail in the Practicum Work Plan and Practicum Progress Reports. In addition to these assignments and deliverables, students are expected to track their efforts through a Practicum Journal, complete a Midterm Self-Evaluation, and complete an MPH Practicum Poster that summarizes their experience. Site Preceptors complete Midterm and Final Evaluation forms. These evaluations are reviewed by both the student and the Directors of Experiential Learning and allow areas of strength to be applauded and areas of challenge to be discussed with plans for improvement. While Preceptors can provide feedback on student’s attainment of the selected competencies, competency attainment and demonstration is ultimately reviewed and approved by the Directors of Experiential Learning.

2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

See ERF D5.2, APE Requirements for rubrics, handbooks, competency forms, progression form, work plan, etc.

3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (i.e., Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

See ERF D5.3, Student Samples for completed materials, including Template D5-1, for five students from the last three years.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**

In 2022, the Department hired a Community Outreach and Engagement Coordinator to help identify new and support existing Practicum sites. This position supports the two Directors of Experiential Learning serving MPH students in both the Residential and Online tracks.
Each Director of Experiential Learning assists students to find a practicum site, which is a benefit to students who are newer to the public health field or do not have established networks in their local area.

Weaknesses
None noted.

Plans for Improvement
None noted.

D6. DrPH Applied Practice Experience

Not Applicable.
D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student’s educational and professional goals; demonstrating synthesis and integration requires more than one foundational and one concentration competency.

Professional certification exams (e.g., CPH, CHES/MCHES, REHS, RHIA) may serve as an element of the ILE, but are not in and of themselves sufficient to satisfy this criterion.

The program identifies assessment methods that ensure that at least one faculty member reviews each student’s performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies. Faculty assessment may be supplemented with assessments from other qualified individuals (e.g., preceptors).

1) List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the program to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

<table>
<thead>
<tr>
<th>MPH Integrative Learning Experience MPH Degree</th>
<th>How competencies are synthesized</th>
</tr>
</thead>
<tbody>
<tr>
<td>Culminating Project: After successful completion of all required MPH core and concentration courses, students will enroll in PUBH 608: Culminating Experience and select a public health-related community agency in which to partner. Under the direction of the Directors of Experiential Learning, the student will work with their community partner to identify a community problem, propose an evidence-based solution, and develop an evaluation plan. The final product is in the form of a high-quality written grant application for their community partner. In addition, each student will complete a 12-hour non-profit grant-writing workshop offered by Purdue Extension.</td>
<td>The ILE allows students to synthesize and demonstrate mastery of Foundational Competencies 7, 10, 13, and 19 and either Family and Community Health Concentration Competency 3-or- Biostatistics Concentration Competency 5. The Directors of Experiential Learning assess all progress and work products to ensure every student has the ability to successfully synthesize these competencies and demonstrate the skills and knowledge necessary for a professional in the field of public health.</td>
</tr>
</tbody>
</table>

2) Briefly summarize the process, expectations, and assessment for each integrative learning experience.

Each MPH student must complete an Integrative Learning Experience, also known as the Culminating Project, that shows mastery of concepts learned throughout the MPH Program and occurs in the final semester of study. After successful completion of all required MPH core and concentration courses, students will enroll in PUBH 608: Culminating Experience and select a public health-related community agency in which to partner. Under the direction of a faculty mentor, the track-specific Director of Experiential Learning, the student will work with their community partner to identify a community problem, propose an evidence-based solution, and develop an evaluation plan. The final product is in the form of a high-quality written grant application for their community partner. In addition, each student will complete a 12-hour non-profit grant-writing workshop offered by Purdue Extension.
Graded assignments include a Grant Proposal and Competency Contract that includes a needs statement, budget, and timeline; a grant proposal poster; grant proposal poster presentation; and an interview with a grant writing expert. All students are assigned five competencies to address during their Culminating Project:

<table>
<thead>
<tr>
<th>Competencies for ALL MPH Culminating Experience Students to Address</th>
<th>How Competency is Addressed in the MPH Culminating Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundational Competency 7: Assess population needs, assets and capacities that affect communities’ health</td>
<td>This is covered well in the research and creation of the needs assessment of the grant proposal.</td>
</tr>
<tr>
<td>Foundational Competency 10: Explain basic principles and tools of budget and resource management</td>
<td>The grant budget information and budget narrative should be sufficient.</td>
</tr>
<tr>
<td>Foundational Competency 13: Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes</td>
<td>Stakeholders can include the organization offering the grant as well as any community members/organizations who would benefit should it be awarded. Additional stakeholders are identified in the organizational introduction and needs assessment.</td>
</tr>
<tr>
<td>Foundational Competency 19: Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation</td>
<td>The grant proposal itself is the written piece, and the poster presentation is the oral piece. We would need to make sure we are inviting community members to the poster presentation to make sure it is not a peer/academic audience only.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family &amp; Community Health vs. Biostatistics Students</th>
<th>How Competency is Addressed in the MPH Culminating Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family and Community Health Students to Address:</td>
<td>How Competency is Addressed for Family and Community Health Students:</td>
</tr>
<tr>
<td>FCH 3: Prioritize community needs, concerns, and resources when addressing family and community health issues</td>
<td>Spelled out in the needs assessment as well as the budgeting portion.</td>
</tr>
<tr>
<td>Biostatistics Students to Address:</td>
<td>How Competency is Addressed for Biostatistics Students:</td>
</tr>
<tr>
<td>Biostats 5: Communicate data and quantitative information to professionals and the public using a variety of approaches</td>
<td>Data analysis and use is an important part of the needs assessment and budgeting sections. The information is presented to professionals through the grant itself and to the public via the poster session.</td>
</tr>
</tbody>
</table>

Students are introduced to the ILE during their initial orientation. The Directors of Experiential Learning also host informational sessions available to all students throughout the academic year. The Academic Affairs Administrator and the Online MPH Program Manager are equipped to discuss basic information on the Culminating experience.
3) Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students.

See ERF_D7.3, ILE Requirements for guiding materials related to the Integrative Learning Experience.

4) Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students’ demonstration of the selected competencies.

See ERF_D7.4, Methods of Competency Assessment for documents that explain the methods used to assess students’ demonstration of the selected competencies within the MPH ILE.

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

Completed, graded samples of deliverables associated with the Culminating Project can be found in ERF_D7.5, Student Samples.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
At the end of the ILE, students produce a grant in collaboration with a community partner which 1) provides assistance to a community partner to seek external funds and 2) allows students to leave the ILE with a tangible product which can be shared with future employers demonstrating their public health and grant-writing expertise.

In 2022, the MPH Program Directors, in collaboration with faculty, reassessed the number of foundational competencies required to be addressed within the ILE. By decreasing the number of foundational competencies, it allows students to be assessed in more depth on key priority areas.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
D8. DrPH Integrative Learning Experience
Not Applicable.

D9. Public Health Bachelor’s Degree Foundational Domains
Not Applicable.

D10. Public Health Bachelor’s Degree Foundational Competencies
Not Applicable.

D11. Public Health Bachelor’s Degree Cumulative and Experiential Activities
Not Applicable.

D12. Public Health Bachelor’s Degree Cross-Cutting Concepts and Experiences
Not Applicable.
D13. MPH Program Length

An MPH degree requires at least 42 semester-credits, 56 quarter-credits or the equivalent for completion.

Programs use university definitions for credit hours.

1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

The MPH Program at Purdue University requires 42 credit hours for all professional master’s students. These credits are broken into Core requirements (18 hours), Concentration requirements (15 hours), Practicum (3 hours), Culminating (3 credit hours), and Elective credits (3 hours).

2) Define a credit with regard to classroom/contact hours.

The University sets guidelines for the definition of credit hours per contact hours. The number of credit hours assigned to a course quantitatively reflects the outcomes expected, the mode of instruction, the amount of time spent in class, and the amount of outside preparatory work expected for the class.

The “Semester Hour” is the unit of University academic credit that represents approximately three hours of work per week by an average student throughout a normal semester, or its equivalent in total work for short courses and summer sessions. Any reference to credit hours, course credits, etc. shall be understood as referring to “semester hours”.

Most courses in the MPH Program are three-credit courses equating to three hours of lecture each week over the course of the semester. For distance-based courses, credit hours associated with this type of course are considered equivalent to if the same course was taught on campus.

D14. DrPH Program Length

Not Applicable.
D15. Bachelor's Degree Program Length
Not Applicable.

D16. Academic and Highly Specialized Public Health Master's Degrees
Not Applicable.

D17. Academic Public Health Doctoral Degrees
Not Applicable.

D18. All Remaining Degrees
Not Applicable.
D19. Distance Education

The university provides needed support for the program, including administrative, communication, information technology and student services.

There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

1) Identify all public health distance education degree programs and/or concentrations that offer a curriculum or course of study that can be obtained via distance education. Template Intro-1 may be referenced for this purpose.

In 2018 the Department of Public Health, which was then the Public Health Graduate Program, developed and implemented an asynchronous, fully online Master of Public Health with a concentration in Family and Community Health. This degree is offered in partnership with Wiley Education Services.

2) Describe the public health distance education programs, including

   a) an explanation of the model or methods used,

   The Online curriculum was developed to mirror the Residential MPH curriculum, which assures consistency between the two delivery methods, as well as with the Program’s mission and areas of expertise. Courses offered online replicate those taught residentially, and the instructors of the Residential courses served as consultants during the development of the Online versions. Online instructors were selected and hired to maintain and teach courses aligned with their respective areas of expertise.

   Similar to the Residential MPH track, the Online MPH requires the completion of 42 credit hours (18 hours of Core courses, 15 hours Concentration courses, 3 credits Electives, 6 credits for Experiential Learning courses). Courses are made available to students through Brightspace Learning Management System (supported by Purdue IT). Courses in the Online track are 8 weeks long, allowing for two courses to be completed per semester. The degree can be completed in 2 years plus one semester for Experiential Learning.

   Courses require weekly deliverables in the form of individual and team projects, as well as weekly discussion assignments. Instructors are available for support and guidance by emails, phone calls, web-based conferencing or optional live sessions.

   b) the program’s rationale for offering these programs,

   The Online MPH was developed to better fulfill the University’s Land Grant Mission and reach learners that may not otherwise attend on-campus programs. The distance format allows working professionals and other populations, such as those serving in the military, to earn their degree in an asynchronous setting while retaining their other responsibilities.

   c) the manner in which it provides necessary administrative, information technology and student support services,

   The Department of Public Health contracts with Purdue University Online to employ the Online Program Manager. The Online Program Manager is assigned with a 0.5 FTE to the MPH Program and oversees the hiring and management of online instructors, organizes course scheduling, coordinates the admissions process, and provides public-health related academic advising. The person also ensures compliance of the Online track to accreditation
requirements by working closely with the Data and Accreditation Specialist. The Online Program Manager works closely with staff overseeing the Residential MPH track to ensure both programs are aligned in terms of course content, student services, and communication.

The Business Office in the College of Health and Human Sciences monitors all fiscal matters related to the Online and Residential tracks and provides a monthly review to the Department Head. The Department Head meets monthly with the Dean of the College of Health and Human Sciences to review fiscal programmatic topics.

In addition to the services offered by Purdue IT, Wiley Education Services provides 24/7 technical support to students and instructors, as well as a shared Student Services Coordinator to help with course registration, plan of study, financial aid, course preparation, administrative holds, etc. As mentioned in Criterion C.3.2, Purdue contracts with Wiley Education Services for various pieces of the Online MPH administration, including: marketing, recruiting, admissions, enrollment, registration, and advising. Purdue University Online provides a shared Program Administrator who serves as a liaison with the Bursar’s Office, Registrar’s Office, Graduate School, and Division of Financial Aid. Wiley and Purdue University Online team members collaborate with the Department of Public Health in monitoring student success or concerns and communicate with students when potential problems are identified.

d) the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and

All online courses were developed using the same student learning outcomes included in their on-campus counterpart. The evaluation process to ensure the learning outcomes are accurate, pertinent, and rigorous entails review and approval of the course syllabi by the Department’s Graduate Academic Curriculum Committee. Substantive changes in course content must also be reviewed and approved by the College Graduate Educational Policy and Curriculum Committee and the University Graduate Council. This is the same process used for the Residential track.

All methods are subject to the same quality control process that other degree programs in the University are. The Online MPH was approved by all levels of Purdue University. Changes such as adding or removing concentrations and modifying course descriptions, learning objectives, credit hours or modes of delivery need to be reviewed and approved by the Curriculum Committees in the Department of Public Health and the College of Health and Human Sciences, and Purdue’s Graduate School. This process is the same for all graduate programs and courses in the College of Health and Human Sciences.

e) the manner in which it evaluates the educational outcomes, as well as the format and methods.

The Program regularly reviews metrics such as grades; course evaluation feedback from students; and feedback from instructors about how prepared students are for their respective course. For example, this information was used to:

A. Assess and improve admissions procedures and criteria (e.g., No associations between GRE scores and success in the Program were observed, therefore GRE requirement was removed),

B. Adjust course content and assignments (e.g., some students commented they would like to attend live sessions with their instructors to have opportunities to clarify expectations. Optional live sessions have been added throughout the curriculum),
C. Provide feedback to instructors on their teaching and support (e.g., students comment on the balance between reading, discussion, and writing),

D. Improve overall student services and program management (e.g., a virtual orientation session is being developed for incoming students with specific activities that will prepare them for their assignments).

The Department surveys students annually to collect feedback on course content and delivery, quality of the instructors, and perception of competencies covered. This is reviewed by program leadership. Every three years, starting in the Summer of 2021, the Program will initiate a pre-planned, in-depth course update. This process will be informed by the findings of a more comprehensive course evaluation survey using the Community of Inquiry questionnaire.

In addition to gathering formal data, students are encouraged to meet with Program leadership and administration to discuss any needs and issues as they arise.

3) Describe the processes that the university uses to verify that the student who registers in a distance education course (as part of a distance-based degree) or a fully distance-based degree is the same student who participates in and completes the course or degree and receives the academic credit.

Verification is addressed at the University level via BoilerKey authentication. BoilerKey is the University’s version of two-factor authentication and improves the security of protected computer systems and personal data. Every member of the University community is required to utilize BoilerKey. BoilerKey is a required login to all secure University systems, including the Learning Management System, Brightspace, and the student portal, myPurdue. BoilerKey can be utilized through the Duo Mobile app on smartphones, or via a key fob that generates a unique 6-digit code that expires in about 15 seconds.

The Learning Management System utilized by the Program (Brightspace), is equipped to check for student plagiarism. Courses are also designed to create authentic assessments that prevent the sharing of work.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
The MPH Program offers a fully online track that provides students the flexibility and convenience to take courses on their own schedule. This is particularly important for the many students who want or need to work full-time while furthering their careers.

Faculty and students within Online courses receive technical support from the College and the University for course delivery and program implementation.

The Online offering is supported by an instructional design team who conducts content reviews when curriculum redevelopment occurs and address any technical issues within the learning platform.

Weaknesses
None noted.

Plans for Improvement
None noted.

E1. Faculty Alignment with Degrees Offered
Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor’s, master’s, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated.

1) Provide a table showing the program’s primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

<table>
<thead>
<tr>
<th>Name*</th>
<th>Title/ Academic Rank</th>
<th>Tenure Status or Classification^</th>
<th>Graduate Degrees Earned</th>
<th>Institution(s) from which degree(s) were earned</th>
<th>Discipline in which degrees were earned</th>
<th>Concentration affiliated with in Template C2-1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afsan Bhadelia</td>
<td>Assistant Professor</td>
<td>Tenure Track</td>
<td>PhD, MS</td>
<td>Johns Hopkins, Tufts University</td>
<td>Health Systems, Food Policy and Applied Nutrition</td>
<td>Online FCH</td>
</tr>
<tr>
<td>Landrus Burress</td>
<td>Lecturer</td>
<td>Non-Tenure Track</td>
<td>DrPH, MPH, MS, MS</td>
<td>University of Texas, University of Memphis, Air University</td>
<td>Epidemiology, Population Health, Human Movement Science, Military Operational Science</td>
<td>Online FCH</td>
</tr>
<tr>
<td>Andrea DeMaria</td>
<td>Associate Professor</td>
<td>Tenured</td>
<td>PhD, MS</td>
<td>Texas A&amp;M University, University of North Texas</td>
<td>Health Education, Kinesiology</td>
<td>Residential FCH, Biostatistics</td>
</tr>
<tr>
<td>Rob Duncan</td>
<td>Assistant Professor</td>
<td>Tenure Track</td>
<td>PhD, MPH, MS</td>
<td>Oregon State University</td>
<td>Human Development and Family Studies, Biostatistics</td>
<td>Residential FCH</td>
</tr>
<tr>
<td>Nilupa Gunaratna</td>
<td>Associate Professor</td>
<td>Tenured</td>
<td>PhD, MSc, MSc</td>
<td>Purdue University</td>
<td>Statistics, Statistics, Agronomy</td>
<td>Biostatistics</td>
</tr>
<tr>
<td>Randolph Hubach</td>
<td>Associate Professor</td>
<td>Tenured</td>
<td>PhD, MPH</td>
<td>Indiana University, California State University Fullerton</td>
<td>Health Behavior, Health Promotion and Disease Prevention</td>
<td>Residential FCH, Biostatistics</td>
</tr>
<tr>
<td>Melissa Kenzig</td>
<td>Lecturer</td>
<td>Non-Tenure Track</td>
<td>DrPH, MPH</td>
<td>Columbia University, University of South Carolina</td>
<td>Sociomedical Sciences, Health Promotion and Education, Women's Health</td>
<td>Online FCH</td>
</tr>
<tr>
<td>Name</td>
<td>Rank</td>
<td>Tenure Track</td>
<td>Degree(s)</td>
<td>Institution(s)</td>
<td>Field(s)</td>
<td>Affiliation</td>
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</tr>
<tr>
<td>Carlos Mahaffey</td>
<td>Assistant Professor</td>
<td>Tenure Track</td>
<td>PharmD, MPH</td>
<td>Florida A&amp;M University, Morehouse School of Medicine</td>
<td>Pharmacy, Epidemiology</td>
<td>Residential FCH</td>
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<tr>
<td>Shandey Malcolm</td>
<td>Assistant Professor</td>
<td>Tenure Track</td>
<td>PhD, MPH</td>
<td>University of Miami, University of South Florida</td>
<td>Epidemiology, Epidemiology and Biostatistics</td>
<td>Residential FCH, Biostatistics</td>
</tr>
<tr>
<td>Natalia Rodriguez</td>
<td>Assistant Professor</td>
<td>Tenure Track</td>
<td>PhD, MPH, MSE</td>
<td>Boston University, Harvard University, University of Pennsylvania</td>
<td>Biomedical Engineering, Global Health, Bioengineering</td>
<td>Residential FCH</td>
</tr>
<tr>
<td>Yumary Ruiz</td>
<td>Associate Professor</td>
<td>Tenured</td>
<td>PhD, MPH</td>
<td>Purdue University, San Jose State University</td>
<td>Health Promotion and Disease Prevention, Community Health Education</td>
<td>Residential FCH, Biostatistics</td>
</tr>
<tr>
<td>Laura Schwab Reese</td>
<td>Associate Professor</td>
<td>Tenure Track</td>
<td>PhD, MA</td>
<td>University of Iowa</td>
<td>Community and Behavioral Health, Community and Rehabilitation Counseling</td>
<td>Biostatistics</td>
</tr>
<tr>
<td>Ellen Wells</td>
<td>Associate Professor</td>
<td>Tenured</td>
<td>PhD, MPH, MEM</td>
<td>Johns Hopkins, Yale University</td>
<td>Environmental and Occupational Health; Environmental Health Sciences; Environment, Health, and Policy</td>
<td>Residential FCH, Biostatistics</td>
</tr>
</tbody>
</table>
2) Provide summary data on the qualifications of any other faculty with significant involvement in the program’s public health instruction in the format of Template E1-2. Programs define “significant” in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students’ practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

**TEMPLATE E1-2**

<table>
<thead>
<tr>
<th>Name*</th>
<th>Academic Rank^</th>
<th>Title and Current Employment</th>
<th>FTE or % Time Allocated</th>
<th>Graduate Degrees Earned</th>
<th>Institution(s) from which degree(s) were earned</th>
<th>Discipline in which degrees were earned</th>
<th>Concentration affiliated with in Template C2-1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basil Aboul-</td>
<td>Non- Tenure</td>
<td>Lecturer</td>
<td>0.5</td>
<td>EdD, MA, MPH, MSc</td>
<td>A.T. Still University of Health Sciences, Norwich University, University of Texas, Texas Woman's University</td>
<td>Nutrition and Public Health, Historical Studies, Health Education</td>
<td>Online FCH</td>
</tr>
<tr>
<td>Enein</td>
<td>Track</td>
<td></td>
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<tr>
<td>Faisal Aboul-</td>
<td>Non- Tenure</td>
<td>Lecturer</td>
<td>0.5</td>
<td>DrPH, MS, MPH</td>
<td>University of Texas</td>
<td>Health Management, Policy, Community Health, Family Nurse Practitioner; International Health, Health Systems</td>
<td>Online FCH</td>
</tr>
<tr>
<td>Enein</td>
<td>Track</td>
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<tr>
<td>Simone Charles</td>
<td>Non- Tenure</td>
<td>Lecturer</td>
<td>0.5</td>
<td>PhD, MS</td>
<td>Michigan State University, University of Maryland</td>
<td>Environmental Chemistry and Toxicology, Environmental Science</td>
<td>Online FCH</td>
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<tr>
<td></td>
<td>Track</td>
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<tr>
<td>Melissa Franks</td>
<td>Tenured</td>
<td>Associate Professor</td>
<td>0.526</td>
<td>PhD, MA</td>
<td>Kent State University</td>
<td>Social/ Health Psychology</td>
<td>Residential FCH</td>
</tr>
<tr>
<td>Jennifer Freeman</td>
<td>Tenured</td>
<td>Professor</td>
<td>0.526</td>
<td>PhD</td>
<td>University of Illinois</td>
<td>Environmental Toxicology and Molecular Cytogenetics</td>
<td>Residential FCH, Biostatistics</td>
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<td>Name</td>
<td>Track Type</td>
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<td>Education</td>
<td>Department</td>
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<tr>
<td>Attila Hertelendy</td>
<td>Non-Tenure Track</td>
<td>Lecturer</td>
<td>0.5</td>
<td>PhD, MS, MS</td>
<td>Clinical Health Sciences, Biomedical Sciences, Health Services Management</td>
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<td></td>
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<td></td>
<td>University of Mississippi, Charles Sturt University</td>
<td>Online FCH</td>
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<tr>
<td>Jill Inderstrodt</td>
<td>Non-Tenure Track</td>
<td>Lecturer</td>
<td>0.5</td>
<td>PhD, MPH, MA</td>
<td>Health Communication, Family and Community Health, Performance Studies</td>
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<td></td>
<td>Purdue University, University of Texas at Austin</td>
<td>Residential FCH</td>
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<tr>
<td>Timothy Keaton</td>
<td>Tenure Track</td>
<td>Assistant Professor</td>
<td>0.526</td>
<td>PhD, MS, MS</td>
<td>Statistics, Mathematical Statistics and Probability, Applied Statistics</td>
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<td></td>
<td>Purdue University, Bowling Green State University</td>
<td>Biostatistics</td>
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<tr>
<td>Cody Mullen</td>
<td>Non-Tenure Track</td>
<td>Clinical Associate Professor</td>
<td>0.4</td>
<td>PhD</td>
<td>Health Policy and Management</td>
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<td>Indiana University-Indianapolis</td>
<td>Residential FCH, Biostatistics</td>
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<tr>
<td>Michael Reger</td>
<td>Non-Tenure Track</td>
<td>Lecturer</td>
<td>1</td>
<td>PhD, MPH</td>
<td>Epidemiology</td>
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<td>Online FCH</td>
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</tr>
</tbody>
</table>

3) Include CVs for all individuals listed in the templates above.

   All CV’s for the individuals listed in Template E1-1 and Template E1-2 are located in [ERF E1.3, Faculty CVs].

4) If applicable, provide a narrative explanation that supplements reviewers’ understanding of data in the templates.

   Not Applicable.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   **Strengths**
   The Department and Program are supported by a diverse community of faculty with a range of professional and educational experiences. Faculty expertise covers the core functions of public health, and their training is representative of programs who achieve excellence in scholarship and teaching.

   **Weaknesses**
   None noted.

   **Plans for Improvement**
   None noted.
E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

1) Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, other than faculty members’ participation in extramural service, as discussed in Criterion E5. The unit may identify full-time faculty with prior employment experience in practice settings outside of academia, and/or units may describe employment of part-time practice-based faculty, use of guest lecturers from the practice community, etc.

Many faculty members within the Department of Public Health that serve the MPH Program as PIF faculty have a mix of academic and professional experience in public health practice. Examples of faculty involvement in public health practice include:

- Dr. Landrus Burress has served as the Associate Director of Health Services/Chief of Patient Services Administration at the University of Houston Campus Health Center; Senior Director of Medical and Health Services at West Chester University of Pennsylvania; Chief of Public Health Operations in the Preventative Aerospace Medicine Division in the US Air Force; Chief of Epidemiology and Field Support and Course Director for the US Air Force School of Aerospace Medicine; Public Health Officer with the US Air Force 5th Medical Group; Infection Prevention and Control Officer with the US Air Force, 5th Medical Group; Senior Hospital Associate at the UT Houston-Memorial Hermann Center for Healthcare Quality and Safety at the University of Texas Medical School in Houston, Texas; and was the Developmental Program Assistant at the National Kidney Foundation of West Tennessee.

- Dr. Nilupa Gunaratna served as a Statistician and Senior Manager of Operations, as well as a Program Officer, for the Nevin Scrimshaw International Nutrition Foundation. She has also served as a statistical consultant for multiple national and international research centers and non-governmental organizations operating in Sub-Saharan Africa.

- Dr. Shandey Malcolm was the National Epidemiologist in Turks and Caicos for three years. Prior to this she was the Deputy National Epidemiologist. She also works with the local health department (Tippecanoe County Health Department) to understand syphilis in adolescence.

- Dr. Natalia Rodriguez worked as a Biochemical Engineer in Vaccine Process Development at Merck Research Laboratories. She also was the co-founder and CEO of Jane Diagnostics, Inc. Dr. Rodriguez was an invited expert for the World Health Organization’s Working for Health Action Plan, 2022-2030 Consultation.

- Dr. Yumary Ruiz has worked as an Associate Staff Analyst Community Health Planner for the New York City Department of Health and Mental Hygiene and has experience with the San Francisco Department of Health. Dr. Ruiz is also involved as co-investigator on a three-year HRSA grant to deliver training to Community Health Workers.
In addition to these experiences, non-PIF faculty offer the following experience to the MPH Program:

- Dr. Basil Aboul-Enein served as the Chief of Public Health Education and Wellness in the United States Navy. Through this experience, he also served on Health Promotion Wellness panels, task forces, and advisory committees. He also has experience as the Chief of Medical Intelligence and Preventative Medicine (Active Duty) through the United States Air Force and worked as a Public Health Nutrition Supervisor and Health Education Liaison through the Texas Department of State Health Services.
- Dr. Faisal Aboul-Enein is the CEO and Founder of an advisory and consulting service that advises in strategic planning for hospitals and ambulatory settings in the US and abroad. He has also served as the Clinical Administrative Director of a medical center, and has experience as a Family Nurse Practitioner, Clinical Manager, and Staff RN at various hospitals and practice groups.
- Dr. Attila Hertelendy is a licensed paramedic in numerous states and Canadian provinces and territories. He has served on numerous government committees in various roles, including a Technical Assistant to the U.S. Department of Transportation; an Appointed Member of the New Mexico Department of Higher Education Campus Safety Committee and Campus Emergency Preparedness subcommittee co-chair; an Appointment Member of the Mississippi State Department of Health, Office of Emergency Preparedness, State Performance Improvement Committee; and an Appointed Member of the Providence of Manitoba Emergency Health Services Regional Board.
- Dr. Cody Mullen has served as the Policy, Research, and Development Officer, as well as a Project Director, for the Indiana Rural Health Association.

All of these perspectives from the field of public health practice are integrated into the curriculum for the MPH Program through selection of readings, guest lectures, and identifying prompts and partners for community-based course projects.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
Faculty members are engaged in collaborative work in strategic community partnerships. Faculty engage with community leaders and stakeholders for public health improvement at local, state, national, and international levels, and bring real-world knowledge and the voices of experts into the classroom to enrich students’ educational experiences.

Weaknesses
None noted.

Plans for Improvement
None noted.
E3. Faculty Instructional Effectiveness

The program ensures that systems, policies, and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The program supports professional development and advancement in instructional effectiveness.

1) Describe the program’s procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable.

All students at Purdue can complete a Course Evaluation and Survey for each course they are enrolled in for the current term. Course Evaluations and Surveys are organized by Purdue’s Instructional Data Processing (IDP) unit with the help of a department liaison. The Data and Accreditation Specialist is the liaison for the Department of Public Health. Each evaluation includes 10 questions that are standard on all surveys. These standard questions include qualitative and quantitative measures about the course and the instructor. Departments can choose an additional five questions, from a list of over 600, for each course. Evaluations are scheduled to coincide with the conclusion of each course, with results being released to the Department and instructors after the Grade Entry Deadline for each term. Instructors can opt-in to administering mid-semester formative evaluations which can help implement necessary adjustments prior to the conclusion of the course.

Course Evaluations are reviewed by the Department Head and, if appropriate, Program Directors. Evaluations are used by the Department to initiate conversations about necessary programmatic and curricular changes and are a considerable factor in the annual review process for all instructors.

Peer evaluations are not required but occur upon faculty request, particularly as faculty prepare their Promotion and Tenure documents. Peer evaluations focus on teaching effectiveness and provide feedback and ideas for instructional enhancement.

See ERF E3.1, Faculty Instructional Effectiveness for examples of the Student Course Evaluation and Survey.

2) Describe available university and programmatic support for continuous improvement in teaching practices and student learning. Provide three to five examples of program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

The University facilitates numerous opportunities for instructors to improve teaching practices and student learning. Within the Department of Public Health and the MPH Program, both primary instructional faculty (PIF) and non-primary instructional faculty (non-PIF) have utilized the following resources:

- IMPACT at Purdue (https://www.purdue.edu/impact/) is a faculty development program that utilizes research-based practices and collaboration to create student-centered teaching and learning environments. Dr. Cody Mullen (PIF) has completed this program for PUBH 604.

- Teaching for Tomorrow (TfT) Fellowship (https://www.purdue.edu/provost/faculty/awards/tft.html#:~:text=This%20program%20rec...
ognizes tenure track, contributions to teaching and mentoring) program is for tenure track or clinical faculty members. The goal of this program is to improve the learning environment for students by enhancing junior faculty teaching skills through senior faculty mentorship. Dr. Andrea DeMaria (PIF) and Dr. Laura Schwab-Reese (non-PIF) have completed this program.

- The Teaching Academy (https://www.purdue.edu/provost/teaching-excellence/teaching-academy/) is sponsored by the Office of the Provost and the Center for Instructional Excellence. It fosters collaboration between faculty and graduate students to create a voice for teaching excellence through the “Framework for Teaching Excellence”. Fellows are tenure-track faculty, clinical faculty, lecturers, and senior lecturers who have distinguished themselves in teaching and were nominated by their School/College. Dr. Jennifer Freeman (non-PIF) is a past-fellow of the Teaching Academy.

- The HHS Online Education Faculty Fellows Program (https://hhs.purdue.edu/faculty-staff/online-education-resources/) selects 10 tenured, tenure-track, and clinical faculty annually to collaborate and develop innovative ideas; provide feedback; and disseminate information, resources, and best practices to all faculty on the conceptualization, development, and teaching of online offerings with the College of Health and Human Sciences. Dr. Andrea DeMaria (PIF) and Dr. Cody Mullen (PIF) are past fellows of the HHS Online Education Faculty Fellows Program.

3) Describe means through which the school or program ensures that all faculty (primary instructional and non-primary instructional) maintain currency in their areas of instructional responsibility. Provide examples as relevant. This response should focus on methods for ensuring that faculty members’ disciplinary knowledge is current.

It is an expectation that all faculty and lecturers maintain currency in their areas of instructional responsibility. The majority of PIF and non-PIF faculty achieve this through activities offered by professional organizations, such as professional memberships, continuing education modules and trainings, and conference attendance. Faculty and lecturers are responsible for reporting participation in professional organizations annually through the formal review process.

Funding is available through the Program, Department College, and University for faculty and lecturers to participate in discipline-specific professional development activities, including travel. For example, the Department provides financial support to faculty to attend the American Public Health Association annual meeting.

ERF E3.3, Evidence of Faculty Currency for an example of the Faculty Promotion Form 36, which is used during the formal review process.

4) Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement.

During the annual review process, faculty and instructors must include information obtained from the Course Evaluation process for the last three academic years. These review documents are assessed by both the Department Head and senior faculty (i.e., assistant professors are reviewed by associate professors, associate professors are reviewed by full professors). In addition to the annual review process, this information is taken into consideration during the holistic review that occurs with Promotion and Tenure procedures.

5) Provide quantitative and/or qualitative information that characterizes the unit’s performance over the last three years on its self-selected indicators of instructional effectiveness.
Select at least three indicators, meaningful to the unit, with one from each listed category.

**Faculty Currency**

**Indicator:** Peer/ internal review of syllabi/ curricula for currency of readings, topics, methods, etc.

To assess faculty currency, the Department of Public Health and the MPH Program require the MPH Residential and MPH Online Curriculum Committees to review all proposed significant changes to course syllabi and curricula. Upon approval at the MPH Curriculum Committees, the Graduate Academic Curriculum Committee reviews and grants final approval. The Graduate Academic Curriculum Committee then moves the proposed changes to the Executive Council. These layers of review ensure currency of readings, topics, assessment methods, etc.

ERF E3.5, Indicators of Instructional Effectiveness includes a sample of Committee agendas where course syllabi were reviewed for currency and content.

**Faculty Instructional Technique**

**Indicator:** Student satisfaction with instructional quality

To assess student satisfaction with instructional quality, all instructors must include a summary of their student course evaluation results with their annual review documents. These documents are reviewed by the Department Head, and Program Directors as appropriate.

Within the Online MPH Program, student course evaluations are reviewed each term to calculate an average score. Within the ten-item survey, each item receives a score on a scale of 1-5, from which a mean for each instructor is calculated. The mean score is utilized to assess average student satisfaction with instructional quality, and adjustments to teaching requirements may be adjusted as necessary based off student feedback.

The table below shows the averaged results over the last three years for the Online MPH track:

<table>
<thead>
<tr>
<th></th>
<th>2020-2021*</th>
<th>2021-2022</th>
<th>2022-2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>4.5</td>
<td>4.5</td>
<td>4.5</td>
</tr>
<tr>
<td>Actual</td>
<td>4.39</td>
<td>4.08</td>
<td>4.23</td>
</tr>
</tbody>
</table>

*Student Course Evaluation data was not available for the Spring 2021 term. Calculation includes Fall 2020 and Summer 2021 terms only.

**School- or Program-Level Outcomes**

**Indicator:** Courses that integrate community-based projects

As a land-grant institution, Purdue University emphasizes the importance of preparing graduates for the workforce through project-based learning. The Department of Public Health and the MPH Program share this sentiment and strive to integrate community-based projects throughout the curriculum. Currently, only certain MPH courses facilitate a community-based project. For the courses that do not have a community-based project, guest lecturers from community-based organizations and community-engaged research examples are a part of the curriculum.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The University provides ample pedagogical and learning support to support teaching faculty both for Residential and Online courses.

The Department and Program apply numerous feedback mechanisms to monitor instructional effectiveness.

Weaknesses
Currently the Program does not require peer instructional reviewers. Instead, faculty, usually in the context of tenure and promotion, can request peer review.

Plans for Improvement
The Department and Program will develop a peer review system, outside of the tenure and promotion process, within the coming year.

E4. Faculty Scholarship
The program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form,
whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and program missions and relate to the types of degrees offered.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the program’s definition of and expectations regarding faculty research and scholarly activity.

Purdue University defines discovery (i.e., research and scholarly activity) as:

“…accomplishments such as refereed publications, external funding (where it can be said to reflect the positive, rigorous assessment of peers and the scholarly promise of the topic), national and/or international reputation (if appropriate), awards and other contributions to knowledge. It may also include patents, licenses, prototypes, and entrepreneurship activities that move products from the bench to the marketplace; these activities are particularly encouraged in disciplines where there is a focus on addressing societal needs.”

Within the Department of Public Health, for which the MPH Program resides, faculty who have research effort within their position can demonstrate excellence in discovery by:

- Productive record of contributions to scholarly literature through publications in scholarly refereed publications, especially top-rated journals in the faculty member’s field. Publications reporting original research, critical literature reviews, advances in theory development or analysis, and refereed publications that synthesize research literature for practitioners are considered appropriate contributions. The publication record must have publications for which the candidate or their mentee is lead author and/or the senior author (usually typically the last author position in the field). The Department also values research publications whose author lists provide evidence of meaningful collaboration with those bringing differing perspectives, including cross-disciplinary research colleagues and community partners. It is recognized that the candidate’s research methodology may affect the rate of publication. In addition, the vagaries of the publication process may lead to unevenness in publication rate. Although there should not be significant gaps across years, recognition should be made that temporary gaps may be anticipated.
- Coherent substantive focus in a program of research is expected. Faculty who specialize in interdisciplinary or methodologically based research can present their research program as being focused on this type of research approach. It is expected that candidates will develop recognized expertise in their research domain. Recognized expertise may be demonstrated by serving as a reviewer for a journal or conference, serving on an editorial board, serving on a grant review panel, serving as an editor or associated editor of a journal, or other relevant professional service beyond Purdue.
- Presentations of research at annual or biennial meetings of international, national, or regional professional organizations are expected.
- Submission of internal and/or external funding proposals to support one’s discovery.

Among those who are tenured or tenure-track, faculty dedicate at least 30% of their effort to discovery. Depending on funding and individual goals, up to 75% of their effort may be dedicated to discovery. Those faculty who are not tenure-track (i.e., lectures, clinical faculty) either have no or reduced discovery expectation.
2) Describe available university and program support for research and scholarly activities.

Purdue University is Indiana's land-grant university and a Carnegie Foundation tier-one research institution for very high research activity. The University's mission is to serve diverse populations across Indiana, the US, and the world through discovery that expands the frontiers of knowledge, learning that nurtures the sharing of knowledge, and engagement that promotes the application of knowledge. Purdue University cultivates an academic environment where the highest standards of intellectual integrity and scholarship are practiced by over 2,000 faculty who are at the forefront of their disciplines.

The Office of Research, led by the Executive Vice President for Research, oversees university-wide strategic initiatives and all operational and regulatory functions of the Purdue University research enterprise. The Office offers services which include, but are not limited to, grant writing support, provision of internal and seed funds, linkage to corporate and global partners, regulatory oversight, facilities and infrastructure, and protection of intellectual property.

For example, numerous Public Health faculty have secured Office of Research funding through the Kinley Trust. The Clifford B. Kinley Trust was established in 1978 to fund research relating to human welfare and was activated in 1991 upon Mrs. Kinley's death. The competition is exclusive to the West Lafayette campus. The Kinley Trust competition limits eligibility to faculty (tenure-track/tenured, research, clinical) principal investigators (PIs). The endowment was established to fund research which uses a social science perspective to explore methods for improving the human condition. Investigators receive up to $25,000 for a one-year project.

At the College and Departmental level, Public Health faculty have access to grant writing support and internal/seed research support. Each faculty member is provided with laboratory space. The Department of Public Health occupies approximately 10,000 square feet of laboratory space used by faculty, research staff, and students. Research spaces are equipped with locked file cabinets, and phone and Ethernet ports linked to the Purdue University network. Departmental space also includes conference rooms, reception and waiting areas, and secured rooms for storing materials. Research teams have access to a copy/scan/fax machine and other Department amenities. Similarly, the College and Department provide full support services. Logistical support is provided by University, College, and Departmental financial and administrative staff, including contracts and grants. The Department's business office is responsible for the management and distribution of grant funds, with additional support provided by the College's financial officer and through Purdue Sponsored Programs.

3) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities. This response should focus on instances in which students were employed or volunteered to assist faculty in faculty research projects and/or independent student projects that arose from or were related to a faculty member's existing research.

Dr. Andrea DeMaria is a women’s reproductive health expert and is the Founder and Director of the Interdisciplinary Women’s Reproductive Health Collaborative, which is her Purdue University research laboratory. The Collaborative's primary research areas include exploring genital hygiene and menstruation management, investing pubic hair grooming and body image, understanding barriers to contraception decision making and healthcare access, and identifying how sexual violence intersects with routine women’s healthcare behaviors. Students have the opportunity to co-author professional presentations and research manuscripts.

Dr. Carlos Mahaffey’s research focuses on HIV/AIDS, substance abuse, sociocultural determinants of health, justice-involved populations, and African American/Black MSM. He is a member of the Sexual Health Research Lab, which is an interdisciplinary group that works to advance sexual health and address sexuality-related health disparities. The lab offers students opportunities to apply research skills to sexuality research.
Dr. Natalia Rodriguez’s research intersects Public Health and Biomedical Engineering and focuses on the design of health technologies and tailored implementation strategies to address health disparities in underserved communities through community-based participatory research, human-centered design of health technologies, and training of community health workers. Within her lab, Dr. Rodriguez mentors a multidisciplinary team of graduate and undergraduate student researchers and provides opportunities and training to students to pursue publications and presentations.

4) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students. This response should briefly summarize three to five faculty research projects and explain how the faculty member leverages the research project or integrates examples or material from the research project into classroom instruction. Each example should be drawn from a different faculty member, if possible.

Dr. Andrea DeMaria uses her women’s health research methods and findings to develop content for courses, including building a needs assessment, designing measurement tools, and using findings to develop community interventions. Her research and professional networks are used to connect students to community partners, professional opportunities, and external mentoring. In addition to her own research, she brings groundbreaking content learned at seminars, society meetings, and networking events to the classroom to educate and advance thought among the MPH students in PUBH 606: Design and Analysis of Public Health Interventions. Examples from her Women’s Reproductive Health Collaborative are regularly shared with students in her courses to use as templates or guiding documents for their idea development (e.g., white papers, team protocols and procedures, measurement tools).

Dr. Nilupa Gunaratna draws on her research experience for PUBH 526: Design and Analysis of Randomized Trials in Public Health. In PUBH 526, Dr. Gunaratna discusses the experience of conducting randomized controlled trials, including problems that occurred and their solutions, and covers issues of debate that arise in statistical practice and how to make decisions about them. Students are also given concrete examples of ethical issues that arise in research and discuss how to reason through similar situations in future research and field-based experiences.

Dr. Natalia Rodriguez uses examples from her research to contextualize theoretical concepts taught in course lectures, such as in PUBH 511: Foundations of Global Health. For example, when discussing community-based approaches to addressing health disparities, students are given specific examples from her work in cervical cancer screening with Latinx migrant farmworker populations, highlighting their specific barriers and challenges and how their participation in research allows for the co-creation of effective solutions.

5) Describe the role of research and scholarly activity in decisions about faculty advancement.

To be considered for promotion, a tenured or tenure track faculty member should contribute to all University mission areas appropriate to their position (in most cases, contributing to all three areas of discovery, learning, and engagement), meeting minimum thresholds in each. They should also have demonstrated excellence and scholarly productivity in at least one of these areas – discovery, learning, and engagement – with the understanding that, ordinarily, strength would be apparent in more than one.

Every year each faculty member submits an updated version of their CV and Faculty Promotion Form 36 to the Department Head, highlighting their activities and accomplishments during the past year. They also provide a narrative describing how these activities and accomplishments aligned with the goals that were set during the previous year’s review process.

The role and expectations for research and scholarship are described in detail in the University and Department’s promotion and tenure guidelines. This includes the definition of discovery given in Criterion E.4.1, the expectation of scholarship for each track and rank, and the documentation
faculty must provide as part of their promotion review packet. Contributions to discovery are also evaluated at each stage of the promotion process, which include a vote of Departmental faculty (i.e., Primary Committee), external reviews from experts in the faculty member’s field, a vote of the College faculty (i.e., Area Committee), a vote of the University faculty (i.e., Campus Promotions Committee), the Provost, the President, and the Board of Trustees.

6) Provide quantitative data on the unit’s scholarly activities from the last three years in the format of Template E4-1, with the unit’s self-defined target level on each measure for reference. In addition to at least three from the list that follows, the program may add measures that are significant to its own mission and context.

<table>
<thead>
<tr>
<th>Outcome Measures for Faculty Research and Scholarly Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome Measure</td>
</tr>
<tr>
<td>Number of community-based research projects</td>
</tr>
<tr>
<td>Number of articles published in peer-reviewed journals</td>
</tr>
<tr>
<td>Number of grant submissions</td>
</tr>
</tbody>
</table>

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**

The University, Department, and Program continue to provide ample resources to support faculty and students in research.

Faculty have a strong history of submitting and securing extramurally- and internally-funded public health research, extensive publication records, and engagement of community stakeholders.

The faculty have extensive research collaborations at the local, national, and international level.

The faculty regularly engage MPH students in research projects which lead to students earning co-authorship on manuscripts and conference abstracts.

**Weaknesses**

None noted.

**Plans for Improvement**

None noted.

**E5. Faculty Extramural Service**

The program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.
As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the program's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the program’s definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

The Department of Public Health defines service as an explicit activity undertaken for the benefit of communities and greater society, above what is accomplished through instruction and research. Service refers to contributions of professional expertise to the public, including professional practice. Examples of service could include serving as board members and officers of professional organizations; serving as members of community-based organizations, community advisory boards, or other groups; consulting with or providing testimony for governmental entities; reviewing grant applications; and other activities which advance the public’s health.

Purdue University’s definition of faculty service includes, but is not limited to, activities internal and external to the University. Service is inclusive of administrative functions, committee service, special program management, contributions to staff development, leadership in community affairs, participation in scholarly and professional societies, membership on review panels, other peer reviewing activities (manuscript reviews), and consultation to government agencies.

Public Health faculty are expected to participate in service. Expectations are outlined in the Department’s promotion and tenure guidelines, and progress toward meeting these expectations is discussed by the faculty member and the Department Head during annual reviews.

2) Describe available university and program support for extramural service activities.

As Indiana's only land-grant university, Purdue is an important partner with the state in myriad programs and services. The University supports service/engagement initiatives through the Office of Engagement. The Purdue Office of Engagement connects the University with communities and individuals in partnerships to make the world a more equitable, resilient and prosperous place for all, at home and across the globe. The Office fosters reciprocal relationships with external partners, leveraging University resources in teaching, research and engagement to solve societal challenges. The Office of Engagement includes regional offices that establish and maintain regional partnerships with businesses, industry, and community organizations across Indiana as well as Purdue Extension, which houses Purdue staff in all 92 Indiana counties to provide evidence-based, programing to communities, families, and youth. Public Health faculty are actively engaged with Purdue Extension, leveraging this resource to contribute their professional expertise to local communities.

Faculty have a percentage of their effort dedicated to engage in service activities. Similarly, the Department has provided funds to faculty, staff, and students to support service activities. Notably, in 2022 the Department hired a full-time staff member dedicated to community engagement—including the development and implementation of service and service-learning activities.

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students. This response should briefly summarize three to five faculty extramural service activities and explain how the faculty member leverages the activity or integrates examples or material from the activity into classroom instruction. Each example should be drawn from a different faculty member, if possible.

Dr. Natalia Rodriguez serves on the Board of Directors of LTHC Homeless Service, a nonprofit addressing homelessness in Lafayette, IN and surrounding communities. As an extension of her BOD role, she has students participate in service-learning and experiential practice with LTHC Homeless Services to build capacity for health-related programming.
Dr. Cody Mullen serves on the Board of Trustees of the National Rural Health Association and on the Board of Directors of the Arc of Indiana. Dr. Mullen has facilitated workshops within MPH Professional Development Seminars to discuss the types of boards (e.g., advisory, public, non-profit, private), their responsibilities (e.g., fiduciary), his experiences by type, and the benefits of MPH alumni engaging with and serving on boards.

Dr. Laura Schwab-Reese maintains ongoing work with various community partners through her community based participatory research, including crisis counselors, paramedics, child protection system caseworkers, Extension educators, and others. To bridge this experience to the classroom, Dr. Schwab-Reese has partnered with Dr. Andrea DeMaria to connect the outcomes of her evaluation course (PUBH 547: Public Health Program and Policy Evaluation) to Dr. DeMaria's program development course (PUBH 606: Design and Analysis of Public Health Interventions). PUBH 547 students conducted a comprehensive mixed-methods needs assessment for a local community center. Then, PUBH 606 students created an intervention based on the needs assessment. By pairing these courses, students are able to complete more focused, detailed work, and the community partner, in this case, a local community center, receives a more comprehensive project.

4) Provide quantitative and/or qualitative information that characterizes the unit's performance over the last three years on the self-selected indicators of extramural service, as specified below.

Select at least three of the following indicators that are meaningful to the program. In addition to at least three from the list in the criteria, the program may add indicators that are significant to its own mission and context.

### Outcome Measures for Faculty Extramural Service

<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>Target</th>
<th>Year 1 (2019-2020)</th>
<th>Year 2 (2020-2021)</th>
<th>Year 3 (2021-2022)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of PIF participating in extramural service activities</td>
<td>50.00%</td>
<td>46.15%</td>
<td>61.53%</td>
<td>69.23%</td>
</tr>
<tr>
<td>Number of community-based service projects</td>
<td>15</td>
<td>16</td>
<td>18</td>
<td>19</td>
</tr>
<tr>
<td>Public/ private or cross-sector partnerships for engagement and service</td>
<td>30</td>
<td>35</td>
<td>35</td>
<td>37</td>
</tr>
</tbody>
</table>

5) Describe the role of service in decisions about faculty advancement.

To be considered for promotion, a tenured or tenure track faculty member should contribute to all University mission areas appropriate to their position—in most cases, contributing to all three areas of discovery, learning, and engagement, meeting minimum thresholds in each. They should also have demonstrated excellence and scholarly productivity in at least one of these areas—discovery, learning, and engagement—with the understanding that, ordinarily, strength would be apparent in more than one. All faculty are expected to participate in extramural service and their service record is taken into consideration as part of the promotion and tenure process.
Every year each faculty member submits an updated version of their CV and Faculty Promotion Form 36 to the Department Head, highlighting their activities and accomplishments during the past year. They also provide a narrative describing how these activities and accomplishments aligned with the goals that were set during the previous year’s review process.

The role and expectations for service and engagement are described in detail in the University and Department’s promotion and tenure guidelines. This includes the definition of service given in Criterion E.5.1, the expectation of service and engagement for each track and rank, and the documentation faculty must provide as part of their promotion review packet. Contributions to service and engagement are also evaluated at each stage of the promotion process, which include a vote of Departmental faculty (i.e., Primary Committee), external reviews from experts in the faculty member’s field, a vote of the College faculty (i.e., Area Committee), a vote of the University faculty (i.e., Campus Promotions Committee), the Provost, the President, and the Board of Trustees.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The Department and Program are committed to service. This is reflected in the variety of service activities in which the faculty are engaged.

The number of faculty engaged in service activities increased prior to COVID-19 and remained stable during the height of the pandemic.

**Weaknesses**
None noted.

**Plans for Improvement**
Within the next year, the Department and Program would like to see more PIF participating in extramural service activities. Targets, as well as ways to support faculty to engage in extramural service activities, will be reexamined this year.

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**F1. Community Involvement in Program Evaluation and Assessment**

The program engages constituents, including community stakeholders, alumni, employers, and other relevant community partners. Stakeholders may include professionals in sectors other than health (e.g., attorneys, architects, parks and recreation personnel).

Specifically, the program ensures that constituents provide regular feedback on its student outcomes, curriculum, and overall planning processes, including the self-study process.
1) Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

The MPH Program utilizes a Community Advisory Board (CAB). The Board provides guidance aimed at promoting the mission and vision of both the Department of Public Health and its degree programs, including the MPH Program. It also serves the MPH Program by providing ongoing review and advice on policies and practices and allows community partners and local public health professionals an opportunity to offer input on changing workforce needs, curriculum, procedures, and other topics as relevant.

The CAB is comprised of MPH Program alumni and other local and regional public health professionals, healthcare and social service administration professionals, health policy advocates, leaders of community partner organizations, and representatives from health profession schools that a subset of program graduates commonly matriculate into after graduation from the Department’s undergraduate or MPH programs. The Department Head is chair.

The MPH Program initially utilized a Community Advisory Board, but under prior Department leadership, the Program moved away from the CAB and utilized an EAB model. Based on faculty and community feedback, the Department is returning to the CAB model for community feedback and guidance. The Board reconvened in August 2023.

In addition to the Community Advisory Board, the MPH Program also utilizes Qualtrics surveys to gather input from alumni and employers of alumni. These surveys occur every three to five years and allow graduates and employers to provide insight on how well the curriculum prepared students for the field, what professional development needs exist for those in the workforce, feedback on the Department’s guiding statements and principles, and what emerging public health topics are impacting various sectors of the field.

2) Describe any other groups of external constituents (outside formal structures mentioned above) from whom the unit regularly gathers feedback.

The Directors of Experiential Learning regularly interact with community partners and public health professionals while advising students in their completion of the Applied Practice Experience (MPH Practicum) and Integrative Learning Experience (MPH Culminating Project). These interactions with site preceptors allow the Directors of Experiential Learning to informally solicit feedback on the necessary skills and competencies students and graduates need to be successful professionals within the field of public health.

3) Describe how the program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

The MPH Program regularly engages external constituents to obtain their assessment of the content and currency of the program’s curriculum and its relevance to current and future public health practice. Alumni and employers of alumni are surveyed for their feedback on how prepared MPH graduates are every three to five years. These surveys also inquire about professional development needs and emerging topics in the field. The information collected from these surveys is reviewed by the MPH Online Curriculum Committee and the MPH Residential Curriculum Committee. Adjustments to the curriculum and new initiatives are developed as appropriate.
After the MPH Online Curriculum Committee and the MPH Residential Curriculum Committee initiative adjustments, the Community Advisory Board reviews any suggested changes to curriculum and policies, which includes reviewing course syllabi, assessment requirements, and draft policy changes. The Community Advisory Board also provides feedback on professional development opportunities hosted by the Department.

4) Describe how the program’s external partners contribute to the ongoing operations of the program, including the development of the vision, mission, values, goals, and evaluation plan and the development of the self-study document.

The Community Advisory Board provides feedback on the development of the Department’s vision, mission, and values, and advises on the MPH Program’s goals and evaluation plan. Alumni and employers of alumni are surveyed on their perception of how well the Program and Department are demonstrating and implementing these guiding statements. Regular updates on the self-study process and document have been provided to external partners via email and in-person meetings.

5) Provide documentation (e.g., minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation requests 3 and 4.

Documentation of external contribution for the Community Advisory Board, as well as Alumni and Alumni Employer Surveys, are located in ERF F1.5, Evidence of Community Input.

6) Summarize the findings of the employers’ assessment of program graduates’ preparation for post-graduation destinations and explain how the information was gathered.

The MPH Alumni Employer Survey conducted in Summer 2022 asks about graduate’s preparation for the workforce. The results to the question, “Was this employee prepared to enter the workforce”, are summarized below:

<table>
<thead>
<tr>
<th>Summer 2022 MPH Alumni Employer Survey</th>
<th>n = 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>4 (100%)</td>
</tr>
<tr>
<td>Maybe</td>
<td>0</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of responses: 4
Total number of students invited to respond: 9
Response rate: 44.44%

Employers are given the opportunity to elaborate on their answer. Selected responses are provided below:

- “((alumni name redacted)) has shown experience in working with the public and collecting data.”
- “((alumni name redacted)) has been successful in her position as she has been able to foster relationships, teach locally and secure funding.”
- “((alumni name redacted)) has been an invaluable team member for us. She came into our association needing very little training and hit the ground running. She was quickly promoted based on her mastery of data collection and analysis, along with her ability to quickly solve issues that have arisen. She has led our data team extremely effectively. She has also conceived of and lead at least two brand new and independent initiatives
including a telehealth in libraries project and a new membership (academic members) arm for the association."

The MPH Alumni Employer Survey conducted in Spring 2023 asks employers, “If given the opportunity, would you hire another graduate from Purdue’s MPH Program?”. The results to the question are summarized below:

<table>
<thead>
<tr>
<th></th>
<th>Spring 2023 MPH Alumni Employer Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n = 7</td>
</tr>
<tr>
<td>Yes</td>
<td>5 (71.43%)</td>
</tr>
<tr>
<td>Maybe</td>
<td>2 (28.57%)</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of responses: 7
Total number of students invited to respond: 42
Response rate: 16.67%

Employers were also asked, “What did the MPH Program do well in preparing our graduates for the workforce?” Selected responses are provided below:

- “Utilizing a public health theoretical approach for program evaluation projects and utilizing biostats skills for practical public health interventions.”
- “Ability to analyze complex data.”
- “Excellent technical skills and diversity and inclusion background.”

7) Provide documentation of the method by which the program gathered employer feedback.

Alumni were first surveyed in Spring 2022, five years after completion of the established Plan of Study for most students in the initial cohort. This initial MPH Alumni Survey included all MPH graduates up to the most recent graduates, who completed the program in December 2021 (N=132). This electronic survey was distributed to alumni emails via Qualtrics with additional prompting through LinkedIn. Alumni were asked to provide their employers contact information and were informed that the information would be utilized to survey employers on how well graduates were trained and gather suggestions employers may have for current students. A total of 24 responses were received with a survey response rate of 18.18%. Of these 24, only nine provided employer contact information. Nine employers were sent a Qualtrics survey in Summer 2022 via email. A total of four employers responded, for a response rate of 44.44%.

As the initial MPH Alumni Survey resulted in an unsatisfactory survey response rate, a secondary Alumni survey was released in February 2023 (N = 206). The initial survey was revised based on feedback from the Executive Council. The original survey had 51 comprehensive questions, and the revised survey had 17 essential questions. To improve response rate, the Program offered $10 electronic gift card incentives to all who completed the survey at 85% or higher. A total of 98 responses were received with a survey response rate of 47.57%. Alumni were again asked to provide their employers contact information. Of these 98, 42 viable employer emails were received.

In Spring 2023, 42 employers were sent the MPH Alumni Employer Survey. This survey was revised from the Summer 2022 survey to ensure only essential questions were included. The original survey had 15 questions, and the revised survey included eight questions. A total of nine employers responded for a survey response rate of 21.43%.

Documentation can be found in ERF F1.7, Employer Feedback Methodology.
8) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
None noted.

**Weaknesses**
The Community Advisory Board has been dormant since the height of the COVID-19 pandemic and continued to be so due to changes in Department and Program leadership.

The response rates for the MPH Alumni Employer Survey remain suboptimal, even when reducing the number of questions and providing a monetary incentive for participation.

**Plans for Improvement**
The Community Advisory Board has been repopulated with previous and new members.

In the coming year, the Program will explore other opportunities to collect data (e.g., one-on-one interviews, focus groups) from current and potential employers of MPH alumni.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D5, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.

Students, both Online and Residential, are introduced to community and professional service opportunities during their initial orientations and then are encouraged to participate in these opportunities throughout the Program via their instructors and Program staff. The Academic Affairs Administrator and the Online Program Manager inquire about student’s involvement in volunteer and professional development activities and guide them in facilitating those
conversations with community partners as needed. The Department of Public Health publishes weekly newsletters with pertinent opportunities available to all students.

For Residential students, Purdue University is home to a variety of service-oriented student organizations that provide ample opportunities to volunteer within the community. Students are also encouraged to become involved with faculty research projects, which allows students to engage with community members and organizations while honing skills related to conducting needs assessments, writing grants, and listening to the needs of community partners.

Specifically for Online students, an MPH Resource Center is maintained within the Brightspace Learning Management System (LMS). The Online Program Manager announces student opportunities to become involved with service learning, research, and professional development both to the MPH Resource Center and to the student email listserv.

2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

Across both tracks of the MPH Program, students are engaged in a variety of community service and professional development activities, including:

- MPH students volunteered at a no-cost vaccine clinic hosted by two Public Health faculty members.
- Multiple students are involved with Indiana Public Health Association (IPHA) and American Public Health Association (APHA).
- In partnership with the local health department, the Public Health Student Association (PHSA) has hosted a Naloxone Training and Harm Reduction Education event.
- Multiple students volunteer with the local health department to assist with harm reduction activities, such as passing out condoms on weekends and needle-take-back programs in the community.
- The Public Health Student Association has hosted a Virtual MPH Alumni Panel open to all students.
- Student representatives from the MPH program serve on the following committees:
  - Online MPH Curriculum
  - Residential MPH Curriculum
  - DEI

ERF F2.2, Professional and Community Service Opportunities includes Departmental Newsletters containing professional development and service opportunities for students, and flyers for professional development and service events distributed to MPH students.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
To support students wishing to be involved in APHA, the Department has recently implemented a new initiative for which the Department has paid the APHA membership fees for 20-30 students. It is the expectation that decreasing barriers to membership will allow MPH students to better engage in the APHA Student Assembly and other APHA sections/caucuses.

The Public Health Student Association, as well as events held in tandem with the MPH Professional Development Seminar, provide opportunities for students to engage with MPH alumni and public health stakeholders.
Weaknesses
None noted.

Plans for Improvement
None noted.

F3. Delivery of Professional Development Opportunities for the Workforce
The program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (i.e., individuals who are not faculty or students at the institution that houses the program) and an indication of how the unit identified the educational needs. See Template F3-1.

TEMPLATE F3-1
External participants are individuals who are not faculty or students at the institution that houses the school or program

**Example 1**
In September 2022, faculty within the Department of Public Health received HRSA funding to launch a Community Health Worker training program which will enhance health outcomes within rural and underserved communities. This program provides certification training for new community health workers and upskills existing community health workers in emergency response education, prevention, treatment, and vaccine hesitancy. The need for this program was identified through a statewide community health worker needs assessment and County Health rankings. To date, 45 individuals have completed this training. The program is prepared to provide training for up to 60 new community health workers and upskilling of 20 existing community health workers per year for the next three years.

**Example 2**
In Fall 2022, four Public Health faculty were involved in an interdisciplinary team that offered a Community Health Worker training related to ethics in research. This training was a result of data collected during a 2020 Needs Assessment conducted by the Community Health Workforce Development Institute. Nine individuals attended this training.

**Example 3**
In April 2019, the Public Health Graduate Program (now the Department of Public Health) hosted Breaking Barriers: Improving Access to Health Services for Women and Children in Indiana in response to Indiana’s maternal and child health rankings. This women’s health symposium included a keynote address from the Indiana State Health Commissioner, a panel discussion moderated by the President and CEO of CDC Foundation, roundtable discussions, and research rapid fire presentations from faculty and leaders of state-wide organizations. About 200 people were in attendance. Additional Breaking Barriers events were scheduled for 2020 and 2021 but were subsequently cancelled due to the COVID-19 pandemic. The Department of Public Health has plans to reinstate the Breaking Barriers symposium during the 2023 calendar year.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
Faculty have actively engaged stakeholders to address the needs of various cadres of public health professionals. In doing so, faculty have secured internal and extramural funding to support training programs and public health pipeline initiatives.

Weaknesses
Although the faculty have identified important professional communities to provide support to, such as community health workers, the Department and Program recognize there are other cadres of public health professionals for which training, continuing education, and professional development is needed.

Plans for Improvement
Reengaging the Community Advisory Board and enhancing data collection from current and prospective employers of MPH students will allow for the identification of professional development needs. Based on these findings, the Program will work to develop new professional development programs.
G1. Diversity and Cultural Competence

The school or program defines systematic, coherent, and long-term efforts to incorporate elements of diversity. Diversity considerations relate to faculty, staff, students, curriculum, scholarship, and community engagement efforts.

The school or program also provides a learning environment that prepares students with broad competencies regarding diversity and cultural competence, recognizing that graduates may be employed anywhere in the world and will work with diverse populations.

Schools and programs advance diversity and cultural competency through a variety of practices, which may include the following:

- incorporation of diversity and cultural competency considerations in the curriculum
- recruitment and retention of diverse faculty, staff, and students
- development and/or implementation of policies that support a climate of equity and inclusion, free of harassment and discrimination
- reflection of diversity and cultural competence in the types of scholarship and/or community engagement conducted

1) List the program’s self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

Purdue University is committed to maintaining a community which recognizes and values the inherent worth and dignity of every person. The University defines Diversity as excellence expressing itself through the intersections of perspectives and lived experiences.

Students
The MPH Program and the Department of Public Health has identified Black or African American, Hispanic/ Latino, and non-traditional aged (30 years or older) students as priority populations. These groups are prioritized in an effort to reduce the gap in representation between program enrollment and the demographic distribution of these groups in the general campus population and the general population in the State of Indiana.

MPH Program Priority Student Enrollment ‡

<table>
<thead>
<tr>
<th>Graduate School Enrollment</th>
<th>Academic Year 2021-2022 MPH Accepted Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2021*</td>
<td></td>
</tr>
<tr>
<td>Black or African American</td>
<td>5.5%</td>
</tr>
<tr>
<td>Hispanic/ Latino</td>
<td>9.0%</td>
</tr>
<tr>
<td></td>
<td>7.11%</td>
</tr>
</tbody>
</table>

*Source: Purdue University Graduate School Enrollment Summary, Fall Semester 2021 [https://www.purdue.edu/gradschool/documents/ima/enrollment/Fall-Enrollment-WL-Fall-2021.pdf](https://www.purdue.edu/gradschool/documents/ima/enrollment/Fall-Enrollment-WL-Fall-2021.pdf)

‡Due to the recent Supreme Court ruling, race and ethnicity data will no longer be collected. Data presented is prior to the Summer 2023 ruling.
State of Indiana Population Estimates by Age, 2021

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>9.7%</td>
</tr>
<tr>
<td>25-44</td>
<td>25.7%</td>
</tr>
<tr>
<td>45-64</td>
<td>24.9%</td>
</tr>
<tr>
<td>65 and older</td>
<td>16.4%</td>
</tr>
</tbody>
</table>

* Source: https://www.stats.indiana.edu/profiles/profiles.asp

Academic Year 2021-2022 MPH Program Student Enrollment by Age

<table>
<thead>
<tr>
<th>AY 2021-2022 MPH Program Student Enrollment, Fall Census</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Group</td>
</tr>
<tr>
<td>--------------</td>
</tr>
<tr>
<td>21-25</td>
</tr>
<tr>
<td>26-30</td>
</tr>
<tr>
<td>31-35</td>
</tr>
<tr>
<td>36-40</td>
</tr>
<tr>
<td>41-45</td>
</tr>
<tr>
<td>46-50</td>
</tr>
<tr>
<td>51+</td>
</tr>
</tbody>
</table>

Faculty and Staff

Diversity, Inclusion and Belonging: Purdue Campus Population Overview‡

<table>
<thead>
<tr>
<th>Race/Origin</th>
<th>2019 Tenured/ Tenure Track DDI Data*^</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black or African American</td>
<td>59</td>
</tr>
<tr>
<td>Hispanic/ Latino</td>
<td>93</td>
</tr>
</tbody>
</table>

*Source: https://www.purdue.edu/diversity-inclusion/about-us/stats.html
^Purdue reports the total number, not percentage, of minority faculty and staff
‡Due to the recent Supreme Court ruling, race and ethnicity data will no longer be collected. Data presented is prior to the Summer 2023 ruling.

The MPH Program and the Department of Public Health seeks to employ minoritized identities, especially those outside of the majoritized identities of Male, White, Cisgendered, Heteronormative, and Ableist. Recruiting and retaining faculty and staff with minoritized racial and social identities is imperative to strengthening the institution, stimulating creativity, promoting the exchange of ideas, and enriching campus life.

2) List the program’s specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request

The MPH Program’s specific goals for increasing the representation and supporting the persistence and ongoing success of priority under-represented populations includes:

1. Cultivate and maintain a more culturally competent environment for all students, faculty, and staff.
2. Recruit and matriculate students from diverse backgrounds that meet or exceed the distribution of these groups at the University or State level.
3. Recruit and hire faculty from diverse backgrounds that meet or exceed the distribution of these groups at the University level.
4. Ensure curricular and extracurricular opportunities for students, faculty, and staff to connect and reflect on issues of diversity, equity, and inclusion.
3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

The Department of Public Health and the MPH Program are both committed to engaging, recruiting, and retaining diverse students and faculty members. To cultivate and maintain a more culturally competent environment, the Department regularly asks stakeholders for feedback on its DEI efforts, guiding statements, and goals. This information is collected through surveys that include questions on the Program’s, Department’s, and College’s diversity, equity, and inclusion efforts, the results of which are discussed at various committee meetings. Faculty and staff provide feedback through Departmental retreats held throughout the academic year. The University’s Cultural Centers and DEI Committees across campus also offer various trainings and webinars intended to foster and facilitate inclusion within Purdue’s community. The MPH Program and Department also work to ensure curricular and extracurricular opportunities, such as listening sessions, to connect and reflect on issues of diversity, equity, and inclusion.

To recruit students and faculty from diverse backgrounds, current faculty regularly discuss the MPH Program and Department while they are participating in guest lectures, poster presentations, conferences, and other engagements. At the University level, fellowships are available for students classified as under-represented minorities, which pertains specifically to students in the 4+1 track. The University also maintains partnerships with Historically Black Colleges and Universities (HBCU’s) to bring faculty and students to campus to create shared research and encourage undergraduate students to conduct their graduate studies at Purdue. The Office of the Provost began a cluster-hire initiative in 2021, which aims to hiring 40 new faculty in an effort to promote and advance diversity.

4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

The Department of Public Health and the MPH Program work to ensure students have the opportunity to discuss, reflect, and apply what they have learned and experienced about cultural competence and diversity. This is done through the selection of course topics and materials and the opportunity to connect with community partners through various course assignments.

Purdue is home to multiple Cultural and Resources Centers that offer workshops, webinars, listening sessions, and other events that are open to the whole campus community. Students, faculty, and staff are encouraged to connect with these Centers.

In Spring 2022, the Department of Public Health’s DEI Committee hosted a listening session for students, faculty, and staff in response to a campus event that involved an HHS student and the Purdue University Police Department. A representative from Purdue’s Counseling and Psychological Services (CAPS) was available as a resource. The discussion that occurred during the listening session in Spring 2022 generated many ideas on how the Department can support discussions on structural and systemic racism. Listening sessions will continue to be held in the future to ensure actions and strategies taken by the Department and MPH Program to create and maintain a culturally competent environment are inclusive of all students, faculty, and staff.

Specifically for non-traditional aged students, the MPH Program allows flexibility for all students to complete their degree. Students in both tracks can take up to 12 credit hours in their non-primary track, i.e., Residential students can take up to 12 credit hours in the Online track and Online students can complete up to 12 hours in the Residential track. This change was implemented in Spring 2022.
5) Provide quantitative and qualitative data that document the program’s approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

The table below shows Fall enrollment numbers for the Program's priority under-represented students. The MPH Online Curriculum Committee and MPH Residential Curriculum Committee compares enrollment numbers to the number of under-represented students who accept their offers of admissions as shown in Template H4-1. The Curriculum Committees review the discrepancy in these numbers to develop actions and strategies that will both recruit and retain the Program's priority under-represented students.

**MPH Program Priority Under-Represented Student Enrollment, Fall Term 2019-2022†**

<table>
<thead>
<tr>
<th>Year</th>
<th>Black or African American</th>
<th>Hispanic/ Latino</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>2020</td>
<td>19</td>
<td>1</td>
</tr>
<tr>
<td>2021</td>
<td>12</td>
<td>8</td>
</tr>
<tr>
<td>2022</td>
<td>4</td>
<td>7</td>
</tr>
</tbody>
</table>

†Due to the recent Supreme Court ruling, race and ethnicity data will no longer be collected. Data presented is prior to the Summer 2023 ruling.

In addition to discussing these metrics, the annual Current Student Survey asks MPH students, “How can we better increase representation of under-represented populations in our MPH Program and Department?” as well as “How can we better support the persistence and ongoing success of under-represented populations in our Program and Department?”. Selected responses are shown below:

- “Require a class or webinar on cultural competence when students enter the program.”
- “Develop a course on cultural competence for new students that focuses on the diversity in the US and around the globe.”
- “Decreasing the tuition and increasing the amount of scholarships.”
- “Hiring more professionals of diverse backgrounds.”
- “Give mentors to incoming students that are students who understand the program.”

These responses have been reviewed within the MPH Online Curriculum and MPH Residential Curriculum Committees and discussion is ongoing on efforts to enact these suggestions.

ERF G1.5, Data for Supporting Priority Populations contains documentation of the annual Current Student Survey.

6) Provide student and faculty (and staff, if applicable) perceptions of the program’s climate regarding diversity and cultural competence.

Faculty and staff have the opportunity to discuss their perceptions of the Program and Department’s climate regarding diversity and cultural competence at various retreats held throughout the Academic Year. As a result of these retreats, the Department reviewed and updated its mission and vision statements in Spring 2023. ERF G1.6, Evidence of Program’s Climate shows the agenda from a February 2023 Departmental Retreat where revisions to these statements were considered, and the final version of these statements adopted in April 2023.

Within the MPH Current Student Survey, students are asked, “What is your perception of the Department’s climate regarding diversity and cultural competence?”. Select responses are shared below:

- “There needs to be more education in this area.”
- “I don’t feel that it’s celebrated enough.”
• “The program is not very diverse but I think we talk a lot about the importance of understanding culture when implementing public health programs and targeting health behaviors.”
• “Based on communication I have received, the Department seems very focused on creating a climate which respects diversity and is very inclusive.”
• “It seems very accepting to all cultures and makes sure to address diversity and culture in the classes.”
• “Many resources have been provided to educate students about diversity and cultural competence. This was also a relevant topic in our classes.”

The same question was posed to Alumni via the Alumni Survey. Select responses are shared below:
• “Positive, I believe the program is diverse in its students, staff, faculty, and internship placement sites.”
• “The program was incredibly diverse, and it was a wonderful opportunity to work so closely with everyone and understand their perspective. All around, it’s a very inclusive program.”
• “I think it’s lacking. Not enough people of color.”
• “I think there is always room for improvement when it comes to diversity. I do think the MPH program draws students from a wide range of educational backgrounds which adds depth and excellent debate/discussion.”
• “From an international student perspective, I thought the climate was good! Diversity is clearly present, not always 100% sure about cultural competence.”
• “I don’t think there is a good representation of your student body in those teaching the courses. I’ve had great professors, but I didn’t see anyone from my community represented in the faculty and staff.”

Full copies of these survey results are available in ERF G1.6, Evidence of Program’s Climate.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
Purdue University is strongly committed to achieving diversity, equity, and inclusion at all levels. This commitment is showcased through content displayed on Purdue websites, strategic hiring initiatives to grow a diverse workforce, departmental committee and program offerings, and purposeful recruitment and application review procedures.

Weaknesses
None noted.

Plans for Improvement
The Program will utilize information received from stakeholders to guide DEI initiatives.

Considering the recent Supreme Court ruling, race and ethnicity data is no longer being collected. The Department and the University remain committed to diversity, equity, and inclusion efforts, and will reevaluate the parameters of the defined priority under-represented populations in the coming months.
H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program’s curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

1) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

Residential Track
All incoming Residential students are required to attend the in-person departmental orientation held one week prior to the start of fall classes. Residential students are also highly encouraged to attend the Purdue Graduate School orientation held the Friday before fall classes begin. At the departmental orientation, students review the student handbook, review graduation requirements and learn Program, Department, and University processes. Guest speakers are invited to share about resources around campus, and an "Imposter Syndrome" training is provided by the Dean of the Graduate School. On the same day of orientation is the Welcome Back event where students, faculty and staff introduce themselves and network. Prior to orientation, students are enrolled in the "Orientation Checklist" badge in Purdue Passport. This system asks students to complete around a dozen tasks such as registering for courses, accessing pertinent systems, attending online orientation sessions and includes a short quiz on the student handbook.

Online Track
Upon accepting their admittance, Online students are enrolled in the “New Student Demo Course” in their learning management system. This course provides them with an overview of campus offices and resources, insight in navigating the online classroom, tips for the first week of class and communicating online, etc. Course components include:

- Welcome to Purdue!
- Important Information
  - Purdue Systems
  - Meet your Student Services Team
  - Financial Aid
  - Bursar/ Student Accounts
  - Veteran Success Center
  - Technical Support
- Library and Writing Resources
  - Purdue Library Resources
  - Online Writing Lab (Purdue OWL)
- Navigating the Online Classroom
- Communicating Online
  - Student Email Account
  - Netiquette
  - Tips for Crafting Discussion Posts
- What to Expect your First Week
  - What to Expect
  - Best Practices
- Students Rights and Responsibilities
  - Office of the Dean of Students
Online students also have access to the Student Resource Center, which is housed in the learning management system. This provides students with program specific resources to use throughout their time in the program. Topics covered include:

- Student Handbook and CEPH Competencies
- Professional Development Series
- Practicum and Culminating Projects
- Useful Resources and Services while in Program
- Public Health Student Association
- Public Health Knowledge and Practice
- Career Development
- CEPH Accreditation

In addition to the resources within the learning management system, new students are invited to attend a live orientation and Q&A session. The live orientation is hosted by the Student Services Coordinator(s) and is focused on general student onboarding and allows students to meet with the Student Services Team, and learn about Program and University resources, initial course registration, and University systems including student email and BoilerKey.

2) Describe the program’s academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

**Residential Track**

Advising, in many cases, begins before the student begins the enrollment process. The Academic Affairs Administrator typically meets with combined (4+1) and other prospective students before the student applies to the program to discuss the program fit for the student’s career goals. Many stand-alone applicants will also communicate with the Administrator prior to applying. After admittance, the applicants are contacted to meet with the Administrator to develop a draft academic plan prior to enrollment.

All students are required to meet with the Administrator at least once per semester before registration. An Academic Guide is reviewed during the registration meeting, practicum placement progress, course selection, and degree progress and any other special concerns are addressed. Often, students meet with the Administrator several times during the semester for ongoing support. Appointments are made through an online scheduling system. Students are able to log into the system with their Purdue career account and select the time and date that works best.

The Student Handbook provides details on all deadlines for graduation and program requirements. The Administrator also sends out email notifications throughout each semester.

**Online Track**

The Online MPH contracts with Purdue University Online and Wiley Education Services to administer advising services. The Student Service Coordinator(s) serves as the primary contact for students. They provide student support from program start to graduation and focus on student retention and persistence. Responsibilities of the Student Service Coordinator(s) include:

- Monitoring student degree progression, including course registration, completion of plan of study requirements, etc.
- Disseminating pertinent information to students, including program updates, course information, registration planning, tuition due dates, University resources, graduation preparation, etc.
- Provide support for tasks related to Bursar, Registrar, etc. including but not limited to:
  - Transfer policy and procedures
3) Explain how advisors are selected and oriented to their roles and responsibilities.

**Residential Track**
Advisors are selected based on the delivery method of the student. All Residential MPH students are assigned to the Academic Affairs Administrator for academic advising and to the Public Health Graduate Coordinator for registration support. The Academic Affairs Administrator has an advanced degree in public health as well as previous work experience. The current Administrator has been the academic advisor for Residential MPH students since 2015. The Administrator and Coordinator are members of the Graduate Support Network on campus and utilize Graduate School resources as needed. The Graduate School hosts weekly open hours sessions for staff. The Administrator receives support and guidance on course options and curriculum from the Residential MPH Program Director and the Graduate Academic Curriculum Committee. They work with the MPH Residential Curriculum Committee and Graduate Academic Curriculum Committee to design and update curriculum requirements and plans of study for each concentration. Any deviations from the approved plans of study are brought back to the committees for approval (i.e., substituting courses or independent research projects.

**Online Track**
Student Service Coordinators are required to have a bachelor’s degree and 1-3 years of student support and/ or advising experience. Skills in customer service, time management, accuracy, and communication are essential. New Coordinators receive two weeks of orientation to Wiley Education Services before they train with the Program and University on specific systems and processes.

4) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.

Advising materials and resources, such as student handbooks and plans of study, can be found in ERF H1.4, Sample of Advising Materials.
5) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

Graduating students are asked to rate their satisfaction with academic advising within the Program when they complete the MPH Exit Survey. A summary of the data from the last three academic years for students is below:

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n = 14</td>
<td>n = 9</td>
<td>n = 85</td>
</tr>
<tr>
<td>Very Dissatisfied</td>
<td>0</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>1</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>Neither Satisfied nor Dissatisfied</td>
<td>4</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Satisfied</td>
<td>5</td>
<td>2</td>
<td>27</td>
</tr>
<tr>
<td>Very Satisfied</td>
<td>4</td>
<td>3</td>
<td>29</td>
</tr>
</tbody>
</table>

Total number of responses: 120
Total number of students invited to respond: unknown
Response rate: unknown

Prior to the 2022-2023 Academic Year, students in the Online MPH track were not consistently given the opportunity to complete an MPH Exit Survey. When Online students were given the opportunity to complete an Exit Survey, the survey did not inquire about student's satisfaction with academic advising. This oversight has been rectified. Students in both tracks now receive the same MPH Exit Survey, which allows variables to be compared across the entire MPH Program.

In addition to being asked to rate their satisfaction with academic advising, students are also asked to share their suggestions for the Program. Specific feedback on academic advising provides context for dissatisfaction in this area:

- “The attrition rate of advisors was unsettling.” (Online Student, Spring 2023 MPH Exit Survey)
- “There should be more than one academic advisor. My advising appointments were severely unhelpful and led to many issues that impacted my financial and degree timeline.” (Online Student, Fall 2022 MPH Exit Survey)

Both quotes are from students in the Online track. The Online track experienced a period of staff turnover between August 2021 and August 2022. Students in the Program at this time may have experienced longer wait times for advising appointments and may have been impacted by onboarding procedures. These issues have been rectified and were not present in the Residential track.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
The MPH Program is committed to a comprehensive approach to academic advising for both the Residential and Online tracks, which includes the assignment of an experienced full-time academic advisor who regularly meets with students to discuss plans of study and professional and personal growth opportunities and checks in on their overall health and well-being. This approach facilitates successful Program navigation and completion and yields high student satisfaction.

**Weaknesses**
Inconsistent response rates to MPH Exit Surveys.
The Online track experienced a period of staff turnover between August 2021 and August 2022. Students in the Program at this time may have experienced longer wait times for advising appointments and may have been impacted by onboarding procedures. These issues have been rectified.

Plans for Improvement
The Program will utilize approaches that have been effective in achieving high response rates on other Program/Departmental surveys and apply them to the MPH Exit Survey to achieve more consistent response rates.

Information gleaned from advising meetings continues to inform Program development, student support structures, and extracurricular offerings to meet student needs and interests.

H2. Career Advising

The program provides accessible and supportive career advising services for students. All students, including those who may be currently employed, have access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to their
professional development needs; these faculty and/or staff provide appropriate career placement advice, including advice about enrollment in additional education or training programs, when applicable. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program’s career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students’ specific needs.

Multiple resources on career advising exist for students in the MPH Program:

- Purdue students and alumni have access to Purdue’s Center for Career Opportunities (CCO). The CCO serves as the centralized Career Services office for the West Lafayette campus, and provides resources on graduate school and career planning, job search strategies, interview preparation, document review, and more. Students and Alumni can meet with the CCO via virtual or in-person appointments, and the CCO hosts regular professional development and career services events.

- The Academic Affairs Administrator is the academic advisor for all Residential MPH students. During advising meetings, students are expected to discuss career aspirations, extra- and co-curricular involvement, participation in research, etc. Online students are encouraged to meet with the Online Program Manager to discuss similar topics throughout their course of study.

- All students have an opportunity to discuss their post-graduation plans while preparing for and completing the Integrated Learning Experience and Applied Learning Experience (Culminating and Practicum Experiences). The Directors of Experiential Learning interact with all students and regularly advise on preparation and attainment of post-graduation endeavors.

- Students, both Online and Residential, have access to Professional Development Seminars. These seminars are held in-person and have a virtual link for individuals to watch live or view the recording later. Seminar is a chance for students to connect with public health professionals and researchers from across the field.

- The Graduate School hosts professional development workshops throughout the year. Many of these events are held fully online and free of charge. More information can be found here: https://www.purdue.edu/gradschool/professional-development/workshops/index.php.

- Graduating students and Alumni are encouraged to join the “Purdue University Public Health Graduate Program Alumni” group on LinkedIn (https://www.linkedin.com/groups/12536114/). This group allows alumni to connect with each other, current and previous program administration, and current students preparing to graduate. Students are encouraged to join and participate in this group when they complete their Exit Survey a month prior to graduation.

A sample of career advising materials can be found in ERF H2.1, Career Advising Services.

2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

All advisors and faculty that provide career advising services are either trained public health professionals and/ or professionals in student services. These individuals have experience
counseling students in their career development and are equipped to provide students with appropriate resources based on personal goals.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

**Current Students**
The Department of Public Health offers all MPH students the opportunity to attend monthly Professional Development Seminars. PhD students in the Department are also invited. These events are held both online and in-person, and allow students to network with faculty, alumni, and professionals in the field. In August 2022, Dr. Michelle Garrison presented on personal mission statements and developing professional development goals. 74 students attended.

During the APE, students meet regularly with the Directors of Experiential Learning. These faculty members interact and advise all students in preparation for their practicum and post-graduation plans.

**Alumni**
Within the MPH Alumni Survey, alumni are asked if they know that Purdue’s Center for Career Opportunities (CCO) offers career services to alumni. As a result of the MPH Alumni Survey, five alumni were directly connected to the CCO in Spring 2022 and 20 alumni were connected directly to the CCO in Spring 2023. These alumni did not know that they had access to CCO services.

4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

Graduating students are asked to rate their satisfaction with career advising within the program when they complete the MPH Exit Survey. A summary of the data from the last three academic years for Residential students is below:

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>n = 14</td>
<td>n = 9</td>
<td>n = 85</td>
</tr>
<tr>
<td>Very Dissatisfied</td>
<td>0</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>0</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>Neither Satisfied</td>
<td>7</td>
<td>3</td>
<td>42</td>
</tr>
<tr>
<td>nor Dissatisfied</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>5</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>Very Satisfied</td>
<td>2</td>
<td>3</td>
<td>10</td>
</tr>
</tbody>
</table>

Total number of responses: 120
Total number of students invited to respond: unknown
Response rate: unknown

Prior to the 2022-2023 Academic Year, students in the Online MPH track were not consistently given the opportunity to complete an MPH Exit Survey. When Online students were given the opportunity to complete an Exit Survey, the survey did not inquire about student’s satisfaction with career advising. This oversight has been rectified. Students in both tracks now receive the same MPH Exit Survey, which allows variables to be compared across the entire MPH Program.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
MPH academic advisors have significant experience providing career services to graduate students of all stages.

Students regularly connect with faculty, who provide additional career counseling and establish network connections for continued growth and opportunities.

The Program provides several networking opportunities for current students and alumni, including scheduled learning and social events. There is also an alumni LinkedIn page where graduates can stay connected to each other and the Program and share professional opportunities.

A select number of APHA student memberships are awarded by the Department, which is available to MPH students. The state chapter, IPHA, offers free membership to all students.

**Weaknesses**
The response to Program surveys has historically been low, and outcomes suggest students are indifferent about the current career advising approach.

**Plans for Improvement**
Strategies have been implemented to yield higher survey response rates. The Residential and Online tracks have committed to offering career counseling, including partnering with the University's Center for Career Opportunities (CCO), as part of their professional development series.

The Program plans to coordinate reoccurring office hours with the CCO for MPH students, where they have the flexibility to attend, as needed, and receive information related to their career goals and trajectories.
H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate complaints and/or grievances to program officials, addressing both informal complaint resolution and formal complaints or grievances. Explain how these procedures are publicized.

There are various methods students can utilize to lodge a complaint:
1. All formal complaints filed within the Department of Public Health are to be sent via email to publichealth@purdue.edu. This email is monitored by administrative staff who can direct the complaint to the appropriate Program Leader or Department Head.
2. The Purdue Graduate School and the Office of Graduate Assistance has an Ombuds and Mediation Services program that allows graduate students a private means of discussing concerns with trained peers and staff. While this is not a formal route of grievance, any graduate student can discuss concerns about their graduate education with an Ombuds.
3. Students can direct complaints of any nature to the Academic Affairs Administrator, Online Program Manager, Residential MPH Program Director, Online MPH Program Director, and/or Public Health Department Head. These individuals can assist any student(s) in identifying the appropriate resources for resolution.

These procedures are publicized within the Student Manuals and discussed during student orientations. Students are also directed to these procedures when applicable.

2) Briefly summarize the steps for how a formal complaint or grievance is filed through official university processes progresses. Include information on all levels of review/appeal.

If a student is interested in appealing their final assigned grade for the course, they can file a Grade Appeal through the Office of Student Rights and Responsibilities, which is a division of the Office of the Dean of Students (https://www.purdue.edu/odos/osrr/grade-appeal-process/). The process for filing a Grade Appeal is as follows:

1. Informal Attempt
   a. Student must make an informal attempt by contacting their instructor and requesting a grade change.
   b. If the instructor does not change the grade and the student is still in disagreement, the student may contact the Department Head to request a grade change.

2. Formal Process
   a. If the Informal Attempt is not successful, a student may:
      i. Prepare and submit a written appeal within 30 calendar days after the start of the following regular semester. This written appeal is submitted to the Grade Appeals Committee chair of the college or school in which the course originates.
      ii. The Grade Appeals Committee has 7 days to review the written appeal and determine if a hearing is needed.
      iii. If needed, the hearing will be scheduled within 14 days after notification is given to both parties.
      iv. A written decision is released to both parties within 3 days of the hearing conclusion.
      v. Both parties have 6 days to appeal the decision in writing to the University Grade Appeals Committee.
In situations pertaining to Student Conduct, Academic Integrity, or violation of other University regulations, the Office of Student Rights and Responsibilities will oversee all procedural steps, including a preliminary investigation and initiation of disciplinary proceedings. Students will work with a Conduct Officer from the Office of Student Rights and Responsibilities throughout the proceedings, which may include a hearing conducted by the Community Standards Board. Following the hearing and any further investigation, the Dean of Students and, if appropriate, the Dean of the Graduate School, shall review the recommendation of the Community Standards Board to determine a decision and disciplinary sanction. The student is notified via letter. Under certain criteria and procedures, a student may appeal the disciplinary sanction/decision. Instructions regarding the appeal will be provided in the decision letter.

3) List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution.

No formal complaints or student grievances have been submitted in the last three years.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Strengths**
None noted.

**Weaknesses**
None noted.

**Plans for Improvement**
None noted.
H4. Student Recruitment and Admissions

The program implements student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program’s various learning activities, which will enable each of them to develop competence for a career in public health.

1) Describe the program's recruitment activities. If these differ by degree (e.g., bachelor’s vs. graduate degrees), a description should be provided for each.

Recruitment efforts for the MPH Program are focused on reaching and retaining qualified individuals who will be meaningful contributors to their communities and the field of Public Health. There are slight variances in recruitment activities between the two tracks of the MPH Program:

- **Residential recruitment efforts rely on word of mouth.** Faculty will relay information about the program and the field during lectures, panels, and speaking engagements. The Academic Affairs Administrator hosts virtual and in-person recruitment events, and faculty and staff are equipped to discuss the Program at conferences, such as APHA, and other events. As the Department of Public Health and the College of Health and Human Sciences do not have a designated recruiter, many applicants learn about the Program while exploring degree options through the Graduate School.

- **Wiley Educational Services oversees the marketing and recruitment efforts for the Online MPH track.** The Brand Manager works in close partnership with the Online MPH Program Director and Online Program Manager on program marketing efforts and ensures delivery of all integrated marketing and recruitment initiatives. Search Engine Optimization has been shown to be the most successful driver of successful applicants. After prospective students express interest in the Online MPH Program, Wiley recruitment staff work with them to provide pertinent information on the Program, application process, and upcoming deadlines. The Online MPH Program Director and the Online Program Manager meet bimonthly with all Wiley staff to ensure fidelity to Program, Department, College, and University standards and expectations.

Both tracks utilize membership and participation in the Association of Schools and Programs in Public Health (ASPPH), Indiana Public Health Association (IPHA), and American Public Health Association (APHA). Social media pages and alumni networks are also utilized to recruit qualified individuals.

2) Provide a brief summary of admissions policies and procedures. If these differ by degree (e.g., bachelor’s vs. graduate degrees), a description should be provided for each. Detailed admissions policies, if relevant, may be provided in the electronic resource file and referenced here.

Applications to the MPH Program include the following:

- **Transcripts for every institution of higher education attended.** A cumulative undergraduate GPA of at least 3.0 is preferred, but applicant’s holistic submission will be considered.

- **Three letters of recommendation (for Residential students, two of these letters must be from an academic perspective; Online students must have at least one letter from an academic perspective).**

- **Statement of Purpose responding to the following statement, “Discuss your past, present, and future. What have you accomplished that uniquely qualifies you for this program and your intended concentration? Why are you applying to this program? What are your professional, academic, and personal goals? How does this program fit into your goals? You may also provide a brief GPA statement, highlighting any shortcomings, if necessary.”**

- **Resume or Curriculum Vitae.**

- **Application via SOPHAS (Residential students) or Slate (Online and 4+1 students) and corresponding application fee.**
• International students must submit their official English Proficiency Test scores in accordance with the Graduate School requirements.

The GRE was waived indefinitely in 2021 in response to the COVID-19 pandemic. Currently, no plans exist for reinstating this requirement.

Prior to the recent Supreme Court ruling, a Diversity Statement was required. This has been removed from all applications as of Summer 2023.

Procedures vary as necessary by program track, with the most notable difference pertaining to admissions deadlines. Residential students are admitted for a Fall, Spring, or Summer matriculation. The Online program offers rolling admissions, which allows students to enroll and begin courses as quickly as possible.

For both tracks, faculty on the corresponding Curriculum Committees review each application. Each application undergoes three unique reviews. The Department’s Diversity, Equity, and Inclusion Committee provides training to all application reviewers to ensure fair review.

Application requirements can be found in ERF H4.2, Admissions Policies and Procedures.

3) Provide quantitative data on the unit’s student body from the last three years in the format of Template H4-1, with the unit’s self-defined target level on each measure for reference. In addition to at least one from the list that follows, the program may add measures that are significant to its own mission and context.

<table>
<thead>
<tr>
<th>Outcome Measures for Recruitment and Admissions‡</th>
<th>Target</th>
<th>2019-2020^^</th>
<th>2020-2021*</th>
<th>2021-2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of priority under-represented students (as defined in Criterion G1) accepting offers of admission^</td>
<td>25%</td>
<td>NA</td>
<td>33.53%</td>
<td>26.67%</td>
</tr>
<tr>
<td>Number of Black or African American</td>
<td>--</td>
<td>NA</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Number of Hispanic/ Latino</td>
<td>--</td>
<td>NA</td>
<td>8</td>
<td>16</td>
</tr>
<tr>
<td>Number of Non-traditional age (30+)**</td>
<td>--</td>
<td>NA</td>
<td>29</td>
<td>28</td>
</tr>
</tbody>
</table>

^Numbers are representative of both the Online and Residential tracks
^^Metrics not tracked prior to Spring 2021
* Numbers in this column are representative of Spring 2021 and Summer 2021 only. Data not available for Fall 2020.
** Metric represents the average age of student who accepted enrollment
‡ Due to the recent Supreme Court ruling, race and ethnicity data will no longer be collected. Data presented is prior to the Summer 2023 ruling.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.
**Strengths**
The members of the MPH Residential Curriculum Committee and MPH Online Curriculum Committee are cycled every three years, which refreshes the admissions perspectives to include new reviewers.

The Program has implemented priority deadlines and communication plans to streamline how and when applicants receive information about their application status.

The GRE requirement has been suspended to reduce barriers to applying to the MPH Program.

Utilizing SOPHAS for the Residential track has increased program recruitment and applications received.

**Weaknesses**
There is not a formal recruitment strategy for the Residential MPH track, outside of University efforts.

Due to the Program utilizing both SOPHAS and the University’s Graduate School application procedures (Slate), it can be confusing and costly for students who are submitting documents through both platforms.

**Plans for Improvement**
The Department's website was refreshed to relay information explicitly about what is needed to complete an application, where to submit the application to, and the application deadline.

The MPH Program will be working within the Department and College to develop recruitment strategies to meet goals and projections.

Considering the recent Supreme Court ruling, race and ethnicity data is no longer being collected. The Department and the University remain committed to diversity, equity, and inclusion efforts, and will re-evaluate the parameters of the defined priority under-represented populations in the coming months.
H5. Publication of Educational Offerings

Catalogs and bulletins used by the program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

1) Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

University Catalog:
https://catalog.purdue.edu/index.php

Department of Public Health Catalog Entry:

Academic Calendar:
https://catalog.purdue.edu/preview_program.php?catoid=16&poid=27594

Admissions Policies:
https://catalog.purdue.edu/content.php?catoid=16&navoid=19695
https://www.purdue.edu/gradschool/prospective/gradrequirements/westlafayette/hhmp.html

Residential Track:
https://hhs.purdue.edu/graduate-programs/master-of-public-health-mph-graduate-program/?_ga=2.214884439.1106996980.1688994223-295702675.1685553267

Online Track:
https://online.purdue.edu/programs/health-sciences/masters-in-public-health?_ga=2.46286119.1223953384.1662996007-1145867360.1658243451

Grading Policies:
https://catalog.purdue.edu/content.php?catoid=16&navoid=19711

Academic Integrity Standards:
https://catalog.purdue.edu/content.php?catoid=16&navoid=19705
https://www.purdue.edu/odos/osrr/academic-integrity/graduate.html

Degree Completion Requirements:
https://catalog.purdue.edu/content.php?catoid=16&navoid=19711
https://catalog.purdue.edu/content.php?catoid=16&navoid=19706

Residential Track:
https://hhs.purdue.edu/graduate-programs/master-of-public-health-mph-graduate-program/

Online Track:
https://online.purdue.edu/programs/health-sciences/masters-in-public-health/courses?_ga=2.46286119.1223953384.1662996007-1145867360.1658243451

End of Document