



Maternal and Child Health

MPH Degree Program

Division of Epidemiology and Community Health

2018-2019

STUDENT GUIDEBOOK

SCHOOL OF
PUBLIC HEALTH

UNIVERSITY OF MINNESOTA

Welcome to the University of Minnesota School of Public Health!

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

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

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

The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status, or sexual orientation.

This publication can be made available in alternative formats for people with disabilities. Direct requests to the Student Services Center, School of Public Health, MMC 819 Mayo, 420 Delaware Street SE, Minneapolis, MN 55455; 612-626-3500 or 800-774-8636.

TABLE OF CONTENTS

Table of Contents	3
1. Maternal and Child Health MPH Degree Program	5
1.1 Fall 2018 Standard and Advanced Standing (formerly Online) Program Curriculum	5
1.2 Fall 2018 MCH Epidemiology Emphasis Program Curriculum	8
MCH Core (6 credits).....	8
Methodological and Analytical Skills (13 credits).....	8
Management, Communication, Policy and Advocacy Skills (5-7 credits)	8
Applied Practice Experience (APEX) and Integrated Learning Experience (ILE) (2-4 credits)	9
Electives (to total 48 credits).....	9
1.3 Other MPH Degree Requirements	10
Changing Tracks:.....	10
Registration Requirement	10
Course Numbers and Graduate Credit	10
MPH Study Plan	10
Time Frame.....	10
Course Transfer Credits.....	10
Course Substitutions and Waivers.....	11
Application for Degree	11
1.4 Planning Your Schedule	12
1.5 Applied Practice Experience (APEX)	12
1.6 Integrated Learning Experience (ILE)	18
Costs Associated with the ILE	23
Dissemination and Authorship	23
1.7 Career Survey.....	23
1.8 Program Faculty List.....	24
Primary Faculty.....	24
Adjunct Faculty.....	25
Health of college students; Urban Health	25
1.19 Graduation Checklist.....	25
General steps for all MPH majors.....	25
2. Division of Epidemiology and Community Health (EpiCH).....	27
2.1 Welcome.....	27
2.2 The West Bank Office Building (WBOB)	27
2.3 Division Communication with Students	28
2.4 Seminars	28
2.5 Academic Credit for Independent or Directed Coursework	28
2.6 Division Resources and Policies	30
Incomplete Grades	30
Six Credit Minimum Exemption.....	30
Sitting in on a Class.....	30
Support for Student Travel (effective 5/2017)	30

Payment for TA English Program	31
SAS Access	31
J.B. Hawley Student Research Award	31
Martinson-Luepker Student Travel Award	34
Division of Epidemiology and Community Health Student Support Policies.....	34
Requesting Letters of Support – 10 Tips for Students	34
Division of Epidemiology and Community Health Websites	36
2.7 Division Advising Information	36
Guidelines for Faculty/Student Interactions	36
Confidentiality	37
Sexual Harassment Policy.....	37
Guidelines for Changing Advisors.....	37
Guide to Mission, Definitions and Expectations of Advising	38

1. MATERNAL AND CHILD HEALTH MPH DEGREE PROGRAM

1.1 FALL 2018 STANDARD AND ADVANCED STANDING (FORMERLY ONLINE) PROGRAM CURRICULUM

Advanced Standing = 42 Semester Credit Minimum

Standard = 48 credit Minimum

Please note that students must take the following courses A/F and receive a grade of B- or higher: All MCH Core Content courses; PubH 6673 Grant Writing; PubH 6034/PubH 6852 Program Evaluation; and all Public Health Core Courses.

MCH Core Content			
PubH 6630 OR PubH 6655	Foundations of MCH Leadership (in-person – preferred course for standard students) Principles of MCH in the US (online)	Fall Summer	3 2
Advanced Standing = Select three (3) courses from the following list Standard = Select four (4) courses from the following list			
PubH 6605	Reproductive and Perinatal Health (in-person)	Spring	2
PubH 66XX	Global Maternal and Child Health (online)	Fall '19 (and every fall after)	2
PubH 6606	Children's Hlth: Equity and Lifecourse Perspectives (online)	Spring	2
PubH 6607	Adolescent Hlth: Issues, Programs and Policies (in-person)	Spring '20	2
PubH 6613	Children and Youth With Special Health Care Needs (online)	Fall	2
PubH 6675	Women's Health (in-person)	Fall '19	2
PubH 6907	Maternal, Infant, Child, & Adolescent Nutrition (in-person) or Maternal, Infant, Child, & Adolescent Nutrition (online)	Fall Summer	3 3
Methods and Analysis			
*If choosing to take PubH 6414 to meet the SPH Biostats core requirement you must also take one of the following one credit SAS class (PubH 6325, Pubh 6420 or Pubh 6107)			
PubH 6034 or PubH 6852	Evaluation (in-person) Program Evaluation in Health and Mental Health Settings (online and in-person)	Spring Fall (in-person)/Spring (online)	3 2
Advanced Standing = Select a Minimum of 3 credits from this list Standard = Select a minimum of 3 courses from this list			
PubH 6035	Applied Research Methods (in-person)	Fall	3
PubH 6107*	Excel and Access Skills in Public Health Settings (in-person)	Spring	1

PubH 6307	Clinical Epidemiology (online)	Spring	2
PubH 6325*	Data Processing with PC SAS (partially online)	Fall/Spring	1
PubH 6342	Epidemiologic Methods II (in-person)	Spring	3
PubH 6389	Nutritional Epidemiology (in-person)[pre-req PubH 6320 or 6341]	Fall	2
PubH 6420*	Introduction to SAS Programming (in-person) OR Introduction to SAS Programming (online)	Fall Summer	1 1
PubH 6451	Biostatistics II (online and in-person - prerequisite 6450)	Fall/Spring	4
PubH 6617	Practical Methods for Secondary Data Analysis (in-person)	Fall	3
PubH 6636	Qualitative Research Methods in Public Health Practice (in-person)	Spring	2
PubH 6765	Continuous Quality Improvement: Methods and Techniques (in-person and online)	Fall/Spring (online)	3
PubH 6803	Conducting a Systematic Literature Review (in-person)	Spring	3
PubH 6806	Principles of Public Health Research (online) OR Principles of Public Health Research (in-person)	Fall Spring	2 2
PubH 6810	Survey Research Methods (in-person)	Spring	3
PubH 6845	Using Demographic Data for Policy Analysis (in-person)	Spring	3
PubH 6864	Conducting Health Outcomes Research (in-person)	Spring	3
PubH 6880	Introduction to Public Health Informatics (in-person)	Spring	2
PubH 6914	Community Nutrition Intervention (in-person)	Spring	3
PubH 7250	Designing and Conducting Focus Group Interviews	Spring	1
PubH 7415 PubH 7420	Introduction to Clinical Trials (online) OR Clinical Trials: Design, Implementation and Analysis (in-person)	Sum/Fall Spring	3 3
Management, Communications, Policy and Advocacy Skills (2-4 credits)			
PubH 6673 OR Nurs 5925	Grant Writing for Public Health (in-person) Grant Writing (online)	Spring Spring	1 1
Advanced Standing and Standard = Select one additional course from the list below:			
PubH 6000	Urban Health and Social Policy (in-person)	Spring '20/'22	2
PubH 6045	Skills for Policy Development (in-person)	Spring	1
PubH 6049	Legislative Advocacy Skills for Public Health (pre-req 6078; in-person)	Spring	3
PubH 6066	Building Communities, Increasing Health: Preparing for Community Health Work (in-person)	Fall	2
PubH 6074	Mass Communication and Public Health (in-person)	Fall	3
PubH 6078	Public Health Policy as a Prevention Strategy (in-person)	Fall	2
PubH 6556	Health and Health Systems (in-person)	Fall	3
PubH 6571	Leading Performance Improvement in Health Care (hybrid)	Spring	2
PubH 6627	Sexuality Education: Criteria, Curricula and Controversies (in-person)	Fall	1
PubH 6634	Children and Families: Public Health Policy and Advocacy (in-person)	Fall (not avail Fall '18)	2
PubH 6702	Integrative Leadership Seminar (in-person)	Fall/ Spring	3

PubH 6711	Public Health Law (in-person)	Spring	2
PubH 6724	The Health Care System and Public Health (in-person)	Fall	3
	The Health Care System and Public Health (online)	Spring	3
PubH 6727	Health Leadership and Effecting Change (in-person)	Spring	2
PubH 6735	Principles of Health Policy (in-person)	Fall	3
	Principles of Health Policy (online)	Spring	3
PubH 6755	Planning and Budgeting for Public Health (online)	Summer	2
PubH 6805	Introduction to Project Management (in-person)	Summer	2
PubH 6807	Global Health Relief, Development and Religious and Non-religious NGO's (in-person)	Spring	3
PubH 7691	Applied Methods for Health Transformation in MCH (offered online by University of North Carolina)	Fall	1-2
PubH 6955	Using Policy to Address Child and Adolescent Obesity Prevention (online)	Spring	1
PubH 6571	Leading Performance Improvement in Health Care (hybrid)	Spring	2
PubH 7556	Health and Health Systems (online)	Spring	2
PubH 7569	Health Care Policy (online)	Summer	1
Public Health Core (15-16 credits)			
☞ Note: Courses designated as part of the Public Health Core must be taken for a letter grade (A/F) ☞			
PubH 6020	Fundamentals of Social and Behavioral Science(in-person and online)	Fall/Spring /Summer	2
PubH 6101 or PubH 6102	Environmental Health (in-person)(not offered after F 2018)	Fall/Spring	2
	Issues in Environmental and Occupational Health (in-person and online)	Fall/Spring/ Summer	2
PubH 6250	Foundations of Public Health (online)	Fall/Spring	2
PubH 6320 or PubH 6341	Fundamentals of Epidemiology (in-person and online)	Fall/Spring/ Summer	3
	Epidemiologic Methods I (in-person)	Fall	3
PubH 6414 or PubH 6450	Biostatistical Literacy (in-person and online)**	Fall/Spring Summer	3
	Biostatistics I (in-person and online)	Fall/Spring	4
PubH 6741	Ethics in Public Health: Professional Practice and Policy (online)	Fall/Spring/ Summer	1
PubH 6751	Principles of Management in Health Services Organizations (in-person and online)	Fall/Spring/ Summer	2
Applied Practice Experience and Integrated Learning Experience (3-4 credits)			
PubH 7696	Applied Practice Experience (APEX)	Any term	1-2
PubH 7694	Integrated Learning Experience (ILE)	Any term	1-2
Electives (Advanced Standing - to total 42 credits; Standard – to total 48 credits)			

**If choosing to take PubH 6414 you must also take a one credit SAS class (PubH 6325, Pubh 6420 or Pubh 6107)

1.2 FALL 2018 MCH EPIDEMIOLOGY EMPHASIS PROGRAM CURRICULUM

48 Semester Credit Minimum

Please note that students must take the following courses A/F and receive a grade of B- or higher: All scientific basis courses; PubH 6673 (or Nurs 6925) Grant Writing; PubH 6630 Foundation of MCH Leadership; and all SPH Core Courses.

MCH Core (6 credits)			
<i>Select one course from the list below:</i>			
PubH 6123	Violence Prevention and Control: Theory, Research and Application	Spring	2
PubH 6605	Reproductive and Perinatal Health	Spring	2
PubH 6675	Women's Health	Fall `19/Fall `21	2
PubH 6600	Global MCH (online course)	Fall `19	2
<i>Select one course from the list below:</i>			
PubH 6381	Genetics in Public Health in the Age of Precision Medicine	Fall	2
PubH 6385	Epidemiology & Control of Infectious Disease	Spring	2
PubH 6386	Public Health Aspects of Cardiovascular Disease	Fall	2
PubH 6387	Cancer Epidemiology	Spring	2
PubH 6389	Nutritional Epidemiology	Fall	2
<i>Select one course from the list below:</i>			
PubH 6606	Children's Health: Issues, Program and Policies (online course)	Spring	2
PubH 6607	Adolescent Health: Issues, Programs & Policies	Spring '18/Spring '20	2
PubH 6613	Children and Youth with Special Health Care Needs (online course)	Fall '18/Fall '20	
PubH 6906	Global Nutrition	Spring	2
PubH 6907	Maternal, Infant, Child and Adolescent Nutrition (in-person)	Fall	3
	Maternal, Infant, Child and Adolescent Nutrition (online)	Summer	3
Nurs 6924	Assessment and Intervention for Children and Youth with Special Health Care Needs	Fall	2
Methodological and Analytical Skills (13 credits)			
PubH 6342	Epidemiologic Methods II (prerequisite 6341)	Spring	3
PubH 6343	Epidemiologic Methods III (prerequisite 6342)	Fall	4
PubH 6350	Epidemiologic Methods III Lab	Fall	1
PubH 6451	Biostatistics II	Spring	4
PubH 6325 OR	Data Processing with PC SAS	Fall/ Spring	1
PubH 6420	Introduction to SAS Programming	Fall/ Summer	1
Management, Communication, Policy and Advocacy Skills (5-7 credits)			
PubH 6673	Grant Writing for Public Health	Spring	1
PubH 6630	Foundations of MCH Leadership	Fall	3
<i>Please select one additional course from the list below:</i>			
PubH 6034	Evaluation	Spring	3
PubH 6045	Skills for Policy Development	Spring	1
PubH 6066	Building Communities, Increasing Health: Preparing for Community Health Work	Fall	2
PubH 6074	Mass Communication and Public Health	Fall	3

PubH 6078	Public Health Policy as a Prevention Strategy	Fall	2
PubH 6571	Leading Performance Improvement in Health Care (Hybrid)	Spring	2
PubH 6634	Advocacy and Children's Rights	Fall	2
PubH 6702	Integrative Leadership Seminar	Fall/Spring	3
PubH 6711	Public Health Law	Spring	2
PubH 6724	The Health Care System and Public Health	Fall (online)/ Spring	3
PubH 6727	Health Leadership and Effecting Change	Spring	2
PUBh 6735	Principles of Health Policy (in-person)	Fall	3
	Principles of Health Policy (online)	Spring	3
PubH 6755	Planning and Budgeting for Public Health	Fall/Summer (online)	2
PubH 6805	Introduction to Project Management	Summer	2
PubH 6807	Global Health Relief, Development and Religious and Non-religious NGO's	Spring	3
PubH 6955	Using Policy to Address Child and Adolescent Obesity Prevention(online)	Spring	1

Public Health Core (16 credits)

 **Note: Courses designated as part of the Public Health Core must be taken for a letter grade (A/F)** 

PubH 6020	Fundamentals of Social and Behavioral Science(available online)	Fall/Spring /Summer	2
PubH 6101 or PubH 6102	Environmental Health OR Issues in Environmental and Occupational Health (online or in-class)	Fall/Spring Fall/Spring/Summer	2 2
PubH 6250	Foundations of Public Health (Online)	Fall/Spring	2
PubH 6341	Epidemiologic Methods I	Fall	3
PubH 6450	Biostatistics I (available online)	Fall/Spring	4
PubH 6741	Ethics in Public Health: Professional Practice and Policy	Fall/Spring/Summer	1
PubH 6751	Principles of Management in Health Services Organizations (available online)	Fall/Spring/Summer	2

Applied Practice Experience (APEX) and Integrated Learning Experience (ILE) (2-4 credits)

PubH 7696	Applied Practice Experience (APEX)	Fall/Spring/Summer	1-2
PubH 7694	Integrated Learning Experience (ILE)	Fall/Spring/Summer	1-2

Electives (to total 48 credits)

Elective Credits/Concentrations

Elective courses are usually taken during the second year. Electives must be 5XXX level or higher and may be taken within the School of Public Health or in other areas of the University.

PLEASE NOTE: Students in the MCH-Epi track are strongly encouraged to declare the Epidemiology Minor for master's level students which will appear on the transcript as a sub-plan. Contact EpiCH Student Services at epichstu@umn.edu for details on how to declare a minor.

1.3 OTHER MPH DEGREE REQUIREMENTS

The basis for all MCH graduate program curricula in the U.S. are the Maternal and Child Health Competencies (<http://www.atmch.org/sites/atmch.org/files/documents/mchcomps.PDF>). They were developed by the education committee of the Association of Teachers of Maternal and Child Health and approved by the membership and the Association of Schools of Public Health MCH Council in 1993 and revised in 2001. Achieving these competencies permit MCH professionals to perform the MCH essential services in the broader context of public health core functions.

MCH curricula are also informed by competencies identified by the Council on Education for Public Health, an independent agency that accredits schools of public health.

Changing Tracks:

Students may request to switch tracks by completing a form available by contacting the EpiCH Student Services staff, at epichstu@umn.edu. Students are encouraged to discuss changing tracks with their academic advisor as early in the program as possible.

Registration Requirement

To graduate with an MPH at the University of Minnesota students are required to register for at least 2 semesters and 20 credits in the School of Public Health.

Course Numbers and Graduate Credit

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

MPH Study Plan

Students are required to submit a completed MPH Study Plan to the EpiCH Student Service staff, at epichstu@umn.edu at least one semester prior to their anticipated completion of coursework.

Time Frame

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

Course Transfer Credits

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

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

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

Students must:

1. Meet with their academic advisor to discuss the petitioning process. If the petition is acceptable to the advisor, the student will complete and sign the Academic Policy Petition form, and attach an official transcript on which the final grade has been posted.
2. Submit the Academic Policy Petition form to the Program Coordinator for processing. The Academic Policy Petition form can be found at www.sph.umn.edu/current/resources/.

3. The Program Coordinator will forward the petition to the Program Director for approval and signature and then to the Student Services Center for the Associate Dean for Learning Systems and Student Affairs for final evaluation and/or approval.

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

Course Substitutions and Waivers

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

Students should note that the process for approving a course substitution or waiver could take up to one month, so plan accordingly.

Course Substitution Procedures

The process outlined below should be followed when requesting that a course substitute for a required course in the degree program.

1. Obtain the course syllabi of the required course in your degree program and the proposed substitute course and a transcript on which the proposed course grade has been posted (if the proposed course has already been completed).
2. Complete the *Petition* form with the following information in each section:
 - Briefly state the exception or approval to be considered: describe the course requested for substitution including the course title, number of credits, term and year taken, and the name of the institution where the course was taken. Also list the course/requirement in your degree program for which you are asking for the substitution.
 - Provide an explanation or reason to grant your request below: Indicate what skills and/or content overlaps between the required course(s) and the proposed substitute course(s).
3. Compile the above materials and submit these materials to the EpiCH Student Services staff via email at epichstu@umn.edu who will forward it to the appropriate Credentials Committee for review. The student will be notified via e-mail of the committee's decision.
4. If the substitute course is to replace a School of Public Health Core course (administration—PubH 6751, behavioral/social science—PubH 6020, biostatistics—PubH 6414/6450, environmental health—PubH 6101/6102, epidemiology—PubH 6320/6341, ethics—PubH 6741, Foundations Public Health PubH 6250, there is an additional step to get School-level approval. To complete this next step, provide the materials to the EpiCH Student Services staff. Upon receipt of those materials, the materials will be reviewed with the Program Director and then if approved by the Program Director, the request will be forwarded to the SPH Student Services Center to be presented to the appropriate SPH Educational Policy committee members. The student will be notified via e-mail of the committee's decision. If the Program Director does not approve of the request, the EpiCH Student Services staff will inform the student that the request will not be forwarded to the SPH Educational Policy Committee for review.

Application for Degree

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

1.4 PLANNING YOUR SCHEDULE

Students are strongly encouraged to develop a draft plan for degree completion sometime during the initial term of registration. This draft should be reviewed by the EpiCH Student Services staff, at epichstu@umn.edu for feedback.

1.5 APPLIED PRACTICE EXPERIENCE (APEX)

Introduction

The Applied Practice Experience (APEX) is a required hands-on learning opportunity to implement your public health Maternal and Child Health program-specific theory, knowledge, and skills in a real-world practice setting, under the direction of a preceptor, a public health professional who will supervise the work. The goal of the APEX is to demonstrate the application or practice of *at least five public health competencies*, as required by the Council on Education for Public Health (CEPH). Competencies are demonstrated through the production of *at least two work products*. The APEX products must link to *at least three of the Public Health Foundational Competencies and to at least two of the Maternal and Child Health MPH program Competencies*. Foundational and Program Competencies are below. When selecting your APEX, think about the competencies or skills that you want to work on and what content areas or settings about which you would like to learn more. Prior work/volunteer activities or coursework that begins before the learning agreement is approved will not be accepted. *Waivers are not accepted.*

- A student should work with the APEX advisor, their academic advisor, and the APEX preceptor to insure that the APEX work products will benefit both the organization and will fulfill the above requirements. The MCH APEX advisor is Dr. Mark Pereira.
- The APEX may be completed at the student's current workplace, if applicable, but must begin after the learning agreement is approved.
- An APEX can be paid or unpaid.

Preparing to Meet the APEX Requirement

How many credits should I take? The APEX must involve a minimum of 120 hours of work. The expectation is that students will complete the APEX through a single internship (either paid or unpaid), except for extraordinary situations. Students will register for PubH 7696 for either 1 or 2 credits. Generally, students should register for 1 credit; two credits require more than 120 hours of work and at least three work products.

When should I complete the APEX? The APEX is typically completed after two semesters in the MCH program (usually in the summer in between the first and second year). The APEX should not be started until after students have completed the following courses:

- PubH 6250 (Foundations of Public Health)
- PubH 6630/PubH 6655 (Principles/Foundations of MCH),
- At least one additional MCH core course

Students (including part-time and advanced standing students) may select an earlier or later start for their APEX in consultation with their academic advisor and the APEX advisor. Students are encouraged to begin seeking an appropriate placement site ~3-6 months before they are prepared to begin.

Where will the APEX occur? The APEX can be completed at governmental, non-governmental, non-profit, for-profit, and some university-affiliated settings. University-affiliated settings must be primarily focused on community engagement activities and can include University health promotion or wellness centers. An APEX cannot be a research or teaching assistantship with a faculty member unless the work under the APEX directly benefits an external (non-University) community agency or program.

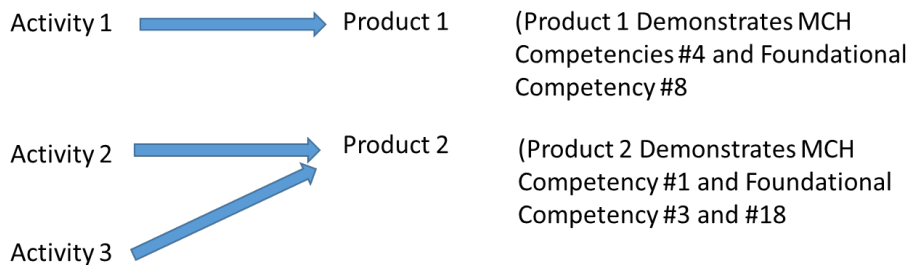
How do I identify an APEX preceptor/experience? The first step is to identify your interests and find a good match. The SPH has helpful tools that provide a self-learning tool, hints for networking and

professional development, and a searchable database of many APEX sites that have hosted SPH students in the past: <http://www.sph.umn.edu/careers/fe/>. The student should make contact with the organization to confirm that the APEX preceptor is available and interested in working with the student. If you have difficulty after using these tools and guidance, students should consult with the APEX advisor and their academic advisor in selecting a practice experience that will provide an opportunity to achieve their own educational and professional objectives and meet the APEX requirements.

Registering For, and Completing, the APEX

Once an APEX experience placement is identified, the student should make contact with the organization to define a specific project or area, determine the time commitment, and establish a site preceptor. The site preceptor will supervise the APEX. The student, site preceptor, and APEX advisor should all agree upon the competencies that will be met and the products that the student will take the lead in developing. A Learning Agreement should then be completed. The Figure below shows an example of the relationship between three APEX activities, two APEX products, and competencies for a student. Your particular case may be different, but there must be two products linked to a total of 5 competencies (at least 3 Foundational and at least 2 MCH competencies).

Linking Activities, Products and Competencies for the APEX



The Learning Agreement

The APEX learning agreement directs you to complete the required Competency Assessment Tool (CAT). In the APEX learning agreement, you will provide information on your upcoming APEX experience (where you will be working, when this will occur, with whom you will be working, etc.) and identify the competencies that will be fulfilled. At the end of your APEX you will verify which competencies were fulfilled and upload your APEX product(s) for your advisor to review.

Step by step instructions:

- Fill out the Competency Assessment Tool (CAT). This tool is designed to help you identify which competencies you plan to address through the APEX. Discuss the results with your APEX advisor and your academic advisor.
- Discuss the five competencies you will address through the APEX and the two products that will result from the experience with your preceptor prior to starting the learning agreement. Meet with the APEX advisor to review the competencies and products you agreed on with your preceptor. It is important that you and your preceptor agree on the expectations for the APEX.
- You will document the five competencies in the Learning Agreement
- Initiate and submit the [online Learning Agreement](#) prior to beginning the experience.
- Preceptor approves APEX learning agreement.
- APEX Advisor approves APEX learning agreement.
- Once the agreement is signed, register for the appropriate course number of credits. You will be given registration details by the EpiCH Student Services staff once the Learning Agreement has been approved by the APEX Advisor and the Site Preceptor.

- Note: You are required to enroll in APEX credit(s) and submit the agreement before beginning the APEX. You may only commence the APEX after you are registered for the credit(s) and the transcript shows registration for APEX credit(s). Ideally, you will complete the APEX during the term for which you are registered, but if necessary, a portion of your APEX can be done in another term.
- Note: Some facilities require a criminal background check. If students need a background check they can contact the Student Service Center at sph-ask@umn.edu.
- Start the APEX.

Completion of the APEX

The student is required to keep a careful record of their hours with the organization and their activities. If the student is not receiving sufficient supervision, work, and support at the organization/from the preceptor, the student must reach out to their academic advisor, the APEX advisor and/or the Program Director for assistance to resolve the problem in a timely manner. Upon completion, both students and site preceptors are required to complete electronic evaluations, and the student must upload their APEX products to an online folder for evaluation. The products, self-evaluation, and preceptor evaluation will be assessed by the APEX advisor who will grade them on S/N basis.

Who can help me to set up and complete the APEX?

- The Academic Advisor will help the student decide what kind of APEX best fits their interests and needs, and can advocate for the student with potential preceptors. The APEX Advisor will review the self- and preceptor evaluations of the APEX and products of the APEX, and enter the final grade.
- The APEX Advisors can assist in assuring the APEX will meet the requirements, how to approach preceptors, complete the learning agreement, clarify product requirements, credits, and timing of the experience.

Foundational and Program Competencies

Public Health Foundational Competencies	Maternal and Child Health Program Competencies
F1: Apply epidemiological methods to the breadth of settings and situations in public health practice	MCH1: Use publically available data to appraise and/or prioritize important health issues for specific MCH populations, including place, race, and status disparities in health and wellness.
F2: Select quantitative and qualitative data collection methods appropriate for a given public health context	MCH2: Describe and weigh the role of social determinants of health as they affect women, infants, children, adolescents, and/or pregnant and parenting families, including their contribution to disparities in health.
F3: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.	MCH3: Select appropriate evidence-based US (e.g., CDC) and global (e.g., WHO) guidelines, recommendations, programs and initiatives to promote newborn, child, adolescent, maternal, paternal reproductive, and women's health, including Title V programs.
F4: Interpret results of data analysis for public health research, policy or practice.	MCH4: Explain concepts and elements of the life course health development framework and argue for its integration in MCH programs or policies.
F5: Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings.	MCH5: Demonstrate family-centered philosophical constructs and use these constructs to critique practices, programs, or policies that affect MCH population groups, including children and youth with special health care needs (CYSHCN).
F6: Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	MCH6: Locate and use scientific literature sources to formulate an important MCH practice, research, or policy question, and/or to present a rationale for MCH policies and programs.
F7: Assess population needs, assets and capacities that affect communities' health	MCH7: Develop, edit, or use surveys, questionnaires, indicators, or other qualitative or quantitative tools to help assess MCH population needs or evaluate the effectiveness of an existing program for specific MCH population groups.
F8: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.	MCH8: Identify federal, state, local or philanthropic grant funding sources to support interventions, programs, and research in MCH populations and develop elements of an effective grant proposal.
F9: Design a population-based policy, program, project, or intervention.	MCH9: Describe ethical issues faced by MCH populations in different settings, including clinical care, community-based settings, research, or public health practice.
F10: Explain basic principles and tools of budget and resource management	MCH10: Demonstrate the ability to work effectively in group discussions, meetings, and projects with individuals from diverse groups, and with cultural and linguistic proficiency.
F11: Select methods to evaluate public health programs	MCH11: Communicate with diverse audiences about MCH populations, issues, and/or services through oral presentations, website content, social media, or written scholarship and reports.
F12: Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	MCH12: Conduct an environmental scan or other community needs assessment to identify systems, stakeholders, programs, practices or other features that impact the health of MCH populations in a given location.
F13: Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	MCH13: Identify factors that facilitate or impede implementation of evidence-based programs in MCH or otherwise assist in MCH program implementation.
F14: Advocate for political, social or economic policies and programs that will improve health in diverse populations.	
F15: Evaluate policies for their impact on public health and health equity	
F16: Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making.	
F17: Apply negotiation and mediation skills to address organizational or community challenges	
F18: Select communication strategies for different audiences and sectors	
F19: Communicate audience-appropriate public health content, both in writing and through oral presentation	
F20: Describe the importance of cultural competence in communicating public health content.	
F21: Perform effectively on inter-professional teams	
F22: Apply systems thinking tools to a public health issue	

Products Approved for the MCH Applied Practice Experience

Students must submit at least two products; more than two can also be submitted. A list of approved APEX products is provided below. Other types of products should be approved by the program director and the APEX advisor prior to completion of the APEX Learning Agreement.

[NOTE: If a product contains sensitive information (for example, datasets or interview audio recordings with personal information or other sensitive data the organization cannot release), the student should discuss alternatives with the APEX advisor; such an alternative may include a detailed written description of the product and the process through which it was developed.]

- Data collection protocol. As part of an assessment or evaluation, preceptor organizations may ask students to develop a data collection protocol. This tool can be developed for quantitative and/or qualitative data collection.
- Training Manual: A training manual can be developed to assist with training of field data collectors or data coders. The manual may include coding definitions, data collection protocols, confidentiality agreements, safety protocols, etc. A training manual may be developed to train intervention or other staff (e.g., recruiters, community health workers, educators) to consistently implement intervention recruitment, activities, and procedures. The training manual could include intervention objectives, intervention protocols, safety protocols, etc.
- Literature review: A summary (in either written or table form) of representative scientific evidence on a given topic, such as published interventions/programs similar to that which the organization is attempting to implement. A literature summary table will typically include a row for each major scientific study on a given topic and outline study characteristics (sample size, location, study design) and findings in the columns. In contrast, a written literature summary may be in full-sentence, paragraph form. Studies to include in a literature review are identified using library search tools and databases.
- Surveys/other data collection instruments. As part of an assessment or evaluation, preceptor organizations may ask students to develop a data collection instrument (e.g., survey, observation form, coding form, etc.). This data collection instrument can be developed for quantitative and/or qualitative data collection.
- Analysis code: As part of an assessment or evaluation, students may conduct statistical analyses. The analysis code can be submitted as an APEX product. The analysis code could be using any major analytical software, including SAS, STATA, and R.
- Data Codebook: A codebook includes definitions of all variables in an analytical database. A codebook helps ensure that the database can be consistently accessed and used across analysts and time.
- Logic model: A standard logic model that includes the resources/inputs, activities, and outcomes for an intervention planned or being implemented by the preceptor organization. The logic model can be used to guide intervention planning, development, or evaluation by the preceptor organization.
- Evaluation plan: An evaluation plan may focus on an assessment to plan for an intervention or formative, process, and or outcome evaluation to evaluate an intervention (i.e., how promising is the intervention, how well is the intervention being implemented, or effects of the intervention). The evaluation plan should propose an evaluation design, data collection methods and timelines, and key measures.
- Section of an assessment or evaluation report. Preceptor organizations may conduct assessments or evaluations and then write a report summarizing the results and implications. Students may write a section(s) of a report or write the entire report.
- Site-specific report or case study. Through a review of documents and/or interviews of key stakeholders, the story of challenges faced, solutions to overcome barriers, etc. can be documented and written up for dissemination.
- Maps. An effective way to quickly convey geographical information is through maps. Mapping assessment information can demonstrate whether specific geographic areas are in need of intervention (programmatic or policy), need different resources, etc.
- Fact Sheet/Infographics. A brief document (1-2 pages) can be used to convey results of assessments or evaluation to the general public, key stakeholders, policymakers, etc. The fact sheet/infographics should include simple language, have a professional appearance and target an 8th grade reading level (or lower).

- Implementation plan. An implementation plan is useful for identification of time and resources needed to implement an intervention. An implementation plan can be helpful with grant writing, hiring, and program management. An implementation plan usually will include a timeline; staffing, material, and equipment needs; incentives; locations of intervention activities; recruitment strategies, etc.
- Budget. A budget for an intervention can be used to determine whether an intervention will be feasible, how many participants can be included, etc. A budget is also needed to identify and request sufficient funds to implement an intervention. A budget should include a spread sheet and a corresponding budget justification.
- Policy brief. A two- to four- page document that focuses on a single policy. The document will have an Executive Summary, an Introduction (what is the public health problem), Approach (what is the policy solution), Conclusion, and Recommendations or Call to Action.
- Talking points. Talking points are brief facts or points that can be used to guide media interviews, testimony, fact sheets, etc. Talking points are used as part of advocacy campaigns to stay on message. The main points should each be a very brief sentence. Supporting information can be included for each talking point. Students conducting meetings with legislators or other decision-makers as part of their APEX may submit their talking points as a product.
- Testimony. Public health professionals often volunteer to testify or are requested by the legislature to testify. Testimony can be presented orally or in a written format. Oral testimony is often also prepared in a written format prior to it being presented. Testimony could be given in support or opposition of a specific policy proposal or it could be to educate policy makers about public health issues that have policy relevance. Testimony is usually four to five minutes long.
- Fact sheet/Infographic. Fact sheets/infographics are 1-2 page documents that may be used to educate the general public or key stakeholders (e.g., policy makers) about an issue or used as part of an advocacy campaign to move the general public or stakeholders to take a specific action. References should be included.
- Photo Voice. A qualitative process through which people can record and represent the strengths in and concerns about their community. The goal of using this technique is to promote discussion and influence policymakers. A photo voice product may include a collection of photos collected by a student or a collection of photos that the student facilitated collection of with community members. A second photo voice product that could result from such a project would be a protocol or training manual on how to effectively use the photo voice method.
- In-service plan or planning materials. Students leading staff in-service trainings through their APEX may develop an in-service plan, handouts and/or PPT slides to support the in-service.
- Curriculum. A curriculum provides structure to an educational intervention and increases consistency in implementation. The curriculum includes session objectives, a description of activities that should be conducted within each session, and a description of what the trainer or educator should communicate within each session.
- Recruitment material. For an intervention to be successful, often times participants, key stakeholders, and/or community partners need to be recruited. Examples of recruitment material that may be needed include: introductory letters, brief summaries of the intervention, recruitment scripts, advertisements, etc.
- Other participant materials. As part of an intervention, educational brochures or other participant materials may be developed to explain risk factors, recommendations to improve health, etc. The expectation is that these types of brochures would have a professional appearance and yet be written simply for the general public using lay language.
- Poster or similar displays. Posters, bulletin boards or other informational displays may be used as part of some interventions or programs, such as an awareness campaign. The expectation is that a display will include simple messaging and a professional layout.
- Videos. Videos may be created as part of educational or advocacy campaigns. They may be videos that provide education, provide opportunities for community members to share their stories, etc.
- Website: A website can be used as part of an intervention or program to educate or promote behavior change among the general public or program participants. A student may take the lead in designing a website (e.g., creating wireframes), developing the website, or creating material to populate the website.
- Policy resolution. As part of an advocacy campaign, a policy resolution may be written and then submitted to organizations to have them officially support a policy recommendation or action. A

resolution is typically one to two pages, includes references, and appropriately uses Whereas and Resolved statements/clauses.

- **Social media campaign.** A preceptor organization may be interested in developing or continuing to implement a social media campaign to educate specific populations about a public health nutrition issue and/or to advocate for policy changes. Products relevant to a social media campaign may include a protocol or strategic plan for developing a social media campaign or specific products used as part of such a campaign (e.g., blogs, tweets, Facebook ads, a strategic plan for developing a social media campaign, etc.).
- **Meeting agenda and minutes.** In some cases, students may take a lead role in organizing stakeholder meetings for an organization; in these cases a meeting agenda and meeting minutes would be an acceptable product. However the student should play a lead role in the convening and/or implementation of the meeting (i.e., simply attending the meeting and taking minutes is not sufficient).
- **Grant proposal:** A grant proposal asking for funding for an intervention and corresponding evaluation. The proposal should be written to obtain funding for the field site or partner organization. If the student takes the lead on a major section of a grant proposal, this could also be considered an acceptable APEX product.
- **White paper:** A systematic review that provides justification for specific policy or program or intervention approach.
- **PowerPoint Presentation:** One way for organizations to disseminate information about their interventions and evaluations is to do formal presentations at community meetings or conferences. A student may be asked to create and do the presentation for their preceptor organization.
- **Conference Poster:** One way for organizations to disseminate information about their interventions and evaluations is to participate in a poster session. A student may be asked to create and present a poster for their preceptor organization.

1.6 INTEGRATED LEARNING EXPERIENCE (ILE)

Introduction

The Integrated Learning Experience (ILE) is a required culminating experience for all MPH students. The purpose of the ILE is to demonstrate the student can write a logical, high-quality, thoughtful written document that clearly synthesizes MCH and public health foundational concepts and principles, conveys familiarity with MCH programs and policies, and displays critical thinking skills. All ILE written documents must demonstrate *at least three Public Health Foundational and MCH program competencies*, listed on page 14. However, this should not limit the student's scope of work, which may extend beyond these specific competencies.

Students in consultation with their academic advisor should select experiences and competencies that are appropriate for the student's educational and professional goals. MCH students must select one of the options described below to meet the ILE requirement.

For all options, there are two required elements, a written document, and a short oral presentation at one of several Presentation Day events scheduled each year (see details below). Two readers (usually the academic advisor and one other MCH program faculty member) must review, assess, and grade the written document as satisfactory.

How to Meet the ILE Requirement

When should I complete the ILE?

The ILE cannot be completed until after satisfactory completion of the APEX. For most students, the ILE is best completed in the last semester of the program, or after successful completion of the majority of required credits. For advanced standing students and in other cases, students may consult with their academic advisor to obtain permission from the program director for an earlier completion of the ILE.

How do I start?

The student must meet with their academic advisor in the Fall of their second year, or equivalent point in the program for part-time students, to make a final decision on the type of ILE to complete and to

identify two appropriate ILE readers (usually the Academic Advisor and another MCH faculty member with relevant background). This review ensures that the experience addresses the selected foundational and concentration-specific competencies. The next step is to complete the required ILE Declaration form. This form states the type of ILE (which option, below), lists the three or more competencies to be integrated and synthesized in the document, a short description of the proposed work, timeline for completion, and the signatures of the two readers.

How many credits are required for the ILE?

For all options, please register in PubH 7694 in your final semester for 1-2 credits.

How is the ILE graded?

A grade of S/N will be entered by the ILE advisor. A grading rubric will be provided that details the elements of the assessment.

What types of ILE are allowed?

The MCH program has three different options for completion of the ILE requirement. The student will work with their academic advisor to choose the best option for their career goals and interests. NOTE: Epi-emphasis students must choose Option #2.

Option #1: Critical Analysis of the APEx or Other Public Health Practice Experience

This is the standard option for the MCH program. This ILE option builds upon the work the student conducted during their APEx or during another MCH related practice-based experience *completed during the MCH MPH program* (i.e., paid or unpaid internship) by reflecting on and analyzing how that work relates to MCH-specific principles and skill-sets.

The format of the written document is based on the Public Health Practice (PHP) Vignette (one type of manuscript accepted by the *American Journal of Public Health*): (<http://ajph.aphapublications.org/userimages/ContentEditor/1432646399120/authorinstructions.pdf>) and written for a public health audience. The ILE must synthesize at least three foundational and program-specific competencies. The student and academic advisor should agree upon these competencies prior to the student beginning the ILE. The PHP Vignette should be a critical analysis of the public health practice experience. The double-spaced document should have a maximum of 1,200 words. The following sections should be included if relevant to the APEx:

- (1) MCH/Public Health Significance: describe the importance of this program for MCH and public health, locally and/or more generally. Provide a short literature review of the broader context, with references (consider prevalence, disparities, social, behavioral or biological determinants of the condition or problem, etc);
- (2) Intervention/Assessment: describe the goals and objectives of the program/assessment; if appropriate, describe how the program/intervention/assessment was funded
- (3) Place and Time: briefly describe the organization where the public health practice experience took place, including mission, location, and the years when the program/assessment was implemented;
- (4) Person: define the population subject to the intervention/assessment [include a description of recruitment, participation rates, characteristics of participants];
- (5) Purpose: explain the motivation behind the program/assessment , including citation of the literature
- (6) Implementation: describe how the program/assessment was implemented in practice;

- (7) Evaluation: provide evidence on whether the program worked or not [include a brief description of design, measures, analyses, results];
- (8) Sustainability: if it is desirable for the practice to continue, describe the factors that indicate why the intervention is felt to be sustainable;
- (9) Recommendations: provide concrete recommendations to improve the program or services
- (10) Summary: Synthesize and summarize how your learning in the MCH program informed your involvement in and analysis of the experience.

References should be included but are not part of the 1,200 word limit. A 150-word abstract should also be included (not as part of the 1,200 word limit). Up to two tables and/or figures may be included, which are not included in the word limit. The order of the sections can be determined by the student and the academic advisor.

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

The student should register for PubH 7694 for 1 credit for this option.

Option #2: Secondary Data Analysis Relevant to MCH (required option for Epi Emphasis)

This is an option encouraged for MCH students seeking more experience analyzing, interpreting, and presenting quantitative and/or qualitative data in written form for an audience of MCH professionals. In this option, the student will complete quantitative and/or qualitative data analysis on a topic relevant to MCH. The dataset can be an epidemiologic study dataset, publically available survey or surveillance data, open-ended responses to questions in a mixed-methods study, focus group data, results of a program evaluation, and others. The dataset, analyses, and study question could carry forward work produced during or related to the APEx or other public health practice experience, or can be arranged through a faculty member or public health / community health agency that has a dataset ready for analysis. The written scientific report will be approximately 20 double-spaced pages in length, and include the following sections: Abstract, Introduction, Methods, Results, and Discussion. Citation and reference formats must be according to the APA style and the reference list is not included within the 20 page limit.

The student must confirm with their academic advisor that their proposed topic relates sufficiently to the field and principles of MCH, and, if an Epi Emphasis student, that the topic and data analysis plan sufficiently draws on epidemiological analysis skills. Students selecting this option must identify an MCH faculty member willing to serve as the ILE project advisor who is familiar with the dataset and will work closely with the student on the analyses, and another MCH faculty member willing to serve as the secondary reader. The academic advisor must be one of the reviewers. The ILE must address at least three competencies that include both foundational and program-specific competencies. The student and academic advisor or ILE advisor should agree upon these competencies prior to the student beginning the ILE. Both the ILE advisor and secondary reader must approve the final versions of the paper. The expectation is that the ILE advisor will complete multiple reviews of the documents, working closely with the student, before submission to the secondary reviewer for a final review.

Institutional Review Board Approval

If the dataset involves human subjects, the student may need to obtain approval from the Institutional Review Board (IRB) of the University of Minnesota prior to working on the dataset. The IRB reviews all activities that meet the federal definition of human research. If you are unsure if your proposed project meets that definition, refer to the "WORKSHEET: Human Research (HRP-310)" for guidance. If you remain unsure about whether your project qualifies as human research or you desire documentation of the determination, you can submit the "Human Research Determination Form (HRP-503)". Worksheets

are found at: <https://research.umn.edu/units/irb/toolkit-library/worksheets>.

If the research is determined to be “Human Research”, you must submit an IRB application through ETHOS. ETHOS is the University’s online system for submission, review, revision, and tracking of human subjects research approval; extensive information and documentation is at:

<https://research.umn.edu/units/irb/ethos/ethos-log>. In order to ensure adequate oversight of student-led research, your academic advisor or ILE advisor (must be a UMN faculty member) is required to submit your IRB application and any subsequent changes made to that application. The student can set up the study in ETHOS, but must assign the advisor to the PI/Advisor role in the ETHOS SmartForm for it to be submitted for review. For extensive information templates and aids for submitting a new study for IRB review, and for the ETHOS Guide for Students and Advisors, see the following link: <https://research.umn.edu/units/irb/how-submit/new-study>. Guidance is also available from EPOCH Student Services staff and academic/ILE advisors.

The student should register for PubH 7694 for 1 or 2 credits for this option.

Option #3: Literature Review

For students who are interested in deepening their knowledge of a particular MCH topic and who have experience in conducting literature reviews, this option may be beneficial. The student must confirm with their academic advisor that their proposed topic relates sufficiently to the field and principles of MCH. Students selecting this option must identify an MCH faculty member willing to serve as the ILE advisor and another MCH faculty member willing to serve as a reader. One of the two must be the academic advisor. Two main types of literature reviews are allowed: 1) a narrative literature review, or 2) a systematic literature review.

- The purpose of a narrative review of the literature is to identify, assess, synthesize, and interpret in writing the published literature on a defined area of research involving one or more specific questions, identify gaps in knowledge, summarize best practices or optimal approaches, and identify areas for future research. Guidance on how to perform a narrative review is provided in the article “Writing narrative literature reviews” by Rossella Ferrari (Medical Writing, 2015, 24(4), pp. 230-235). The review must be approximately 20-25 double-spaced pages in length and include all elements of the [Narrative Review Checklist](#), including completion of the [Narrative Review Flow Diagram](#), proper in-text citation format and a list of References, both formatted according to the American Psychological Association (APA) guidelines.
- The purpose of a systematic review of the literature is to formulate a single narrowly focused research question and provide a quantitative and qualitative analysis of all relevant evidence, with or without a meta-analysis. Methods for the conduct of a systematic review are found at the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) website (<http://prisma-statement.org/>). The review must be approximately 20-25 double-spaced pages in length, include all elements of the PRISMA Checklist, including completion of the PRISMA Flow Diagram, proper in-text citation format and a list of References, both formatted according to the American Psychological Association (APA) guidelines.

The student should register for PubH 7694 for 1-2 credits for this option.

Oral Presentation of the ILE

All students must give an oral presentation covering the highlights of their written ILE project in front of other MPH students and faculty members, and must register their intent to present on one of the scheduled presentation days. Students should prepare a 15-minute PowerPoint presentation that must be submitted to the EpiCH Student Services staff at least two weeks before the presentation day. Students will also have 5 minutes to answer questions following their presentation. Your written document (Option 1-3) and PowerPoint slides must be approved by your ILE advisor prior to submitting them to the EpiCH Student Services staff. Students are expected to attend the entire Student Presentation Day in which they are presenting.

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

	Pass with distinction	Pass	Fail*
Presentation delivery	<ul style="list-style-type: none"> Presented in a highly professional manner, with a notable level of clarity and depth. Good vocal projection and inflection throughout the entire presentation. Good eye contact with audience, seldom referring to notes. Presentation delivered without rushing or running over the allotted time. Very few 'ums,' 'uhs' or other fillers. 	<ul style="list-style-type: none"> Presented in a generally professional manner. A majority of the points made in the presentation were clear, though there may have been minor gaps in clarity and/or depth (i.e., where more detail was needed). Vocal projection and inflection was generally satisfactory, though may have not been consistent throughout presentation. Some eye contact with audience, but some reliance on notes. Presentation may have been delivered with some rushing. A few 'ums,' 'uhs' or other fillers. 	<ul style="list-style-type: none"> Presentation lacked the professionalism expected from an entry-level professional. Several major points made in the presentation were not clear. Key details were lacking. Vocal projection and inflection was poor. Eye contact was limited with excessive reliance on notes. Presentation was rushed and/or had to end abruptly due to time running out. Presentation not professionally concluded. Many 'ums,' 'uhs' or other fillers.
Presentation slides	<ul style="list-style-type: none"> Slides were well designed and included interesting/helpful pictures or graphics. Slides were easy for all attendees to read. 	<ul style="list-style-type: none"> Slides were interpretable, but some may have been crowded and/or wordy. 	<ul style="list-style-type: none"> Slides were challenging to interpret. Many slides were wordy (i.e., too much text). Multiple slides included tables or figures that were difficult to read.
Presentation content	<ul style="list-style-type: none"> Content flowed very well and in a highly logical and clear manner. Clearly conveyed the public health relevance of the topic and how the topic is based on the scientific literature. Clearly described the APEX experience, activities completed, and /or methods used. Provided a thorough and thoughtful analysis of the findings, including implications for future public health work or research. 	<ul style="list-style-type: none"> Content flowed reasonably well, though there may have been limited gaps in logic and clarity. Gave an adequate, though perhaps limited, description of the public health relevance of the topic and how the topic is based on the scientific literature. Provided a description of the methods/activities, analysis of the findings, and/or implications that was reasonable but may have benefitted from additional detail, clarity and/or depth. 	<ul style="list-style-type: none"> Content did not flow well and in a clear and logical progression. Did not adequately describe (or incorrectly described) the public health relevance of the topic and how the topic is based on the scientific literature. Provided an insufficient or unclear description of the methods/activities, analysis of the findings, and/or implications of their work.

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

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

- a. *PowerPoint Slides*: Did the information flow well and in a logical and clear manner? Did the slide presentation use color and design well, avoid crowded or wordy slides? Were interesting pictures or graphics used? Were the slides easy for all attendees to easily read them?

- b. *Presentation Delivery*: Does the student clearly and deeply describe the main points of the presentation? Was the information delivered effectively, with good vocal projection and inflection, eye contact, and body language? Was time used appropriately (i.e., was the presentation delivered without rushing, using the allotted time)? Did the student present him/herself in a professional manner?

Suggested Timetable for the ILE

During Fall Semester of Year Two students should:

- Develop a topic, select the project option, and identify the two readers, in consultation with their advisor;
- Once approved, submit the Integrated Learning Experience Declaration Form to the EpiCH Student Services staff. The EpiCH Student Services staff will inform you or your registration details for the ILE credits;
- Complete IRB application if necessary (allow two months for approval); and
- After IRB approval, begin work on their project.

One to three months before expected program completion students should:

- Submit the first draft of the project to their primary ILE advisor and make an appointment for a follow-up discussion (allow 2 weeks for ILE advisor to read draft);
- Discuss the draft with their ILE advisor and make revisions and corrections (more than one round of revisions will probably be required);
- Schedule their Presentation Day, with advisor approval; and
- Submit final project to the secondary reader (allow at minimum two weeks for reading).

Costs Associated with the ILE

Students are responsible for costs associated with completing their Integrated Learning Experiences. These costs are sometimes offset in part by the organization with which the student is working. Funds may also be available from the Division of Epidemiology and Community Health by applying for the J. B. Hawley Student Research Award. A call for submissions for this award is usually sent out via email in October and March.

Dissemination and Authorship

It is expected that projects may result in findings of interest to professionals in the field. Students are highly encouraged to disseminate their findings at professional meetings (poster or paper), in a professional journal at the annual summer MCH Institute or by preparing a technical report for MCH agencies. The student will be the first author on their master's paper manuscript if it is submitted for publication only if the student meets the qualifications for first authorship. Students and advisors should have a conversation about authorship before work begins. Interested students may also refer to the authorship guidelines of the International Committee of Medical Journal Editors (ICMJE) (<http://www.icmje.org/>). According to ICMJE, authors should have made substantial contributions to all of the following: conception or design; acquisition of data; analysis and interpretation of data; drafting the article or revising it critically for important intellectual content; and final approval of the version to be published. Order of authorship should reflect the extent of each collaborator's contribution to the paper, with the first author typically being the individual who takes primary responsibility for conceptualizing and writing the first draft of the paper. It is the first author's responsibility to ensure that all the co-authors have the opportunity to review and contribute to various drafts of a paper or presentation before it is submitted. It is also the first author's responsibility to determine order of authorship, based on contribution.

1.7 CAREER SURVEY

Students must submit the Career Survey prior to receiving their degree or certificate. Students may complete the process online at the appropriate link on the current student Web page or at this link <http://secure.ahc.umn.edu/PublicHealth/CareerSurvey>. Upon submitting the electronic survey, the student's relevant program Coordinator will be notified by e-mail.

All graduates will receive a three-month and six-month e-mail message asking them to update survey information (e.g., employment). This is through secure access and staff are unable to input information on students' behalf.

1.8 PROGRAM FACULTY LIST

Primary Faculty

Name	Phone	E-mail	Research Expertise
Zobeida Bonilla, PhD, MPH	624-1818	zbonilla@umn.edu	Health disparities, global MCH and qualitative research
Sonya Brady, PhD	626-4026	ssbrady@umn.edu	Health risk behavior during adolescence and young adulthood; Developmental influences on risk taking; Mechanisms linking stressful life circumstances to health risk behavior and factors promoting resiliency; Promotion of health protective behavior; Public policies affecting adolescent health.
Ellen Demerath, PhD	624-8231	ewd@umn.edu	Body composition and obesity assessment; Developmental determinants of cardiovascular disease risk; Lifecourse epidemiology; Genetic epidemiology of obesity, diabetes, and coronary heart disease; Biomarkers of biological senescence
John Finnegan, Jr., PhD	625-1179	finne001@umn.edu	Media communication and public health; Community campaigns; The "Knowledge Gap" and health outcomes; Digital information technology and its impact on public health
Eileen Harwood, PhD	626-1824	harwo002@umn.edu	Social Epidemiology Health Program and Policy Evaluation Alcohol; Tobacco and Illicit Drugs
David Jacobs, Jr., PhD	624-4196	jacob004@umn.edu	Cardiovascular disease epidemiology; Biometry; Diet; Physical activity; Low serum; Cholesterol and noncardiovascular disease; Nutritional epidemiology and whole grains
Rhonda Jones-Webb, DrPH	626-8866	jones010@umn.edu	Alcohol studies; Alcohol policy as a prevention strategy; Minority health issues; Behavioral epidemiology
Harry Lando, PhD	624-1877	lando001@umn.edu	Global issues in tobacco reduction; Smoking cessation; Treatment of medically compromised smokers
Russell Luepker, MD, MS	624-6362	luepk001@umn.edu	Cardiovascular disease epidemiology and prevention; Health behavior; Community trials; Clinical trials
Susan Marshall Mason, PhD, MPH	624-9556	smmason@umn.edu	Psychosocial stress and stress mechanisms, women's health, maternal and child health, health disparities, exposure to violence
Dianne Neumark-Sztainer, PhD, MPH	624-0880	neuma011@umn.edu	Adolescent health and nutrition; Obesity and eating disorder prevention; Health behavior change; Nutrition education program design and evaluation
Ruby Nguyen, PhD	626-7559	nguy0082@umn.edu	Women's Health; Reproductive and Perinatal Epidemiology.
J. Michael Oakes, PhD	624-6855	oakes007@umn.edu	Quantitative Methods; Social Epidemiology; Research Ethics
Theresa L. Osypuk, SD, SM	525-8279	tosypuk@umn.edu	Social epidemiology, health disparities racial/ethnic, socioeconomic, and nativity/immigrant disparities in health, their geographic patterns, and causes.
Pamela Schreiner, PhD	626-9097	schre012@umn.edu	Etiology of cardiovascular disease particularly as it relates to lipids, obesity, visceral fat accumulation and the perimenopausal transition; Osteoporosis
Jamie Stang, PhD, MPH, RD	626-0351	stang002@umn.edu	Nutrition and weight status in pregnancy; Child and adolescent nutrition; Behavioral counseling in child obesity; Eating disorders treatment
Jaime Slaughter –Acey	5-8357	jslaught@umn.edu	Health equity, maternal and child health/perinatal epidemiology, social determinants of health, racism, colorism, lifecourse perspective, perinatal health, women's health, prenatal care, prenatal home vi
Boris Volkov, PhD	624-7176	volk0057@umn.edu	Domestic and international surveillance and evaluation

Adjunct Faculty

Name	Phone	E-mail	Research Expertise
Sara Axtell, PhD	625-0252	axtel002@umn.edu	Community organizing
Mark Bergeron, MD, MPH		berge356@umn.edu	Maternal and child public health; infant apnea; hospital-based quality improvement initiatives; NICU follow-up clinic
Lynn Bretl, MPP	612-275-6690	muen0001@umn.edu	Health promotion with vulnerable adolescents; Sexual behavior; Substance abuse; Violence involvement; Multiethnic issues in adolescent health.
Edward Ehlinger, MD, MSPH	612-625-1434	ehlin003@umn.edu	Health of college students; Urban Health
Lauren Gilchrist, MPH	626-1125	gilc0010@umn.edu	Health policy and reform, community outreach, women's health
Molly Harney, PhD	218-726-6778	mharney@d.umn.edu	Maternal care, early brain development, emotional development, and attachment
Annie-Laurie McRee, DrPH	626-0162	almcree@umn.edu	HPV vaccination; Parental influences on adolescent health; Adolescent health care utilization; Parent-child communication; Adolescent sexual behaviors
Oswald, John W., Jr. PhD, MPH	612-623-5187	oswal007@umn.edu	Safety net hospital performance for cost, quality and access; applied research supporting federal health statistics and epidemiologic surveillance; population studies using vital statistics and surveys
Carolyn Porta, PhD, MPH, RN	624-6179	garcia@umn.edu	Latino adolescent mental health, stress and coping, access to care, effect of uninsurance, longitudinal prevention interventions, mixed methods, community-based participatory methods.
Cheryl Robertson, PhD, MPH, RN	624-5412	rober007@umn.edu	Refugee family health; trauma, stress and coping; community-based interventions
Shlafer, Rebecca, PhD, MPH	625-9907	shlaf002@umn.edu	Achievement gap, opportunity gap, and educational disparities
Logan Spector, PhD	624-3912	spect012@umn.edu	Etiology of childhood cancer
Lisa Turnham, MPH	612-799-8595	lisa.turnham@hennepin.us	Sexuality Education, Adolescent Pregnancy Prevention.

1.19 GRADUATION CHECKLIST

General steps for all MPH majors

1. Student submits completed *Study Plan* at least one semester prior to the anticipated completion of coursework;
2. Student submits the on-line *Application for Degree* form by the end of the first business day of the month in which they intend to graduate.
3. Student completes all coursework and requirements by noon on the last business day of the month in which they wish to have their degree conferred.
4. Student completes and circulates the Integrated Learning Experience paper and schedules the oral exam at least two weeks before the scheduled oral examination date;
5. **Student notifies EpiCH Student Services staff via email at epichstu@umn.edu of the date of the oral exam at least two weeks prior to the exam so that their study plan can be forwarded to the project advisor;**
6. After the oral exam, project advisor returns the student's study plan to the EpiCH Student Services staff;
7. Student submits the Integrated Learning Experience paper via email to EpiCH Student Services staff at epichstu@umn.edu.
8. Student submits the *Career Survey*;

All Division of Epidemiology and Community Health students who fulfill, or anticipate fulfilling, the above requirements and deadlines for Fall 2018 through Summer Session 2019 are eligible to participate in the School of Public Health commencement ceremony on May 20, 2019. We encourage you to attend!

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

2. DIVISION OF EPIDEMIOLOGY AND COMMUNITY HEALTH (EPICH)

2.1 WELCOME

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

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

The Division Head is Dr. Dianne Neumark-Sztainer

EpiCH Student Services (ESS):

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

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

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

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

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

E-Mail..... epichstu@umn.edu

Phone 612-626-8802

Fax..... 612-624-0315

Campus Mail WBOB, #300, Delivery Code 7525

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

2.2 THE WEST BANK OFFICE BUILDING (WBOB)

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

Forms

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

Evening and Weekend Access

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

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

Computer Lab

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

Copier and Fax Access

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

2.3 DIVISION COMMUNICATION WITH STUDENTS

The Division communicates information to students in the following ways:

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

2.4 SEMINARS

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

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

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

2.5 ACADEMIC CREDIT FOR INDEPENDENT OR DIRECTED COURSEWORK

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

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

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

Examples of Independent and Directed Coursework

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

Additional comments

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

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

Choosing Course Numbers

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

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

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

Procedures

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

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

2.6 DIVISION RESOURCES AND POLICIES

Incomplete Grades

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

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

Six Credit Minimum Exemption

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

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

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

Sitting in on a Class

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

Support for Student Travel (effective 5/2017)

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

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

Payment for TA English Program

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

SAS Access

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

J.B. Hawley Student Research Award

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

STANDARD AWARD

Who May Apply?

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

for further support until they have submitted the required one-page report for their prior award (see below).

How Much?

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

How Can It Be Used?

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

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

How Long?

Normally projects are funded for one year.

DOCTORAL AWARD

Who May Apply?

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

How Much?

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

How Can It Be Used?

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

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

How Long?

Normally projects are funded for one year.

What is the Format for the Proposal?

1. Cover Letter
Please indicate in the letter whether the project will help support an Integrated Learning Experience (ILE), master's thesis, PhD thesis, or Applied Practice Experience (APEX).
2. Face Page (1 page)
 - a. Title
 - b. Investigator information, including name, address, telephone, and e-mail address
 - c. Your degree program
 - d. Collaborating investigators (faculty, staff, students), if any
3. Research Proposal (4 pages maximum; font: 12-point Times or larger)
 - a. Background and Significance (1 page maximum):
Describe the background and justification for the study and state the research questions/hypotheses.
 - b. Research Methods (2 pages maximum):
Describe the study design and detailed methods. Be sure to include information on each of the following issues (and others, as appropriate):

- Study population
 - Sample selection and recruitment
 - Measurements
 - Data analysis plan (required for both quantitative and qualitative research)
 - Timeline
 - Sample size (justified by formal statistical calculations or other means)
- c. Human Subjects (no page limit):
All proposals must address protection of human subjects and have the project approved by the University of Minnesota's Institutional Review Board (IRB) prior to receiving funds. However, a project will be reviewed by the Research Awards Committee prior to receiving final IRB approval.
- d. References (no page limit):
Citations for articles referenced in the background and significance and research methods portions of the proposal should be listed after the Human Subjects section of the proposal.
4. Detailed Budget (2 page maximum):
The proposed budget should include precise amounts requested in various categories (e.g., postage, supplies, printing, personnel, etc.). Provide a brief justification for the amount requested in each category and state why these funds are needed to conduct the proposed research. The budget should clearly itemize and justify expenditures. If the request is part of a larger project, the proportion to be supported by this award and the rationale and need for this funding mechanism, should be specified clearly.
- The following items are NOT allowed: stipends or salary for the applicant, computer purchase, publication costs (e.g., page charges, reprints), and presentation costs (e.g., travel to a conference, conference fee).
5. Letter of Endorsement from Faculty Advisor (1 page):
A primary or adjunct faculty member in the Division of Epidemiology and Community Health must provide a brief letter to accompany the proposal, specifically endorsing the applicant's request. First, applicants must discuss their proposals with the faculty advisor, who must review the proposal before it is submitted. Then, the faculty advisor's letter of funding endorsement must state that the faculty member has read and provided input on the proposal. The faculty member must also indicate his/her opinion of the quality and importance of the research.
6. Appendices, if needed (no page limit)

Submission

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

Review Process

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

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

Final Report

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

Martinson-Luepker Student Travel Award

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

Division of Epidemiology and Community Health Student Support Policies

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

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

Approved 7/1/03, revised 06/08

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

Master's Student Support Policy

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

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

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

Requesting Letters of Support – 10 Tips for Students

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

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

2. **THINK AHEAD.** Many faculty members in EpiCH have 10 or more advisees, so they may not be able to respond immediately to student requests. If they receive a request with short notice, they may not be able to respond positively, so contact them well ahead of deadlines so they can schedule your request.
Deadlines: Clearly convey the deadline for the materials you are requesting. It is also fine to re-contact the faculty member a week before the deadline as a gentle reminder. Such contact should include, in addition to the reminder about the deadline, your reiteration that you are happy to provide additional information about yourself, or the opportunity and details about where and how to submit the reference (in case the original contact information was misplaced).
3. **REQUEST LETTERS FROM PEOPLE WHO KNOW YOU.** A letter from someone who does not know you well may not be a strong letter, as the lack of familiarity is usually reflected in the text. Many requests for references also require individuals to specifically indicate how well they know an applicant. Reviewers may not give much weight to a referral from someone who does not know the applicant well—and they may wonder *why* the applicant did not select someone who knows her/him well. For example, they could think that either the applicant does not know anyone well OR everyone who knows the applicant well would write a lousy letter—both imagined scenarios are bad. **Try to gauge if the person can write a “good” letter for you.** A strategy is to ask this question directly: don’t ask “will you write a letter for me?” Instead, ask “will you write a supportive letter for me?” A hard life lesson is that some faculty members may be unable to strongly recommend you, and it is best to find that out—and respect it—before you agree that the person will write a letter. Most faculty members will reveal any hesitation they have and it is important to listen to it and accept it. A tentative, or a poor, letter can have a strong negative impact on an application.
4. **IF YOU CONTACT SOMEONE WHO DOES NOT KNOW YOU WELL, BE PROFESSIONAL.** An exception to item #3 is when you *have* to ask Program Directors or Division Heads for letters of support because their support is required by the applicant organization. If you don’t know such people well, and must request a favor, use his/her last, rather than first, name (i.e., Dr. Smith instead of Judy) when you make your first approach. In EpiCH, you will likely be told to use his/her first name, but your professionalism will be noted and appreciated.
5. **DON’T ASSUME THAT FACULTY MEMBERS KNOW ANYTHING ABOUT THE APPLICANT ORGANIZATION.** There are hundreds of fellowships, scholarships, etc. for which faculty members are asked to write letters. Faculty members have little or no connection with many organizations beyond writing letters for students. They often receive what, to them, are garbled messages, with acronyms instead of full organization names, and find them incomprehensible. Don’t rely on acronyms or assume any knowledge about the opportunity for which you are applying, even if it is at the SPH or UMN.
To inform faculty members, it is fine to e-mail them URLs and PDFs about the applicant organization, but also include a 1-page synthesis of relevant information. You are asking the faculty member to volunteer time: don’t ask him/her to also go to a website and/or open multi-page PDFs. Those materials can be optional—your one-pager should be all your letter writer needs, along with your CV and some guidance about the text of the letter.
6. **DON’T ASSUME FACULTY MEMBERS KNOW YOU WELL ENOUGH TO WRITE A GREAT LETTER OR THAT THEY HAVE TIME FOR A 1-HOUR INTERVIEW TO PREPARE FOR THE LETTER.** A great strategy is to offer to provide bullet points about your qualities, eligibility, and interest in the opportunity that can be used by the faculty member to frame the letter. You may even offer to write a draft letter. You are in the **best** position to draft a successful letter and it is not uncommon to provide such help for letters of reference.
7. **MAKE SURE FACULTY MEMBERS HAVE CONTACT INFORMATION.** Clearly indicate where the letter or rating sheet should be sent! One of the most common—and frustrating—mistakes made by students is to omit this information, resulting in unnecessary contacts, delays, and poor impressions.
8. **MAKE SURE YOU ARE ELIGIBLE FOR THE OPPORTUNITY AND THAT YOU INTEND TO APPLY BEFORE YOU ASK FOR A LETTER.** Unfortunately, it is common for faculty members to write letters, only to be told by students that they found out they were ineligible or decided not to apply after all.

9. **MAKE SURE THE MATERIALS YOU PROVIDE DO NOT HAVE TYPOS AND GRAMMATICAL ERRORS.** The written word is influential: we often base our impressions about someone's intellectual qualities on the quality of his/her writing. While this may not be fair, it is what academics (and others) do. You are asking for a laudatory letter of reference, so make sure that your CV, 1-pager, bullet points/draft letter, are clearly and properly written.
10. **THANK THE FACULTY MEMBER FOR WRITING THE LETTER AND FOLLOW-UP.** It is surprisingly common for students to not thank a faculty member after an application is complete and even less common for students to let faculty members know if they received the scholarships, fellowships, internships, jobs, etc. for which they applied. Faculty members commit time to letters of reference because they want students to succeed—they are rewarded with thanks and updates.

Division of Epidemiology and Community Health Websites

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

2.7 DIVISION ADVISING INFORMATION

Team approach to Advising at the Master's level

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

Guidelines for Faculty/Student Interactions

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

- **A faculty member asking you to drive them somewhere, including the airport, home, or main campus.** Such a request does not fall under a student's duties. A situation when this may be acceptable is when the student has the same destination.
- **A faculty member asking you to work extra hours or late hours.** Students should be expected to work the hours for which they are paid. Students may volunteer to work extra hours to gain more experience (e.g. grant writing), gain authorship on a paper or help meet a deadline – but should not be expected to work these extra hours.
- **Your advisor asking you to housesit, take care of your children or pets, or help you move.** While some students may not mind house sitting, taking care of children or pets, or helping someone move, others may only agree to do these jobs because they feel obligated or worry that saying no will somehow affect their relationships with faculty members. To avoid problematic

situations, a faculty member may post a flyer requesting a sitter or mover for pay without the faculty member's name attached to the request – ensuring that respondents really want the job.

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

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

Confidentiality

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

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

Sexual Harassment Policy

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

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

Guidelines for Changing Advisors

Master's Students

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

PhD Students

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

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

Guide to Mission, Definitions and Expectations of Advising

Mission Statement

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

Defining Advising

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

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

Advising Expectations for Students

SPH students are expected to...

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

Advising Expectations for Faculty

Faculty advisors are expected to...

- Refer advisee to EPICH Student Services staff for course planning/scheduling, policy and procedural information
- Review program objectives and educational documents at least on an annual basis, (i.e. Student Guidebook, etc.), or when directed by EPICH Student Services staff or Program Director/DGS
- Actively contribute to a welcoming and supportive SPH climate

- Initiate meetings with advisee at least once per semester; regularly communicate with students on program progress
- Respond to student inquiries in a timely manner (ideally within 5 – 7 business days)
- Provide reasonable office hours and/or appointments and be generally available to student inquiries; communicate with students about extended absences or travel
- Serve as a model and example of respectful behavior
- Provide referrals to school and university resources when appropriate (e.g. Student Mental Health Services)