



## TABLE OF CONTENTS

Introduction.....	4
A1. Organization and Administrative Process.....	13
A2. Multi-Partnered Schools.....	24
A3. Student Engagement.....	25
A4. Autonomy for Schools of Public Health.....	27
A5. Degree Offerings in Schools of Public Health.....	28
B1. Guiding Statements.....	29
B2. Evaluation and Quality Improvement.....	32
B3. Graduation Rates.....	42
B4. Post-Graduation Outcomes.....	51
B5. Alumni Perceptions of Curricular Effectiveness.....	53
C1. Fiscal Resources.....	57
C2. Faculty Resources.....	64
C4. Physical Resources.....	72
C5. Information and Technology Resources.....	76
D1. MPH & DrPH Foundational Public Health Knowledge.....	78
D2. MPH Foundational Competencies.....	80
D3. DrPH Foundational Competencies.....	91
D4. MPH & DrPH Concentration Competencies .....	98
D5. MPH Applied Practice Experiences.....	108
D6. DrPH Applied Practice Experience.....	113
D7. MPH Integrative Learning Experience.....	117
D8. DrPH Integrative Learning Experience.....	120
D9. Public Health Bachelor's Degree Foundational Domains.....	125
D10. Public Health Bachelor's Degree Foundational Competencies.....	131
D11. Public Health Bachelor's Degree Cumulative and Experiential Activities.....	135
D12. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences.....	137

D13. MPH Program Length .....	140
D14. DrPH Program Length.....	141
D15. Bachelor's Degree Program Length.....	142
D16. Academic and Highly Specialized Public Health Master's Degrees.....	143
D17. Academic Public Health Doctoral Degrees.....	144
D18. All Remaining Degrees.....	146
D19. Distance Education.....	154
E1. Faculty Alignment with Degrees Offered.....	155
E2. Integration of Faculty with Practice Experience.....	163
E3. Faculty Instructional Effectiveness .....	166
E4. Faculty Scholarship.....	169
E5. Faculty Extramural Service.....	173
F1. Community Involvement in School Evaluation and Assessment.....	175
F2. Student Involvement in Community and Professional Service .....	178
F3. Delivery of Professional Development Opportunities for the Workforce .....	179
G1. Diversity and Cultural Competence.....	180
H1. Academic Advising.....	188
H2. Career Advising.....	190
H3. Student Complaint Procedures.....	193
H4. Student Recruitment and Admissions.....	195
H5. Publication of Educational Offerings .....	196

## Introduction

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

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

#### History of the university

In 1877, the American Baptist Home Mission Society founded the Natchez Seminary, in Natchez, Mississippi. The goal of the seminary was to provide moral, religious, and intellectual support for “Christian Leaders of Color” from Mississippi and its neighboring states. The seminary initially enrolled twenty newly freed slaves as students and served primarily as a school to train ministers and teachers. In 1882, the institution moved to Jackson to be more centrally located within the state, and shortly thereafter, its name was changed to Jackson College. Programs were added in education, liberal arts, the sciences, and graduate studies. For sixty-three years, the institution operated as a private church school.

In 1940, the State of Mississippi assumed support of the institution, and the college became a state institution for training rural and elementary school teachers, awarding its first bachelor’s degrees in 1944. In 1956, the school’s name was changed to Jackson State College. Further expansion of the curriculum and facilities elevated the college to university status in 1974, when its name was changed to Jackson State University (JSU). In 1979, the state officially designated JSU “Mississippi’s Urban University.”

The university is a member of the state system of colleges and universities and is governed by the Mississippi Board of Trustees, which is the constitutional governing body of the Mississippi State Institutions of Higher Learning (IHL). The state’s governor appoints IHL Board members for twelve-year terms.

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

The university provides its students with academic opportunities intended to help them succeed in an increasingly complex and technologically advanced world. The university also provides public service programs designed to enhance quality of life, such as community health needs assessments, health professional workforce development, and consultations on the preparation of health policies, and seeks solutions to urban and rural problems in the physical, social, intellectual, and economic environments. Educational programs are conducted through **JSU’s five colleges: the College of Business; College of Education and Human Development; College of Liberal Arts; College of Health Sciences; College of Science, Engineering and Technology;** (University organizational chart in Exhibit 2.2.b, below). The university offers 45 bachelors, 35 masters, 1 specialist-in-education, and 13 doctoral degree programs.

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

Based on the most recent Institutional Research Facts and Figures Publication (2020-2021), Jackson State University reports the following data:

549	<b>Faculty</b> (Full time and Part-Time)
1,236	<b>Staff</b>
4,668	<b>Undergraduate students</b>
2, 253	<b>Graduate students</b>

<https://www.jsu.edu/institutionalresearch/files/2021/07/2020-21-Facts-and-Figures.pdf>

*JSU Frequently Requested Student Data (Fall 2022 Student Enrollment Overview)*

4,927      **Undergraduate students**

1, 979      **Graduate students**

<https://www.jsums.edu/institutionalresearch/data/student-data/frequentlyrequesteddata/>

Update for Faculty and Staff (Office of the Provost Communication,  
Faculty  
Staff

- d. brief statement of distinguishing university facts and characteristics

Jackson State University (JSU) is a public university located Jackson, MS. It is the fourth largest HBCU in the U.S. based on enrollment. The urban campus sits on 220 acres and is close to various cultural settings. In Mississippi, JSU is ranked #4 out of 11 for Best Colleges for Education. It boasts a 15:1 student faculty ratio. We are a Carnegie-classified high research university with an emphasis on interdisciplinary collaboration and more than 25.8 million in funding each year.

JSU is one of the leading HBCUs in the country for overall academics, and our STEM program is ranked #5 by the National Institutes of Health (NIH). With our interdisciplinary curriculum model, students have access to train in a variety of fields, which further prepares them for the next career move.

Washington Monthly magazine annually ranks JSU among the nation's top colleges for social mobility, research and service, and it also is considered one of the top "Military Friendly Schools."

The JSU Band program is world renowned and home to the "*Sonic Boom of the South*".

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

Jackson State University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC).

Accreditation information is listed on the Academic Affairs website.

<https://www.jsums.edu/academicaffairs/accreditations-and-memberships/>

Every ten years, the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), the recognized regional accrediting body for eleven U.S. southern states, reviews all university programs (see information on the JSU SACSCOC accreditation website [https://sacscoc.org/institutions/?state=MS&results\\_per\\_page=25&curpage=1&status=Accredited%2CCandidate](https://sacscoc.org/institutions/?state=MS&results_per_page=25&curpage=1&status=Accredited%2CCandidate)). The university received its most recent ten-year accreditation from SACS in December 2021.

The accrediting agencies for individual JSU colleges and schools are also listed below:

### Accrediting Agencies for University and Other Colleges and Units

Accreditation Agency	University & Colleges
Southern Association of Colleges and Schools Commission on Colleges (SACSCOC)	Jackson State University
The Accrediting Council on Education in Journalism and Mass Communication	College of Liberal Arts
American Chemical Society	College of Science, Engineering and Technology
American Psychological Association	College of Liberal Arts
American Speech-Language-Hearing Association	College of Health Sciences
Association for Advancement of Collegiate Schools of Business	College of Business
Accreditation Board for Engineering and Technology	College of Science, Engineering and Technology
Council on Rehabilitation Education	College of Education and Human Development
Council on Social Work Education	College of Health Sciences
Counseling for Accreditation of Counseling and Related Educational Programs	College of Education and Human Development
National Association of Industrial Technology	College of Science, Engineering and Technology
National Association of Schools of Art and Design	College of Liberal Arts
National Association of Schools of Music	College of Liberal Arts
National Association of Schools of Public Affairs and Administration	College of Liberal Arts
National Council for the Accreditation of Teacher Education	College of Education and Human Development

\*The list of discipline specific accreditation agencies are listed in the Intro ERF A1.3.

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

#### **History of the College of Health Sciences (unit)**

The JSU College of Health Sciences (CHS) began as a department within the School of Allied Health Sciences in a trailer on the main campus. The School of Allied Health Sciences, formed in 1998, initially consisted of two departments, the Department of Healthcare Administration (which offered a BS degree) and the Department of Communicative Disorders (which offered an MS degree). The Department of Public Health was launched the following year (1999), and by 2000 it moved to its current location in the Jackson Medical Mall.

During 2003-04, the university reorganized under five overarching colleges. A new College of

Public Service was formed, which encompassed the School of Social Work and the School of Policy and Planning; the School of Allied Health Sciences was eliminated. However, the Department of Public Health continued, emerging as the JSU School of Public Health within the College of Public Service. The School of Public Health incorporated the programs of Communicative Disorders and Healthcare Administration that were formerly housed in the School of Allied Health Sciences. The school also established a Doctor of Public Health program and began admitting its first cohort of students in 2005.

In 2004-05, preparations were made to seek Council on Education for Public Health (CEPH) accreditation at the school level. The public health program was restructured into three departments (Epidemiology and Biostatistics, Behavioral and Environmental Health, and Health Policy and Management), which offered the Master of Public Health degree in their respective concentrations. The Bachelor of Science degree program and faculty from the former Department of Healthcare Administration were shifted to the new Department of Health Policy and Management. The Department of Communicative Disorders continued under its original name.

However, the university determined that it was not ready to make the necessary commitments to create an accredited school of public health and withdrew its application. As required by CEPH guidelines, the name "school of public health" was rescinded and replaced by the title School of Health Sciences. The university pursued accreditation at the program level for both the MPH and DrPH programs during academic year 2006. In October 2008, the program was accredited for a five-year period through December 2013. After its accreditation, the program maintained the required sixteen-member faculty and enrolled more than 100 students. The program continued to be housed in the School of Health Sciences within the College of Public Service, under the direction of an associate dean (2008-11) and then an executive director (2011-15) both of whom reported to the dean of the College of Public Service.

In 2013-14, the public health degree programs completed the process for CEPH reaccreditation. The final report and decision by CEPH on the accreditation status of JSU's Public Health Program resulted in the maximum length of approval, seven years through July 2021. The interim dean, working closely with the faculty, staff, and students, applied to CEPH in December 2016 proposing the transition from an accredited public health program to a school of public health. In February 2017, CEPH approved the school's application, and JSU began the accreditation self-study process. In fall 2015, the state legislature approved a one-time, \$2 million special appropriation to support the transition of the program to a school of public health, and a new dean was hired. The former dean was reassigned in February 2016, when the current interim dean was appointed and charged with moving forward the CEPH accreditation endeavor.

The Council on Education for Public Health (CEPH) accredited the Jackson State University School of Public Health on November 2, 2018. In August 2019, the name of the school was changed to the College of Health Sciences (CHS), and the School of Social Work merged with the College, reporting to the dean of the newly formed College. A new dean, Dr. Girmay Berhie, was appointed to the CHS in August 2019. Dr. Berhie served as the dean of CHS until July 2022. An Interim Dean, Dr. Russell Bennett was appointed to the CHS in July 2022.

The CHS offers the following degrees:

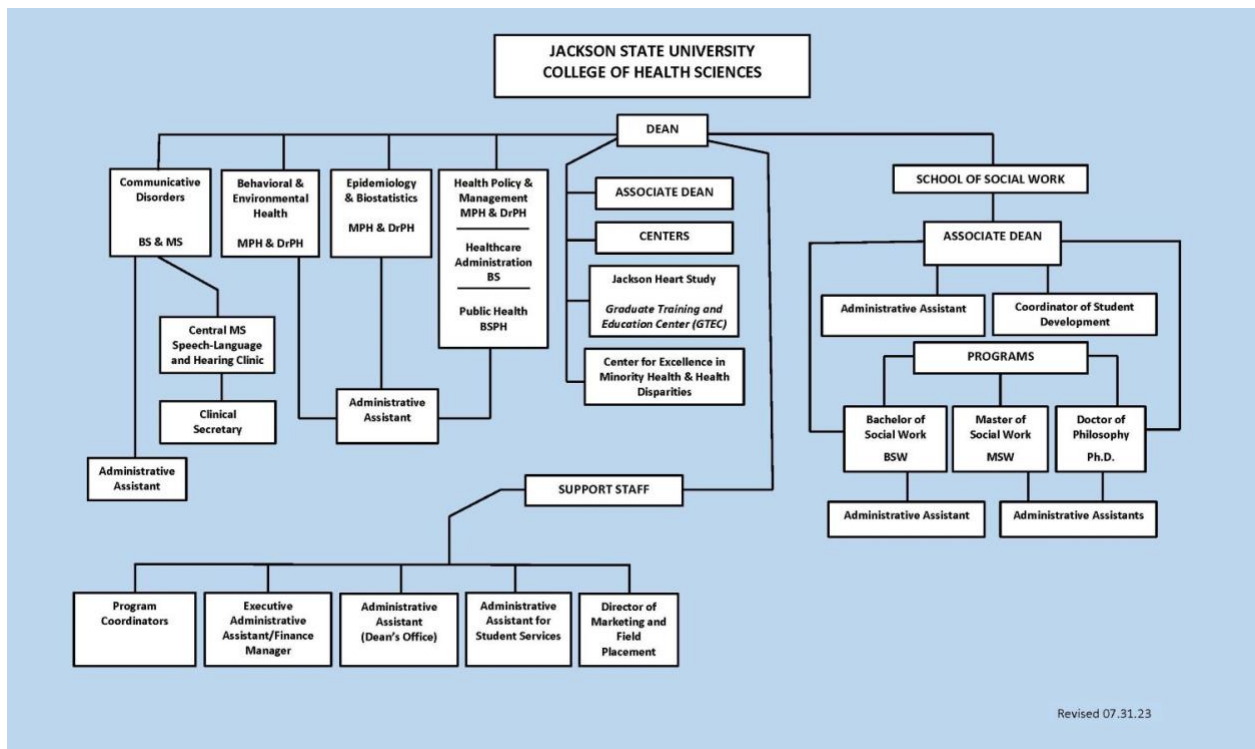
MPH with concentrations in Epidemiology, Biostatistics, Environmental Health, Behavioral Health Promotion & Education, and Health Policy and Management; DrPH with concentrations in Behavioral Health Promotion & Education, Epidemiology, and Health Policy & Management. Additional degrees offered in the CHS are: Communicative Disorders (BS & MS); Social Work (BSW, MSW, and PhD). Communicative Disorders and Social Work students are now required to take an introduction to public health course described in Criterion D19 of the CEPH Accreditation Criteria 2021 (see Criterion D19 below for details). A new BSPH degree program with 3 concentrations (Health Education, Allied Health, and Healthcare Administration) was launched in fall 2022.

The unit offers public health education because of local, national, and international needs for individual and population-based health and wellness programs, interventions, and research to achieve health and health care equity for Mississippians. The unit seeks to develop public health education leaders for Mississippi and beyond.

2) Organizational charts that clearly depict the following related to the school:

- a. the school's internal organization, including the reporting lines to the dean

Exhibit 1-2a Organizational Chart for the College of Health Sciences Sciences

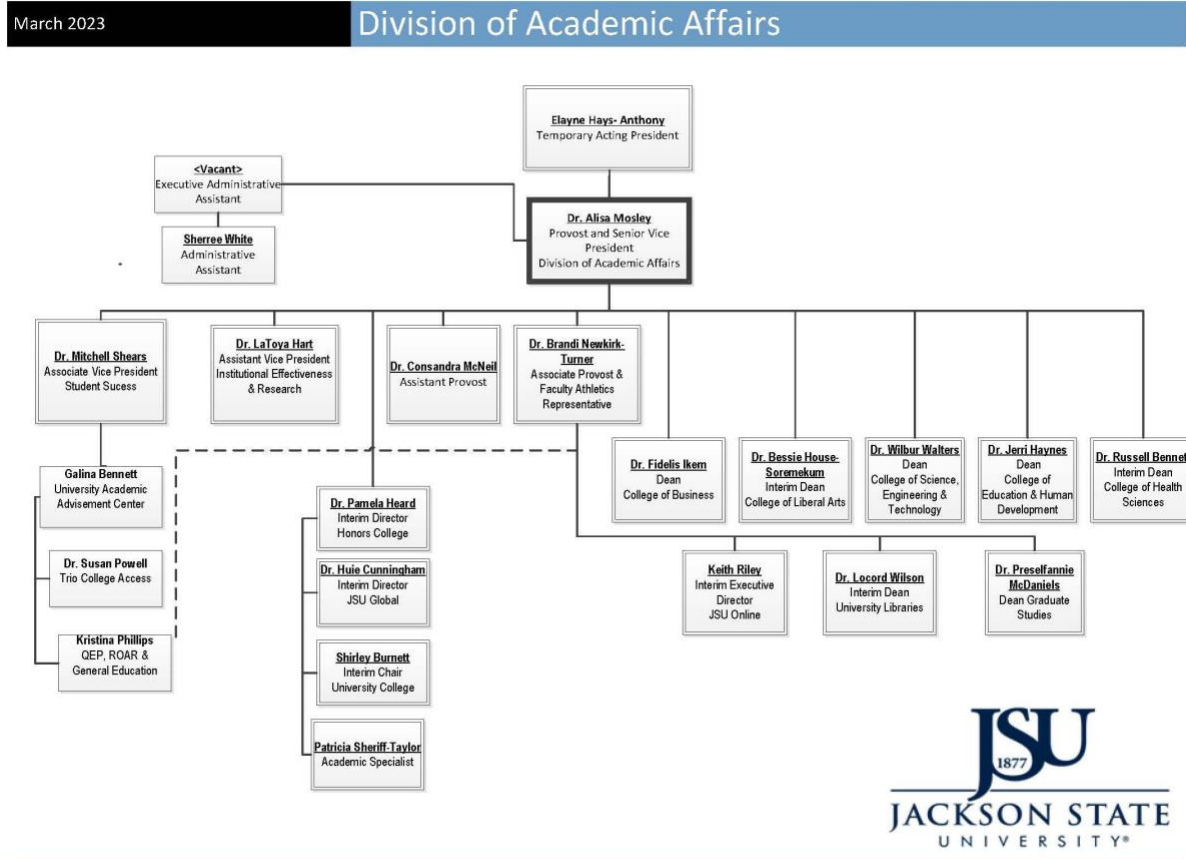


\*Reviewers find it helpful to also include a copy of the organizational chart in the ERF Introduction



- b. the relationship between school and other academic units within the institution. Organizational charts may include committee structure organization and reporting lines

Exhibit 1-2b. The University's Organizational Chart – Academic Affairs

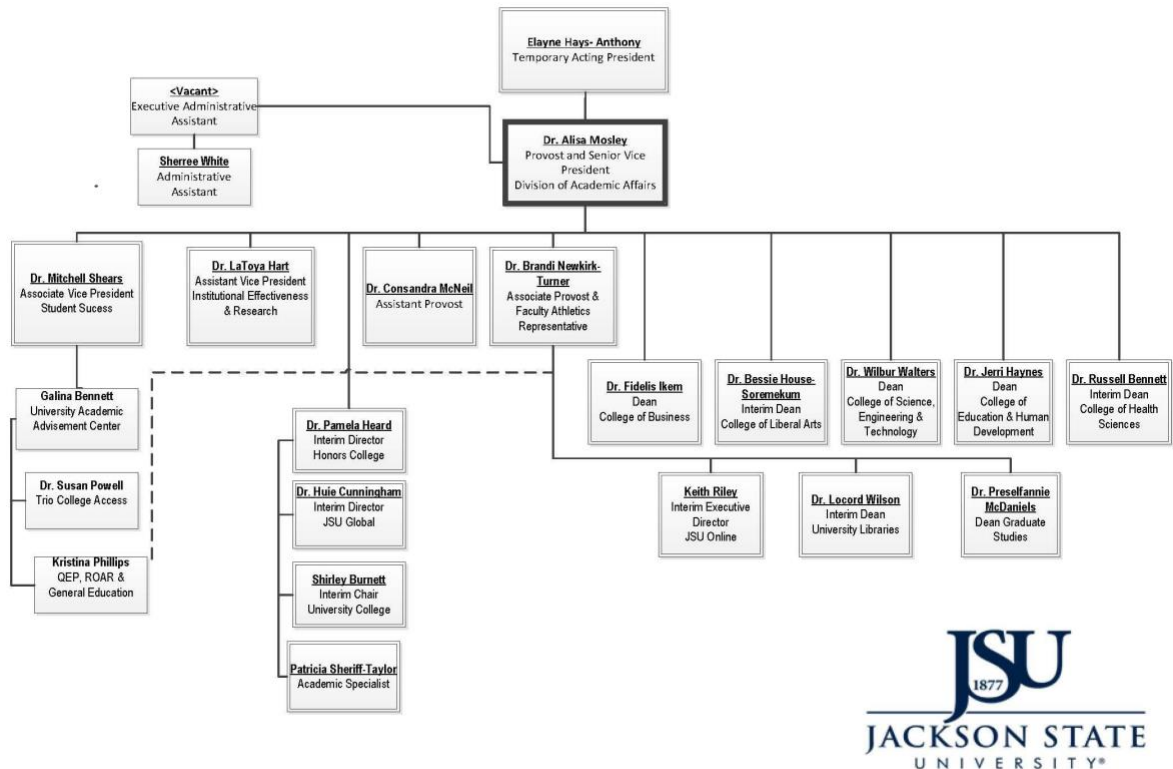


- c. the lines of authority from the school's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)

Exhibit 1-2.c The University's Organizational Chart – Academic Affairs

March 2023

Division of Academic Affairs



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

**NOT APPLICABLE**

- 3) An instructional matrix presenting all of the school's degree schools and concentrations including bachelor's, master's and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

Template Intro-1. Instructional Matrix: Degrees and Concentrations

Instructional Matrix- Degrees and Concentrations					
			Categorized as public health	Campus based	Distance based*
Bachelor's degrees					
Concentration	Degree				
Healthcare Administration	BS				
Communicative Disorders	BS			X	
BSPH	BSPH		X	X	
Health Education			X	X	
Allied Health			X	X	
Healthcare Administration			X	X	
Social Work (BSW)	BSW			X	X
Master's degrees	Academic	Professional			
Concentration	Degree	Degree			
Biostatistics		MPH	X	X	
Behavioral Health Promotion and Education		MPH	X	X	
Environmental and Occupational Health		MPH	X	X	
Epidemiology		MPH	X	X	
Health Policy and Management		MPH	X	X	
Communicative Disorders	MS			X	
Social Work		MSW		X	X
Doctoral degrees	Academic	Professional			
Concentration	Degree	Degree			
Behavioral Health Promotion and Education		DrPH	X	X	
Epidemiology		DrPH	X	X	
Health Policy and Management		DrPH	X	X	
Social Work	PhD			X	

\*The college does not offer any executive programs currently. The college does offer the BSW and MSW programs as distance-based programs (JSU Online).

- 4) Enrollment data for all of the school's degree schools, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2. Schools that house "other" degrees and

concentrations (as defined in Criterion D18) should separate those degrees and concentrations from the public health degrees for reporting student enrollments.

Degree		Current Enrollment 2022-2023
Master's		
	<b>MPH</b>	<b>74</b>
	Behavioral Health Promotion and Education	13
	Biostatistics	3
	Environmental and Occupational Health	4
	Epidemiology	26
	Health Policy and Management	28
	MS in Communication Disorders	55
	MSW in Social Work	138
Doctoral		
	<b>DrPH</b>	<b>68</b>
	Behavioral Health Promotion and Education	27
	Epidemiology	19
	Health Policy and Management	22
	PhD Social Work	19
Bachelor's		
	<b>BSPH</b>	<b>12</b>
	BS in Health Education	*
	BS in Allied Health	*
	BS in Healthcare Administration	*
	BS Communication Disorders	108
	BS Health Care Administration	310
	BS Social Work	260

\*New (Fall 2022) BSPH program and UG students have not declared BSPH concentration.

## A1. Organization and Administrative Processes

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

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

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

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

Annually, the dean appoints, or renews the appointments of, two faculty coordinators, one each for the MPH and DrPH programs. The faculty coordinators work with other faculty, department chairs, and the dean's office to coordinate course schedules, facilitate graduate comprehensive examinations, update student handbooks, and handle academic matters that support the smooth and efficient operation of departments and the school.

In accordance with the school's policies and procedures, tenured and tenure-track faculty elect members of the standing committees at the beginning of each academic year (see JSU's *Faculty Handbook* in ERF A5). The standing committees cover promotion and tenure (with one committee at the department level and another at the school level), admissions (MPH and DrPH Admissions Committee), curriculum design (CHS-PH Curriculum Committee), degree requirements (CHS-PH Curriculum Committee), and student assessment policies and processes (CHS-PH Curriculum Committee and MPH and DrPH Coordinators). The BSPH program concentrations are administered through policies and processes that govern the undergraduate programs (Undergraduate admissions, undergraduate Curriculum Committee. See undergraduate catalog at <https://www.jsu.edu/wp-content/uploads/2023/02/JSU-UNDERGRADUATE-CATALOG-2022-2023-v9-1.pdf>

The College Leadership Team is composed of faculty with administrative appointments in each of the degree earning programs (Public Health, Communicative Disorders, and Social Work). Each program has a department chair who reports directly to the Dean of the College.

### **Public Health**

Dr. Marinelle Payton (Epi/Bio)\*  
Dr. Russell Bennett (HPM) \*  
Dr. Mary Shaw (BEH) \*  
Dr. Sophia Leggett (MPH Program Coordinator) \*  
Dr. Russell Bennett (DrPH Program Coordinator) \*  
Dr. Yalanda Barner (BSPH)\*

### **Social Work**

Dr. Kristin Richards (BSW)  
Dr. Terrell Brown (MSW)  
Dr. Patrice Jenkins (PhD)

### **Communicative Disorders**

Dr. Whitney Perkins

\*These faculty also comprise the Public Health Leadership Team

**Table A1.1 CHS Standing Committees, 2022-2023**

Department committees	Function/responsibilities	Committee members
<b>Promotion and Tenure, Behavioral and Environmental Health</b>	Reviews applications and makes recommendations to the department chair	Dr. Amal Mitra (EPI/BIO) Dr. Sophia Leggett (BEH) Dr. Bhuiyan (EPI/BIO) *Dr. Turner (Biology)
<b>Promotion and Tenure, Epidemiology and Biostatistics</b>	Reviews applications and makes recommendations to the department chair	Dr. Azad Bhuiyan (EPI/BIO) Dr. Jung Lee (EPI/BIO) Dr. Amal Mitra (EPI/BIO) Dr. Clifton Addison (EPI/BIO)

*Each committee is comprised of tenured public health faculty or external tenured university faculty in accordance with university T&P policies.*

Department committees	Function/responsibilities	Committee members
<b>Promotion and Tenure, Health Policy and Management</b>	Reviews applications and makes recommendations to the department chair	No applicants this year
<b>Faculty Searches, Behavioral and Environmental Health</b>	Reviews applications and makes recommendations to the department chair	Dr. Sophia Leggett (BEH) Dr. Sheila McKinney (BEH) Dr. Girmay Berhie (HPM/SW) Dr. Felicia Caples (HPM)
<b>Faculty Searches, Epidemiology and Biostatistics</b>	Reviews applications and makes recommendations to the department chair	Dr. Amal Mitra (EPI/BIO) Dr. Azad Bhuiyan (EPI/BIO) Dr. Jung Lee (EPI/BIO) Dr. Clifton Addison (EPI/BIO)
<b>Faculty Searches, Healthcare Policy and Management</b>	Reviews applications and makes recommendations to the	Dr. Yalanda Barner (HPM) Dr. M. Younis (HPM) Dr. McDaniels (Dean, Graduate Studies)
College (CHS) committees	Function/responsibilities	Committee members
<b>SPH Promotion and Tenure</b>	Reviews applications and makes recommendations to the Dean	*Dr. Mario Azevedo (Liberal Arts) *Dr. Brian Anderson (Social Work) *Dr. Talya Thomas (CSET) Dr. Carlos Wilson (EDUC) Dr. LaKitta Johnson (EDUC) Dr. Regina McMurtery (EDUC) Dr. Chandar Lewis (EDUC)

**CHS Curriculum Committee  
(Public Health)**

Reviews proposals for the introduction of new courses, revision of existing courses, and elimination of unneeded courses and modifications to degree requirements; makes recommendations to the department chairs and dean.

Dr. Luma Akil (BEH)  
Dr. Jung Lee (EPI/BIO) Dr.  
Angela Omondi (BEH)  
Dr. Vincent Mendy (EPI)  
Dr. Yalanda Barner (HPM)

*The committee is comprised of at least one public health faculty representative from each PH department (BEH, EPI/BIO/ and HPM).*

**MPH and DrPH Admissions Committee  
(Public Health)**

Reviews applications and recommends admission of eligible applicants to the department chairs; reviews proposals for changes in admissions standards before making recommendations to the dean

Dr. Russell Bennett,  
DrPH Coordinator,  
(HPM)  
Dr. Sophia Leggett,  
MPH Coordinator,  
(BEH)  
Dr. Jung Lee (EPI/BIO)  
Dr. Sheila McKinney  
(BEH)  
Dr. Vincent Mendy,  
EPI/BIO



*The Admissions committee is comprised of at least one faculty representative from each PH department and the MPH/DrPH Coordinators.*

**Community Advisory Board\*\***

*\*\*The complete roster 2021-2023 CAB is in the ERF*

Review of mission, goals, and objectives; curriculum and competencies; and practice experiences; make recommendations for changes in these areas to the CHS Leadership Team.  
The CAB identifies community needs and resources to advance the mission of the College and support PH workforce development.

Dr. Jasmine Chapman  
Mr. Jim Craig  
Dr. Mary Crump  
Ms. Annette Vise  
Dr. Victor Sutton

*\*\*The 2022-2023 Community Advisor Board (CAB) is comprised of community members nominated by the Dean of the College of Health Sciences. The current Board includes community members and alumni. The 2023-2024 CAB will include current student representatives. The Dean's office maintains a copy of the Bylaws for the CAB and its membership.*

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

The CHS/JSU College of Health Sciences has established internal decision-making structures, as outlined in Table A1-1 and described below. Depending on the area of decision making, the dean works directly with department chairs, with the school's Leadership Team (the dean, department chairs, MPH and DrPH program coordinators, Healthcare Administration director, Communicative Disorders director, director of undergraduate programs, the Jackson Heart Study Community Outreach Center director, the informatics and analytics director, and with standing committees.

a. degree requirements

Degree requirements are addressed within departments with recommendations made to the Curriculum Committee and the CHS Public Health Leadership Team. The Curriculum Committee and Leadership Team bring its recommendations to a school-wide meeting of faculty and staff members. The dean forwards the recommendations to the Division of Graduate Studies.

b. curriculum design

Curriculum design recommendations and modifications to degree requirements are generated at the departmental level and forwarded to the school's Curriculum Committee. The Curriculum Committee presents its recommendation at a school-wide meeting of faculty and staff members. The dean then forwards it to the Division of Graduate Studies, which, in turn, forwards it to the Graduate Curriculum Committee. This committee makes a recommendation to the Graduate Council for approval. The Dean of Graduate Studies forwards the council's decision to JSU's Division of Academic Affairs.

c. student assessment policies and processes

The Graduate Area Comprehensive Examination (GACE) Committees, led by the MPH and DrPH coordinators, determine the policies and processes for compiling the examinations and grading rubrics. Grading of course assignments and assessments is addressed at the departmental level, in accordance with policies published in the student handbooks and the graduate catalog. **Note:** *The MPH GACE is no longer a curriculum requirement, effective Fall 2022*

d. admissions policies and/or decisions

The admissions committee has elected representatives from each of the public health departments (Behavioral & Environmental Health, Epidemiology and Biostatistics, and Health Policy & Management, plus the MPH and DrPH Coordinators. Assessment of admission applications is carried out according to policies published in the MPH and DrPH student handbooks, and the graduate catalog.

e. faculty recruitment and promotion

Policies and procedures for faculty recruitment and promotion are described in detail in the faculty handbook (see **ERF A1.3**). In brief, if promotion is being considered, a department chair facilitates the election of five of the department's tenured faculty members to a promotion and tenure committee (P&T); the elected members choose one of the committee members to serve as chair. The committee reviews the application(s) and supporting documents of the faculty member(s) being considered and makes recommendations to the department chair. The department chair reviews the application(s) and supporting documents and forwards these to the college-level Promotion and Tenure Committee, with the recommendations of the departmental committee and its chair. The college-level Promotion and Tenure Committee reviews the application(s) and supporting documents and makes recommendations to the dean. The dean reviews the applications and supporting documents for recommended applicants before making recommendations to the provost. The provost chairs the university-level tenure/promotion committee. If approved, a letter offering the position to the successful candidate is dispatched from the provost's office. In the final process, the JSU president recommends the final tenure/promotion decision to the IHL. The process for faculty recruitment is similar, except that the department chairs make their recommendation directly to the dean.

f. research and service activities

As part of the annual performance review process, faculty members and their department chairs agree at the beginning of the academic year to a professional plan that includes teaching, research, and service activities. At the end of the academic year, the faculty member reports what has been accomplished during the year, and the department chair

assesses the faculty member's performance in meeting the goals stated in the plan. The annual performance report, including the department chair's assessment, is forwarded to the dean, who in turn forwards an evaluation report to the Office of the Provost and Vice President of Academic Affairs.

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

The bylaws that determine the rights and obligations of administrators, faculty, and students in the governance of the school are available in **ERF A1.3** in the **JSU Faculty Handbook**.

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

Faculty are elected by their peers to serve on university committees external to the unit of accreditation. Elected faculty contribute to decision-making activities within the university.

Elections

occur during a general faculty assembly occurs in August, at the beginning of each academic year,

**Table A1.1** provides a list of the university committees on which CHS faculty and staff are serving in 2022-2023.

University Committee	Function/Responsibilities	Committee Members
<b>Faculty Personnel</b>	Represents the CHS in advising on the development, maintenance, and modifications of employment policies	Dr. Clifton Addison(EPI/BIO) Dr. Terrell Brown (SW)
<b>Faculty Senate</b>	Represents the faculty members of the CHS in communicating about issues that affect all faculty members of the university	Dr. Azad Bhuiyan (EPI/BIO) Dr. Sheila McKinney (BEH) Dr. Patrice Jenkins (SW) Dr. Younis Mustafa (HPM) Dr. Jennifer Wiles (CMD)

University Committee	Function/Responsibilities	Committee Members
<b>Freshman Class Sponsor</b>	Advises freshman class members	Dr. Jennifer Wiles
<b>Graduate Council</b>	Represents the CHS when addressing issues related to graduate education	Dr. Russell Bennett (HPM) Dr. Sophia Leggett (BEH) Dr. Mary Shaw (BEH)
<b>Grievance Committee</b>	Reviews complaints and makes recommendations for resolving issues	Dr. Luma Akil (BEH) Dr. Yalanda Barner (HPM)

<b>Sexual Harassment Grievance Panel (involving faculty)</b>	Reviews sexual harassments, grievances, and recommends actions of administrators	Selected by Faculty Senate as needed
<b>Tenure and Promotion</b>	Reviews recommendations for improvement of policies related to tenure and promotion practices	Brian Anderson, CHS  Dr. Mario Azevedo Liberal Art (History)  Dr. Fultz-McMurtery COE(Rehab)  Dr.Lakita Johnson COE (Rehab)  Dr. Chandra Lewis COE (Education Admin)  Dr. Talya Thomas CSET (Urban Ing)  Dr. Carlos Wilson (Graduate Studies)
<b>Tenure and Promotion Appeals</b>	Reviews appeals and makes recommendations regarding the responses	Dr. E. Yoon (SW) Dr. Alfonso Haraizon (COE)
<b>Undergraduate Curriculum Committee</b>	Reviews requests for curriculum changes and makes recommendations to Dean of Undergraduate Studies	Dr. Girmay Berhie (-alternate SW & HPM)  Dr. Yalanda Barner (HCA) Dr. Brian Anderson (BSW) Dr. Dawn Stanley (CMD) Dr. Trenia Allen (CMD) Ms. Jocelyn Green (CMD Student)

#### **Election to University-wide Committees**

The CHS faculty annually elect faculty members to serve on committees at the university level, including the Faculty Senate, as described below:

**Faculty Personnel Committee** – This committee includes two elected-at-large faculty members from each college/school. The committee, when possible, will be composed of tenured faculty members.

**Faculty Senate** – One faculty member from each department is elected to serve on the Senate for a period of one year with the opportunity to be re-elected for a second year. A faculty member must be in the third year of employment and on tenure track or tenured to be eligible to be elected to serve in the Senate.

**Freshman Class Sponsor** – One representative is chosen by the dean of each college/school.

**Graduate Council** – The members serving on the Graduate Council are appointed by the dean of the college. Deans are ex-officio members. All graduate faculty members may attend meetings of the Graduate Council.

**Undergraduate Curriculum Committee** – A maximum of four faculty members are elected from each college for terms of three years, on a rotating basis. One student is elected from each college for a one-year term, with the possibility of re-election for another year.

**University Grievance Committee** – This committee includes two elected-at-large faculty members from each college/school. The faculty members must be in tenure-track positions.

**University Sexual Harassment Grievance Panel (involving faculty)** – This panel includes one elected-at-large faculty member from each college, as well as one member from the library. The election of the Sexual Harassment Grievance Panel members is conducted under the auspices of the University Faculty Senate.

**University Tenure and Promotion Committee** – This committee includes two elected-at-large faculty members and one alternate from each college/school. Both elected members must be tenured faculty members holding the rank of associate professor or above who have served on the university's faculty for a minimum of three years and who are not being considered for promotion during the year in which they are elected to the committee.

**University Tenure and Promotion Appeals Committee** – This committee includes two elected-at-large faculty members and one alternate from each college. Both elected members are ordinarily expected to hold the rank of full professor. Individuals serving on the departmental, college, or university promotion and tenure committee are not eligible for service on this committee.

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

Faculty members, both full- and part-time, interact in a variety of ways. These include collaboration when conducting research; participation in departmental faculty meetings and monthly school-wide faculty and staff meetings; attendance at university-wide gatherings (e.g., the fall faculty and staff seminar, new student convocation, commencement ceremonies, awards and recognition ceremonies); attendance at student presentations (colloquia, dissertation proposal presentations, dissertation defenses); participation in research symposiums and seminars; and attendance at social events, such as departmental meet-and-greet social gatherings and graduation receptions. Additionally, both full- and part-time faculty interact regularly through email, telephone, zoom, and text messaging. (For meeting minutes and attendee lists, see **Resource File A1.5**)

Currently, the CHS maintains meeting minutes and attendee lists for several activities/events. These include participation in departmental faculty meetings and monthly school-wide faculty and staff meetings. Proposal presentations and dissertation defenses are virtual events that are recorded sessions. Attendance at the fall faculty and staff seminar is maintained through the Office of Academic Affairs.

***LOCATION OF DOCUMENTATION ERF\_A1.5 Meeting Minutes***

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

The CHS is developing an infrastructure to ensure that required CEPH data is in a centralized repository. The leadership team has recommended that the Dean's Office be responsible for developing and maintaining a centralized data management system to support college operations and data resources.

**Plans for Improvement**

The school will establish a shared drive and develop a comprehensive data management system to be used to store and provide ready access to CHS assessment data, meeting records and other important accreditation documents. College level Committee meeting minutes will be collected and maintained by the Dean's office beginning summer 2023. Departmental level Committee meeting agendas and reports will be maintained by each Department chair.

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

**“Not Applicable”**

**The school has a single identified leader (dean or director) and a cohesive chain of authority for all decision making relevant to the educational school that culminates with this individual.**

- 1) Describe the major rights and responsibilities of each participating institution.

**NOT APPLICABLE**

- 2) A copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the school's operation.

*PROVIDE LOCATION OF DOCUMENTATION IN ERF* **NOT APPLICABLE**

- 3) Describe the role and responsibilities of the identified leader.

*INSERT NARRATIVE HERE* **NOT APPLICABLE**

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

*IF APPLICABLE, INSERT NARRATIVE HERE* **NOT APPLICABLE**



### **A3. Student Engagement**

**Students have formal methods to participate in policy making and decision making within the school, and the school engages students as members on decision-making bodies whenever appropriate.**

- 1) Describe student participation in policy making and decision making at the school level, including identification of all student members of school committees over the last three years, and student organizations involved in school governance. Schools should focus this discussion on students in public health degree programs.

Prior to the COVID-19 pandemic, students participated in policy making and decision-making at the school level, serving on the Community Advisory Board and student associations. As we shifted to hybrid instruction, zoom meetings and gatherings in 2020-2022, student engagement has become more challenging. Few students attend classes in person and the level of engagement continues to decline. The MPH and DrPH program coordinators who serve as the sponsors for the MPH Student Association and the DrPH Student Association plan to meet with faculty and students to consider new engagement strategies beginning in fall 2023. Additionally, the CHS has been challenged by the appointments of two different Deans within the period 2019-2022.

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

#### **Plans for Improvement**

The school will aggressively re-engage student associations, including the MPH and DrPH Public Health Student Associations, the Communicative Disorders Undergraduate and Graduate Student Association, and the Health Care Student Association. Each association has several officers, who are elected in accordance with their bylaws. Additionally, students are members of several school committees. Student membership over the past three years is listed below.

**Curriculum Committee** – Reviews proposals for the introduction of new courses, revision of existing courses, and elimination of unneeded courses as modifications to degree requirements; makes recommendations to the department chairs and dean.

**Student members: TBN**

**Community Advisory Board (newly formed in 2020)** – Review of mission, goals, and objectives; curriculum and competencies; and practice experience; make recommendations for changes in these areas to the school's Leadership Team

**Student members: TBN for Fall 2023**

#### **CEPH Self-study Steering Committee**

**Two-year terms) Student members: TBN for Fall 2023 to review/comment on the**

#### **Student Associations**

The JSU undergraduate and graduate student associations are dedicated to advancing the goals, objectives, and interests of students. The associations serve as a liaison between students and the school community, providing students with a base for connecting with school leadership, social interaction, professional friendships, and contacts. Leadership of the student associations has direct contact with program directors and coordinators as well as the dean.

**MPH Public Health Student Association Officers:  
TBN**

**DrPH Public Health Student Association Officers:  
TBN**

**National Public Health Planning Committee Student Members:  
TBN**

**National Student Speech Language Hearing Association Communicative Disorders  
Undergraduate and Graduate Student Associations  
Officers: TBN**

**Healthcare Administration Undergraduate Student Association (newly formed in  
2017) Officers:  
2022-2023 – President, TBA**

Prior to COVID-19 shutdown, students were invited to serve on various school committees. For example, one or more student representatives were invited to serve on the Community Advisory Board (a community outreach effort that also includes representatives from local neighborhood associations, area businesses, churches, and schools), on the Curriculum Committee, on the CEPH Self-study Steering Committee, and on the National Public Health Planning Committee. The elected student representatives are encouraged to meet with the dean regularly to address student-related matters. We expect that each faculty sponsor and association will aggressively re-engage students in 2023-2024 as we see an uptick in the number of CHS students who are actually on campus and meeting face-to face with each other.

#### **A4. Autonomy for Schools of Public Health**

**A school of public health operates at the highest level of organizational status and independence available within the university context. If there are other professional schools in the same university (e.g., medicine, nursing, law, etc.), the school of public health shall have the same degree of independence accorded to those professional schools. Independence and status are viewed within the context of institutional policies, procedures, and practices.**

- 1) Briefly describe the school's reporting lines up to the institution's chief executive officer. The response may refer to the organizational chart provided in the introduction.

The chief executive Officer of Jackson State University (JSU) is the president. The chief academic officer is the provost. The dean of the College of Health Sciences reports directly to the provost, which is the pattern for all the deans of colleges at JSU.

The dean of the college has the same level of autonomy as all deans of colleges and schools within the JSU Division of Academic Affairs (see the school's organizational chart in Exhibit 1.2.a and the university's organizational chart in Exhibit 1.2.b). The dean has authority over all school- related administration, including the budget, personnel assignments, and academic affairs, including curriculum, student recruitment and admissions, instruction, and advising policies, subject to review by the provost and president. The dean supervises the department chairs, librarian, field internship coordinator, recruiter/publicist, administrative assistant for student services, director for accreditation/assessment, director of grant writing services, director for public health workforce development, and two support staff within the dean's office. The dean works closely with department chairs and other senior administrators on admissions, curriculum, granting of degrees, support for research and operations, and faculty appointments and promotions. The faculty approves courses, new degree programs, and any substantive changes to policies before sending to Graduate Studies and Academic Affairs for approval.

Hiring decisions are the responsibility of each college. The university's Office of Human Resources (HR) works with the departments, offices, and programs of all colleges and schools to recruit and hire staff. The HR website provides information on the JSU hiring process and on other personnel-related processes (see <http://www.jsu.edu/hr/>). Information on equal opportunity hiring and affirmative action also can be found on the website.

- 2) Describe the reporting lines and levels of autonomy of other professional schools located in the same institution and identify any differences between the school of public health's reporting lines/level of autonomy and those of other units.

The reporting lines and levels of autonomy of other professional schools located at Jackson State University is same the College of Health Sciences. See the university organizational chart. in the ERF document\_ Introduction **Organizational Charts**

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

**NOT APPLICABLE**

#### A5. Degree Offerings in Schools of Public Health

**A school of public health offers a professional public health master's degree (e.g., MPH) in at least three concentrations representing at least three distinct sub-disciplinary areas in public health and public health doctoral degree programs (academic or professional) in at least two concentrations representing at least two distinct sub-disciplinary areas in public health. A school may offer more degrees or concentrations at either degree level.**

- 1) Affirm that the school offers professional public health master's degree concentrations in at least three areas and public health doctoral degree programs of study in at least two areas. Template Intro-1 may be referenced for this purpose.

The JSU College of Health Sciences offers the MPH degree in five concentrations: Behavioral Health Promotion and Education, Biostatistics, Environmental and Occupational Health, Epidemiology, and Health Policy and Management. The college offers the DrPH degree in three concentrations: Behavioral Health Promotion and Education, Epidemiology, and Health Policy and Management (**see Table Intro-1, Instructional Matrix: Degrees and Concentrations**).

- 2) An official catalog or bulletin that lists the degrees offered by the school.

The JSU Graduate Catalog 2022-2023 reflects the current offerings in the five areas of MPH degree concentration and the three areas of DrPH degree concentration (see the JSU Graduate Catalog <https://www.jsu.edu/wp-content/uploads/2023/07/2022-2023-JSU-Graduate-Catalog-Updated-7.2023.pdf>

Additional program offerings in the CHS are listed in catalog (Communicative Disorders, Social Work, and the BSPH program is described in the JSU Undergraduate Catalog <https://www.jsu.edu/wp-content/uploads/2023/02/JSU-UNDERGRADUATE-CATALOG-2022-2023-v9-1.pdf>

## B1. Guiding Statements

The school defines a *vision* that describes how the community/world will be different if the school achieves its aims.

The school defines a *mission statement* that identifies what the school will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the school's setting or community and priority population(s).

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

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

- 1) The school's vision, mission, goals, and values.

### Development of the vision, mission, values, goals, and evaluation measures

Planning, monitoring, evaluation, and revision are integral to the school's ongoing efforts to ensure the accomplishment of its vision, mission, values, and goals. The process involves strategic planning at department level faculty retreats, departmental and leadership team meetings, departmental and school annual reports, annual faculty evaluation and assessment meetings with department chairs, and student course evaluations (SIRS), which assess the overall academic state of the school. (For annual reports and strategic plan [roadmap] **see Resource File B1.**)

The school's vision, mission, goals, and values are as follows:

### Vision

Exemplary public health practice, research, and service-oriented leaders who collaborate to make lives better for local, national, and global communities.

### Mission

The mission of the College of Health Sciences is to provide quality teaching, research, and service to produce team-oriented leaders who think critically and address health and societal issues that impact quality of life and well-being in communities at the local, state, national, and global levels.

### Goals

The CHS goals are expressed in three categories: education, research, and service as follows:

#### GOAL 1

**Education goal 1A:** Produce competitive and highly skilled public health professionals equipped with the knowledge and skills to solve public health problems.

**Educational goal 1B:** Sustain a nurturing educational environment that promotes academic excellence and effective public health practice.

## **GOAL 2**

**Research goal 2 A:** Promote health equity and social justice and reduce health disparities of disadvantaged populations locally, statewide, nationally, and globally.

**Research goal 2B:** Enhance the research and practice skills of public health students.

## **GOAL 3**

**Service goal:** Increase visibility within the community in the development of policy and in advocating on behalf of disparate populations.

See **Table B2-1** for the goals and evaluation measures through which the school intends to determine its effectiveness in advancing its mission and vision. Some outcomes are not easily measured quantitatively; when applicable, the school measures outcomes qualitatively.

### **Values**

*In the area of organizational culture, the school values*

- A nurturing environment
- Commitment to excellence

*In the area of research, the school values*

- Health equity and social justice
- Translational research

*In the area of teaching and learning, the school values*

- Diversity among the faculty and students
- Instruction that enhances critical and analytical skills
- Instruction that prepares students to be culturally competent to address local, state, national, and global health problems, particularly those among underserved populations
- Effective mentorship

*In the area of service, the school values*

- Community outreach to improve health
- Public health advocacy

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

*IF APPLICABLE, PROVIDE LOCATION OF DOCUMENTATION IN ERF -B1*

Each department within the CHS had a faculty retreat (2021-2022) to develop a strategic plan that would guide the development of college strategic plan. The plan has not been developed at the time of this report. However, the Interim Dean is responsible for moving the development of a college strategic plan forward in summer 2023 (faculty, staff, and department chairs will be part of the process. The department Strategic Plans (Behavioral & Environmental Health; Epidemiology & Biostatistics; and Health Policy & Management) are in **ERF\_B1 Guiding Statements**

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

**Challenges**

The change in leadership of the CHS/SPH in July 2022 delayed the momentum for the development of the CHS/SPH Strategic Plan to align with the university Strategic Plan. See the JSU ELEVATE Strategic Plan in **ERF\_\_B1 JSU Elevate**. The Interim Dean has prioritized the development and approval of the CHS/SPH Strategic Plan during summer 2023, integrating the department strategic plans into the final CHS/SPH document.

## B2. Evaluation and Quality Improvement

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

- includes all measures listed in Appendix 1 in these Accreditation Criteria
  - provides information that allows the school to determine its effectiveness in advancing its mission and goals (as defined in Criterion B1)
    - Measures must capture all aspects of the unit's mission and goals. In most cases, this will require supplementing the measures captured in Appendix 1 with additional measures that address the unit's unique context.
  - defines a process to engage in regular, substantive review of evaluation findings, as well as strategic discussions about their implications
  - allows the school to make data-driven quality improvements e.g., in curriculum, student services, advising, faculty functions, research and extramural service, and operations, as appropriate
- 1) Present an evaluation plan in the format of Template B2-1 that lists the following for each required element in Appendix 1:
- a. the specific data source(s) for each listed element (e.g., alumni survey, student database)
  - b. a brief summary of the method of compiling or extracting information from the data source
  - c. the entity or entities (generally a committee or group) responsible for reviewing and discussing each element and recommending needed improvements, when applicable
  - d. the timeline for review (e.g., monthly, at each semester's end, annually in September)

At the beginning of each academic year, faculty members are required to develop a statement of their professional goals and measurable objectives, tied to the school's overall goals relative to teaching, research, service, and grantsmanship. Department chairs consider these goals and objectives during the annual faculty performance evaluation process. The university requires evaluation reports from faculty, department chairs, deans, and other supervisors at the end of each academic year. In this way, each level of evaluation offers an opportunity to identify strengths, challenges, and plans for improvement.

Table B2-1 describes the evaluation measures used to determine the school's effectiveness in advancing its mission and goals, and the individual or group responsible for the data review. Some measures are not easily measured quantitatively; when applicable, the school measures outcomes qualitatively.



<b>Template B2-1</b>						
<b>Measures</b>	<b>Criteria or <i>Template</i></b>	<b>Data source &amp; method of analysis</b>	<b>Who has review &amp; decision-making responsibility?</b>	<b>Does it measure Goal 1?</b>	<b>Does it measure Goal 2?</b>	<b>Does it measure Goal 3?</b>
Student enrollment	<i>Intro-2</i>	Division of Institutional Research; Descriptive statistics based on admission and registration data	Committee comprised of Assessment Director, Department Chairs, and Program Coordinators	No	NO	NO
Number of BSPH, MPH, and DrPH students enrolled each semester	<i>B2-1</i>	Institutional Research & College Department Chairs Admit Recommendations	Director of Assessment	YES	NO	NO
At least three specific examples of improvements undertaken in the last three years based on the evaluation plan. At least one of the changes must relate to an area other than the curriculum	<i>B2-2</i>					
Graduation rates	<i>B3-1</i>	Leadership Team CEPH formula	Department Chairs and Program Coordinators	YES	YES	NO
Doctoral student progression (e.g., # newly admitted, # completed coursework)	<i>B3-2</i>	Department Chairs Qualitative Review	Department Chairs and dissertation advisors	YES	YES	NO
Post-graduation outcomes (e.g., employment, enrollment in further education)	<i>B4-1</i>	MPH & DrPH Coordinators Descriptive Statistics	Assessment Director Program Coordinator	YES	NO	NO

Quantitative and/or qualitative) data of recent alumni on their self-assessed preparation for post-graduation destinations	B5	Alumni survey and Exit Interviews Descriptive & Content Analysis	Assessment Director and Elected Committee	YES	NO	NO
Budget table	C1-1					
Student perceptions of faculty availability	C2	Exit Surveys/ Alumni Survey	Assessment Director and Program Coordinators	YES	NO	NO
Student perceptions of class size & relationship to learning	C2	Exit Survey/ Alumni Survey Descriptive Statistics; Qualitative analysis	Assessment Director supported by Program Coordinators	YES	NO	NO
List of all faculty, which concentrations they support & their FTE allocation to the unit as a whole	C2-1, E1-1, E1-2					
Ratios for student academic advising (all degree levels)	C2-2	Department Chair Reports Qualitative and quantitative	Department Chairs	YES	NO	NO
Maintain balance of student/faculty ratios for advising (adjusted each semester)	C2-2	Department Chair Reports Qualitative and Quantitative	Department Chairs	YES	NO	NO
Ratios for supervision of MPH ILE	C2-2	Director Field Placement; Director Reports. Descriptive Statistics	Director Field Placement	YES	NO	NO
Ratios for supervision of bachelor's cumulative/experiential activity	C2-2	Registration data Registrar	Director of UG Programs	YES	NO	NO
Ratios for DrPH ILE advising	C2-2	Course Instructor	Department Chairs and Dissertation Advisors	YES	NO	NO

Ratios for PhD dissertation advising	C2-2	N/A	Department Chairs and	YES	NO	NO
Ratios for MS final project advising	C2-2					
Count, FTE (if applicable), and type/categories of staff resources	C3-1					
Faculty participation in activities/resources designed to improve instructional effectiveness (maintain ongoing list of exemplars)	E3	Academic Affairs Office/Professional Development Office  Quantitative & Qualitative	Director of Assessment	YES	YES	NO
Faculty reports of participation in teaching/instructional development activities	E3	Academic Affairs  Quantitative & Qualitative	Department Chair/Faculty Annual Performance Evaluation meetings	YES	NO	NO
Percentage of faculty reporting Continuing Education credits related to teaching content/instructional effectiveness	E3	Department Chair/Program Director Annual Reports	Department Chairs and Director of Assessment	YES	YES	NO
Number of Faculty research/scholarly activities with connections to instruction (maintain ongoing list of exemplars)	E4	Faculty Annual Evaluations	Department Chairs and Dean's Office	NO	YES	NO
Number of faculty/student-mentored publications that relate to health equity/health disparities	E4-1	Department and College Annual Reports	Department Chairs and Dean	YES	YES	NO
Number of faculty/student-mentored presentations that relate to health equity/health disparities	E4-1	Department and College Annual Reports	Department Chairs and Dean	YES	YES	NO

Faculty extramural service activities with connections to instruction (maintain ongoing list of exemplars)	E5	Department Annual Report; College Annual Report;  Descriptive statistics for reporting	Faculty, Chairs, and Dean	NO	NO	YES
Number of faculty who reported extramural service activities on an annual basis	E5	Department & College Annual Reports  Quantitative	Department Chairs & Faculty (Faculty Accomplishment Reports)	NO	NO	YES
Percentage of CHS faculty that document participation in Extramural activities	E5	Department & College Annual Reports  Quantitative	Annual Faculty Accomplishments Report	NO	NO	YES
Number of employers who participate in an interview on graduates' preparation for post-graduation destinations	F1	Director of Marketing & Field Placement  Qualitative; Thematic content analyses	Director of Assessment and Appointed committee	YES	NO	NO
Feedback from external stakeholders on changing practice & research needs that might impact CHS priorities and/or curricula	F1	Community Advisory Board; Preceptor Evaluations	Public Health Practice Community Collaboration with Field Placement Director	YES	NO	YES
Feedback from stakeholders on guiding statements and ongoing self-evaluation data	F1	Community Advisory Board Qualitative Data (Content Analysis)	Individual CAB Members Director of Assessment	YES	NO	YES

Professional AND community service activities that students participate in (maintain ongoing list of exemplars)	F2	Director of Marketing & Placement Qualitative	College Student Associations	NO	NO	YES
Current educational and professional development needs of self-defined communities of public health workers (individuals not currently enrolled in unit's degree programs)	F3	Faculty from each department  Data will be analyzed utilizing Descriptive stats and thematic Content analysis	Faculty led Continuing Education / Community Development Committee	YES	NO	YES
Number of community-based partnerships developed	F3	Grant funding reports and Internship/Practicum MOUs	PHS 508 and PHS 750 Instructors and Director, Marketing & Field Placement	YES	YES	YES
Maintain ongoing list of Continuing Education events presented for the external community, with number of non-student, non-faculty attendees per event (Annually)	F3-1	CHS Faculty and Students  Descriptive and qualitative analyses of data and planning activities	Faculty led Continuing Education / Community Development Committee	YES	YES	YES
Number of students from underrepresented Hispanic, White, and Asian populations who apply to CHS	G1	Admission Committee Reports  Quantitative	Director of Assessment in Collaboration with Director of Marketing and Admissions Committee	YES	NO	NO
Number of staff from underrepresented Hispanic, White, and Asian populations who apply to CHS	G1	Dean Reports  Quantitative	Dean's Diversity Committee	YES	NO	NO
Student, faculty, and staff perceptions of unit's climate regarding diversity & cultural competence	G1	Climate Survey  Data will be analyzed via SPSS; Descriptive statistic	Director of Assessment and Climate Committee	YES	NO	NO

Student satisfaction with academic advising	H1	Exit Interviews & Alumni Survey/Interview	Director of Field Placement & Program Coordinator	YES	NO	YES
Student satisfaction with career advising	H2	Exit Interviews & Alumni Survey/Interview  Qualitative and quantitative Analysis of data sources	Director of Field Placement & Program Coordinator	Yes	No	NO
Events or services provided to assist with career readiness, job search, enrollment in additional education, etc. for students and alumni (maintain ongoing list of exemplars)	H2	Marketing & Field Placement  Qualitative data/thematic Content analyses	Director of Assessment and the Director of Marketing & Placement	YES	NO	YES
Number of student complaints filed (and info on disposition or progress)	H3	Student Affairs Office Dean's Office  Descriptive stats and qualitative Analyses (anonymous)	Director of Assessment and an Student Grievance Committee	YES	NO	NO
Number of recruitment fairs attended by Director of Marketing, faculty, and staff	H4	Director of Marketing Qualitative and Quantitative	Director of Marketing & Field Placement; Director of Assessment	YES	NO	NO
Number of students admitted to BSPH and MPH programs each semester	H4	Director of Marketing Reports Admissions Committee Reports  Quantitative methods	Director of Assessment & Admissions Committee	YES	NO	NO
Number of students admitted to DrPH concentrations annually	H4	Director of Marketing Reports Admissions Committee Reports  Quantitative methods	Director of Assessment & Admissions Committee	YES	NO	NO
Replace all <b><i>bold italic text</i></b> with the unit's chosen measures						
* Add columns for additional goals, if applicable						

+ Add rows for unit-specific measures, as needed (must include 5 at a minimum)				
--	--	--	--	--

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

On an annual basis, program leaders use evaluation feedback to frame discussions and make decisions regarding achievement of the mission, goals, and learning outcomes, which are included in the *Graduate Catalog*, MPH and DrPH student handbooks, promotional printed material for prospective students, reported on the website, and shared with the members of the school's Community Advisory Board.

In one example, following the Graduate Studies policy, the MPH program previously admitted applicants with a GPA 2.5, on a conditional basis. After review of this category of admission, it was found that these students received a higher number of "C" grades, which led to many holds on the students' academic records and interfered with their timely progress through the program. Upon the recommendation of the admissions committee, the policy was changed to requiring a minimum GPA of 2.8, beginning with the 2017 fall semester.

In another example, the DrPH degree program graduation rates have been lower than desired. The Public Health Leadership Team reviewed materials and data and brought faculty together to discuss ways to improve the rate. As a result, the college decreased the number of admitted DrPH students, faculty advisors are now carefully assigned to students with similar interests, and the school continues to search for additional sources of student financial support. The college has received several large grants through Dr. Girmay Berhie, PI and Director for the Public Health Informatics program, currently housed in the HPM department. Dr. Berhie provided Graduate Assistant opportunities to several DrPH students annually since 2021. Dr. Sophia Leggett (PI) has also offered tuition support and conference travel assistance for both MPH and DrPH students through Title III funding (*Establishing a Center for Environmental & Public Health Research, Training, & Practice*)

#### **LOCATION OF DOCUMENTATION IN *ERF B7 Student Development***

- 3) Provide at least three specific examples of improvements undertaken in the last three years based on the evaluation plan. At least one of the changes must relate to an area other than the curriculum. See Template B2-2.



## Template B2-2

	Measure (copied from column 1 of Template B2-1) that informed the change	Data that indicated improvement was needed	Improvement undertaken*
<b>Example 1</b>	Number of community-based partnerships developed	Shortage of approved Field Placement sites during COVID-19 and due to increases in number of students eligible for MPH Internship and DrPH Practicum	Aggressive outreach by MPH and DrPH Instructors of Record to identify potential partners. This led to an increase in new partnerships to support field experience needs.
<b>Example 2</b>	Maintain balance of student/faculty ratios for advising (adjusted each semester)	Department Chair data on faculty advising loads for MPH and DrPH	Each department chair was responsible for balancing advising loads at the beginning of each semester, effective fall 2019. There is evidence of improvement in each department.
<b>Example 3</b>	Number of faculty-mentored student publications and presentations of scholarly work at local, national, and international conferences	Department Annual Reports utilized to develop the CHS Annual Report	Faculty were strongly encouraged to engage students in scholarly work. Academic Affairs and Student Affairs provide travel support for students to local, national, and international conference; Statements of Accomplishments show an increase over the past two years across departments.

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

**Plans for Improvement:** The CHS will ensure that the Director of Assessment collects and maintains performance improvement data for each of the indicators in Template B2-1. Reporting committees and/or department chairs will collaborate to produce quality annual reports that capture improvement data for selected performance indicators. The Dean will engage external stakeholders to review and discuss Quality Improvement indicators on an annual basis (end of each academic year).

### B3. Graduation Rates

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

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

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

Students in MPH Degree, by Cohorts Entering Between 2016-2017 and 2022-2023								
*Maximum Time to Graduate: 7 years								
	Cohort of Students	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
2016-2017	# Students entered	61						
	# Students withdrew, dropped, etc.	20						
	# Students graduated	0						
	Cumulative graduation rate	0%						
2017-2018	# Students continuing at beginning of this school year (or # entering for newest cohort)	41	25					
	# Students withdrew, dropped, etc.	5	7					
	# Students graduated	4	0					
	Cumulative graduation rate	7%	0%					
2018-2019	# Students continuing at beginning of this school year (or # entering for newest cohort)	32	18	33				
	# Students withdrew, dropped, etc.	0	0	7				
	# Students graduated	18	2	0				
	Cumulative graduation rate	36%	8%	0%				

2019-2020	# Students continuing at beginning of this school year (or # entering for newest cohort)	14	16	26	26			
	# Students withdrew, dropped, etc.	2	0	4	3			
	# Students graduated	11	11	4	0			
	Cumulative graduation rate	54%	52%	12%	0%			
2020-2021	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	5	18	23	32		
	# Students withdrew, dropped, etc.	0	0	0	3	6		
	# Students graduated	0	5	7	1	0		
	Cumulative graduation rate	54%	72%	33%	3%	0%		
2021-2022	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	0	11	19	26	13	
	# Students withdrew, dropped, etc.	0	0	0	2	4	4	
	# Students graduated	0	0	3	11	2	0	
	Cumulative graduation rate	54%	72%	42%	46%	6%	0%	
2022-2023	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	0	8	6	20	9	41
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	27
	# Students graduated	0	0	5	5	15	4	0
	Cumulative graduation rate	54%	72%	57%	65%	53%	31%	0%

Students in Doctor of Public Health Degree, by Cohorts Entering Between 2013-2014 and 2022-23											
*Maximum Time to Graduate: 10 years											
	Cohort of Students	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
2013-2014	# Students entered	14									
	# Students withdrew, dropped,	2									
	# Students graduated	0									
	Cumulative graduation rate	0%									
2014-2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	19								
	# Students withdrew, dropped,	0	4								
	# Students graduated	0	0								
	Cumulative graduation rate	0%	0%								
2015-2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	15	11							
	# Students withdrew, dropped,	1	0	1							
	# Students graduated	0	0	0							
	Cumulative graduation rate	0%	0%	0%							

2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	11	15	10	5						
	# Students withdrew, dropped,	1	0	1	1						
	# Students graduated	0	0	0	0						
	Cumulative graduation rate	0%	0%	0%	0%						
2017-2018	# Students continuing at beginning of this school year (or # entering for newest cohort)	10	15	9	4	9					
	# Students withdrew, dropped,	2	0	0	0	1					
	# Students graduated	2	0	0	0	0					
	Cumulative graduation rate	14%	0%	0%	0%	0%					
2018-2019	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	15	9	4	8	10				
	# Students withdrew, dropped,	0	0	0	0	0	3				
	# Students graduated	1	2	0	0	0	0				
	Cumulative graduation rate	21%	11%	0%	0%	0%	0%				

2019-2020	# Students continuing at beginning of this school year (or # entering for newest cohort)	5	13	9	4	8	7	16			
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	1			
	# Students graduated	1	2	2	0	0	0	0			
	Cumulative graduation rate	28%	21%	18%	0%	0%	0%	0%			
2020-2021	# Students continuing at beginning of this school year (or # entering for newest cohort)	4	11	7	4	8	7	15	29		
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	1	2		
	# Students graduated	1	0	3	1	3	0	0	0		
	Cumulative graduation rate	36%	21%	45%	20%	33%	0%	0%	0%		
2021-2022	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	11	4	3	5	7	14	27	6	
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	0	0	0	
	# Students graduated	0	2	0	1	1	2	0		0	
	Cumulative graduation rate	36%	32%	45%	40%	44%	20%	0%	0%	0%	

2022-2023	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	9	4	2	4	5	13	27	6	20
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	0	0	0	7
	# Students graduated	1	3	2	0	0	0	1	0	0	0
	Cumulative graduation rate	43%	47%	45%	40%	44%	20%	6%	0%	0%	0%

2) Data on doctoral student progression in the format of Template B3-2.

<b>B3-2 Doctoral Student Data for year 2022-2023</b>			
	<b>Doctoral Behavioral and Environmental Health</b>	<b>Doctoral Epidemiology</b>	<b>Doctoral Health Policy and Management</b>
# newly admitted in 2022-2023	3	9	8
# currently enrolled (total) in 2022-2023	27	19	28
# completed coursework during 2021-2022	7	6	7
# in candidacy status (cumulative) during 2021-2022	2	3	5
# graduated in 2021-2022	2	3	0



\*The number of currently enrolled students includes students from cohorts who began the program prior to the AY 2014-2015 and are still within the 10 years allowed by the Division of Graduate Studies or were given an extension in time to complete their degree program.

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

The maximum time to graduate is seven years for MPH students and ten years for DrPH students (prior to 2015, the Public Health Program DrPH students were subject to the Division of Graduate Studies maximum time to graduation of ten years). The MPH graduation rate has fluctuated over the past five years due to a required Graduate Area Comprehensive Exam (GACE). Faculty and the PH Leadership team determined that the time lapses between completion of foundation courses and the administration of GACE was problematic for student success. The MPH GACE was removed from the curriculum effective fall semester 2022. We anticipate steady improvements in the MPH graduation rates to ensure that we exceed the 70% required by CEPH within the allowable 7 years to complete the program of study.

However, the DrPH graduation rate, while improving, has been below the 60 percent requirement since the initial school accreditation in 2018. The DrPH Coordinator and former Dean reviewed various data sources and brought Department Chairs together to discuss ways to improve the rate. To address this issue, the CHS has implemented several recommended initiatives that have yielded modest improvement in retention and graduation of the DrPH students.

- The maximum number of admissions per department is now nine and allows recruitment and admission to focus on students with interests that align more closely with current faculty members' research. Faculty are expected to begin mentoring for dissertation research in the first semester of enrollment.
- Faculty members will each have a smaller number of students to advise, which will allow them to provide more frequent contact and a higher quality of advising and mentoring.
- A monitoring system (Department Chairs and Student Services Administrative Asst) has been instituted to track where students are within their program. When a student becomes inactive, the system will trigger a response from faculty to actively encourage the student to re-engage in the program. The system needs to improve to ensure that assigned Faculty Advisors are engaged in the system and reporting progress data to the department chair.
- DrPH students will be administered a new exit survey designed (in development) to better capture their specific issues or concerns to improve the degree program.
- The DrPH alumni survey will include questions on ways to improve the program.
- The director of assessment (TBN) and another staff member (student services) will conduct student focus groups and/or in-depth interviews at least once per year to solicit feedback.
- Tuition support is available for all DrPH students who reach the dissertation level, which has historically been a period when some students become inactive, withdraw, or drop from the program.

Financial constraints/concerns continue to be an issue for many DrPH students. The university offers a diversity scholarship, and some faculty members support students through grants. As the program seeks

to grow, financial assistance for students will continue to be an area for improvement. The CHS is considering an annual fund raising gala for public health to raise “gap” funding to support student tuition and purchase of books/supplies.

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

**Not Applicable**

#### B4. Post-Graduation Outcomes

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

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

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

**Table B4-1.a MPH Post-Graduation Outcomes**

MPH Post-Graduation Outcomes*			
	2022	2023	
Employed	10(83.33%)	11(67.71)	
Continuing education/training (not employed)	2(16.7%)	1(5.9%)	
Not seeking employment or not seeking additional education by choice	1(8.33%)	3(17.64%)	
Actively seeking employment or enrollment in further education	1(8.33%)	7(41.17%)	
Unknown			
<b>Total Graduates</b>	<b>12</b>	<b>17</b>	

\*Data in these columns were obtained through faculty knowledge, search of LinkedIn profiles; and Exit Surveys.

**Table B3-1.b DrPH Post-Graduation Outcomes**

DrPH Post-Graduation Outcomes*			
	2022	2023	
Employed	5 (100%)	4 (51.14%)	
Continuing education/training (not employed)	0	3 (42.86%)	
Not seeking employment or not seeking additional education by choice	0	0	
Actively seeking employment or enrollment in further education	0	2 (28.6%)	
Unknown		1	
<b>Total Graduates</b>	<b>5</b>	<b>7</b>	

\*Data in these columns were obtained through faculty knowledge and search of LinkedIn profiles.

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

The MPH and DrPH Coordinators collect and maintain Post-Graduation Outcomes data each semester and compile reports. These reports are submitted to the Dean's office. The Dean is responsible for disseminating the reports to department chairs. Effective fall 2023, these reports will be discussed in with the public health leadership team (Dean, Department Chairs, Coordinators, BSPH program director). Chairs discuss the findings in department meetings to provide an opportunity for faculty engagement to address the issue. The TBN Associate Dean/Assessment Director will oversee the process.

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

Alumni employment data are based on faculty knowledge of alumni employment and a search of LinkedIn profiles. Data that is usually collected through the alumni survey were not available for years prior to 2022-2023 because the alumni survey was not administered. The PH leadership team in collaboration with faculty provided the 2022 and 2023 data in the tables above. In 2022, 5 of the 5 DrPH graduates were employed; In 2023, 4 of the 7 DrPH graduates were employed.

Additionally, 10 of the 12 MPH graduates in 2022 were employed; 11 of the 17 MPH graduates in 2023 were employed.

#### **Plans for Improvement**

Both the MPH and DrPH Coordinators are expected to implement a new data collection protocol effective fall 2023. The MPH Survey is in **ERF\_D7.4**. Details are described below for the administration of the MPH exit survey below. The DrPH exit survey details will be presented to the leadership team in summer 2023 and implemented in fall 2023.

#### MPH Methodology for Managing MPH Exit Survey

The MPH (Master of Public Health) Exit Survey is designed to assist the MPH program in assessing students' perceptions of the quality of the MPH students' learning and program effectiveness. The MPH Exit Survey is administered through Qualtrics by the MPH Coordinator three weeks prior to graduation each semester. Two reminder e-mails are sent to increase the response rates.

The MPH Coordinator oversees the process, including data analysis. The data is exported from Qualtrics into SPSS, analyzed and aggregate data is compiled into an annual report. The data is stored in a secured location within the MPH Coordinator's office. The annual exit survey report is submitted to the College of Health Sciences Dean. The College Dean is responsible for disseminating the report to Department Chairs. The MPH Coordinator is responsible for formally presenting the report to the Public Health Leadership Team for discussion and recommendations that will be used to inform decision-making for program improvements.

## **B5. Alumni Perceptions of Curricular Effectiveness**

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

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

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

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

The College gathers quantitative and qualitative data from students after they have graduated and become productive members of the public health workforce. However, we are aware that a small percent of our graduates do find jobs in related and in some cases unrelated public health areas.

Overall, the majority of our graduates do find employment in public health jobs. For full disclosure, however, the majority of our DrPH students at the time of enrollment are already public health professionals and are employed in public health jobs or public health related jobs.

**Results from the 2021-2023 Alumni Survey** overall revealed that graduates from the College in public health believed that they were adequately prepared for a career in public health after graduation. Specially, when asked “how well did Jackson State University prepare you for the public health workforce”, the majority or 72% of the respondents answered “very well”. When asked “how well did they understand and interpret the knowledge in their concentration”, 100% of the respondents answered “very well”. Respondents were asked “how well did the program prepare their written and oral communication skills in their public health career”, 100% stated they feel “very well prepared”.

When asked how well did the public health program curriculum prepare them for public health program management and planning, the majority or 72% responded they feel “very well prepared”; 14% responded they feel “somewhat prepared”, while another 14% responded that the curriculum prepared them for public health program management and planning only “adequately”. However, 100% of the respondents answered “very well” when asked “how well did the curriculum provide the skills and competencies to apply public health concepts to solve community health problems.

The respondents were asked, “did the public health program provide them with sufficient advocacy and policy competencies to advance a community’s health and social well-being”? All 100% of the participants responded “yes”. When asked “did

the field practicum and dissertation experiences help prepare them for a public health career” the respondents responded “yes” for both activities.

When asked if the participants had “worked directly with any faculty member on research, service, or creative projects during their time at Jackson State University”, the majority or 86% responded “yes” while 14% responded “no”. However, 100% of the participants responded “yes” when asked if their research experience improved their knowledge of how to plan and conduct research/inquiry in a public health setting” and that “their research experience provided them with an opportunity to get CITI Program training”. Additionally, participants were asked “overall, how well did their field work/research experience contribute to their professional development in public health”, the majority or 86% responded “very well” and 14% responded “somewhat well”.

Alumni respondents were asked “did the public health program provide sufficient courses/curriculum to meet their career objectives”, “did classes in their major concentration help them think about public health problems in new ways”, and “did the public health program provide adequate research opportunities”, 100% of the respondents answered “yes” to all questions.

When asked “what were the advantages of the public health program”, 100% of the respondents answered location, faculty, class hours/schedules, curriculum, night classes, CEPH Accreditation, good academic advisement, and well-rounded advisement. Between 14%-28% of the respondents when asked “what were the disadvantages” responded a lack of equipment/facilities/resources, lack of diversity among students, inadequate library holdings, and lack of scholarships. When asked “would they recommend the public health degree program at Jackson State University to others” 100% of the respondents stated “yes”.

On the section **Employment**, 100% of the respondents stated that they are employed full-time. When asked “which type of agency the are employed in”, the majority or 43% stated that the are employed in “Government agencies”, 15% in “Health care/hospitals”, another 14% in “public health departments”, 14% in “post-secondary institutions” and the remaining 14% in “for-profit business”.

Alumni were asked “did their employment change to an area related to their degree”, the majority or 57% answered “yes”, 43% answered “no”. When asked “was it necessary to relocate due to their employment”, 14% answered “yes”, while the majority or 86% answered “no”. Overall, the majority or 86% of the respondents answered “yes” to the question “did their degree help them to advance their career”, while 14% answered “no”.

When asked about **staying connected**, 100% of the respondents answered that they are most likely to stay connect with the College via “email” and “social media”.

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

The public health program assesses alumni perceptions of curriculum effectiveness through multiple methods including sending out electronic alumni surveys and conducting exit interviews with graduating students. Alumni surveys are sent out at least every three years.

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

#### **Plans for Improvement (ERF\_B6)**

It is important to note that CHS developed an Alum Survey for dissemination in Google Forms to its graduate students in 2020, which precedes the recent CEPH guidance. However, data was never collected using that instrument, and that form does not include data elements related to CEPH's guidance of new data.

New data is conceptualized as information that indicates the readiness of recent graduates to perform in the workforce after graduation based on their educational experience and the curriculum offered in the graduate program. This data captures the perceptions of the graduates and their employers. Given this framework, this committee proposes that SPH use two surveys to capture the new data and the following process to guide the administration of these surveys as part of a School of Public Health self-evaluation. The first survey is the JSU School of Public Health Alum Survey. It documents graduates' perceptions of readiness to work in the public health field and their feedback about the educational experience across all three concentration areas (Appendix A). The second survey is the JSU School of Public Health Employer Feedback Survey, which documents employers' perceptions about graduate students' readiness to work in the public health field and identifies those skill sets needed from the workforce to support current and future responsibilities (Appendix B). The SPH will initiate its data collection with students graduating from the MPH and DrPH programs in Spring 2020 onward and with the organizations that have employed these students.

Additionally, the committee created an Alum Contact Update Form to update graduates' contact information. This information will help SPH remain connected with its alum and enable the staff to disseminate the surveys according to the proposed timelines under the Data Collection Cycle. Dr. Sheila Y. McKinney, Department of Behavior and Environmental Health, and Dr. Vincent L. Mendy, Department of Epidemiology and Biostatistics, serve on this committee.

#### **Description of the SPH Self-Evaluation and Self-Evaluation Protocol**

The CHS Self-Evaluation aims to serve as an institutionalized process that provides feedback from MPH and DrPH graduates and their future employers on the readiness of CHS students to work in the public health field after graduation. Its purpose is to create an ongoing process in the SPH to capture data that can be used to inform future decisions about the graduate curriculum and generate data that SPH can use to assess whether the instruction is meeting the needs of current and prospective students. Objectives, indicators, and milestones to support the evaluation need to be created as the process is further developed.

#### **Overview of the Self-Evaluation Protocol**

The CHS Self-Evaluation Protocol is a guide for administering the three data collection tools proposed by the committee and recommendations for developing an infrastructure in SPH that would support this evaluation.

#### **Data Collection Cycle**

- The Alum survey will be administered every two years, and the employer interviews will be conducted annually.
- The initial set of Alum Surveys will be administered to students who graduated from our program no later than in Spring 2021
- Interviews will begin with companies, organizations, or individuals and from organizations or companies that have hired SPH alums starting in Fall 2023.

- The Committee recommends that with each graduating class, the MPH Coordinator, DrPH Coordinator, and Marketing/Field Placement Director obtain current employment information from the graduating students.
- The Director of Marketing/Field Placement will select three employers linked to each concentration area for the interview. The intent is to complete a total of nine interviews annually.

### **Managing the Data Collection Process**

This committee views the data collection for the self-evaluation as an SPH-led initiative and recommends that the responsibility of administration, analysis, and reporting be made part of the job requirements of the SPH Director of Marketing/Field Placement. This person will collaborate with the MPH coordinator, the DrPH Coordinator, the Office of the Dean, and other staff to coordinate the data collection, analysis, and reporting.

These are the steps that will guide the administration of each survey.

### **Administering the JSU School of Public Health Alum Survey**

We propose the following steps for administering the JSU School of Public Health Alum Survey:

1. The Director of Marketing/Field Placement will administer the survey using Qualtrics.
2. The SPH Director of Marketing/Field Placement will pilot the tool and is expected to maintain an updated, populated copy of the database in SPH.
3. The JSU Alumni Office administers the survey every two years during the first week of November commencing November 2023.
4. Annually, the SPH Director of Marketing/Field Placement or a graduate assistant will send an updated file to the Alumni office in December and May containing new contact information captured by the Alum Contact Update Form
5. Annually, the SPH Director of Marketing/Field Placement will provide the Sr. Leadership team with a summary of the survey results. In addition, the Departmental Chairs will also share these findings with their staff.

### **Administering the JSU School of Public Health Employer Survey**

We propose the following steps for conducting the JSU School of Public Health Employer Survey:

1. The JSU School of Public Health Employer Survey will be administered as a structured interview.
2. The interviews will happen by phone or Zoom using the questions listed in the JSU Public Health Employer Survey.
3. The SPH Director of Marketing/Field Placement and a dedicated graduate assistant will interview the employers to obtain this information.
4. SPH leadership will sponsor and coordinate training for the Director and staff to prepare them to conduct these interviews. The training will be offered each time the director or graduate assistant changes.
5. The Employer Interviews will happen annually over 60 days beginning May 2024.

### **Administering the Alum Contact Update Form**

The committee proposes these steps to guide using the Alum Tracking Form.

1. During the exit interviews, the MPH Coordinator, the DrPH Coordinator, or their designees will administer the Alum Contact Update Form to graduating students.
2. This form will be completed for all graduating MPH and DrPH students.
3. This data will be shared with the SPH Director of Marketing/Field Placement.
4. The MPH and DrPH Coordinators will begin using this form in Spring 2023.



## **C1. Fiscal Resources**

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

### **Sources of Funding**

As a state institution, JSU receives a large portion of its operating budget from the Mississippi legislature; funds approved by the legislature are allocated to the universities by the Institutions of Higher Learning. Tuition, student fees, and federal and private grants and contracts supplement the university's budget allocation.

In recent years, the school also has been subsidized through funds originating from a historic court settlement decision, the Ayers Case, which sought to correct the imbalance in appropriations and funding between the predominantly white institutions of higher learning in Mississippi and the state's three Historically Black Colleges and Universities, including JSU. The Ayers funds have declined over the years. However, the university has been able to absorb the cuts and is shifting the Ayers-funded programs, including the SPH, to the university's general sources of funding. The university is committed to full fiscal support of the SPH and has provided the necessary resources to hire new faculty and to maintain a viable, excellent school.

Fundraising, through both grants and philanthropy, represents an increasingly important element of the strategy for school financial support. Faculty and staff members are encouraged to pursue funding from extramural sources and to work closely with the Division of Research and Federal Relations to assure that applications are submitted in a timely manner and that they comply with all university, agency, or foundation requirements and policies.

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

#### **Budget Processes**

Budgets are reviewed and needs accessed on an annual basis at the department and college levels. The individual department heads submit and discuss their recommendations for additional funding based on their departmental needs to the College Dean. The Dean consolidates the individual departmental needs into an overall college needs budget request and submits it to the Division of Academic Affairs. These recommendations are submitted to the budget office, president, and executive cabinet for review. A meeting is then scheduled with the provost, president, and budget office to discuss the budget requests and/or revisions. Assisted by the cabinet and a presidentially appointed budget committee focusing on the university's strategic plans, the JSU president makes the final determination on budget allocations for the university's various units. Funds are allocated based on the availability of funds, previous allocations, accreditation requirements, and other operational needs. The annual operating budget for the university is then submitted to the Institution of Higher Learning (IHL) by the Vice President for Finance and Administration for approval. Upon IHL's approval the approved budgets are integrated into the University ERP system (Banner Finance) for each college/department.

- a) Briefly describe how the school pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples.

The university supports faculty salaries with funds from the Mississippi legislature, tuition and fees, and federal and private grants. While some personnel have been supported by the Ayers funds (described above), the University is committed to transitioning these salaries to university funds when Ayers funds are no longer available.

Indirect cost recovery from grants and contracts is an additional source of salary support. According to current university policies, principal investigators in the school and other academic units may retain 15-20 percent of the indirect costs generated from their grants and contracts.

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

If the need for additional faculty or staff positions arises during the academic year, a request is presented to the provost at the time of need and/or included in the annual submission of the budget requests for the new fiscal year. The request(s) are reviewed and a decision is made based on assessment and the availability of funds.

JSU has established processes for recruiting and appointing faculty and other personnel. While the college must comply with JSU's policies regarding recruitment, selection, and advancement, these policies give the college considerable power and autonomy in matters of importance to the academic mission. The JSU Senate Faculty Policy and Procedures Committee develops, monitors, and reviews university-wide policies on faculty recruitment, retention, promotion, and tenure. Appointment policies are set forth in the JSU Faculty Handbook for administrative, professional, and support personnel.

The faculty recruitment process involves department chairs, search committee members, and staff working collaboratively with the dean's office to ensure compliance with the university's affirmative action policies and other applicable personnel system requirements. Criteria for faculty appointments are contained in the JSU Faculty Handbook. Department chairs review needs for additional faculty with the dean. If approved at the college level, a search committee is formed, and a job requisition is submitted and routed through the JSU approval process. Advertisements are placed and applicants are interviewed by the search committee. Hiring proposals for the chosen candidates are routed for approval by the dean, provost, budget office, and HR.

Staff personnel are recruited and interviewed primarily by supervisors within the department, center, or unit of placement. Collaboration with the dean's office ensures compliance with affirmative action policies and facilitates the review of credentials. The dean or his representative reviews requests for the hiring of staff; the request then routes for review by the provost, and finally for review and approval by the budget office and HR.

- c) Describe how the school funds the following:
- a. operational costs (schools define "operational" in their own contexts; definition must be included in response)

Operational costs are those costs other than salaries, fringes, travel, etc. (e.g., other professional fees, dues, subscriptions, postage, office supplies, furniture, and equipment). Funds are allocated annually in the fiscal year budget to cover these costs. Funds that have been allocated in these areas may also be transferred from one to another as needed.

The college uses annual operating revenues from state funding, tuition and fees, grants and contracts, and indirect cost recovery to fund operational expenses, endowments, and gifts. State funds, tuition and fees, and indirect cost recovery is allocated to the college according to market share by formulas designed and administered by the president and provost. State, tuition and fees, and indirect cost recovery funds allocated to the college are distributed to the departments based on criteria such as market share of credit hour production, number of faculty, and market share of indirect cost recovery. A portion of the funding is reserved for administrative support. Research funding (grants and contracts) is derived from the entrepreneurial activities of the faculty. Research funding, which includes

funds supporting research and public health practice projects, provides direct salary support to faculty and staff, travel, equipment, software, telephone, and office supplies required by each project. Endowment funds are distributed based on the returns generated by the university's investments and use-of-funds stipulations specified by the endowment creators. Funds received as gifts flow through intact from the university to the college. The college's major expenditures of funds are in the categories of faculty salaries and benefits, staff salaries and benefits, operations, travel, and student support.

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

**Scholarships:** Students are afforded the opportunity to apply for scholarships via various university levels (academic scholarships, tuition waivers, graduate assistantship, etc.). Funds are also available to assist the students (tuition payments, stipends, and graduate assistantships) using grant funds, where available. All scholarships are awarded through an application process, with the awardees determined by merit or need, or other criteria specified by the college, department, or donor.

**Student Conference Travel and Other Opportunities:** Students are supported through a mixture of revenue sources through the college and other areas at the university. Funds may be requested up to \$500 for eligible graduate students for professional development and travel purposes through the JSU Graduate School. All students are also encouraged to attend and present at professional meetings and conferences (e.g., American Public Health Association (APHA) Annual Meeting and the Mississippi Public Health Association (MPHA) Annual Conference, and others). To encourage participation, the university, department, and/or college provides funds for travel to such events (airline ticket, registration costs, hotel expenses, food, etc.). Students must make a request via the department and/or university and be approved prior to any travel or incurring any travel expenses.

**Student Activities:** The various units within the college are encouraged to keep active student organizations/associations whereby the students also contribute via dues, fundraising, and other activities to assist in the cost of participation in student activities (homecoming, thanksgiving baskets, adopt a kid angel tree, etc.), the community, and the profession on behalf of the college.

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

Faculty members are encouraged to attend and present at professional meetings and conferences. To encourage participation, the university and/or college provides funds for travel to such events. The faculty may request support via the college and/or university. Faculty must make a request via the department and/or university and be approved prior to any travel or incurring any travel expenses.

Each year faculty members have received travel support to attend the annual meetings of the American Public Health Association (APHA) and others of their choosing if presenting at the meetings/conferences. In addition to these, faculty received reimbursement for registration at the Mississippi Public Health Association (MPHA) Annual Conference.

While tenure-track/tenured faculty have been consistently funded to attend conferences and professional development activities, such support is also available for adjunct and visiting faculty dependent on the availability of funds.

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

If additional funds are needed for other operational cost (such as consultants and accreditation dues/fees) or student support, a request is made by the college dean to the provost for additional funds and a justification is included with the request. Approval of some requests may be dependent upon the availability of funds. Students may also seek additional funds through other university sources. In addition, the college may submit funding requests for the purchase of equipment to the University's Information Technology Department.

Faculty may seek funding for professional development using other funding sources at the university designated specifically for faculty development. The faculty must adhere to the standard procedure of approval by following the administrative chain of department chair, dean, provost, and, if necessary, the president.

Additionally, college revenue may be increased by increasing student enrollment (tuition and fees), research funding (indirect cost recovery), and donations (endowments and gifts). Increased revenue would provide additional funds for operational costs, student support, and faculty development expenses.

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

The university administration collects all tuition proceeds and distributes them to units using a formula, generally based on the number of faculty and the number of students enrolled in that unit. Academic units do not receive tuition-derived resources based directly on the number of credit hours generated.

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

The Office of Grants and Contracts is responsible for the financial administration of all external grants and contracts including calculating and recovering all legitimate indirect costs.

While funds related to grants and contracts are administered by the recipient of the grant or contract, indirect cost recovery is shared among the university units and managed by the Division of the Vice President for Research and Federal Relations and the principal investigator, who receives 15-20 percent of the recovered sum. The university administration is reviewing the current formula to ensure that the respective college/school and academic unit, through the dean and the department chairs, receive part of the generated indirect cost funds to assist in meeting critical needs of the school not covered by the general and education budget.

- 2) A clearly formulated school budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Table C1-1 exhibits funding for recurring expenditures (salaries, fringe benefits, contractual services, and capital outlay), start-up funds for emerging needs, resources for information technology equipment, etc.

<b>Template C1-1</b>					
<b>Sources of Funds and Expenditures by Major Category, 2019 to 2023</b>					
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
<b>Source of Funds</b>					
Tuition & Fees/Assistantships (SPH, University - Ayers)	302,803.45	207,585.00	251,490.00	85,137.99	32,566.00
Tuition & Fees/Assistantships (University - Title III)					14,026.50
University Funds (E&G)	3,509,063.00	6,139,565.00	5,547,709.00	5,572,433.00	3,931,149.00
University Funds (Ayers)	377,379.00	397,674.00	403,674.00	608,129.00	59,136.00
Other (CMD* Clinic)	39,914.34	33,982.77	103,419.65	92,192.15	118,674.47
Grants/Contracts	1,384,552.00	780,894.01	1,981,345.06	13,601,639.66	12,181,126.99
Gifts - CMD* (Lecture Series)	7,000.00	11,000.00	6,000.00	2,700.98	-
Gifts - CMD* (Dora S. Washington Reading Room)	-	-		12,996.89	-
<b>Total</b>	<b>5,620,711.79</b>	<b>7,570,700.78</b>	<b>8,293,637.71</b>	<b>19,975,229.67</b>	<b>16,336,678.96</b>
<b>Expenditures</b>					
Salaries (Executive Administration & Managerial)	270,244.00	484,983.62	489,263.98	327,129.04	87,383.26
Salaries (Faculty and Non-Professional Staff)	2,173,922.71	3,340,805.10	3,152,948.20	2,903,844.35	1,879,634.75
Salaries (Staff)	245,099.25	271,770.87	264,955.95	205,163.03	165,982.32
Fringes	755,481.10	1,285,744.52	1,242,344.12	1,105,615.72	672,232.54
Operations	19,613.82	24,202.38	21,255.74	8,377.47	6,399.76
Travel	471.32	996.75	2,790.00	1,895.00	677.55
Other (Library/Resource Room)	7,583.30	-	-	-	-
Other (Accreditation)				10,624.00	8,949.00
Other (Tuition & Fees)	234,143.29	185,085.00	199,173.12	62,637.99	19,466.00
Other (Research - Graduate Assistant)	44,220.00	42,267.50	24,300.00	20,660.68	2,160.00
Gifts (Dora S. Washington Reading Room)	2,680.00	-	-	-	-
Other (CMD* Clinic)		19,909.19	20,846.49	17,133.18	32,066.10
Gifts - CMD (Lecture Series)		5,795.56	5,000.00	-	-
Grants/Contracts	935,638.86	604,310.30	626,080.09	2,019,434.11	2,883,598.06
<b>Total</b>	<b>4,689,097.65</b>	<b>6,265,870.79</b>	<b>6,048,957.69</b>	<b>6,682,514.57</b>	<b>5,758,549.34</b>

\*CMD (Department of Communicative Disorders)

1. During the final month(s) before the year-end budget closure, the university applies any excess funds to other needed areas, such as scholarships.

2. The school has included those grant/contract funds awarded to faculty members and departments for research as documentation of external funding. Grants/contracts expenditures include salaries and benefits, administration, facilities, supplies, and student support. Funds not used in current year are carried over into the new budget year until the grant closes.

3. Funds deposited into the Development fund for Dora S. Washington Reading Room are restricted funds and balances are carried over to the next year.

If the school is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall school budget.

**NOT APPLICABLE**

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

**NOT APPLICABLE**

## **C2. Faculty Resources**

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

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

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

- 1) A table demonstrating the adequacy of the school's instructional faculty resources in the format of Template C2-1.



**Template C2-1 (schools)**

	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	ADDITIONAL FACULTY <sup>+</sup>
CONCENTRATION	PIF 1*	PIF 2*	FACULTY 3^	PIF 4*	
BHPR	Shaw (1.0 FTE)	Omondi (1.0 FTE)	McKinney (1.0 FTE)	Scott (1.0 FTE)	PIF: , Non-PIF: Atehortua
MPH, DrPH					
EPI	Payton (1.0 FTE)	Mendy (1.0 FTE)	Mitra (1.0 FTE)	Bhuiyan (1.0 FTE)	PIF: , Non-PIF:
MPH, DrPH					
BIOST	Lee (1.0 FTE)	Addison (1.0 FTE)	Zhang 1.0 FTE)	Abebe (1.0)	PIF: , Non-PIF:
MPH, DrPH					
ENV	Akil (1.0 FTE)	Leggett (1.0 FTE)	Payton (1.0 FTE)		PIF: , Non-PIF:
MPH					
HPM	Bennett (1.0 FTE)	Barner ((1.0 FTE)	Younis (1.0 FTE)	Berhie (1.0)	PIF: , Non-PIF:Howard
MPH, DrPH					
Health Education	Hayes (1.0 FTE)	Offiah (1.0 FRE)	Scott (1.0 FTE)		PIF: , Non-PIF: White
BSPH					
Allied Health	Hayes (1.0 FTE)	Michael (1.0 FTE)	Bennett (1.0 FTE)		PIF: , Non-PIF: Roby
BSPH					
Health Administration	Barner (1.0 FTE)	Offiah (1.0 FTE)	Michael (1.0 FTE)		PIF: , Non-PIF: Caples; Healthcare Admin
BSPH					

<b>TOTALS:</b>	Named PIF	21
	Total PIF	21
	Non-PIF	6

\***Primary Instructional Faculty (PIF)** may be counted as a PIF a maximum of two times.

^**Faculty 3** can be either primary instructional faculty or non-primary instructional faculty. These individuals may appear multiple times if their responsibilities and training/experience are appropriate to count in multiple concentrations.

+**Additional Faculty** must be individually identified in Templates E1-1 and E1-2, as applicable. PIF and non-PIF faculty identified in other concentrations in the table may be included in this headcount if their responsibilities and training/experience are appropriate to count in multiple concentrations.

The FTE indicated below each faculty name should denote the contribution to the school as a whole rather than to individual concentrations.



- 2) All primary instructional faculty, by definition, are allocated 1.0 FTE. Schools must explain the method for calculating FTE for any non-primary instructional faculty presented in C2-1.

The school currently employs 21 of its allotted twenty-one primary instructional faculty members (PIFs), as indicated in Table C2-1. The school does have the required number of PIFs in each of the concentrations. Each PIF is employed to teach, advise students, create, and disseminate new knowledge through the production of scholarship, exhibit professionalism and collegiality, and engage in service to the university, college, department, community, and professional organizations. All PIFs are full-time employees of the school without split appointments, with a full-time equivalent (FTE) status calculated based on a nine-hour teaching load. A full-time faculty member can be released from teaching based upon dissertation supervision assignments, grant management responsibilities, and special assignments, as described in the JSU *Faculty Handbook* (see **ERF File A5**).

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

**Not Applicable**

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

General advising & career counseling			
Degree level	Average	Min	Max
Bachelor's	2.4	2.4	2.4
Master's	5	3	13
Doctoral	6		16

Supervision/Advising of bachelor's cumulative or experiential activity		
Average	Min	Max
12	12	12

Advising in MPH integrative experience		
Average	Min	Max
1.67	1	2
Supervision/Advising of bachelor's cumulative or experiential activity		
Average	Min	Max
Not Available	Not Available	Not Available (New Degree Program launched Fall 2022)

Mentoring/primary advising of DrPH students			
Degree	Average	Minimum	Maximum
DrPH	3.5	0	11

Disparity in the number of advisees assigned to each faculty member is the result of resignations and retirement of faculty members during the past 2 years. Senior faculty members assumed a heavier advising load while positions were vacant, and adjunct faculty members taught some of the senior faculty members' courses. The recently employed and new faculty members (2023-2024) will assume a greater share of the advising load.

- 5) Quantitative data on student perceptions of the following for the most recent year. Schools should only present data on public health degrees and concentrations.

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

**MPH**

A total of twenty students 17 (85%) females and three (15%) males participated in the exit survey. The graduating students' area of concentrations included 25% Behavioral Health Promotion and Education, 5% Biostatistics, 10% Environmental and Occupational Health, 40% Epidemiology, and 20% Health Policy and Management.

**DrPH Not Available**

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

**MPH**

**DrPH Not Available**

- 6) Qualitative data on student perceptions of class size and availability of faculty. Only present data on public health degrees and concentrations.

**See RESULTS IN ERF C2.2**

*INSERT SUMMARY HERE AND PROVIDE LOCATION OF FULL RESULTS IN ERF*

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

**Challenges**

The CHS/SPH does not have a centralized database or data management system for capturing the information based on exit survey. The MPH and DrPH Coordinators are responsible for these

assessments and will coordinate efforts to establish the methodology for collecting and analyzing the data, reporting it to department chairs and faculty.

#### **Improvement Plans**

The Dean, MPH, and DrPH Coordinators will coordinate the development and management of a system wide approach for collecting the data. Currently, there are plans to hire an Associate Director to have oversight of all assessment protocols essential to reporting to faculty, staff, the university, external partners, and CEPH.

\*The school has not had an Associate Director at any point during the past 5 years of SPH accreditation

*IF APPLICABLE, INSERT NARRATIVE HERE*

### **C3. Staff and Other Personnel Resources**

**The school has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.**

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

**Table C3-1 Staff Support**

<b>Name</b>	<b>Title(s)</b>	<b>Full Time Equivalency</b>
Frankie Adams	Administrative Assistant, Student Support Services	1.0
Dr. Verdean Potter	Executive Administrative Assistant and Finance Manager	1.0
Shirley Banks (Part-time) Retired	Administrative Asst to Dean (Part-time)	.5
<b>TBN**</b>	Marketing, Field Experience Director	1.0
<b>TBN**</b>	Associate Dean and Director of SPH Assessment and Accreditation	1.0
<b>TBN**</b>	Secretary to Dean	1.0
<b>TBN**</b>	Administrative Assistant, Public Health Department Chairs & Faculty	1.0
Sherri Ross, MA	Administrative Assistant, Communication Disorders	1.0
<b>Name (Center/Program Only)</b>	<b>Title(s)</b>	<b>Full Time Equivalency</b>
*Clevette Woodbury	Administrative Assistant, JHS CORC	1.0
<b>TOTAL FTE</b> <i>Excludes Center Staff</i>		<b>3.5 employed</b>

Table C3-1 Other personnel who are support staff, but do not provide instruction. All support staff in the SPH provide services to the departments with public health concentrations at the BSPH, MPH and DrPH levels, as well as the Department of Communicative Disorders and the undergraduate program in Healthcare Administration program. Also listed as support staff are those serving the Centers of the Jackson Heart Study. Center staff serve centers only.

While the broader university community has experienced a substantial, strategic reduction in staff support due to budget cuts, the school has seen a slight decrease in support staff since the 2018 affirmation. Some positions were eliminated (librarian) and others are vacant at the time of this report (retirements, resignations, etc.) By fall 2023, the school expects to fill vacant positions, including secretary to the dean and Associate Dean/Director of Assessment and Accreditation. Currently, the school employs 3.5 FTE staff members with 4 positions vacant for a total of 7.5 FTE staff members (see Table C3-1 above).

*\*This does not include Center/Program personnel who are hired to support specific program and center functions through faculty grants.*

*INSERT TEMPLATE C3-1 HERE*

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

*Not Applicable*

- 3) Provide narrative and/or data that support the assertion that the school's staff and other personnel support is sufficient or not sufficient.

Numerous clerical tasks are performed by Department Chairs and faculty due to vacant positions that we have not been able to fill with highly qualified individuals. The Marketing and Field Placement Director was vacant for over a year. The position was filled in July 2022, but is not vacant as of March 2023. Both directors accepted other opportunities (one moved into a faculty position within the CHS/SPH).

The Internship and Practicum faculty of record need a full-time equivalent Marketing and Field Placement Director to efficiently manage all aspects of the field experience.

The admission process and responding to prospective student inquiries were previously handled by the Director of Marketing & Field Placement. Currently, department faculty and chairs facilitate the admissions process in collaboration with the Graduate Studies office.

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

#### **Weaknesses**

Lacking sufficient staff to support the needs of department chairs, faculty, and students. Numerous clerical tasks are performed by Department Chairs and faculty due to vacant staff positions.

There is limited outreach to sufficiently grow and maintain Internship and Practicum sites.

#### **Plans for Improvement**

Hire a highly qualified and experienced Director of Marketing and Field Placement who can support the admissions process, evaluation activities, and maintain the website. The CHS Interim Dean has prioritized the hiring of other personnel to fill the vacancies listed above in C3-1.

#### C4. Physical Resources

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

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

The JMM is home to the offices of the dean of the SPH, the chairs of the Departments of Behavioral and Environmental Health, Epidemiology and Biostatistics, and Health Policy and Management, the directors of the BSPH, Healthcare Administration and Communicative Disorders programs, and the faculty members and staff associated with these academic units. Faculty members ordinarily have equal access to office space, though programmatic needs and the size of a unit may play a role in the specific allocation. Each administrator and faculty member has a separate office.

- Staff office space

Staff members have separate offices or well-defined office spaces to perform designated roles/responsibilities.

- Classrooms

Classes are generally held in one of the ten classrooms on the first floor. In addition to these classrooms, there is a conference room on the first floor that can be used for small classes, and large classes or combined classes can be scheduled to meet in the additional conference room and the auditorium on the second floor (see table below).



Public Health Program Space Allocation (in square feet) in the Jackson Medical Mall					
Academic Units	Administrative Offices*	Faculty Offices	Research/ Computer Labs	Conference /Class Rm*	Total
Behavioral Health Promotion and Education	1,222	1,998		369	3,589
Health Policy and Management	1,222	1,998		151	3,371
Epidemiology and Biostatistics	650	1,998			2,648
Public Health Programs Administrative Offices (Suite 2300)	1,261				1,261
Communicative Disorders Department (Suite 2260)	713	N/A			713
Healthcare Administration Program (Suite 2240)	372	N/A			372
Lecture Hall	4,465	N/A			4,465
Institute of Epidemiology and Health Services Research	1,600	N/A			1,600
Center of Excellence in Minority Health and Health Disparities	1,512	N/A	Shares same space as the Institute of Epidemiology and Health Services		1,512
Administrative Offices of the Dean and Student Support Center	2,275	N/A	2,910	11,423	16,608
<b>TOTAL</b>	<b>10,827</b>	<b>5, 994</b>	<b>2,910</b>	<b>11,943</b>	<b>31,674</b>

- Shared student space

In addition to the space listed in the table above, the school has the Health Sciences Library (1,684 square feet) and a student lounge (682 square feet) at the JMM. The school renovated much of its space during the SPH Initiative of 2016-2018 to accommodate the projected increase in the number of faculty and students resulting from the establishment of Mississippi's first school of public health. The Health Sciences Library (now a Resource Center) was reorganized to support student success. Conference rooms were updated to allow for "smart" meeting areas for both faculty and students; with this technology, students will be able to attend lectures by Skype or video cast.

The school also has space to provide doctoral students access to private zones that are outfitted with up-to-date technology and research resources aimed at enhancing their efforts in conducting dissertation research. Other areas designated for student use include two separate spaces with computers for graduate students and a separate area for students in the Communicative Disorders program.

Students and faculty have access to a technologically and ergonomically updated computer labs for advanced computer instructions and research capability (described in C5).

- Laboratories, if applicable to public health degree school offerings

*There is no research laboratory space at the school*

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

As described above, the school has ample physical space to support its current programs, faculty, students, and personnel, and has prepared for the physical and technological needs of a growing faculty and student body.

<b>Public Health Program Space Allocation (in square feet) in the Jackson Medical Mall</b>					
<b>Academic Units</b>	<b>Administrative Offices*</b>	<b>Faculty Offices</b>	<b>Research/Computer Labs</b>	<b>Conference /Class Rm*</b>	<b>Total</b>
Behavioral Health Promotion and Education	1,222	1,998		369	3,589
Health Policy and Management	1,222	1,998		151	3,371
Epidemiology and Biostatistics	650	1,998			2,648
Public Health Programs Administrative Offices (Suite 2300)	1,261				1,261
Communicative Disorders Department (Suite 2260)	713	N/A			713
Healthcare Administration Program (Suite 2240)	372	N/A			372
Lecture Hall	4,465	N/A			4,465
Institute of Epidemiology and Health Services Research	1,600	N/A			1,600
Center of Excellence in Minority Health and Health Disparities	1,512	N/A	Shares same space as the Institute of Epidemiology and Health Services		1,512
Administrative Offices of the Dean and Student Support Center	2,275	N/A	2,910	11,423	16,608
<b>TOTAL</b>	<b>10,827</b>	<b>5, 994</b>	<b>2,910</b>	<b>11,943</b>	<b>31,674</b>

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

#### **Plans for Improvement**

The CHS will provide funding to support improvements in the availability of health science databases and journals that are essential to support student and faculty research. These resources will be available through the JSU library on main campus rather than through the CHS Resource Center. The change will support expansion of shared resources available to JSU graduate and undergraduate students through a centralized library system.

**Note:** COVID-19 shut down led to fewer MPH and DrPH students utilizing the Health Sciences Library that was located on site at the CHS. Hence this led to the decision to fund research resources to the main campus library. The Interim Dean has committed to working with faculty and

the PH leadership team to identify scholarly resources (journals, databases) that need to be available to SPH faculty and students who seek to engage in meaningful research and scholarship.

## C5. Information and Technology Resources

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

1) Briefly describe, with data if applicable, the following:

- library resources and support available for students and faculty

The public health library resource center (RC) for persons performing academic research and study are located on the first floor of the CHS. The library houses twelve workstations with nine computers, lounges for individual study areas, four individual study booths, five soundproof study booths (two with monitors for group studies and/or viewing group presentations), white boards, a networked printer, and a librarian's desk with computer and storage space. Computers in the public health library RC are equipped with the same software as the main laboratory, described below.

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

Using funds allocated for public health infrastructure development, two computer laboratories located in the Dr. Aaron Shirley Public Health Complex at the Jackson Medical Mall (JMM) were renovated. One computer lab is a split lab, separated by a viewing window, that houses sixteen workstations with computers and a teacher's workstation with a computer on one side, and eight workstations with computers and a teacher's workstation with a computer on the other. Each side is equipped with a projector and white board for instructional purposes. This computer laboratory is designed for intense data access, data management, data analysis, geographic information system work, research, and training. These computers are configured for demanding database and spreadsheet use, as well as statistical analysis. These computer laboratories are available not only to students, but also to administrators, faculty, and staff.

The school's main computer laboratory is used primarily for undergraduate and graduate instruction in statistical software applications and is accessible to students for completing assignments and other projects. This computer laboratory houses fifty-one workstations and computers, white boards, a teacher workstation and observation desk, a networked printer, and a Newline technology board..

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

The school's computers are standardized on a consistent hardware and software platform for all work groups, even during legacy technology transition periods. Access to additional statistical software is available, if needed, to assist with improved teaching and learning experiences. These resources include, but are not limited to, ArcGIS, SAS, and SPSS.

Computer laboratories also are available on the university's main campus and at the university's research and development center, on one of the offsite campuses. One of the laboratory spaces located on the main campus that is available for sharing programs is housed

within the university's Center for Environmental Health in the College of Science, Engineering, and Technology. These computer stations are available to all undergraduate and graduate students on a "first come, first served" basis. The university's Information.

- technical assistance available for students and faculty

The university's Department of Information Technology (DIT) covers the school's technical assistance needs. DIT supports academic and administrative activities at JSU by providing technology infrastructure and services for teaching, learning, and research. The DIT's primary role is to serve as a catalyst in working with all of the colleges and schools to infuse technology to advance and support their missions and goals.

Within DIT, the Department of Computing and Communications (DCC) oversees support services relating to computer issues, telephones, network and operations, and the campus-wide server. The center also is responsible for researching system changes to determine the effects on faculty, staff, and students and to ensure no disruption of service; analyzing university activities and operations; and providing network recommendations to satisfy the university's and school's objectives and growth.<http://www.jsu.edu/informationtechnology/department-of-computing-and-communications/>.

In the area of instructional technology, faculty are supported by the Canvas Learning Management System (LMS) for course delivery. Respondus is a tool faculty may use for creating and managing exams that can be printed or published directly to Canvas. Exams can be created offline and moved on to Canvas through this program. In addition, eBeam Edge is a wireless device that makes any surface interactive.

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

The university has telecommunication and distance learning capabilities (JSU Online), and the school has two centralized smart classrooms in the JMM in which to offer online classes and other learning and communication opportunities across the country and globally.

In addition, all faculty, administrators, and staff offices are equipped with state-of-the-art personal computers. Networked printers are located throughout the school and shared by the faculty and staff. Documents sent to these printers are only accessible to the individual who forwarded them to the printer. For security and privacy, each individual faculty and staff must swipe their ID card in order to retrieve their documents or make copies.

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

NOT APPLICABLE

## D1. MPH & DrPH Foundational Public Health Knowledge

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

The school validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

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

Content Coverage for MPH and DrPH Degrees		
Content	MPH course(s) or other educational requirements	DrPH course(s) or other educational requirements
1.Explain public health history, philosophy and values	PHS 501 Public Health and Behavioral Science	PHS 702 Disease Pathogenesis and Behavioral Risk Factors
2.Identify the core functions of public health and the 10 Essential Services	PHS 501 Public Health and Behavioral Science	PHS 705 Advocacy and Public Health Policies PHS 706 Principles of Environmental and Occupational Health
3.Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	PHS 503 Biostatistics and Computer Applications PHS 505 Principles of Epidemiology PHS 506 Research and Quantitative Methods	PHS 701 Advanced Biostatistics and Computer Science Applications PHS 704 Survey and Qualitative Research Methods PHS 711-713 Advanced Biostatistics Lab I-III
4, List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school	PHS 501 Public Health and Behavioral Science PHS 505 Principles of Epidemiology PHS 506 Research and Quantitative Methods	PHS 702 Disease Pathogenesis and Behavioral Risk Factors PHS 703 Designing Research Studies for Minorities and Special Populations
5.Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	PHS 501Public Health and Behavioral Science	PHS 703 Designing Research Studies for Minorities and Special Populations
6.Explain the critical importance of evidence in advancing public health knowledge	PHS 505 Principles of Epidemiology	PHS 704 Survey and Qualitative Research Methods PHS 711-713 Advanced Biostatistics Lab I-III

<b>Content Coverage for MPH and DrPH Degrees</b>		
<b>Content</b>	<b>MPH course(s) or other educational requirements</b>	<b>DrPH course(s) or other educational requirements</b>
7.Explain effects of environmental factors on a population's health	PHS 504 Environmental and Occupational Health	PHS 706 Principles of Environmental and Occupational Health
8.Explain biological and genetic factors that affect a population's health	PHS 505 Principles of Epidemiology	PHS 702 Disease Pathogenesis and Behavioral Risk Factors
9.Explain behavioral and psychological factors that affect a population's health	PHS 501 Public Health and Behavioral Science	PHS 702 Disease Pathogenesis and Behavioral Risk Factors
10.Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	PHS 501 Public Health and Behavioral Science PHS 502 Public Health Policy and Administration	PHS 702 Disease Pathogenesis and Behavioral Risk Factors PHS 705 Advocacy and Public Health Policies
11.Explain how globalization affects global burdens of disease	PHS 505 Principles of Epidemiology	PHS 703 Designing Research Studies for Minorities and Special Populations
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	PHS 504 Environmental and Occupational Health	PHS 706 Principles of Environmental and Occupational Health

See Resource File D1 for syllabi listed in Table D1-1.

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

See Resource File D1 for syllabi listed in Table D1-1.

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

#### **Strengths**

The school has knowledgeable and experienced public health faculty that represent diverse cultures and backgrounds. Their combined experiences assure that all students are grounded in foundational public health knowledge taught in a combination of core courses.

#### **Challenges**

In addition, both the MPH and DrPH programs need a systematic way to receive input from the Community Advisory Board (CAB), preceptors, employers, and alumni to offer a curriculum that will prepare students for entering the evolving field of public health, particularly as it relates to the application and use of emerging technologies.

## **D2. MPH Foundational Competencies**

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

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

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

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

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

## **The Master of Public Health Degree and Concentration Requirements**

### **Behavioral Health Promotion and Education Concentration**

The Behavioral Health Promotion and Education concentration focuses on the health-related behavior of individuals in the context of sociocultural structures, communities, healthcare systems, and family units. Of particular interest is how health-related behaviors of individuals are determined by, and interact with, conditions in the social, political, cultural, economic, physical, and biological environment to influence health status. Emphasis is placed on identifying, evaluating, and diminishing unhealthy behaviors and promoting positive personal health. This concentration seeks to integrate and apply health behavior and social theories and methods to problems of human health. Assessment, planning implementation, and evaluation of interventions with emphasis on behavioral sociocultural aspects of health are the core themes of the study of health promotion and education. (See Table D2-1.a below, and find core course syllabi and other information in **Resource File D2. The concentration syllabi in Resource File D4.**)



**Table D2-1.a Requirements for the MPH Degree, Behavioral Health Promotion and Education Concentration**

<b>Requirements for MPH Degree, Behavioral Health Promotion and Education Concentration</b>		
<b>Course number</b>	<b>Course name</b>	<b>Credits</b>
<b>I. Public Health Core: 18 credits</b>		
PHS 501	Public Health and Behavioral Science	3
PHS 502	Public Health Policy and Administration	3
PHS 503	Biostatistics and Computer Applications	3
PHS 504	Environmental and Occupational Health	3
PHS 505	Principles of Epidemiology	3
PHS 506	Research and Quantitative Methods	3
<b>II. Concentration Core: 15 credits</b>		
PHS 531	Health Behavior, Promotion and Education	3
PHS 532	Community and Patient Health Education	3
PHS 533	Wellness and Maternal Child Health	3
PHS 534	Communication and Health Education Marketing	3
PHS 535	Behavioral Change Program Strategies	3
General elective*		3
General elective*		3
<b>III. Capstone Course: 3 credits</b>		
PHS 507**	Applied Master's Project (Integrative Learning Experience)	3
<b>IV. Field Experience: 3 credits</b>		
PHS 508**	Public Health Residency (Applied Practice Experience)	3
	<b>Total Hours</b>	<b>45</b>

### **Biostatistics Concentration**

The Biostatistics concentration prepares students in the competencies of statistical analysis and use of computer-supported statistical analysis application software. (See Table D2-1.b below, and find **core course syllabi and other information in Resource File D2. Find concentration syllabi in D4.1)**

**Table D2-1.b Requirements for the MPH Degree, Biostatistics Concentration**

<b>Requirements for MPH Degree, Biostatistics Concentration</b>		
<b>Course number</b>	<b>Course name</b>	<b>Credits</b>
<b>I. Public Health Core: 18 credits</b>		
PHS 501	Public Health and Behavioral Science	3
PHS 502	Public Health Policy and Administration	3
PHS 503	Biostatistics and Computer Applications	3
PHS 504	Environmental and Occupational Health	3
PHS 505	Principles of Epidemiology	3
PHS 506	Research and Quantitative Methods	3
<b>II. Concentration Core: 15 credits</b>		
PHS 571	Statistical Theory	3
PHS 522	Multivariate and Probabilistic Statistics	3
PHS 572	Statistical Computer Applications	3
PHS 524	Statistical Methods for Applied Epidemiology	3
PHS 601	Advance Biostatistics and Computer Science Application	3
General elective*		3
General elective*		3
<b>III. Capstone Course: 3 credits</b>		
PHS 507**	Applied Master's Project (Integrative Learning Experience)	3
<b>IV. Field Experience: 3 credits</b>		
PHS 508**	Public Health Residency (Applied Practice Experience)	3
	<b>Total Hours</b>	<b>45</b>

\*With approval from the faculty advisor and course instructor a student may take elective courses from other academic units at the university.

### **Environmental and Occupational Health Concentration**

The Environmental and Occupational Health concentration is designed to teach students how to assess and analyze the relationship between basic science and environmental and occupational injuries and diseases. The industrial chemicals, radiation, and other toxic substances absorbed by the environment require ongoing investigation to determine their effects on human health. Students in this concentration examine the science, policies, laws, and regulations that govern how environmental and occupational issues are handled. Furthermore, it provides the knowledge and skills necessary to design and implement prevention measures and to promote healthy behaviors in the workplace. A key objective is to train students to become effective leaders in the field of environmental and occupational health. (See Table D2-1.c below and find core course syllabi and other information in **Resource File D2**. Find **concentration syllabi in D4.2**)

**Table D2-1.c Requirements for the MPH Degree, Environmental and Occupational Health Concentration**

<b>Requirements for MPH Degree, Environmental and Occupational Health Concentration</b>		
<b>Course number</b>	<b>Course name</b>	<b>Credits</b>
<b>I. Public Health Core: 18 credits</b>		
PHS 501	Public Health and Behavioral Science	3
PHS 502	Public Health Policy and Administration	3
PHS 503	Biostatistics and Computer Applications	3
PHS 504	Environmental and Occupational Health	3
PHS 505	Principles of Epidemiology	3
PHS 506	Research and Quantitative Methods	3
<b>II. Concentration Core: 15 credits</b>		
PHS 541	Environmental Management and Industrial Hygiene	3
PHS 542	Environmental and Occupational Health Risk Assessment	3
PHS 543	Occupational Health and Safety Management	3
PHS 544	Environmental and Occupational Toxicology	3
PHS 545	Environmental Policy and Occupational Health Regulations	3
General elective*		3
General elective*		3
<b>III. Capstone Course: 3 credits</b>		
PHS 507**	Applied Master's Project (Integrative Learning Experience)	3
<b>IV. Field Experience: 3 credits</b>		
PHS 508**	Public Health Residency (Applied Practice Experience)	3
	<b>Total Hours</b>	<b>45</b>

\*With approval from the faculty advisor and course instructor a student may take elective courses from other academic units at the university.

### **Epidemiology Concentration**

This concentration prepares students for careers as scientific researchers, practical field investigators, health officers, research program directors and managers, and in other research areas of public health. Epidemiologists work closely with biostatisticians in designing and analyzing research studies. This concentration is designed for students who wish to acquire a thorough understanding of epidemiological methods, statistical principles, and computer software applications for practical fields of public health. It offers students an opportunity to acquire specific skills in designing research studies and to learn how to collect data, conduct analyses, and interpret research studies. (See Table D2-1.d below, and find core course syllabi and other information in **Resource File D2. Find concentration syllabi in D4.3**)

**Table D2-1.d Requirements for the MPH Degree, Epidemiology Concentration**

<b>Requirements for MPH Degree, Epidemiology Concentration</b>		
<b>Course number</b>	<b>Course name</b>	<b>Credits</b>
<b>I. Public Health Core: 18 credits</b>		
PHS 501	Public Health and Behavioral Science	3
PHS 502	Public Health Policy and Administration	3
PHS 503	Biostatistics and Computer Applications	3
PHS 504	Environmental and Occupational Health	3
PHS 505	Principles of Epidemiology	3
PHS 506	Research and Quantitative Methods	3
<b>II. Concentration Core: 15 credits</b>		
PHS 521	Advanced Seminar in Epidemiology	3
PHS 522	Multivariate and Probabilistic Statistics	3
PHS 523	Chronic and Infectious Disease Epidemiology	3
PHS 524	Statistical Methods for Applied Epidemiology	3
PHS 525	Epidemiology of Minority and Special Populations	3
General elective*		3
General elective*		3
<b>III. Capstone Course: 3 credits</b>		
PHS 507**	Applied Master's Project (Integrative Learning Experience)	3
<b>IV. Field Experience: 3 credits</b>		
PHS 508**	Public Health Residency (Applied Practice Experience)	3
	<b>Total Hours</b>	<b>45</b>

\*With approval from the faculty advisor and course instructor a student may take elective courses from other academic units at the university.

#### **Health Policy and Management Concentration**

This concentration prepares students for careers in public health policy and healthcare management. It encompasses concentration competencies in management, strategic planning, marketing, human resource management, and motivation. Students evaluate the role of governmental institutions in the policy process, examine policy models, and differentiate U.S. health policy from that of other countries. Financial aspects of healthcare are offered to those in the discipline who plan to pursue careers in management. Other core components of the concentration pertain to the social and legal principles affecting healthcare delivery in the U.S. (See Table D2-1.e below, and find core course syllabi in **Resource File D2. Find concentration course syllabi in D4.4**)

**Table D2-1.e Requirements for the MPH Degree, Health Policy and Management Concentration**

<b>Requirements for MPH Degree, Health Policy and Management Concentration</b>		
<b>Course number</b>	<b>Course name</b>	<b>Credits</b>
<b>I. Public Health Core: 18 credits</b>		
PHS 501	Public Health and Behavioral Science	3
PHS 502	Public Health Policy and Administration	3
PHS 503	Biostatistics and Computer Applications	3
PHS 504	Environmental and Occupational Health	3
PHS 505	Principles of Epidemiology	3
PHS 506	Research and Quantitative Methods	3
<b>II. Concentration Core: 15 credits</b>		
PHS 511	Organizational Design and Behavior	3
PHS 512	Public Health Policy, Law and Ethics	3
PHS 513	Financial Management of Health Services	3
PHS 514	Health Information Management Systems	3
PHS 515	Marketing Public Health and Strategic Planning	3
General elective*		3
General elective*		3
<b>III. Capstone Course: 3 credits</b>		
PHS 507**	Applied Master's Project (Integrative Learning Experience)	3
<b>IV. Field Experience: 3 credits</b>		
PHS 508**	Public Health Residency (Applied Practice Experience)	3
	<b>Total Hours</b>	<b>45</b>

\*With approval from the faculty advisor and course instructor a student may take elective courses from other academic units at the university.

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

**Not Applicable**

- 3) Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies listed above (1-22). If the school addresses all of the listed foundational competencies in a single, common core curriculum, the school need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the school must present a separate matrix for each combined degree. If the school relies on concentration-specific courses to assess some of the foundational competencies listed above, the school must present a separate matrix for each concentration.

**Table D2-2 MPH Foundational Competencies, Courses, and Assessments**

<b>Assessment of Competencies for MPH (all concentrations)</b>		
<b>Competency</b>	<b>Course number(s) and name(s)</b>	<b>Describe Specific assessment opportunity</b>
<b>Evidence-based Approaches to Public Health</b>		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	PHS 505 Principles of Epidemiology	Assignment 3: using the Mississippi Vital Statistics data, calculate the age-adjusted death rate of heart disease using direct method
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	PHS 506 Research and Quantitative Methods	Submit proposal topics and discuss them in class week 4; develop a proposal during the class week 12
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software as appropriate	PHS 506 Research and Quantitative Methods	Quantitative data will be analyzed in the computer lab in weeks 6 and 9 using SPSS, R, or SAS  Collect qualitative data from an in-depth interview after lecture in week 10; transcript and summary due week 11
4. Interpret results of data analysis for public health research, policy or practice	PHS 503 Biostatistics & Computational Applications  PHS 506 Research and Quantitative Methods	Complete in-class exercises and home assessments with interpretation of statistical tests in week 9 and 12  Complete exercises in-class and on Canvas followed by interpretation of statistical tests week 9; interpret data and results of statistical analysis in mid-term exam
<b>Public Health and Health Care Systems</b>		
5. Compare the organization, structure and function of health care, public health, and regulatory systems across national and international settings	PHS 502 Public Health Policy and Administration	Assignment 1: students produce a chart depicting health and medical organizations in the U.S. and internationally

6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	PHS 501 Public Health and Behavioral Science	Watch a webinar hosted by APHA on strategies to improve the health status of women and children in week 11  Work in groups to apply multiple behavior theories learned to case studies on high-risk populations in week 14
<b>Planning and Management to Promote Health</b>		
7. Assess population needs, assets and capacities that affect communities' health	PHS 501 Public Health and Behavioral Science	Provide assessments to evaluate a health education program and determine its effect on the field and communities health in a short paper (see syllabus, page 5)
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	PHS 501 Public Health and Behavioral Science	Complete a culminating group project creating a hypothetical program that is justified by theory as connected to a specific population and setting
9. Design a population-based policy, program, project or intervention	PHS 506 Research and Quantitative Methods	Developed proposal describes a population-based policy, program, project, or intervention, due in week 12
10. Explain basic principles and tools of budget and resource management	PHS 502 Public Health Policy and Administration	Assignment 2: write a brief paper on the ways in which budget development is influenced by policies
11. Select methods to evaluate public health programs	PHS 506 Research and Quantitative Methods	Discuss evaluation methods in week 11, and an essay question on the final exam asks students to select a method for program evaluation
<b>Policy in Public Health</b>		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	PHS 502 Public Health Policy and Administration	Assignment 3: draft a debate position that addresses the roles of ethics, diversity, and evidence in the policy making process

13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	PHS 502 - Public Health Policy and Administration	Assignment 4: write a scenario that illustrates the identification of stakeholders and the building of a coalition to influence a public health outcome
14. Advocate for political, social, and economic policies and programs that will improve health in diverse populations	PHS 502 Public Health Policy and Administration	Assignment 3: draft a debate position that addresses the roles of ethics, diversity, and
		evidence in the policy making process
15. Evaluate policies for their impact on public health and health equity	PHS 502 Public Health Policy and Administration	Complete a policy evaluation assignment that covers the following steps: engage stakeholders, describe the program, focus on the evaluation design, gather credible evidence, justify conclusions, ensure use and share lessons learned
	PHS 504 Environmental and Occupational Health	Conduct a literature review and make a current event presentation
<b>Leadership</b>		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	PHS 502 Public Health Policy and Administration	Assignment 4: write a scenario that illustrates the identification of stakeholders and building a coalition to influence a public health outcome
17. Apply negotiation and mediation skills to address organizational or community challenges	PHS 502 Public Health Policy and Administration	Assignment 5: write a paper that describes the process by which laws and regulations and the factors that influence those decisions; the assignment includes application of systems thinking tools
<b>Communication</b>		
18. Select communication strategies for different audiences and sectors	PHS 501 Public Health and Behavioral Science	Work in groups to address communication strategies for public health problems of different audiences and sectors by responding to questions in a case study



19. Communicate audience-appropriate public health content, both in writing and through oral presentation	PHS 501 Public Health and Behavioral Science	Mid-term sections III and IV; oral presentation of group project
20. Describe the importance of cultural competence in communicating public health content	PHS 501 Public Health and Behavioral Science	Final exam section IV; community intervention case study and discussion applying multiple behavioral theories learned in week 16 (there are no formal grades but does count toward each

		student's participation grade for that week)
<b>Interprofessional Practice</b>		
21. Perform effectively on interprofessional teams	<p>PHS 504 Environmental and Occupational Health</p> <p>PHS 505 Principles of Epidemiology</p> <p>PHS 506 Research and Quantitative Methods</p>	<p>Assignment 4: perform an observational exercise by shadowing a health professional from a discipline other than public health</p> <p>Assignment 3: write a brief paper on contrasting roles of guest speakers from disciplines other than public health</p> <p>Assignment 1: develop a plan to work on a health project with a team of professionals from disciplines other than public health</p>
<b>Systems Thinking</b>		
22. Apply systems thinking tools to a public health issue	PHS 502 Public Health Policy and Administration	Assignment 5: write a paper that describes the process by which laws and regulations are made and the factors that influence those decisions; assignment includes application of systems thinking tools.

4) Provide supporting documentation for each assessment activity listed in Template D2-2. Documentation should include the following, as relevant, for each listed assessment:

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

*LOCATION OF DOCUMENTATION is **ERF D2.4***

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

*LOCATION OF DOCUMENTATION IN **ERF D2.4***

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

### D3. DrPH Foundational Competencies (if applicable)

If this criterion is not applicable, simply write “Not applicable” and delete the criteria language and documentation requests below.

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

**Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the school must assess *all* DrPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc.**

- 1) List the coursework and other learning experiences required for the school's DrPH degrees. Information may be provided in the format of Template D3-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each DrPH degree.

**Table D3-1.a Core Requirements for the DrPH Degree**

Course number	Course name	Credits
PHS 701	Advanced Biostatistics and Computer Science Applications	3
PHS 702	Disease Pathogenesis and Behavioral Risk Factors	3
PHS 703	Designing Research Studies for Minorities and Special Populations	3
PHS 704	Survey and Qualitative Research Methods	3
PHS 705	Advocacy and Public Health Policies	3
PHS 706	Principles of Environmental and Occupational Health	3
PHS 707	Leadership for Public Health	3
PHBI 711**	Categorical Data Analysis	3
PHS 711, 712, 713	Advanced Biostatistics Lab I, II, and III	3 (1 per lab)
PHS 750	Integrative Learning Experience	3
PHS 798	Dissertation	15 (maximum)
	<b>TOTAL</b>	<b>27***</b>

\*\*\* The curriculum is divided into advanced courses (27 credit hours), concentration hours (15), and the Integrative Learning Experience (3 hours), for a total of 45 credit hours, plus a dissertation (maximum of 15 credit hours).

### Behavioral Health Promotion and Education Concentration

This concentration focuses on the role of behavioral, social, and psychological factors in disease causation, health promotion, and disease prevention.

**Table D3-1.b Requirements for the DrPH Degree, Behavioral Health Promotion and Education Concentration**

Core requirements for DrPH Degree, Behavioral Health Promotion and Education Concentration		
Course number	Course name	Credits
PHBS 711	Advanced Theories and Scientific Principles for Health Promotion and Education	3
PHBS 712/ PHEP 711	Behavioral and Psychosocial Epidemiology	3
PHBS 713	Qualitative Research Methods	3
Students also select two of the following:		
PHEP 712	Clinical Trials and Interventional Study Designs	3
PHBS 715	Research Seminar in Health Promotion	3
PHBS 716	Social and Cognitive Basis of Behavior	3
PHBS 719	Data Base Management Systems	3
	<b>TOTAL</b>	<b>15</b>

### Epidemiology Concentration

This concentration is concerned with methods for elucidating the causes of disease and for evaluating health services, programs, and treatments. Students are instructed in the concepts, knowledge, and statistical skills to study, analyze, and monitor the distribution and determinants of disease occurrence and other outcome measures in human populations.

**Table D3-1.c Requirements for the DrPH Degree, Epidemiology Concentration**

Core requirements for DrPH Degree, Epidemiology Concentration		
Course number	Course name	Credits (if applicable)
PHEP 711	Behavioral and Psychosocial Epidemiology	3
PHBI 712	Multivariate Methods I	3
PHEP 712	Clinical Trials and Interventional Study Designs	3
Students also select two of the following:		
PHEP 713	Infectious Disease Epidemiology	3
PHEP 714	Nutrition and Genetic Epidemiology	3
PHEP 717	Environmental Epidemiology	3
	<b>TOTAL</b>	<b>15</b>

### Health Policy and Management Concentration

This concentration exposes students to a curriculum designed to allow them to have an impact on knowledge of contemporary public health administration and management. The concentration also provides students with analytical skills for designing, implementing, and evaluating public health policies and interventions, including financial and human resource management, comprehensive policy and program planning, analysis, evaluation, development, and implementation.

**Table D3-1.d DrPH Health Policy and Management Concentration Requirements**

Core requirements for DrPH degree, Health Policy and Management Concentration		
Course number	Course name	Credits (if applicable)
PHPM 711	Strategic Leadership in Management of Human Resources	3
PHPM 712	Public Health Economics	3
PHPM 713	Analysis of Health Legislation and Regulations	3
Students also select two of the following:		
PHPM 714	Evaluation of Performance and Quality in Health Service Organizations	3
PHPM 715	Healthcare Informatics and Decision Making	3
PHPM 716	Administration of Integrated Health and Hospital Systems	3
PHPM 717	Managed Care Networks and Public Health	3
	<b>TOTAL</b>	<b>15</b>

- 2) Provide a matrix, in the format of Template D3-2, that indicates the assessment activity for each of the foundational competencies. If the school addresses all of the listed foundational competencies in a single, common core curriculum, the school need only present a single matrix. If the school relies on concentration-specific courses to assess some of the foundational competencies listed above, the school must present a separate matrix for each concentration.

**Table D3-2 Assessment of DrPH Student Achievement of Foundational Competencies**

Assessment of DrPH Student Achievement of Foundational Competencies		
Competency	*Course number(s) and name(s)	Specific assignment(s) that allow assessment
<b>Data and Analysis</b>		
1. Explain qualitative, quantitative, mixed methods and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community and population) levels	PHS 703 Designing Research Studies for Minorities and Special Populations	Discuss the strengths and limitations of different study designs
	PHS 704 Qualitative Research	Conduct an in-depth interview assignment and Assignment 1: participatory observation

2. Design a qualitative, quantitative, mixed methods, policy analysis or evaluation project to address a public health issue	PHS 703 Designing Research Studies for Minorities and Special Populations  PHS 704 Qualitative Research	Design a written policy brief on a topic related to health disparities  Assignment 2: survey development pilot testing
3. Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring and evaluating policies and programs and to address a population's health	PHS 703 Designing Research Studies for Minorities and Special Populations	Critically review and discuss data sources on health disparities
<b>Leadership, Management, and Governance</b>		
4. Propose strategies for health improvement and elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders and other partners	PHS 703 Designing Research Studies for Minorities and Special Populations	Explain in a term paper and a discussion question on the final exam how the concept of stakeholder applies to reduction of health inequities
5. Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies	PHS 706 Principles of Environmental and Occupational Health	Following four weeks of instruction, students participate on a panel addressing the design of environment health assessments
6. Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems	PHS703 Designing Research Studies for Minorities and Special Populations  PHS 705 Advocacy and Public Health Policies	Design a study to test a hypothesis related to health disparities  Compile a bibliography of literature on advocacy and public health policies
7. Create a strategic plan	PHS 705 Advocacy and Public Health Policies	Class advocacy project; see page 5 of the syllabus for details
8. Facilitate shared decision making through negotiation and consensus-building methods	PHS 705 Advocacy and Public Health Policies	Class advocacy project; see page 5 of the syllabus for details

9. Create organizational change strategies	PHS 707 Leadership in Public Health	<p>Perform the Kaizen theory/Shewhart cycle exercise</p> <p>Week 7, exercise 1: Identify and examine the challenges a health leader faces in institutional, resource-dependent, and contingent environments; written responses are required to the question about which strategies a health leader should implement for successful outcomes, to include strategic sourcing</p>
10. Propose strategies to promote inclusion and equity within public health programs, policies and systems	PHS 707 Leadership in Public Health	Week 10: case study – “Racism: A Mental Health Issue” – and discussion questions pertaining to the case
11. Assess one's own strengths and weaknesses in leadership capacities including cultural proficiency	PHS 707 Leadership in Public Health	<p>Week 3: emotional intelligence, and Week 6: strengths based on leadership; group activities in-class and outside of class</p> <p>Week 10: case study – “Racism: A Mental Health Issue” – and discussion questions pertaining to this case</p>
12. Propose human, fiscal, and other resources to achieve a strategic goal	PHS 705 Advocacy and Public Health Policies	Class advocacy project: see page 5 of the
		courses syllabus for details
13. Cultivate new resources and revenue streams to achieve a strategic goal	PHS 707 Leadership in Public Health	Week 8, chapter 12, exercise 6: students evaluate internal and external health organization stakeholders and justify their motivations, needs, and aspirations with regard to health services and products; written response required
<b>Policy and Programs</b>		

14. Design a system-level intervention to address a public health issue	PHS 706 Principles of Environmental and Occupational Health	Week 10: Develop an observational study with another discipline and submit summary of lessons learned
15. Integrate knowledge of cultural values and practices in the design of public health policies and programs	PHS 705 Advocacy and Public Health Policy	Conduct an in-depth interview assignment and participatory observation assignment
16. Integrate scientific information, legal and regulatory approaches, ethical frameworks, and varied stakeholder interests in policy development and analysis	PHS 705 Advocacy and Public Health Policies	Class advocacy project: see page 5 of syllabus for details
17. Propose interprofessional team approaches to improving public health	PHS 704 Qualitative Research "Inter-professional Case Study Module"	Prepare and present the Society for Public Health Education IPE case study (national competition or locally presented) using new or old case studies selected by SOPHE
<b>Education and Workforce Development</b>		
18. Assess an audience's knowledge and learning needs	PHS 704 Qualitative Research	National Public Health Week and participatory observation assignment
19. Deliver training or educational experiences that promote learning in academic, organizational or community settings	PHS 703 Designing Research Studies for Minorities and Special Populations	Summarize principles learned regarding delivery of training or educational events or courses to promote learning
20. Use best practice modalities in pedagogical practices	PHS 704 Qualitative Research  PHS 706 Principles of Environmental and Occupational Health	Presentation of qualitative results assignment  Oral presentation, exams; conduct mock

All DrPH students are required to take the same courses and are assessed using the same activities for the DrPH Foundational Competencies. (See Table D3-2 above and find **core and concentration course syllabi in Resource File D3 and D4.**)

- 3) Provide supporting documentation for each assessment activity listed in Template D3-2. Documentation should include the following, as relevant, for each listed assessment:
  - assignment instructions or guidelines as provided to students
  - writing prompts provided to students
  - sample exam question(s)

**DOCUMENTATION IN ERF D3 (Foundation Course Syllabi listed in D3-2)**



- 4) Include the most recent syllabus from each course listed in Template D3-1, or written guidelines, such as a handbook, for any required elements listed in Template D3-1 that do not have a syllabus.

***DOCUMENTATION IN ERF D3,D4 All Syllabi***

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

**Plans for Improvement**

Plan and implement a curriculum mapping retreat with faculty from all public health degree programs in 2023. The process is essential to ensure that we identify gaps in the curriculum and identify solutions for identified weaknesses in program areas.

#### D4. MPH & DrPH Concentration Competencies

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

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

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

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

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

**Table D4-1.a MPH Behavioral Health Promotion and Education Concentration,  
Specific Competencies and Assessment**

<b>Assessment of Competencies for MPH Behavioral Health Promotion and Education Concentration</b>		
<b>Competency</b>	<b>Course number(s) and name(s)</b>	<b>Specific assignment(s) that allow assessment</b>
1. Explain basic theories, concepts, and models from a range of social and behavioral disciplines that contributes to public health research and practice	PHS 531 Health Behavior Promotion and Education	Skill building activity at the end of the module: Draw a diagram explicating the links between various components of the PRECEDE-PROCEED Model and a chosen health behavior
2. Outline the steps and procedures for the planning, implementation and evaluation of public health programs, policies, and interventions	PHS 532 Community and Patient Health Education	Community health assignments: Conduct a windshield survey, a grocery store audit, and a park audit of local community (see syllabus, page 4)  Community Health Project, Assignment 3: Develop a proposal based on findings from community health
		assignments using the MSDH proposal template (see syllabus, pages 4-5)

3. Utilize community health assessment information about health status, factors influencing health and assets and resources to guide development of public health advocacy and policy decisions	PHS 533 Wellness and Maternal Child Health Promotion	Review and report on a case study that draws upon the historical background of MCH and show how this guides MCH specialists in harnessing divergent public opinions to drive public policy, public health policy, and advocacy (session 5 – fifth week)  Complete discussion item 3 of final exam
4. Select approaches for disseminating public health data and information (e.g., social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)	PHS 534 Communication and Health Education Marketing	In small group, develop a health communications campaign to enhance wellbeing of a health disparity population based on Healthy People 2020 or the most recent version of the U.S. health agenda  Analyze a health-promoting behavior through use of one or more of the following print media: brochure, pamphlet, booklet, fotonovella, or social media platform  Create a 4-page marketing plan to accompany the health communication campaign
5. Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies	PHS 535 Behavioral Change Program Strategies	Complete assignment 1: health problem paper; assignment 5: community-based participatory research using Freirian model paper; and skill building activity at the end of the module

**Table D4-1.b MPH Biostatistics Concentration, Specific Competencies and Assessment**

Assessment of Competencies for MPH in Biostatistics Concentration		
Competency	Course number(s) and name(s)	Specific assignment(s) that allow assessment
1. Describe the basic concepts of probability, random variation and commonly used statistical probability distributions	PHS 571 Statistical Theory	Students complete exercises given in the class for the scheduled topics, such as probability theory, discrete distributions, continuous distributions, statistical inference, hypothesis testing, confidence intervals, and central limit theorem
		Students conduct statistical analyses, such as analysis of variance, linear regression, logistic regression, survival analysis, factor analysis, and structural equation analysis

2. Apply descriptive techniques and statistical methods for drawing inferences and summarizing public health data	PHS 522 Multivariate and Probabilistic Statistics	Conduct simple and multivariate linear/ and log regression methods in SPSS for drawing inferences
	PHS 524 Statistical Methods for Applied Epidemiology	Calculate and draw inference using epidemiologic methods, such as odds ratio, relative risk, and attributable risk
3. Define and apply appropriate informatics techniques in public health research	PHS 572 Statistical Computer Applications	Calculate sample size for a cross-sectional study using G-Power and calculate t-test, confidence intervals, and one-way ANOVA using SPSS for the data given in the class
	PHS 601 Advanced Biostatistics and Computer Science Applications	Conduct statistical analyses, such as analysis of variance, linear regression, logistic regression, survival analysis, factor analysis, and structural equation analysis using SAS
4. Apply statistical methods using the appropriate software	PHS 522 Multivariate and Probabilistic Statistics	Interpret results of simple and multivariate linear/logistic regression analyses
	PHS 524 Statistical Methods for Applied Epidemiology	Calculate data and interpret the results for sensitivity, specificity, and predictive values
5. Develop a written and oral presentation based on statistical analyses for public health professionals and educated lay audience	PHS 601 Advanced Biostatistics and Computer Science Applications	Written and oral presentations are graded based on grading system described in the syllabus

**Table D4-1.c MPH Environmental and Occupational Health Concentration, Specific Competencies and Assessment**

Assessment of Competencies for MPH in Environmental and Occupational Health Concentration		
Competency	Course number(s) and name(s)	Specific assignment(s) that allow assessment
1. Articulate how biological, chemical, and physical agents affect human health	PHS 541 Environmental Management and Industrial Hygiene	A case study relating to industrial hygiene ethics is presented to students, who must write a report that identifies issues (what is the

		problem) involving parties (company, individual, etc.), and responsibilities of involving parties, and discusses solutions and consequences
2. Identify and discuss various risk management and risk communication approaches	PHS 542 Environmental and Occupational Health Risk Assessment	Identify and present a human or ecological risk based on a current event; conduct a risk assessment research paper using the current literature
3. Specify approaches for assessing, preventing and controlling occupational hazards that pose risks to human health and safety	PHS 543 Occupational Health and Safety Management	10- hour OSHA certification training, exams, class discussion; design an evacuation plan as for an agency, home, or etc. with presentations in weeks 11 and 12
4. Explain the general mechanisms of toxicity in eliciting a toxic response to various environmental exposures	PHS 544 Environmental and Occupational Toxicology	Final paper and project; final exam discussion questions
5. Analyze and discuss federal and state regulatory programs, guidelines, and authorities that control environmental health issues	PHS 545 Environmental Policy and Occupational Health Regulations	Answer analytical questions, perform a policy analysis, debrief a case, and take an exam in weeks 4 and 14

**Table D4-1.d MPH Epidemiology Concentration, Specific Competencies and Assessment**

<b>Assessment of Competencies for MPH in Epidemiology Concentration</b>		
<b>Competency</b>	<b>Course number(s) and name(s)</b>	<b>Specific assignment(s) that allow assessment</b>
1. Describe a public health problem in terms of magnitude, person, time, and place	PHS 521 Advanced Seminar in Epidemiology	Assignment 2: describe hypertension in the "stroke belt" of the U.S.
2. Comprehend and explain the importance of ethical and legal principles pertaining to the collection of epidemiologic data and in informing scientific, technical and political discussions of health issues	PHS 525 Epidemiology of Minority and Special Populations	Using case studies, discuss violation of ethical procedures in research using case studies
3. Apply descriptive techniques and statistical methods for drawing inferences and summarizing public health data	PHS 522 Multivariate and Probabilistic Statistics	In homework and exam, predict measures of association for epidemiologic data using simple and multivariate linear and logistic methods in SPSS

	PHS 524 Statistical Methods for Applied Epidemiology	Calculate epidemiologic measures of association, such as odds ratio, relative risk and attributable risk
4. Develop skills in communicating epidemiologic information to lay and professional audiences	PHS 521 Advanced Seminar in Epidemiology	Prepare lay and scientific summaries of published papers (due weeks 2-14)
5. Draw appropriate inference from epidemiologic data	PHS 524 Statistical Methods for Applied Epidemiology	Calculate and interpret results of parametric and nonparametric tests using data in SPSS

**Table D4-1.e MPH Health Policy and Management Concentration, Specific Competencies and Assessment**

<b>Assessment of Competencies for MPH in Health Policy and Management Concentration</b>		
<b>Competency</b>	<b>Course number(s) and name(s)</b>	<b>Specific assignment(s) that allow assessment</b>
1. Apply "systems thinking" for resolving organizational problems	PHS 511 Organizational Design and Behavior	Week 13: case study 18-1 and questions, case study 18-2 and questions, and student case study analysis paper
2. Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the U.S.	PHS 513 Financial Management of Health Service	Week 6: group paper; weeks 8-10: class exercises, quizzes, midterm, and final examination
3. Describe the legal and ethical bases for public health and health services	PHS 512 Public Health Law and Ethics	Assignments that address laws concerning helmets, compulsory sterilization, and compulsory medical treatment to demonstrate the legal and ethical basis of public health
4. Demonstrate leadership skills for building partnerships	PHS 511 Organizational Design and Behavior	Weeks 2 and 3: application exercises; student case study analysis paper; EQ application assessment and discussion
5. Communicate health policy and management issues using appropriate channels and technologies	PHS 511 Organizational Design and Behavior	Week 2: application exercises; student case study analysis and paper
6. Apply principles of strategic planning and marketing to public health	PHS 515 Public Health and Strategic Planning	Develop a marketing plan
7. Discuss the policy process for improving the health status of populations	PHS 512 Public Health Law and Ethics	Demonstrate of models, theories, and processes of policy-making, as well as policy analysis and evaluation with application to population health
8. Apply the principles of program planning, development, budgeting, management, and evaluation in organization and	PHS 513 Financial Management of Health Service	Weeks 9-15: student-graded exercises, presentations, and assignments (see syllabus)

Specific competencies for each DrPH concentration are listed in Tables D4-1.f-h.

**Table D4-1.f DrPH Behavioral Health Promotion and Education Concentration, Specific Competencies and Assessment**

<b>Coverage of Competencies for the DrPH in Behavioral Health Promotion and Education Concentration</b>		
<b>Competency</b>	<b>Course number(s) or other educational requirements</b>	<b>Specific assignment(s) that allow assessment</b>
1. Apply advanced theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice	PHBS 711 Advanced Theories and Scientific Principles of Health Promotion	Assignment 1: Application and critique of an individual-level theory Assignment 2: Application and critique of an interpersonal-level theory Assignment 3: Application and critique of a community-level theory (see page 4 of syllabus)
2. Critically analyze literature and data of behavioral and psychosocial epidemiology for informing scientific, ethical, social, and cultural discussions of health issues	PHBS 712 Behavioral and Psychological Epidemiology	Assignment 1: student research area and PICO/PISO research question definitions; written document report deliverable  Assignment 2: define systematic literature review (SRL) according to Prisma statement, including search and data analysis plan; written document report deliverable  Assignment 3 (class project): an SRL and/or meta-analysis of a pertinent problem area chosen by the student in agreement with the instructor and ideally suitable for publication; review is assessed using explicit criteria posted on the class web site and in the syllabus
3. Demonstrate advanced communication skills including the ability to review manuscripts and edit documents	PHBS 713 Qualitative Research Methods	Assignment 1: a comparative analysis and evaluation of qualitative research paper
		Assignment 2: a comparative analysis and evaluation of qualitative and quantitative research paper  Review at least one manuscript and provide editing comments

4. Ensure ethical principles are applied in accessing, collecting, analyzing, using, maintaining and disseminating data and information	PHBS 714 Clinical Trials and Interventional Study Designs	<p>Assignment 1: successful completion of IRB human subjects research training certificate CITI and NIH</p> <p>Assignment 2: develop a clinical trial protocol that includes research design, sample size, randomization, the type of data collected that must be collected, and, if applicable, analysis of efficacy and non-inferiority</p> <p>Assignment 3: evaluate and present a case study that utilizes statistical analyses for two different audiences (lay and public health professionals)</p>
5. Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences	PHBS 713 Qualitative Research Methods	Complete an application to serve as a reviewer of a manuscript for a professional journal such as <i>Health Promotion Practice</i> , <i>Journal of Health Education</i> , or another public health journal, including those edited by JSU SPH faculty members, that seeks ad hoc reviewers
6. Make evidence-based decisions (e.g., determining research agenda, using recommendations from <i>The Guide to Community Preventive Services</i> in planning population health services)	PHBS 715 Research Seminar in Health Education	Assignment 2: review article focused on determinants of health behavior that explains instrument development to evaluate a health education intervention
7. Advocate for the diversity of individuals and populations being addressed in policies and programs and services that affect the health of a community	<p>PHBS 716 Social and Cognitive bases of Behavior (Not Offered in 2016-2023)</p> <p>Syllabus not provided Now covered in HPM PHS 705 Advocacy</p>	Advocacy Assignment: participate in annual SOPHE advocacy summit or conduct an analysis/evaluation of diversity advocacy strategies within a policy or program, locally or nationally



**Table D4-1.g. DrPH Epidemiology Concentration, Specific Competencies and Assessment**

<b>Assessment of Competencies for DrPH in the Epidemiology Concentration</b>		
<b>Competency</b>	<b>Course number(s) or other educational requirements</b>	<b>Specific assignment(s) that allow assessment</b>
1. Communicate epidemiologic research findings to scientific and nonscientific community in writing and oral presentation	PHEP 711 Behavioral and Psychosocial Epidemiology	Prepare conference presentations, proposal writing and published articles (due week 14)
2. Describe the surveillance system and screening program and their role/application in outbreak investigation and prevention and control of infectious disease	PHEP 713 Infectious Disease Epidemiology	Discussion in item 2 on midterm exam
3. Design a clinical trial	PHEP 712 Clinical Trials and Interventional Study Designs	Develop a clinical trial and present it at the end of the semester (week 10)
4. Translate epidemiologic quantitative research into various statistical models for critical analysis	PHBI 711 Categorical Data Analysis	Assignment 1 and final exam part one
5. Explain the multiple determinants of chronic disease and demonstrate knowledge of prevention at community, state, and country level	PHS 702 Disease Pathology and Behavioral Risk Factors	Discussion items 1-3 on midterm exam
6. Utilize information technology tools, which are critical to epidemiologic data management and analysis (Access, SPSS, SAS and GIS)	PHBI 712 Multivariate Analysis I	Assignment 1: conduct an analysis of data using SAS codes
7. Apply ethical and legal principles pertaining to epidemiologic data collection, use and dissemination through Human Subjects training and an IRB application	PHEP 712 Clinical Trials and Interventional Study Designs	Develop case study (team assignment)

**Table D4-1.h. DrPH Health Policy and Management Concentration, Specific and Assessment**

<b>Assessment of Competencies for the DrPH in Health Policy and Management Concentration</b>		
<b>Competency</b>	<b>Course number(s) or other educational requirements</b>	<b>Specific assignment(s) that allow assessment</b>
1. Evaluate and implement strategic planning processes based on internal and external environmental research for health programs and services	PHPM 713 Analysis of Health Legislation and Regulations	Week 4, assignment 1: demonstrate an understanding of the evolution of health- policymaking in the U.S., the basic structure of the administrative state, and the three branches of government
2. Analyze and interpret data, synthesizing information from multiple sources, and apply theoretical and evidence-based models in the design and implementation of health programs, policies and systems	PHPM 715 Health Informatics and Decision Modeling	Weeks 1-15: written term paper and oral presentations
3. Analyze the impact of legislation, judicial opinions, regulations and policies on population health and health disparities and develop evidence-based strategies for influencing health law and policy	PHPM 714 Evaluation of Performance and Quality in Health Service Organizations	Group case study; weekly in-class application exercises; formal examinations
4. Assess the influence of cultural, environmental, and social justice factors on the health of communities and apply legal principles to public health policy-making decisions	PHPM 713 Analysis of Health Legislation and Regulations	Week 8, assignment 2: demonstrate that the U.S. Constitution explicitly guarantees citizens the right to healthcare; otherwise, justify successive presidents' rationale for providing healthcare to U.S. citizens, using as your guide the following: <ul style="list-style-type: none"> <li>• The general welfare clause</li> <li>• The public interest theory</li> <li>• The theory of social justice</li> <li>• Article 1, section 8 of the U.S. Constitution</li> </ul>
5. Develop skilled teams and capacity-building strategies at the individual, organizational, and community level to improve health	PHPM 716 Administration of Integrated Health and Hospital Systems	Assignment 1: case study analysis and discussion

6.Utilize consensus-building, negotiation, and conflict avoidance and resolution techniques at the individual, community, and organizational levels	PHPM 716 Administration of Integrated Health and Hospital Systems	Assignment 2: role play in which students assume roles of various stakeholders addressing a major health problem
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- 2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the school must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

**DOCUMENTATION IN ERF D1 (*Handbooks & Graduate Bulletins*) & D4 (MPH & DrPH Concentration Syllabi)**

- 3) Provide supporting documentation for each assessment activity listed in Template D4-1. Documentation should include the following, as relevant, for each listed assessment:
- assignment instructions or guidelines as provided to students
  - writing prompts provided to students
  - sample exam question(s)

**DOCUMENTATION LOCATED IN ERF D4** (Syllabi for each MPH and DrPH concentration)

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

**NOT APPLICABLE**

## D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

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

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

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

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

The student in consultation with their academic advisor and preceptor identifies six competencies (three foundational competencies and three concentration competencies). The student and preceptor select five competencies (three foundational and two concentration competencies) that align with his/her applied practice experience project. The student is required to complete the Preceptor-Student Agreement Form B. All internships must be approved by the Director of Field Placement prior to completing the Preceptor-Student Agreement Form B.

The Preceptor evaluates the mastery of selected competencies for the intern(s) and submits a recommended letter grade for the student intern. (see MPH Internship Manual, Appendix VII-Student Evaluation of Agency & Preceptor; Appendix VIII-Preceptor Final Student Evaluation and Appendix IX-Final Grade Report Form D).

### **MPH Public Health Internship/Residency**

Due to the individual nature of student learning needs and educational goals, students are required to develop an internship plan in consultation with their faculty advisor, prior to enrolling in the public health residency course (PHS 508). The public health residency may not be taken before the successful completion of all other coursework. Full-time students usually complete this course during the summer semester of the second year. The procedural steps are outlined in the ***Graduate Field Internship Manual***. Further information about the public health residency can be found in the ***MPH Student Handbook*** (see Resource File D5.2 for the ***MPH Student Handbook*** and ***Graduate Field Internship Manual***).

Students work with their faculty advisor to identify areas of interest and to assess the student's strengths and weaknesses relative to the MPH and specialization competencies. Students select six competencies, of which three are foundational competencies from Table D2.2 and the other three are concentration competencies for the internship (see Tables D5-1.a-e). Samples demonstrating students' mastery of competencies are provided in Resource File D5.3

Competencies attained in MPH applied practice experiences are listed in Tables 5-1.a-e.

**Table D5-1.a MPH Applied Practice Experience, Behavioral Health Promotion and Education Concentration**

<b>Practice-based products that demonstrate MPH competency achievement: Behavioral Health Promotion and Education Concentration</b>	
<b>Specific products in portfolio that demonstrate application or practice</b>	<b>Competency as defined in Criteria D2 and D4</b>
<p>Plan negotiated among student, faculty advisor, faculty instructor of record, and preceptor, and approved by field placement coordinator</p> <p>PowerPoint presentations to the faculty, preceptor, and peers are a deliverable of the student's didactic experience in public health settings</p>	F7. Assess population needs, assets, and capacities that affect communities' health
	F8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
	F19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	F4. Interpret results of data analysis for public health research, policy or practice
	C2. Outline the steps and procedures for the planning, implementation, and evaluation of public health programs, policies, and interventions
	C3. Develop community health assessments using information about health status, factors influencing health and assets and resources
	C5. Specify targets and levels of intervention for social and behavioral science programs and/or policies

**Table D5-1.b MPH Applied Practice Experience, Biostatistics Concentration**

<b>Practice-based products that demonstrate MPH competency achievement: Biostatistics Concentration</b>	
<b>Specific products in portfolio that demonstrate application or practice</b>	<b>Competency as defined in Criteria D2 and D4</b>
<p>Plan negotiated among student, faculty advisor, faculty instructor of record, and preceptor, and approved by field placement coordinator</p> <p>PowerPoint presentations to the faculty, preceptor, and peers are a deliverable of the student's didactic experience in public health settings</p>	F3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software as appropriate
	F7. Assess population needs, assets, and capacities that affect communities' health
	F19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	C1. Describe the basic concepts of probability, random variation, and a commonly used statistical probability distribution
	C3. Define and apply appropriate informatics techniques in public health research

	C4. Interpret results of statistical analyses found in public health studies
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**Table D5-1.c MPH Applied Practice Experience, Environmental and Occupational Health Concentration**

Practice-based products that demonstrate MPH competency achievement: Environmental and Occupational Health Concentration	
Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2 and D4
<p>Plan negotiated among student, faculty advisor, faculty instructor of record, and preceptor, and approved by field placement coordinator</p> <p>PowerPoint presentations to the faculty, preceptor, and peers are a deliverable of the student's didactic experience in public health settings</p>	F3. Evaluate policies for their impact on public health and health equity
	F7. Assess population needs, assets, and capacities that affect communities' health
	F19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	C4. Identify and discuss various risk management and risk communication approaches
	C5. Articulate how biological, chemical, and physical agents affect human health
	C6. Describe and discuss federal and state regulatory programs, guidelines, and authorities that control <i>environmental/occupational</i> health issues

**Table D5-1.d MPH Applied Practice Experience, Epidemiology Concentration**

Practice-based products that demonstrate MPH competency achievement: Epidemiology Concentration	
Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2 and D4
<p>Plan negotiated among student, faculty advisor, faculty instructor of record, and preceptor, and approved by field placement coordinator</p> <p>PowerPoint presentations to the faculty, preceptor, and peers are a deliverable of the student's didactic experience in public health settings</p>	F1. Apply epidemiological methods to the breadth of settings and situations in public health practice
	F8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
	F19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	C3. Apply descriptive techniques and statistical methods for drawing inferences and summarizing public health data
	C4. Communicate epidemiologic information to lay and professional audiences
	C5. Draw appropriate inference from epidemiological data

**Table D5-1.e MPH Applied Practice Experience, Health Policy and Management Concentration**

<b>Practice-based products that demonstrate MPH competency achievement, Health Policy and Management Concentration</b>	
<b>Specific products in portfolio that demonstrate application or practice</b>	<b>Competency as defined in Criteria D2 and D4</b>
<p>Plan negotiated among student, faculty advisor, faculty instructor of record, and preceptor, and approved by field placement coordinator.</p> <p>PowerPoint presentations to the faculty, preceptor, and peers are a deliverable of the student's didactic experience in public health settings</p>	F8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
	F15. Evaluate policies for their impact on public health and health equity
	F16. Apply principles of leadership, governance and management, which includes creating a vision, empowering others, fostering collaboration, and guiding decision making
	F19. Communicate audience-appropriate public health content, both in writing and through oral presentation
	C4. Apply "systems thinking" for resolving organizational problems
	C5. Apply principles of strategic planning and marketing to public health
	C6. Communicate health policy and management issues using appropriate channels and technologies

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

Documentation, including syllabi and handbooks, of the official requirements according to which students complete the applied practice experience is available in **Resource File D5.**

#### **DOCUMENTATION IN ERF D5.2**

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

Samples of practice-related materials for individuals from each MPH concentration are available in **LOCATION OF DOCUMENTATION IN ERF D5.3**

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

NOT APPLICABLE



## **D6. DrPH Applied Practice Experience (if applicable)**

If this criterion is not applicable, simply write “Not applicable” and delete the criteria language and documentation requests below.

**The work product may be a single project or a set of related projects that demonstrate a depth of competence. It may be completed as a discrete experience (such as a practicum or internship) or integrated into school coursework. In either case, the deliverable must contain a reflective component that includes the student’s expression of personal and/or professional reactions to the applied practice experience. This may take the form of a journal or other written product, a professional portfolio, or another deliverable as appropriate for the school.**

**The school identifies a minimum of five foundational and/or concentration-specific competencies (as defined in Criteria D3 and D4) that are reinforced and/or assessed through application. The school may either choose at least one competency from the leadership, management, and governance domain in Criterion D3 or choose a concentration-specific competency identified in Criterion D4 if it relates to leadership skills. Competencies may differ from student to student.**

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

The school identifies competencies to be attained in the applied practice experiences through the development of individual Field Agreements that require students to select competencies that support the agency/organization practice focused projects. The projects are designed to facilitate the integration of Foundational and Concentration competencies to support individual students in the mastery of selected PH competencies within their assigned leadership teams. The teams are essential for addressing and solving complex public health problems identified by each agency/organization. See Syllabus PHS 750.

- 2) Explain, with references to specific deliverables or other requirements, the manner through which the school ensures that the applied practice experience requires students to demonstrate leadership competencies.

**INSERT NARRATIVE HERE**

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

### **DOCUMENTATION IN ERF D6 \_\_PHS 750 Practicum**

- 4) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The school must provide samples of complete sets of materials (ie, Template D6-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the school has not produced five students for which complete samples are available, note this and provide all available samples.

**Table D6-1.a** Provides information about the practice-based products that demonstrate DrPH competency achievements (referred to as competencies). The interdisciplinary leadership teams select foundational and concentration competencies that relate to the specific agency/organization project descriptions. that is designed to mutually benefit the agency and the student Resident.

Practice-based products that demonstrate DrPH competencies achievement: Leadership Teams (Behavioral Health Promotion & Education, Epidemiology, and Health Policy & Management)	
Specific products in Individual portfolio samples that demonstrate application or practice	Cross-cutting Competency as defined in Criteria D2 and D4 ( <i>Integrated for the Practicum</i> )
<p>1. A narrative qualitative field-based project to capture community voices about the closure of hospitals in two Mississippi counties (LeFlore &amp; Humphreys (<u><i>Health Policy &amp; Management</i></u>) <b>Agency report and video</b></p> <p>2. Planning and conducting a Needs Assessment for a University Employee Wellness Program (Tougaloo Project) (<u><i>Behavioral Health Promotion &amp; Education</i></u>) <b>Agency report and recommendations.</b></p> <p>3. Assessment and findings of a FQHC Readiness for COVID-19 Surge (<u><i>Epidemiology</i></u> and Behavioral Health Promotion team)</p> <p>4. Stakeholder perceptions of benefits of postpartum care expansion in Mississippi (Epidemiology sample)</p>	<b>F2.</b> Design a qualitative, quantitative, mixed methods, policy analysis, or evaluation project to address a public health issue
	<b>F5.</b> Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies.
	<b>F6.</b> Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems.
	<b>C1.</b> Analyze and interpret data, synthesizing information from multiple sources, and apply theoretical and evidence-based models in the design and implementation of health programs, policies, and/or systems.
	<b>C2.</b> Apply ethical and legal principles pertaining to assessing, collecting, analyzing, using, maintaining, and disseminating data and information through Human Subjects training and an IRB application.
	<b>C3.</b> Create a climate that values and leverages team members, their strengths, and the diversity of their backgrounds.
	<b>C4.</b> Address organizational challenges and opportunities related to organizational structure, operations, strategic planning and decision-making processes, and/or financial systems.

*\*Self-Study documentation only includes 3 individual student samples because of transition from team-based deliverables to individual deliverables as of spring 2023. Each sample includes cross-cutting competencies (integrated competencies for the 3 concentrations.*

## Required Competency Attainment

The field immersion experience is closely tied to the DrPH foundational and concentration competencies. At a minimum, DrPH students are expected to attain the following competencies by the end of the third semester of the field experience (**F=Foundational Competencies, C=Concentration Competencies**):

### Competencies for Team Based DrPH Applied Practice Experience

#### Foundational

**F2.** Design a qualitative, quantitative, mixed methods, policy analysis, or evaluation project to address a public health issue.

**F5.** Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies.

**F6.** Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems.

**F8.** Facilitate shared decision making through negotiation and consensus building methods.

**F11.** Mindfully reflect on, and assess, one's own leadership strengths, motivations, and weaknesses in leadership capacities, and their impact on other individuals, including cultural proficiency

#### Concentration

**C1.** Analyze and interpret data, synthesizing information from multiple sources, and apply theoretical and evidence-based models in the design and implementation of health programs, policies, and/or systems.

**C2.** Apply ethical and legal principles pertaining to assessing, collecting, analyzing, using, maintaining, and disseminating data and information through Human Subjects training and an IRB application.

**C3.** Create a climate that values and leverages team members, their strengths, and the diversity of their backgrounds.

**C4.** Address organizational challenges and opportunities related to organizational structure, operations, strategic planning and decision-making processes, and/or financial systems.

#### Host Organizations (see host organization information in Syllabus Appendix A)

The scope of a field experience project should be more than an opportunity for additional work experience. Rather it is an applied practice that allows students to (a) advance public health work with a different perspective; (b) develop new competencies; and (c) explore their individual identities as they relate to the practice of leadership. The projects should be designed with the organization's priorities in mind and where the student can assume principal responsibility for project completion, work with others in the organization, have access to leaders and exposure to high level decision making. It is imperative that projects require significant contributions from each student (resident) and completion of a substantive deliverable that

will allow for the advancement of the student's learning goals/objectives and the organization's mission. Completed projects and recommendations made by DrPH students are high quality, innovative, and of critical value to the participating organizations.

#### **DOCUMENTATION IN ERF D6 Applied Practice DrPH Practicum Samples**

##### ***LOCATION OF DOCUMENTATION IN ERF D6.4***

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

**Plans for Improvement:** Develop best-practice measures for assessing individual performance within a team-based public health practice experience, particularly for written products and data analyses. Presentations address individual performance measures, but the Field Agreements will have measures for individual performance that include team member assessments of each other specific to the Foundational and Concentration competencies. We will provide evidence to support individual attainment of competencies separate from the team agency deliverables.

## **D7. MPH Integrative Learning Experience**

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

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

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

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

### **The MPH Applied Master's Project: Integrative Learning Experience**

The purpose of the applied master's project, or integrative learning experience (PHS 507), is to provide MPH students with opportunities to demonstrate and synthesize foundational, core, and concentration competencies. Students, in consultation with their academic advisor, identify a project specific to the student's concentration that can be completed in one semester. By the third week of the semester, the student submits a summary proposal for a defined project that describes the research question(s) or public health problem and the scope of work. In order to optimize the student's public health experience in the program, it is strongly recommended that the project be related to, or culminate the efforts and work, of the internship; ideally, the student will have developed a research question or public health topic by the end of the internship.

Completed projects are expected to demonstrate acquisition and synthesis of MPH foundational and concentration-specific competencies. For this project, students select two or three concentration-specific competencies to complete in conjunction with three of the applied master's project/integrative learning experience competencies. A written product (a paper or report) is required at the end of the applied master's project, which is reviewed by the student's academic advisor.

*INSERT TEMPLATE D7-1 HERE*

Table D7-1 provides additional information about how the integrative learning experience demonstrates synthesis of competencies.

**Table D7-1 MPH Integrative Learning Experience for All Concentrations**

<b>MPH Integrative Learning Experience for All Concentrations</b>	
<b>Integrative learning experience (list all options)</b>	<b>How competencies are synthesized</b>
Beginning in 2016, MPH students complete the following steps:  Take PHS 507 Applied Master's Project  Self-identify competencies in the proposal stage; the course instructor approves the proposal and identified competencies.	The student faculty advisor and faculty of record review each student's final written project to assess her or his ability to appropriately integrate and synthesize the chosen competencies. The faculty advisor designs project-specific rubric for each student's project. Evaluators are encouraged to use a rubric or some other tool to assess the student ILE project
3. Develop a research question, delineate a public health problem, and scope of work, and describe a project that synthesizes the appropriate competencies.  4. Present a final report of the ILE during a colloquium.	

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

Students conclude their MPH studies with an applied master's capstone project in their respective concentration. The master's project provides a culminating experience of the student's scientific and professional practice preparation, including proposal formulation of the problem to be studied or an operational project to be implemented. Students' integrated learning experiences are assessed using the PHS 507 MPH Applied ILE Rubric in Resource File D7. Following this integrative learning experience, all MPH students are expected to demonstrate competence in three of the following areas of MPH competency:

- Identify the core functions of public health and the 10 Essential Services
- Design a population-based policy, program, project or intervention
- Select methods to evaluate public health programs
- Interpret results of data analysis for public health research, policy and practice
- Assess population needs, assets and capacities that affect communities' health
- Apply systems thinking tools to a public health issue

Students also select 2-3 concentration-specific competences to complete in conjunction with three of the above MPH competencies for this course. Thus, students must demonstrate mastery of at least five competencies for this course.

Projects are specific to the student's concentration. A written product (paper or report) is required at the end of the capstone experience. Examples of possible projects are as follows:

- Community/needs assessment: a student may choose to complete a community assessment to characterize the social determinants of the health, economic, and environmental status of a community. The project might include a description of the local, state, and national data resources; development of tools to collect information from the community, including focus groups, key informant interviews, or surveys; and analysis and synthesis of the data collected.
- Environmental/occupational or epidemiological/biostatistics research: a student may choose to develop and implement an epidemiologic research project. This may include development of a study design, collection of data, final analysis, and a report on the findings. The types of projects may include surveillance reports, outbreak investigations, and identification of risk factors related to disease development or worsening.
- Health policy statement: a capstone project could involve analysis of the public health implications of a current or proposed health policy or advocacy plan. The project would include perspectives on economics and financing; need and demand; politics, ethics, and law; and quality and effectiveness.
- Program project grant: a student may write a grant proposal for a public health program, such as disease prevention or health promotion intervention. The proposal would include background on the public health problem; a needs assessment; a theoretical foundation for, and description of, the intervention; an implementation plan; and an evaluation plan.

Selected samples are available for review during the CEPH site visit. Students will be reviewed for competency attainment using the MPH rubric in syllabus **Resource File D7**.

- 3) Provide documentation, including syllabi and/or handbooks, that communicates integrative learning experience policies and procedures to students.

*PROVIDE LOCATION OF DOCUMENTATION IN ERF D6.3*

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

*PROVIDE LOCATION OF DOCUMENTATION IN ERF D6.3*

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

*PROVIDE LOCATION OF DOCUMENTATION IN ERF D6.4*

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

Not Applicable

## D8. DrPH Integrative Learning Experience

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

As part of an integrative learning experience, DrPH candidates generate field-based products consistent with advanced practice designed to influence schools, policies or systems addressing public health. The products demonstrate synthesis of foundational and concentration-specific competencies.

The integrative learning experience is completed at or near the end of the school of study. It may take many forms consistent with advanced, doctoral-level studies and university policies but must require, at a minimum, production of a high-quality written product.

- 1) List, in the format of Template D8-1, the integrative learning experience for each DrPH concentration or generalist degree. The template also requires the school to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

**Table D8-1.a DrPH Integrative Learning Experience, Behavioral Health Promotion and Education Concentration**

<b>DrPH Integrative Learning Experience for Behavioral Health Promotion and Education Concentration</b>	
<b>Integrative learning experience (list all options)</b>	<b>How competencies are synthesized</b>
Enroll in PHS 798 Dissertation Complete minimally 15 hours of dissertation credit.	Each student identifies a dissertation chair who provides mentorship and research expertise on a topic that relates to the concentration focus and supports Healthy People 2030 national goals and objectives. The student must conceptualize a problem of study based on a comprehensive literature review and identified gaps in the literature relative to a specific health problem/issue. Foundational and concentration competencies are an integral part of problem framing, stating the purpose, framing research questions, and determining the methodology for conducting the study. Developing the IRB application also requires application of foundational and concentration competencies. Finally, conducting the study in an ethical and professional manner integrates leadership and ethics competencies from all concentrations. The final writing and dissertation defense requires mastery of foundation and concentration competencies.



**Table D8-1.b DrPH Integrative Learning Experience, Epidemiology Concentration**

<b>DrPH Integrative Learning Experience for Epidemiology Concentration</b>	
<b>Integrative learning experience (list all options)</b>	<b>How competencies are synthesized</b>
<p>Enroll in PHS 798 Dissertation Complete minimally 15 hours of dissertation credit.</p>	<p>Each student identifies a dissertation chair who provides mentorship and research expertise on a topic that relates to the concentration focus and supports Healthy People 2030 national goals and objectives. The student must conceptualize a problem of study based on a comprehensive literature review and identified gaps in the literature relative to a specific health problem/issue. Foundational and concentration competencies are an integral part of problem framing, stating the purpose, framing research questions, and determining the methodology for conducting the study. Developing the IRB application also requires application of foundational and concentration competencies. Finally, conducting the study in an ethical and professional manner integrates leadership and ethics competencies from all concentrations. The final writing and dissertation defense requires mastery of foundation and concentration competencies.</p>

**Table D8-1.c DrPH Integrative Learning Experience, Health Policy, and Management Concentration**

<b>DrPH Integrative Learning Experience for Health Policy and Management Concentration</b>	
<b>Integrative learning experience (list all options)</b>	<b>How competencies are synthesized</b>
Enroll in PHS 798 Dissertation Complete minimally 15 hours of dissertation credit.	Each student identifies a dissertation chair who provides mentorship and research expertise on a topic that relates to the concentration focus and supports Healthy People 2030 national goals and objectives. The student must conceptualize a problem of study based on a comprehensive literature review and identified gaps in the literature relative to a specific health problem/issue. Foundational and concentration competencies are an integral part of problem framing, stating the purpose, framing research questions, and determining the methodology for conducting the study. Developing the IRB application also requires application of foundational and concentration competencies. Finally, conducting the study in an ethical and professional manner integrates leadership and ethics competencies from all concentrations. The final writing and dissertation defense requires mastery of foundation and concentration competencies.

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

As required by the university, all DrPH students complete a dissertation as the integrative learning experience. Policies and standards for establishing a dissertation committee and for preparation and submission of a dissertation are outlined by the Division of Graduate Studies in its *Guidelines for Preparing the Doctoral Dissertation*, which is available online at <http://www.jsu.edu/graduateschool/cyberorientation/>.

The process, expectations, and assessment for each integrative learning experience also are described in the *DrPH Student Handbook* (see Resource File D8). Steps in this process are as follows:

#### **Selection of Dissertation Committee**

Assembling the dissertation committee begins with the selection of its chair, who is chosen by the student in collaboration with her/his academic advisor. The academic advisor also may serve as the student's dissertation chair, or the chair may be another faculty member from the concentration who has approved graduate faculty status. The dissertation chair and the student together will select the other committee members of whom three or four are faculty (with approved graduate faculty status) in the student's concentration. The final member may be an individual who is external to the program or university who has expertise in the specific research area; this person must be approved as adjunct member of the graduate faculty in order to serve on a dissertation committee. One of the members must be a biostatistician or have extensive experience in statistics. The composition of the committee should be such that it can judge the student's competence in the area of emphasis.

### **Dissertation Prospectus**

The DrPH student identifies a research area and then prepares a prospectus outlining the original research to be undertaken, which must be relevant to public health in his/her specific concentration area. The student then presents the prospectus to the doctoral dissertation committee for approval. After successful defense of the prospectus and IRB approval, the student begins work on data collection, analysis, and completion of the dissertation with supervision by the dissertation chair.

### **Dissertation Oral Defense**

When the dissertation is considered complete, the student's doctoral dissertation committee evaluates the document to determine its appropriateness for presentation at a public defense, to be followed by further examination in a closed session to identify additional requirements or needed revisions. The committee reports to the department chair and dean whether the student has passed or has not passed the oral defense. The chair and the dean make a recommendation to the Division of Graduate Studies as to whether the candidate should be awarded the degree of Doctor of Public Health.

### **Final Dissertation Preparation**

After the dissertation has been successfully defended at the final oral defense and approved for content, it is typed in final form and formatted according to the guidelines provided by the Division of Graduate Studies. The approved format for the DrPH is the APA (American Psychological Association) style. The student, dissertation committee, department chair, and dean will review the dissertation for final format approval.

- 3) Provide documentation, including syllabi and/or handbooks, that communicates integrative learning experience policies and procedures to students.

Documentation, including syllabi and the student handbook, relating to the official requirements according to which students complete the integrative learning experience (ILE dissertation) is available in the DrPH Student Handbook.

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

Each student's dissertation committee evaluates her/his dissertation defense (see Resource File **D8.1 Dissertation**).

- 5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations. The school must provide at least 10% of the

number produced in the last three years or five examples, whichever is greater. If the school does not have five recent samples for an option, note this and provide all available samples.

The total number of graded dissertations produced in the last three years (2021-2023 = 22)

6 Behavioral Health Promotion & Education; 12 Epidemiology; 4 Health Policy & Management

We have provided 3 BHPE, 3 Epidemiology, and 2 Health Policy & Management samples in the ERF

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

***Not Applicable***

## **D9. Public Health Bachelor's Degree Foundational Domains**

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

**The requirements for the public health major or concentration provide instruction in the domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (i.e., the school may identify multiple learning experiences that address a domain—the domains listed below do not each require a single designated course).**

**If the school intends to prepare students for a specific credential, the curriculum must also address the areas of instruction required for credential eligibility (e.g., CHES).**

- 1) Provide a matrix, in the format of Template D9-1, that indicates the courses/experience(s) that ensure that students are exposed to each of the domains indicated. Template D9-1 requires the school to identify the learning experiences that introduce and reinforce each domain. Include a footnote with the template that provides the school's definition of "introduced" and "covered."

Template D9-1

Public Health Domains		HCA 380 Statistics for Health Services	HE 208 Epidemiology of Disease	BIO 236 Concepts of Public Health	PHS 301 Introduction to Public Health Organizations	PHS 431 Public Health Professional Career Development Seminar
<b>Math/Quantitative Reasoning: Identify and apply the concepts and applications of basic statistics</b>						
	Concepts of basic statistics	I, C				
	Applications of basic statistics	I, C				
<b>Science: Address the foundations of biological and life sciences</b>						
	Foundations of biological & life sciences		I			
<b>Overview of Public Health: Address the history and philosophy of public health as well as the core values, concepts, and functions</b>						
	Public health history			I	I, C	
	Public health philosophy				I, C	
	Core PH values			I	I, C	I, C
	Core PH concepts			I	I, C	I, C
	Global functions of PH			I	I, C	
	Societal functions of PH			I	I, C	
	Evidence-based			I		

Public Health Domains		PHS 470 Public Health Research and Evaluation	PHS 480 Applied Research Project in Public Health	HCA 311 Public Health and Epidemiology	PHS 395 Problems and Issues in Public Health
<b>Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice</b>					
	Basic concepts of data collection	I	C		
	Basic methods of data collection	I	C		
	Basic tools of data collection	I	C		
	Data usage	I	C		
	Data analysis	I	C		
	Evidence-based approaches	I	C		
<b>Identifying and Addressing Population Health Challenges: Addressing the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations</b>					
	Population health concepts			I, C	I, C
	Introduction to processes & approaches to identify needs & concerns of populations			I, C	I, C
	Introduction to approaches & interventions to address needs & concerns of populations			I, C	I, C

Public Health Domain		SOC 302 Basic Issues in Mental Health	HCA 303 Medical and Admin. Terminology	PHS 395 Problems and Issues in Public Health	HCA 311 Public Health & Epidemiology	PHS 400 Public Health Internship	ITEM 301 Principles of Emergency Management	PHS 450 Financial Management of Public Health Services
<b>Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course</b>								
	Science of human health & disease			I, C	I, C			
	Health promotion		I, C	I, C	I, C			
	Health protection		I, C	I, C	I, C			
<b>Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities</b>								
	Socio-economic impacts on human health & health disparities			I, C				
	Behavioral factors impacts on human health & health disparities			I, C				
	Biological factors impacts on human health & health disparities	I, C		I, C			I, C	
	Environmental factors impacts on human health & health disparities			I, C			I, C	
<b>Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation</b>								
	Introduction to planning concepts & features					C		I, C
	Introduction to assessment concepts & features					C		I, C
	Introduction to evaluation concepts & features					C		I, C



Public Health Domain		PHS 420 Public Health Law & Ethics	PHS 384 Public Health Policy & Politics	BIZ 201 Introduction to Business	ECO 211 Principles of Macroeconomics	PHS 450 Financial Management of Public Health Services	ENG 213 Professional Writing	PHS 350 Public Health Communications
<b>Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government</b>								
	Legal dimensions of health care & public health policy	I, C	I, C			I, C		
	Ethical dimensions of health care & public health policy	I, C	I, C			I, C		
	Economical dimensions of health care & public health policy	I, C	I, C	I, C	I, C	I, C		
	Regulatory dimensions of health care & public health policy	I, C	I, C		I, C			
	Governmental agency roles in health care & public health	I, C	I, C					
<b>Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology</b>								
	Technical writing						I, C	
	Professional writing						I, C	
	Use of mass media							I, C
	Use of electronic technology						I, C	

- 2) Include the most recent syllabus from each course listed in Template D9-1, or written guidelines, such as a handbook, for any required experience(s) listed in Template D9-1 that do not have a syllabus.

*PROVIDE LOCATION OF DOCUMENTATION IN ERFD9.1*

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

The BSPH is a new degree program that was launched in Fall 2022. The BSPH program originated from state level funding secured external to the CHS/SPH. The program is directed by a Health Policy & Management faculty. The BSPH Director will participate in a college wide assessment of Student Learning Outcomes for all public health courses in spring/summer 2023.

During this process, the school will identify the learning experiences that introduce and reinforce each domain that is to be represented in template D9-1.

#### **D10. Public Health Bachelor's Degree Foundational Competencies**

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

**Students must demonstrate the following competencies:**

- **the ability to communicate public health information, in both oral and written forms, through a variety of media and to diverse audiences**
- **the ability to locate, use, evaluate and synthesize public health information**

1) Provide a matrix, in the format of Template D10-1, that indicates the assessment activity for each foundational competency.

Template D10-1

Competencies		Course number(s) & name(s) or other educational requirements	Specific assessment opportunity
<b>Public Health Communication:</b> Students should be able to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences			
	Oral communication	PHS 384 - Public Health Policy and Politics	Students will choose a health topic or issue and create a policy to address, improve, or alleviate the health topic or issue. The presentation must provide an overview of the health topic or issue, the population most affected, the rationale for the proposed policy, and a strategy to promote the policy among legislatures.
	Written communication	PHS 470 - Public Health Research and Evaluation	Students will develop a research proposal to investigate a current public health issue. Students will develop a proposal for change, which demonstrates sensitivity to racial/ethnic, political, economic, and social characteristics based on their understanding of public health.
	Communicate with diverse audiences	PHS 350 – Public Health Communications	Students will develop a health communication campaign addressing an issue of health and present a PowerPoint presentation. Students will provide an overview of the health issue, discuss the risk factors associated with the health issue, and create a campaign that promotes preventive behaviors associated with health conditions. Students will be required to define their target population/audience, setting, media type, and goals of the campaign.
	Communicate through variety of media	PHS 350 - Public Health Communications	Students will develop a health communication campaign addressing an issue of health and present a PowerPoint presentation. Students will provide an overview of the health issue, discuss the risk factors associated with the health issue, and create a campaign that promotes preventive behaviors associated with health conditions. Students will be required to define their target population/audience, setting, media type, and goals of the campaign.
<b>Information Literacy:</b> Students should be able to locate, use, evaluate and synthesize public health information			

	Locate information	PHS 395 - Problems and Issues in Public Health	Students will locate and synthesize information to write a 5-page paper discussing the biological, social, behavioral, and environmental factors associated with a selected health issue or condition.
	Use information	PHS 301 – Introduction to Public Health Organizations	Students will research and select a health topic (i.e. vaccinations, cancer, heart disease etc.) and use the information to develop an eight-page comparative analysis paper that compares historical and current characteristics of the health topic (i.e. prevalence, populations at risk, services, prevention etc.)
	Evaluate information	PHS 470 – Public Health Research & Evaluation	Students will develop a research proposal to investigate and evaluate information on a current public health issue. Students will develop a proposal for change, which demonstrates sensitivity to racial/ethnic, political, economic, and social characteristics based on their understanding of public health.
	Synthesize Information	PHS 395 - Problems and Issues in Public Health	Students will locate and synthesize information to write a 5-page paper discussing the biological, social, behavioral, and environmental factors associated with a selected health issue or condition.

2) Provide supporting documentation for each assessment activity listed in Template D10-1. Documentation should include the following, as relevant, for each listed assessment:

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

*PROVIDE LOCATION OF DOCUMENTATION IN ERF*

- 3) Include the most recent syllabus from each course listed in Template D10-1 (if not presented in Criterion D9), or written guidelines, such as a handbook, for any required elements listed in Template D10-1 that do not have a syllabus.

*PROVIDE LOCATION OF DOCUMENTATION IN ERF*

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

**Strengths**

The Bachelor of Science in Public Health (BSPH) Program will be marketed within the College of Health Sciences and externally to create or approve visibility. This will be achieved through: (1) CHS and university websites; (2) university social media platforms; and (3) promotional/informational flyers. Currently, the BSPH curriculum plan is on the CHS website.

<https://www.jsums.edu/wp-content/uploads/2023/02/JSU-UNDERGRADUATE-CATALOG-2022-2023-v9-1.pdf>

**Plans for Improvement**

The BSPH Program Director and Health Policy & Management Department Chair where the BSPH program is housed will plan and conduct a faculty retreat to inform public health faculty about the “budding” program. They will also work with the TBN Associate Dean/Assessment Director to integrate the BSPH program into the CEPH accreditation process for the college. Fall 2023 will provide new learning opportunities for the CHS graduate faculty to learn more about the “budding” BSPH program and future plans.

## D11. Public Health Bachelor's Degree Cumulative and Experiential Activities

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

**Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative, and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honors theses. Schools encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.**

- 1) Provide a matrix, in the format of Template D11-1, that identifies the cumulative and experiential activities through which students integrate, synthesize, and apply knowledge as indicated.

### Template D11-1

Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	Narrative describing how activity provides students the opportunity to integrate, synthesize and apply knowledge.
Enroll in PHS 400 Public Health Internship	The purpose of internship experience will be to provide students with professional opportunities to apply and demonstrate knowledge, competencies, and skills in a public health placement setting. Students will be required to complete a minimum of 150 internship hours. Students will be able to integrate and apply academic theory and knowledge acquired in the classroom to public health settings. Students will be assessed based on their deliverable to the organization by submission of a Weekly Activity Log, Weekly Report, Final paper, Presentation, Electronic Portfolio, and preceptor evaluations (Please see the BSPH Internship Manual Appendices).

- 2) Include examples of student work that relate to the cumulative and experiential activities.

There are no examples of the student work that relate to the cumulative and experiential activities. We anticipate the first cohort of BSPH will be Spring 2025.

- 3) Briefly describe the means through which the school implements the cumulative experience and field exposure requirements.

The CHS implements the cumulative experience and field exposure requirements through the course, PHS 400 Public Health Internship. The Instructor of Record for PHS 400 collaborates with the Marketing & Field Placement Director to identify appropriate internship sites for students eligible to begin the internship experience. The Instructor of Record for PHS 400 collaborates with the Marketing Field Placement Director to support development of the Internship Agreement with the Preceptor at each site. MOU's are developed, approved and maintained by the Marketing & Field Placement Director. Internship requirements are set forth in the BSPH Internship Handbook effective 2022-2023 (currently under development). The Preceptor and the Instructor of Record will evaluate individual student performance specific to the goals, objectives, and competencies set forth for the Internship experience (PHS 400).

- 4) Include handbooks, websites, forms, and other documentation relating to the cumulative experience and field exposure. Provide hyperlinks to documents if they are available online, or include electronic copies of any documents that are not available online.

*New BSPH program handbooks, websites, forms, and other documentation are under development. The JSU undergraduate catalog has information about the new BSPH program.*

<https://www.jsums.edu/wp-content/uploads/2023/02/JSU-UNDERGRADUATE-CATALOG-2022-2023-v9-1.pdf>



## **D12. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences**

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

**The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education, and lifelong learning. Students are exposed to concepts through any combination of learning experiences and co-curricular experiences.**

- 1) Briefly describe, in the format of Template D12-1, of the manner in which the curriculum and co-curricular experiences expose students to the identified concepts.

## Template D12-1

Concept	Manner in which the curriculum and co-curricular experiences expose students to the concepts
Advocacy for protection and promotion of the public's health at all levels of society	Students will participate in a scheduled tour of the Mississippi state capital during the legislative session. They will observe sessions where legislators hear testimonies from public interest groups and lobbyists. In addition, students will hear discussion and voting of current bills. Students will also attend public health and welfare committee meetings to hear discussion about public health issues/concerns in the state. Lastly, students will have an opportunity to meet one on one with several state legislators to learn about their interests, volunteer opportunities to get involved, and allow the students to ask questions. This service-learning activity will enhance students' knowledge about advocating for the protection and promotion of Mississippi public health efforts at all levels of society.
Community dynamics	The College of Health Sciences Career Fair is a student-led event that will be held at the Jackson Medical Mall. The event is designed to provide an opportunity for students majoring in College of Health Sciences disciplines to engage and interview with representatives of non-profit, healthcare, public health, communicative disorders and social work. The community will be invited to attend this event as well.
Critical thinking and creativity	PHS 480: This course uses an interactive lecture and discussion format to examine various components and interrelationships of public health issues, policies, intervention, treatment, practices, programs, etc. in public health research. Multiple learning strategies are utilized, such as critical thinking exercises, discussion questions, and case studies to better understand the framework of public health research.
Cultural contexts in which public health professionals work	PHS 400: The Public Health Internship is intended to broaden the student's public health perspectives and provide an opportunity to interact with public health professionals and participate in activities that constitute public health.
Ethical decision making as related to self and society	PHS 420: Students develop knowledge and skills in identifying legal and ethical issues in public health policy development by reference to some recurring tensions: balancing individual rights with the goal of achieving healthy populations; the challenges of health care rationing; and addressing the needs of particular population groups.
Independent work and a personal work ethic	PHS 400: Students work independently at different field placement sites and gain a personal work ethic.
Networking	During the internship experience, students are provided an opportunity to meet other professionals of different organizations. Students will have an opportunity to foster a network of professionals while gaining the necessary experiences.
Organizational dynamics	PHS 400: The Public Health Internship activity is a culminating experience and organized into two components: field experience, which require students to participate with agencies, and organizations that provide public-health experiences; and coursework, which focuses

	on professional development, problem-solving, experience sharing, and reflection on work-related issues.
Professionalism	Through the Bachelor of Science in Public Health Student Association (BSPHSA) students will engage in professional development activities such as mock interviews, professional dress, and resume writing, etc. The BSPHSA will partner with JSU Career Services Center to provide presentations and availability of additional resources.
Research methods	PHS 480: Students are exposed to research methods to address practical questions about policies, intervention, treatment, practices, and programs. This is taught throughout the semester.
Systems thinking	PHS 395: Students will locate and synthesize information to write a 5-page paper discussing the biological, social, behavioral, and environmental factors associated with a selected health issue or condition.
Teamwork and leadership	PHS 400: This course will require students to participate with agencies, and organizations that provide public-health experiences This course also uses an interactive lecture and discussion format that provide opportunities for the student to examine and discuss various paradigms and ways to solve public health problems, with experiences that reinforce communication principles, use of relevant information technology, sensitivity to diversity and cultural issues, and enhance a student's leadership, program planning, and systems thinking skills.

- 2) Provide syllabi for all required coursework for the major and/or courses that relate to the domains listed above. Syllabi should be provided as individual files in the electronic resource file and should reflect the current semester or most recent offering of the course.

*PROVIDE LOCATION OF DOCUMENTATION IN **ERF D10.1***

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

**NOT APPLICABLE**

### **D13. MPH Program Length**

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

**Schools use university definitions for credit hours.**

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

The MPH curriculum requires 6 core courses or 18 credit hours (3 hours per course) for all students and 6 credit hours (three hours per course) toward the culminating/capstone courses (PHS 507 and PHS 508). The program requires 6 hours of electives. Each concentration offers 5 required specialization courses or 15 credit hours in the advanced study of public health specialization. The specializations are:

- \_ Behavioral Health Promotion and Education
- \_ Biostatistics
- \_ Environmental and Occupational Health
- \_ Epidemiology
- \_ Health Policy and Management

The MPH degree requires a minimum of 45 credit hours for all specializations. Most students complete the degree in 2 to 2 1/2 years.

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

The university requires that each credit hour results in 50 minutes of actual student contact time. However, most courses are 3 credit hours requiring at a minimum of 2 hours 50 minutes of classroom contact.

#### **D14. DrPH Program Length**

**The DrPH degree requires a minimum of 36 semester-credits, 48 quarter-credits of post-master's coursework or its equivalent. Credits associated with the integrative learning experience and, if applicable, a residency, internship or other applied practice experience conducted outside of a didactic course, do not count toward this requirement. The minimum credit requirement also does not count MPH-level prerequisite courses or their equivalent.**

**Schools use university definitions for credit hours.**

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

The DrPH degree has three concentrations: Behavioral Health Promotion & Education, Epidemiology, and Health Policy & Management. The curriculum is divided into advanced core courses (27 credit hours), concentration courses (15 credit hours), a community research practicum (3 credit hours), and a dissertation (minimum/maximum 15 credit hours). Advanced core courses are required for each concentration, as well as courses specific to each concentration. The total minimum hours to complete the DrPH program=60 hours.

Students are expected to declare their chosen concentration at the time of admission to the program. All students are required to have taken a master's level course in each of the five core areas of public health: behavioral health promotion and education; biostatistics; health policy and management; environmental and occupational health; and epidemiology.

It is expected that a student entering the program with an MPH degree (Track I) has six (6) years to complete the program, including the dissertation. A student entering the program without an MPH degree (Track II) has seven (7) years from the initial semester of enrollment to complete all requirements for the DrPH degree, including the dissertation. However, the university allows 10 years for doctoral students to complete degree program.

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

The university requires that each credit hour results in 50 minutes of actual student contact time. However, most courses are 3 credit hours requiring at a minimum of 2 hours 50 minutes of classroom contact.

## **D15. Bachelor's Degree Program Length**

**1) Provide information about the minimum credit-hour requirements for all public health bachelor's degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form. (self-study document)**

The Bachelor of Science in Public Health degree program has a minimum 123 credit-hour requirement for students in the program. Students must obtain the 123 credit-hours to meet graduation requirements.

**2) Define a credit with regard to classroom/contact hours. (self-study document)**

The university requires that each credit hour results in 50 minutes of actual student contact time. However, the majority of courses are 3 credit hours requiring at a minimum of 2 hours 50 minutes of classroom contact.

**3) Describe policies and procedures for acceptance of coursework completed at other institutions, including community colleges. (self-study document)**

As stated in the Jackson State University undergraduate catalog, students transferring to Jackson State University must have a maximum of 62 semester hours of credit for courses at the freshman and sophomore levels from community college and other institutions toward degree requirements. After earning 62 semester hours from any accredited institution, a student may not take additional courses at the community college and have them applied toward a degree from JSU, unless prior approval is obtained by the college dean. JSU accepts transfer courses with "C" or above grades. Grades earned in transfer courses will show on the permanent record at JSU with a "T" in front of the earned grade from the transfer institution but will not be used in calculating JSU grade point averages. A maximum of 93 semester hours is transferable from an accredited four-year institution.

**4) If applicable, provide articulation agreements with community colleges that address acceptance of coursework. (electronic resource file)**

N/A

**5) Provide information about the minimum credit-hour requirements for coursework for the major in at least two similar bachelor's degree programs in the home institution. (self-study document)**

*Health, Physical Education & Recreation program with a concentration in Health Education* at JSU has 78 coursework credit hours for the major plus 43 general education hours with a total of 121 required curriculum hours.

*Industrial Technology program with a concentration in Emergency Management* at JSU has 79 coursework credit hours for the major plus 44 general education hours with a total of 123 required curriculum hours.

Typically, undergraduate programs are 121 to 123 credit hours at Jackson State University.

**D16. Academic and Highly Specialized Public Health Master's Degrees**

**Not Applicable**

**D17. Academic Public Health Doctoral Degrees**

**Not Applicable**





## **D18. All Remaining Degrees**

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

Students enrolled in any of the SPH's degree programs that are not addressed in Criteria D2, D3, D9, D16 or D17 complete coursework that provides instruction in the foundational public health knowledge at a level of complexity appropriate to the level of the student's degree program.

The instruction and assessment of students' foundational public health knowledge are equivalent in depth to the instruction and assessment that would typically be associated with a three-semester-credit class, regardless of the number of credits awarded for the experience or the mode of delivery.

The school identifies at least one required assessment activity for each of the foundational public health learning objectives.

- 1) Provide a matrix, in the format of Template D18-1, that indicates the assessment activity for each of the foundational public health learning objectives listed above (1-12). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical.

The school offers bachelor's degrees in healthcare administration, communicative disorders, and social work. Within these programs, instruction in foundational public health knowledge is provided in the course HCA 311 Public Health Epidemiology. The instruction and assessment activities in this course address all the introductory public health **competencies**, as demonstrated in Table D18-1.

\*HCA 311 is the designated course for all other non-public health programs.

**Template D18-1. Content Coverage for Bachelor of Science in Healthcare Administration and Bachelor of Science in Communicative Disorders and Bachelor of Science in Social Work (BSW).**

Competencies	Course(s) number(s) and name(s)	Specific assessment opportunity
1. Explain public health history, philosophy and values	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Quiz questions: Discuss John Snow and his contributions to the field of public health. Who is Lemuel Shattuck, and what was his contribution to public health? When was the first permanent public health department established in the U. S., and in which state? Contrast the initial public health operating approach to that of current day public health departments.
2. Identify the core functions of public health and the 10 Essential Services	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Quiz questions: List and discuss the 3 core functions of public health. Select and discuss any 4 of the essential services of public health. Link each essential service to its corresponding core function. (This will follow detailed discussion of the core functions and essential services)
3. Explain the role of quantitative and qualitative methods and sciences in	HCA 311 Public Health and Epidemiology	Descriptive epidemiology project due. Discuss quantitative and/or qualitative methods employed in the project to evaluate the health of affected populations.

Competencies	Course(s) number(s) and name(s)	Specific assessment opportunity
describing and assessing a population's health	PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Define 'morbidity' and 'mortality'. Identify the morbidity and mortality rates for selected sub-populations in Mississippi. Compare state results to regional and national trends.
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline	Quiz questions: Define the levels of prevention. Discuss prevention strategies. Discuss the importance of health fairs and other population health events in relationship to individual and community health status.

Competencies	Course(s) number(s) and name(s)	Specific assessment opportunity
	PHS 501-100 Public Health & Behavioral Science	
6. Explain the critical importance of evidence in advancing public health knowledge	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Discussion post in Canvas: evidence-based practice and its implications for effective public health application in the marketplace. Provide appropriate citations using APA style.
7. Explain effects of environmental factors on a population's health	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Comparative analysis: Select two countries, one industrialized; the other a developing nation. Evaluate quality of air, water, food supply, general living conditions, etc. Present findings to class.

Competencies	Course(s) number(s) and name(s)	Specific assessment opportunity
8. Explain biological and genetic factors that affect a population's health	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Discussion post in Canvas: the importance of screening for diseases within a community and the potential impact of infectious diseases.
9. Explain behavioral and psychological factors that affect a population's health	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Case study analysis and presentations: to be assigned by groups two weeks prior to presentation date.
10. Explain the social, political and economic determinants of health and how they contribute to	HCA 311 Public Health and Epidemiology	Research health disparities in the United States. Discuss differences based on ethnicity, gender, age, region, etc.

Competencies	Course(s) number(s) and name(s)	Specific assessment opportunity
population health and health inequities	PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	
11. Explain how globalization affects global burdens of disease	HCA 311 Public Health and Epidemiology	Read <u>The Global Burden of Disease</u> by Murray and Lopez and <u>Measuring the Global Burden of Disease</u> also by Murray and Lopez. Be prepared to discuss both in class.
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	HCA 311 Public Health and Epidemiology  PHS 500 Intro to the Discipline*  PHS 501-100* Public Health & Behavioral Science	Research and be prepared to discuss the Social Ecological Model.

*\*PHS 500 Intro to the Discipline for CMD master's level student assessments will be linked with the new syllabi at the for the CEPH site visit. PHS 501-100 (16 weeks) assessments are being revised in preparation for the upcoming site visit.*

- 2) Briefly explain how the school ensures that the instruction and assessment in introductory public health knowledge is generally equivalent to the instruction and assessment typically associated with a three-semester-credit course.

The Director of Undergraduate programs closely monitors the content and teaching methods used by the faculty assigned to teach the Introductory public health course (HCA 311) for the Bachelor of Science in Healthcare Administration, Bachelor of Science in Communicative Disorders, and Bachelor of Science in Social Work (BSW). Faculty assigned to teach the courses have extensive practice-based experience. Each faculty participates in an annual performance evaluation in which student evaluations are discussed, faculty reflect on best practices for teaching and assessing introductory public health courses. Courses, instructors, and assessments are discussed in public health leadership team meetings.

The MPH & DrPH Coordinators collaborate with Department Chairs to monitor instruction and assessments of the master's level courses for MSW and PhD students in Social Work, and the PHS 500 Intro to the Discipline for Communicative Disorders. Summer 2022 was the first cohort of MSW students to take the course, PHS 501-100 (Public Health & Behavioral Science).

Student evaluations (knowledge gained about public health and instructor expertise) for the summer of 2022 and summer 2023 (PHS 501-100) were excellent for the public health practitioner-scholar who taught both courses.

Department Chairs in HPM and Behavioral & Environmental Health discuss the course content and assessments with faculty assigned to teach the courses (PHS 501-100 taught by BEH faculty and PHS 500 Intro to the Discipline taught by HPM faculty).

Faculty performance evaluations and the review of the Student Instructional Rating System (SIRS) provide opportunities for chairs to discuss teaching effectiveness, content expertise, and practical experience for the appropriateness of teaching strategies and assessments for these courses.

- 3) Provide supporting documentation for each assessment activity listed in Template D18-1. Documentation should include the following, as relevant, for each listed assessment:
  - assignment instructions or guidelines as provided to students
  - writing prompts provided to students
  - sample exam question(s)

*PROVIDE LOCATION OF DOCUMENTATION IN **ERF D10.1 D2 D3***

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



**Not Applicable**

**D19. Distance Education**

**Not Applicable**

## **E1. Faculty Alignment with Degrees Offered**

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

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

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

2) respond to the data presented in Template C2-1.

Template E1-1						
Primary Instructional Faculty Alignment with Degrees Offered						
Name	Title/ Academic Rank	Tenure Status or Classification^	Graduate degrees earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
Abebe, Hailay	Visiting Assistant Professor	Non-Tenure Track	PhD	National Taiwan University of Science and Technology Taipei, Taiwan	Electrical Engineering	
			M.Sc.	Addis Ababa University Addis Ababa, Ethiopia	Microelectronic Engineering	
Addison, Clifton	Associate Professor	Tenured	PhD	Jackson State University	Educational Administration in Statistics  Guidance and	Epidemiology and Biostatistics
Akil, Luma	Assistant Professor	Tenure-Track	PhD, MS	Jackson State University	Environmental Sciences	Environmental and Occupational
Barner Yalanda	Assistant Professor	Tenure-Track	DrPH	Jackson State University	Health Policy & Management	Health Policy & Management
			MBA	Jackson State University	Business Administration	

Bennett, Russell	Associate Professor	Tenured	PhD	Jackson State University	Public Policy and Administration	Health Policy and Management
			MPH	Jackson State University	Health Policy and Management	
			MS	Univ Southern MS		
Berhie, Girmay	Professor	Tenured	PhD	Saint Louis University	Public Policy Analysis & Administration	Health Policy and Management
			MSW	Saint Louis University	Masters of Social Work	
			MIS	Marshall University	Information Systems	
Bhuiyan Azad R.	Professor	Tenured	DrPH, MPH	Tulane University	Epidemiology	Epidemiology and Biostatistics
				Dkaka University	Medicine	
Hays, Alyce	Visiting Instructor	Non-Tenured Track	DrPH MPH	Jackson State University	Behavior Health Promotion and Education	Behavior Health Promotion and Education
				Jackson State University	Behavior Health Promotion and Education	Behavior Health Promotion and Education
Lee, Jung Hye	Professor	Tenured	ScD	Tulane University	Biostatistics and Epidemiology	Epidemiology and Biostatistics
			MPH	Seoul National University	Public Health,	

Leggett, Sophia	Professor	Tenured	PhD  MPH	Jackson State University  University of Alabama, Birmingham	Environmental Science  Health Sciences	Environmental and Occupational Health
Mendy, Vincent	Assistant Professor	Tenure-Track	DrPH, MPH	Jackson State University	Epidemiology	Epidemiology and Biostatistics
Michael, Latarsha	Assistant Professor	Non-Tenured Track	DrPH  MS	Jackson State University	Health Policy and Management  Counseling	Health Policy and Management
Mitra, Amal	Professor	Tenured	DrPH, MPH  DIH  MBBS	University of Alabama, Birmingham  National Institute of Preventive and Social Medicine  University of Dhaka	International Health  Industrial Hygiene and Toxicology  Medicine	Epidemiology and Biostatistics
McKinney, Sheila	Assistant Professor	Tenure-Track	PhD  MA	Florida International University  The Catholic University of America	Public Health, Health Promotion and Disease Prevention  Education, Administration and	Behavioral Health Promotion and Education

Offiah, Edith	Assistant Professor	Tenure-Track	DrPH MBA MPH (18 hrs)	Jackson State University Jackson State University Jackson State University	Health Policy & Mgmt	Health Policy Management
Omondi, Angela	Visiting Assistant Professor	Non Tenure -Track	DrPH MPH	Jackson State University Florida International University	Behavioral Health Promotion & Education Health Promotion & Disease Prevention	Behavioral Health Promotion & Education
Payton, Marinelle	Chair/Professor	Tenured	MD/PhD  MPH  MS	Boston University  Harvard University  Tennessee State University	Medicine/Neurological Sciences  Epidemiology, Environmental and Occupational Medicine  Biology	Epidemiology and Biostatistics
Scott, Jennifer	Visiting Associate Professor	Non Tenure-Track	DrPH MPH	Texas Woman's University Indiana University	Community Health	Health Policy Management
Shaw, Mary	Chair/Professor	Tenured	PhD  MEd	Texas Woman's University  University of Maryland-College Park	Health Studies  Secondary Science	Behavioral Health Promotion and Education

Younis, Mustafa	Professor	Tenured	DrPH  MBA  MA	Tulane  SUL Ross State University  University of Texas	Health Economics and Policy Analysis International Trade  Finance & International	Health Policy and Management
Zhang, Zhen	Assistant Professor	Tenure-Track	PhD  MS	Univ. of Mississippi Medical Center University of Mississippi Medical Center	Biostatistics	Biostatistics

- 3) Provide summary data on the qualifications of any other faculty with significant involvement in the school's public health instruction in the format of Template E1-2. Schools define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students' practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.



**Template  
E1-2**

		Non-Primary Instructional Faculty Regularly Involved in Instruction						
Name*	Academic Rank^		Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
Atehortua De La Pena, Nelson	Adjunct		Assistant Professor Part-Time	.25	Ph.D MPH	Texas A&M University Western Kentucky University	Health Education Public Health	Behavioral Health Promotion & Education
Caples, Felicia	Adjunct		Assistant Professor Part-Time	.50	DrPH MS	Jackson State University Mississippi College	Public Policy and Administration	BSPH-Healthcare Administration
Howard, Ahfiya	Adjunct		Assistant Professor Part-Time	.25	DrPH MS	Jackson State University	Health Policy and Management Social Work	Health Policy and Management
Patrick-Williams, Irish	Adjunct		Assistant Professor Part-Time	.25	DrPH MS	Jackson State University University of Southern Mississippi	Public Policy and Administration Nursing	BSPH Allied Health
Roby, Christopher	Adjunct		Assistant Part-Time	.25	DrPH MA	Jackson State University	Public Policy and Administration Social Work	BSPH Allied Health
White, Monique	Adjunct		Assistant Part-Time	.25	DrPH MPH	Walden University Jackson State University	Community Health Behavior and Education Public Health	BSPH Health Education

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

*PROVIDE LOCATION OF DOCUMENTATION IN **ERF-E1 E4***

- 5) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

The CHS hires Adjunct faculty to introduce new courses and support existing course offerings and reduce course loads for PIFs.

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

**Not Applicable**

## E2. Integration of Faculty with Practice Experience

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

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

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

The CHS has public health faculty with ongoing and past employment experience in practice settings outside of academia. These faculty bring a wealth of experiences from state and county health departments, non-profits, hospital settings, and global health experiences in developing countries. Additionally, public health faculty regularly engage **public health practitioners and other individuals involved in public health work through arrangements that include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.**

For example, faculty of record for Public Health courses invite practitioners from the Mississippi State Department of Health (MSDH), non-profits, and federal agencies to lecture and/or deliver presentations to expand the academic experience of our students. Preceptors are also invited to engage in interactive sessions about their work and/or organizations.

*Selected examples include:*

PHS 750 (DrPH Practicum) Mr. Darrius Moore, Youth Tobacco & Vaping Prevention Initiatives (Spring 2023)

PHS 533 (Maternal and Child Wellness) Ms. Israel Getty, Sisters in Birth, Inc (Fall 2022)

Dr. Gerri-Cannon-Smith, Pediatric Consultant (Fall 2022)

MomNBabyEXCEL Conference (hosted by Behavioral & Environmental Health Department (Spring 2022)

Speakers: Dr. Anne Merewood (CHEERS) out of Boston University, Global Health Initiatives

Dr. Nelson Atehortua (MSDH) Mississippi PRAMS update

Dr. Consuelo Beck (former CDC Public Health Service Officer) Maternal and Infant Health Expert

Public health faculty also include practitioners on student dissertation committees (as consultants):

2022-2023 Dr. Rodney Washington, Practitioner Consultant on Mr. Brandon Nabors' committee (candidate for the DrPH degree

Dr. Jennifer Scott, Practitioner Consultant on Mr. Brandon Nabors' committee (candidate for the DrPH degree 2021-2022);

Dr. Kamran Baig, International Practitioner Consultant on Dr. Byron Buck's committee (graduated in spring 2022).

The school has both primary instructional faculty and non-primary instructional faculty who are tenured or on the tenure track. The school's adjunct faculty who are not on the tenure track, also are involved with students. Most of these faculty members have public health practice experience and contribute to the integration of those experiences into the classroom and students' projects.

Primary instructional faculty members serve as faculty advisors to students who are engaged in their practice experience and interact with preceptors who guide students' performance in the field. Through participation in community service and in public health professional organizations, all but the newest faculty members in the school interact with public health practitioners, which enhances the courses they teach.

The faculty brings expertise from many areas. Vincent Mendy (DrPH, MPH, CPH), an epidemiologist, served as an Epidemiologist III in the Mississippi Delta Health Collaborative and Special Project Officer II in the Office of Health Promotion and Health Equity at the Mississippi State Department of Health. He works with students' dissertations and projects utilizing Mississippi State data that he collected and managed over the years. Many faculty mentor students in their practice experience areas. Other examples include Jung H. Lee (DS, MPH) who is the President, Korean Society for Public Health, Chair of US Branch, Korea Public Health Association, Chair of Statistic and Quality Assurance Subcommittee of the Jackson Heart Study at Jackson State University, and Research Consultant for the Arthritis Research Institute of America for the Clearwater Osteoarthritis Epidemiology Study (Exercise Study) in Clearwater, Florida. She mentors and tutored students who are interested in pursuing studies in exercise. Clifton Addison (PhD, MS) was a Teacher in the Jackson Public Schools and a Guidance Counselor in the Jackson Public Schools, Canton Public Schools, and Holmes County Public Schools. He provides career guidance to both MPH and DrPH students. Zhen Zhang (PhD, MSc, MSc) was a Statistician at C Spire and a Clinical Data Manager, Biostatistician II, at the University of Mississippi Medical Center. Therefore, she has a wealth of statistical knowledge for students. Marinelle Payton (MD, PhD, MS, MPH) is a physician and an Associate Epidemiologist, who worked at Brigham and Women's and Children's hospitals, Harvard Medical School, Boston, MA. She also provides career guidance and has placed students in agencies for internships and positions such as the National Institutes of Health and the Centers for Disease Control Prevention. Mary Shaw (PhD, MCHES) has over 16 years of teaching and campus-based administrative experience in public schools (Los Angeles Unified School District, Dallas Independent School District and Fairfax County). She provides career guidance and mentoring to both MPH and DrPH students. Dr. Shaw served as the Deputy Director for a non-profit Social and Health Disparities Center in San Antonio where she focused on diabetes prevention intervention studies for Hispanic school-age children. Russell Bennett, PhD, MPH, RN is a nurse and provides mentoring and guidance for student interested in public health careers in healthcare settings. Jennifer Scott, PhD, MPH, CHES, CSE is a new practitioner-scholar who is the Associate Director of HIV Prevention Programs for Abounding Prosperity in Dallas, TX. Dr. Scott has extensive experience

in sexuality health promotion and currently serves as the Project Director for two HRSA funded projects of Special Significance focused on Eliminating the HIV Epidemic initiative.

In addition, adjunct faculty members are selected on the basis of their practice experience. One example of a key adjunct faculty member is the Director of Preventive Health, Mississippi Department of Health. He is the primary health promotion and education officer for the state supported public health agency. He provides a rich environment in which public health students can get practice experience, and he brings to the classroom a wealth of experience of caring out the very duties that students are preparing to perform.

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

**Not Applicable**

### **E3. Faculty Instructional Effectiveness**

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

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

**The school supports professional development and advancement in instructional effectiveness.**

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

The CHS evaluates faculty instructional effectiveness at two levels:

The first level is the annual Faculty Performance Evaluation Instrument (FPEI) that requires faculty to establish teaching and instructional goals/objectives for the academic year. Faculty then meet with Department Chairs to discuss their self-evaluation and supporting documentation regarding teaching/instructional effectiveness. This includes a discussion about instructional strategies, new approaches, andragogy, and continuing education completed. Faculty are encouraged to identify and apply at least one new instructional strategy each year and to consider using qualitative assessments to determine what is "working well" for students and "what is not working well" in the classroom instructional approaches and evaluation of student performance.

The second level of evaluating instructional effectiveness is through the Office of Institutional Research. Each semester, approximately one week before the semester ends, faculty are informed that the Student Instructional Rating System (SIRS) has been launched and to encourage all students to complete SIRS. Students enrolled in fall and spring semester courses are invited to complete an evaluation of teaching effectiveness for each of their courses. The data collected is analyzed and reported to faculty for review (at the request of faculty) each semester. Department Chairs utilize the information to discuss areas of improvement during the annual performance evaluation meeting for each faculty. Professional development plans may be initiated if SIRS scores indicate areas of concern based on student evaluation of instructional effectiveness.

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

The university and individual departments provide support for continuous improvement in teaching practices and student learning. Numerous professional development education and training sessions were offered by the Office of Academic Affairs, Graduate Studies, and within Departments. Both primary and non-primary instructional faculty were invited to participate in the education and training offerings.

1. Academic Affairs “Lunch and Learn” sessions were developed and sponsored via zoom on a weekly basis.
2. Association of College and University Educator (ACU) training was available each semester. Faculty received incentives to participate in fall, spring, and summer to earn certification.
3. Departments offered *Shared Teaching & Learning: Best Practices Instructional Effectiveness*
4. Department Chairs training on developing Equity-based syllabi.

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

Annual Faculty Performance Evaluations provide an opportunity for Department Chairs to discuss Continuing Education opportunities that can document efforts to maintain currency in the areas of instructional responsibility. Faculty provide documentation when available.

Faculty document ongoing participation in conferences that support CPH and CHES continuing education credits or other professional licensures.

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

The annual performance evaluation for all primary and non-primary instructional faculty includes questions and discussion of instructional effectiveness. Tenure-track faculty are expected to receive Satisfactory performance in the Teaching domain. Failure to maintain Satisfactory performance in teaching requires that the Chair in collaboration with faculty develop a Professional Development Plan. The plan details strategies, resources, and timelines for completing the prescribed plan.

Faculty advancement from tenure-track to tenure and promotion includes a provision for Satisfactory performance in Teaching, Mentoring, and Advising. Documentation is provided by individual faculty during the Tenure & Promotion process. Non-Instructional PIFs are reviewed annually by the hiring department to determine their level of instructional effectiveness and whether contracts will be renewed.

- 5) Provide quantitative and/or qualitative information that characterizes the unit’s performance over the last three years on its self-selected indicators of instructional effectiveness.

Select at least three indicators, meaningful to the unit, with one from each listed category.

- Faculty participation in ACUE training to support effective teaching and student success.
- Department Chairs implemented “shared learning” to promote teaching effectiveness practices (Department meetings)
- Faculty participating in education trainings to support CPH or CHES certifications that require continuing education documentation.

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

**Plans for Improvement:** Compile at least 2-3 Student Instructional Rating System (SIRS) samples from each Public Health Department on an annual basis and maintain these records as part of ongoing program evaluation data. Currently CHS Faculty include the Student Evaluations for each course in the Faculty Performance Evaluation Instrument (FPEI) portal annually.



#### **E4. Faculty Scholarship**

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

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

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

- 1) Describe the school's definition of and expectations regarding faculty research and scholarly activity.

Faculty are expected to develop and maintain a productive research and scholarship agenda that supports teaching, advising, and mentoring excellence. Research productivity is evaluated annually through faculty performance evaluations and statement of accomplishments. Research productivity may be based on funded or unfunded projects. Tenure-track faculty are expected to have at least 1-2 externally funded grants or contract to support research prior to attaining tenure and promotion.

Training to support grantsmanship is available to both junior and senior faculty (primary and non-primary instructional faculty). The CHS has promoted collaborative research grant writing sessions for the past 3 years under the leadership of Dr. Girmay Berhie. The grant writing teams meet on Saturday to discuss, write, and submit grant applications.

- 2) Describe available university and school support for research and scholarly activities.

The university collaborates with the CHS to provide education and training that supports grant writing excellence; travel to national and local conferences, and ongoing university-wide collaborations to support limited submission applications through the Office of Research and Economic Development. Faculty are eligible to receive a course load reduction (from 3 courses to 2) if they are engaged in preparing a grant for submission to a funding agency. This type of activity is documented on the Faculty Teaching Load report submitted by department chairs to the Dean.

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

Each public health department has been successful in securing external grant or contract funding to support faculty research. Dr. Marinelle Payton (Epidemiology & Biostatistics) currently leads the Graduate Training Center for the Jackson Heart Study. Dr. Sophia Leggett leads the project "Establishing a Center for Environmental and Public Health Research. Dr. Girmay Berhie is the PI for the Public Health Informatics and Data Analytics program that is being developed through external funding. Each funding source led by the PIs has resulted

in student employment, assistantships, conference abstracts based on faculty research, and/or independent student projects related to the funding.

- Dr. Berhie has supported non-PIF faculty and provided graduate assistantships.
- Dr. Payton has supported Graduate Training Scholars (scholarships and faculty-student mentored projects for national conferences)
- Dr. Leggett has offered research training, tuition assistance, and conference travel support for graduate students.

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

**Dr. Shaw** has an externally funded research project (W.K. Kellogg funded) that focuses on maternal health and well-being for Black women in Mississippi. She has leveraged the research with her teaching/mentoring DrPH students for dissertation research related to maternal health. The research led to a dissertation and student led publication on pregnancy experiences of Black women in Mississippi. An additional teaching/mentoring opportunity led to a student receiving a doctoral fellowship and publication related to an international maternal health issue.

Tangbe, P.E.; **Shaw-Ridley, M.**; Cannon-Smith, G.; **McKinney, S.**; Atehortua, N.; Bennett, R. (2023). Prenatal, delivery and postpartum care experiences among Black women in Mississippi during COVID-19 Pandemic 2020–2021. *Women*, 3, 295-309.  
<https://doi.org/10.3390/women3020022>

**Omondi, A. A., Shaw-Ridley, M., Soliman, A.** (2022). Factors influencing cervical cancer screening among pregnant women in Nairobi, Kenya. *African Journal of Reproductive Health*, 26 (11):4. doi: 10.29063/ajrh/2022/v26i11.5.

Dr. Shaw also includes an interdisciplinary teaching module on breastfeeding in Mississippi to encourage public health knowledge and skills around maternal health matters. All students in PHS 750 Practicum complete the self-paced module developed by the Center for Health Equity at Boston University to train interdisciplinary health professionals in Mississippi.

**Dr. Leggett** (Title III- HBGI) a grant funded by the Department of Education, aims to establish a Center for Environmental & Public Health Research, Training, and Practice (RTP) to 1) provide students with additional knowledge and skills to competitively enter the public health workforce and respond to the growing shortage of public health professionals; and 2) support collaborative, community-engaged research and mentorship efforts that will enhance and inform the field of public health. Dr. Leggett and Dr. Mendy engage students in research and the preparation of manuscripts, presentations, and training. The research has led to presentations at professional meetings.

**\*Brown, Jamarius**, King, Eugenia, Tresvant, DaChiron, Stewart, Mia, Jeffery, Ginger, Leggett, Sophia and Mendy, Vincent (2022). *Racial Disparities in Colorectal Cancer Screening among Mississippi Adults Aged 50-75 Years Who Met Colorectal Cancer Screening Recommendations* [Poster presentation]. Proceedings of the American Public Health Association Annual Meeting, 150. Boston, Massachusetts.

**\*Tresvant, DaChiron, \*Stewart, Mia**, Jeffery, Ginger, King, Eugenia King, Brown, Jamarius, Mendy, Vincent, and, Leggett, Sophia. (2022). *Disparities in Prevalence of Antihypertensive Medication among Self-Reporting Hypertension among Mississippi Adults — Behavioral Risk Factors Surveillance System, 2019*, [Poster presentation]. Proceedings of the American Public Health Association Annual Meeting, 150. Boston, Massachusetts.

**Dr. Mendy** mentors/guides the students in developing their manuscripts on topics related to chronic and infectious diseases in special populations. Both Dr. Leggett and Dr. Mendy include the process in their public health courses.

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

Research and scholarly activities are an important component of faculty performance evaluations. All tenure-track and tenured faculty are expected to have evidence of ongoing research and scholarly productivity, both during the tenure & promotion process and after tenure/promotion. Research and scholarly productivity are approximately 1/3 of the criteria for faculty advancement from one academic rank to the next level. Department Chairs evaluate faculty research and scholarship productivity annually and work with them to set reasonable goals that support faculty advancement. Recommendations regarding faculty performance in the areas of research and scholarly productivity are part of the dossier considered for tenure and promotion. Non-tenure track faculty have roles and responsibilities that support teaching and mentoring, but fewer expectations for research and scholarly productivity.

Details are set forth in the JSU Faculty Handbook.

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

#### Template E4-1

Outcome Measures for Faculty Research and Scholarly Activities				
Outcome Measure	Target	Year 2020-21	Year 2021-22	Year 2022-23
Number of faculty publications in a peer-reviewed journal	6	17	8	23
Number of faculty presentations at professional meetings	6	7	8	17

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

#### Not Applicable

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

During the period 2020-2021, 2021-2022, and 2022-2023, the CHS documented excellence in faculty research and scholarly productivity as evidenced by the following indicators:

1. Number of faculty with student-co-authored presentations at APHA (averaging over 20 presentations each year)
2. An increased number of public health faculty with student-led co-authored publications (averaging 30 percent of faculty with manuscripts)
3. An increased number of grant applications submitted by CHS faculty (Public Health, SW, and CMD)

4. An increased number of externally funded grants (CHS was the most productive of all colleges in terms of securing grant funding as reported in the JSU Research and Economic Development annual report for 2022-2023).
- 9) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

**Not Applicable**

#### **E5. Faculty Extramural Service**

**The school defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.**

**As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the school's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.**

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

The CHS defines extramural service as service leadership that extends beyond the good citizenship service to the university, college, and department to achieve the university mission and goals. Both the university and CHS values community-centered extramural service to improve the public health and well-being of Mississippians and beyond. Service activities range from service to professional associations, community-based organizations, and national boards of public health organizations.

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

The university and CHS support negotiated release time for faculty who serve as elected or appointed officers on national boards that are related to public health and health promotion to achieve health equity. Faculty may be invited to serve as speakers, keynotes, conduct training workshops for non-profit and profit organizations.

- 3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students. This response should briefly summarize three to five faculty extramural service activities and explain how the faculty

member leverages the activity or integrates examples or material from the activity into classroom instruction. Each example should be drawn from a different faculty member, if possible.

**Dr. Shaw** has served on the Board of the Society for Public Health Education (an elected 2-year term). She served as the Trustee for Membership and provided oversight of the Nominations Committee and student engagement in SOPHE. Two doctoral alums and several other doctoral students received 21<sup>st</sup> Century Scholarships from SOPHE because of Dr. Shaw's outreach to recruit JSU students to SOPHE. Both doctoral students served on leadership committees within SOPHE.

**Dr. Atehortua** was appointed to the Mississippi Tobacco Council and was elected Chair of the Council during 2020-2021. Dr. Atehortua has leveraged the appointment to introduce students to tobacco control opportunities within the Mississippi Department of Health (MSDH). He has written local newspaper commentaries on tobacco control policies in Mississippi.

**Dr. Vincent Mendy** was selected to be a Research Faculty Fellow for training an interdisciplinary cohort of community researchers in public health research during the summer of 2023.

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

Overall, faculty engagement in extramural service beyond the university, college, and department has been modest. COVID-19 provided an opportunity for many faculty to support MSDH and the City of Jackson in its interdisciplinary approaches to increase the uptake of CDC mitigation strategies in Jackson and across the state. Dr. Berhie, Dr. Mendy, Dr. Buckner-Brown, and Dr. Atehortua were actively engaged in public health service outreach activities with the JSU Student Health Center, MSDH, and other public health organizations.

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

Service is one of the domains considered in the annual faculty performance evaluation. Faculty are expected to devote approximately 10% of their effort to service within the university, professionally, and to the community. Service to the profession and the community is an area of improvement for CHS public health faculty.

Most faculty meet the service requirements for advancement to the next level of academic appointment in the tenure-promotion process. Many of the non-PIF instructional faculty are engaged in extensive extramural service to the community and national organizations.

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

**Not Applicable**

## **F1. Community Involvement in School Evaluation and Assessment**

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

**Specifically, the school ensures that constituents provide regular feedback on its student outcomes, curriculum, and overall planning processes, including the self-study process.**

- 1) Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

The College utilizes several ways to solicit input/feedback from constituents on student and program outcome. The College's Community Advisory Board (CAB) is one of the main places for constituents to engage and provide feedback. The CAB members meet once per year and more often if there are substantive program changes. (See Resource File F1 for the list and credentials of members of the Board and meeting minutes.) Students and Leadership Team which include faculty serve as members of the CAB.

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

Field-based Internship and Practicum Preceptors serve as experienced public health professionals and provide prospective employer perspectives about how students are trained and to what extent they are prepared to enter the workforce. Preceptor evaluations of students is valuable and provides us with a means to evaluate needed curriculum changes/modifications.

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

The Community Advisory Board members are asked to review and comment on the vision, mission, values, goals, and objectives of the College. The Board has been asked to submit comments and recommendations for improvement of the CHS and its academic programs services to the larger community. A few CAB members also serve as Preceptors for MPH internship placements.

Other external constituents who occasionally provide feedback to CHS are members of the Jackson Medical Mall Foundation, which manages the medical mall and serves as the landlord for numerous governmental and non-governmental agencies and organizations leasing space for clinics and offices.

The leadership of the Mississippi Public Health Association, which represents public health professionals practicing and public health pre-professionals throughout Mississippi, and the leadership of the Mississippi State Department of Health, which is the official agency with the primary mission for delivering public health services in Mississippi provide feedback to the College.

Documentation located in **ERF A1.5**

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

With the help of accreditation consultants, participation of faculty, students, staff, and other stakeholders in retreats and working sessions, the ongoing development and modification of the vision, mission, values, goals, and objectives of the College's self-study document was formulated. Additionally, through extensive interactions with legislators, top administrators of the Mississippi State Department of Health, Mississippi Public Health Association, the staff of the Jackson Medical Mall Foundation, and selected leaders of the American Public Health Association, there has been considerable indirect contributions to the formulation of this document.

Documentation located in **ERF A1.5**

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

Available DOCUMENTATION in **ERF A1.5**

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

Findings from the employers' assessment of program graduates' preparation for post-graduation destinations will be available during the CEPH Site Visit

- 7) Provide documentation of the method by which the school gathered employer feedback.  
A survey questionnaire has been developed and will be administered mid Semester 2023 to collect and analyze data. This report will be available during the site visit in October. Employers will be asked to rate the following questions pertaining to the level of our graduate's competencies:



- a) Ability to assess and monitor population health status and community needs and assets.
- b) Ability to investigate and diagnosis health problems and hazards.
- c) Ability to inform, educate, and empower people about health issues.
- d) Ability to strengthen, support, and mobilize community and partnerships to improve health.
- e) Ability to develop policies and programs that support individual and community health.
- f) Ability to utilize legal and regulatory actions designed to improve and protect the public's health.
- g) Ability to promote equitable access to the services and care needed to be healthy.
- h) Ability to conduct evaluation, research, and continuous quality improvement activities.

Additionally, we will assess employer's satisfaction with our graduate's abilities in the following areas:

- a) Analytical Skills
- b) Communication Skills
- c) Cultural Competency
- d) Program Planning and Implementation
- e) Budget and Resource Management Skills
- f) Leadership Skills
- g) Systems Thinking Skills

The assessment committee will also utilize a rapid phone interview technique to capture employer perceptions about the program graduates' preparation for post-graduation destinations. The qualitative data will be analyzed using a thematic content analysis approach.

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

**Not Applicable**

## **F2. Student Involvement in Community and Professional Service**

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

- 1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.
  
- 2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

*INSERT NARRATIVE HERE*

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

*IF APPLICABLE, INSERT NARRATIVE HERE*

### F3. Delivery of Professional Development Opportunities for the Workforce

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

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

#### Template F3-1

	Education/training activity offered	How did the unit identify this educational need?	External participants served*
<b>Example 1</b>	MomNBabyEXCEL Online Conference in February and April 2022 <i>Project Director: Mary Shaw, PhD, MCHES</i> <i>CE Contact Hours offered</i>	Community assessments by the MSDH and national reports indicating that breastfeeding rates in Mississippi were much lower than the national snapshot	75 for February Conference (Celebrating Mom Love) 50+ for the April Conference (National Nutrition Month)
<b>Example 2</b>	Community Research Fellows Training Course for Summer 2023 <i>Faculty Teaching Fellow: Dr. Vincent Mendy</i>	Community needs assessment for public health research workforce development	19 interdisciplinary public health research fellows and community-based researchers

\* External participants are individuals who are not faculty or students at the institution that houses the school or program

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

**Not Applicable**

## **G1. Diversity and Cultural Competence**

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

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

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

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

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

The college uses the following ASPPH designations for underrepresented minorities (excluding Black or African American): U.S. citizens and permanent residents who identify as Hispanic/Latino, American Indian/Alaskan Native, Native Hawaiian, other Pacific Islander, or mixed race, with any one or more of the above identifications. The college has chosen the ASPPH designation because it reflects the major groups in the U.S. that are underrepresented in graduate education and the public health professions. As of 2020, African Americans and other ethnic minorities (Hispanics, Native Americans, and Native Hawaiians and Pacific Islanders) comprised 31.8% of the total U.S. population (U.S. Census Bureau: <https://www.census.gov/>). Members of these minority groups earned only 13.1 percent of all science, technology, engineering, and math college degrees. Public health as a science has not attracted significant numbers of minorities in general and African Americans in particular.

As a historically Black institution of higher education (HBCU), Jackson State University (JSU) has always maintained as its foremost recruiting priority people of color. The college, based on its mission (see criterion B1-1) and in recognition that people of color are vastly underrepresented among the public health workforce, enrolls a large proportion of its students from underserved populations that experience health disparities. Whereas minorities are underrepresented in leadership roles in public health, minority males are particularly scarce not only in public health preparation programs but generally in graduate programs. According to reports most information includes individuals enrolled in all disciplines, its value for public health is limited. Nevertheless, the college has as its highest priority the recruitment of minority males.

In preparation for applying for CEPH reaccreditation, faculty and staff attended a number of meetings where they reviewed the mission of the university; the mission, values, and goals of the college; and EEOC policies. Participants affirmed that with respect to the desire for diversity in the student body, the recruitment of minority males was the highest priority.

The second of the college's two education goals (see Criterion B1-1) is to "sustain a nurturing educational environment that promotes academic excellence and effective public health practice." An important step toward achieving this goal is to address diversity by actively recruiting white and international faculty, staff, and students, in addition to underrepresented minorities (see Resource File G1 for a copy of 2.1.1 Equal Employment Opportunity and Affirmative Action Policy).

Perhaps the most underrepresented group in the college is the American Indian population. The reasons for this include the small number of American Indians (the Choctaw) in the state and the fact that most American Indian children in Mississippi either do not finish elementary school or they do not continue their education at a university or college. American Indian inclusion is a complex statewide problem that the college hopes to help address.

As the result of a lawsuit filed by the Ayers family, Mississippi is responsible for providing special funding to state-supported HBCUs to compensate for many years of underfunding these institutions. At the point when Ayers Settlement Funds were made available to these institutions, the federal government mandated that HBCUs in Mississippi achieve a more diverse faculty and student body, and the Mississippi Board of Trustees of the State Institutions of Higher Learning (IHL) has instructed Ayers program beneficiaries, including JSU, that one of the requirements would be that the "other race" student population be around 10 percent. The litigants, and the institutions themselves, considered this to be a reasonable goal, though not a quota.

The IHL, beyond the context of the Ayers settlement, has encouraged all eight Mississippi state institutions to integrate their student population and faculty, and JSU has been instructed to increase representation in its workforce and in the classroom of white and underrepresented minorities other than African American and Black. The university's mission makes diversity and multicultural learning one of its priorities: "The University produces technologically advanced, diverse, ethical, global leaders who think critically, address societal problems, and compete effectively."

In addition to valuing cultural and racial diversity on campus, the university also encourages faculty members to take students abroad for international experiential learning that will sensitize them to other cultures and help them to understand different levels of development. This is facilitated by a policy that encourages faculty members to design summer courses that include travel abroad and allows students to request a financial package that includes tuition, room and board, and travel. As a result, students from the college have traveled to Africa, Asia, Europe, and Latin America.

- 2) List the school's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

As indicated in the previous section, the college's goal for increasing diversity is to increase the number of African American males in its degree programs and to increase its "other race" (i.e., other than African American) student population to approximately 10 percent. The college also aims to continue faculty diversity at a minimum of 10 percent "other race."

- 3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of school-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

The effort to increase the number of minority males within the college's enrollment has required the use of assertive recruiting techniques. For example, the college's lead recruiter, the marketing and field placement coordinator, collaborates with department chairs and admissions committee members to plan recruitment strategies that will improve the quality and diversity of students applying for admission to the college. One of the most challenging recruitment issues is persuading graduates of predominately majority- population- serving institutions to apply to a program in an HBCU. It is necessary to recruit onsite at these institutions and, when feasible, it is helpful to have a member of the majority population on the team.

Currently, the plan is to recruit more vigorously at Mississippi universities, the University of Southern Mississippi, which has a BS program in public health and an MPH program; Mississippi University for Women, which has a BS program in family studies; Mississippi State University, which offers a BS in health promotion; University of Mississippi, which has a BS and a master's program in health promotion; Mississippi College, which offers a BS in healthcare administration; and Belhaven College, which has a BS program in healthcare administration. These predominantly majority-serving institutions have students in degree programs in related health disciplines, who might be attracted to a graduate degree in public health.

It is worth noting that the Division of Graduate Studies provides a diversity scholarship. The college notifies qualified students of such opportunities, and a number of public health students have received this scholarship.

Tables G1-1, G1-2, G1-3, and G1-4 below provide data on the diversity of the public health programs in terms of faculty, staff, and students' gender, race, and ethnicity/origin.

- 4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest

lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

The college's students are exposed to cultural and racial issues in several courses in which related competencies and skills are requirements. From its inception in 1999, the college/program has covered cultural competencies in a number of courses. The public health curriculum, through these courses, prepares students to understand that the globe is shrinking and that cultural and racial minorities may become the majority in the world, including in the U.S. The following three courses are core courses that assure that all MPH and DrPH students address cultural competencies:

- PHS 501 Public Health and Behavioral Science is a core course for all MPH concentrations. It addresses the following competency: 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 (see Resource File G1 for the syllabus for PHS 501)
- PHS 703 Designing Research Studies for Minorities and Special Populations is a core course for all DrPH concentrations and addresses the Foundational Competency: propose strategies for health improvement and elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders, and other partners (see Resource File G1 for the syllabus for PHS 703)
- PHS 707 Leadership in Public Health is a core course for all DrPH concentrations and addresses two Foundational competencies: propose strategies to promote inclusion and equity within public health programs, policies, and systems, and assess one's own strengths and weaknesses in leadership capacities including cultural proficiency (see Resource File G1 for the syllabus for PHS 707).

In addition to the core courses, the following elective courses address cultural competencies:

- PHS 525 Epidemiology of Minority and Special Populations is a required course for the epidemiology concentration and a potential elective for other students. The objectives of the course are to help students understand the impacts of implicit biases and develop strategies for reducing/preventing biases that hamper successful decision-making. Faculty instructors for PHS 525 will analyze student pre- and post-tests.
- PHS 537 Medical Anthropology and Public Health is an elective course that explains why behavioral factors play a pivotal role in both infectious and chronic diseases. This course explores variables like culturally constituted risk factors and belief patterns, thus providing a holistic understanding of health and illness within communities and populations. Given that communities and populations are increasingly multicultural and diverse, some discussion of both explicit and implicit biases can heighten awareness in public health professionals serving such communities.

Recently there has been a campus-wide effort to address implicit bias not only attended by students but also by public health faculty and staff. Subsequently, an online tutorial was created.

For several years there has been a campus-wide effort to address implicit bias. The programs and mandatory trainings are attended by students and public health faculty and staff. Subsequently, an online tutorial was created, which all university faculty and staff are now required to complete. Since the conference, several SPH faculty members have developed teaching modules for educating public health students about implicit biases. These modules were implemented in several of the courses listed above beginning in fall 2017. In addition, the curriculum strives to ensure that its students spend the 400 hours of their MPH Applied Practice Experience and the 405 hours of their DrPH Applied Practice Experience in a public health setting that is culturally and racially.

- 1) Provide quantitative and qualitative data that document the school's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

Tables G1-1 and G1-2 present public health's outcome measure data for faculty and staff diversity. Table G1-3 provides comparative university data on student diversity, and G1-4 provides gender data by degree program.

Table G1-1 Public Health Core Faculty Diversity, 2020-23

	Core Faculty Diversity 2020-2021		Core Faculty Diversity 2021-2022		Core Faculty Diversity 2022-2023	
	Number	Percent	Number	Percent	Number	Percent
Female						
African American	7	33%	8	38%	7	33%
Caucasian	1	4.7%	1	4.8%		
International	2	9.6%	2	9.5%	3	17%
Male						
African American	4	19%	5	24%	7	33%
Caucasian	1	4.7%	1	4.7%		
International	6	29%	4	19%	4	17%
Total Faculty	21	100%	21	100%	21	100%



The public health faculty are diverse socio-culturally and with respect to gender and ethnicity, adding to the richness of the college. International faculty have origins in Africa, Asia, Europe, and the Middle East. In terms of gender, 52% percent of faculty are female and 52% percent male. Table G1-1 summarizes the demographic data for faculty for the years 2020-2021, 2022-2022, and 2022-23.

Public health advertises positions for new faculty and administrators on the university's website and through the Chronicle of Higher Education. Also, recruitment occurs at the annual meetings of the American Public Health Association.

Table G1-2 Public Health Staff Diversity, 2020-23

	Staff Diversity 2020-2021		Staff Diversity 2021-2022		Staff Diversity 2022-2023	
	Number	Percent	Number	Percent	Number	Percent
Female						
African American	8	89%	7	87.5%	7	87.5%
Caucasian						
International						
Male						
African American	1	11%	1	12.5%	1	12.5%
Caucasian						
International						
Total Staff	9	100%	8	100%	8	100%

Table G1-2 demonstrates that, in 2020, 89% percent of public health's staff were female and 11% percent male. Overall, 100 percent of the staff is African American. This lack of diversity among staff over the three-year period (2020-2023) is greater than at the university and among other HBCUs in the State of Mississippi, though it is in keeping with the African American population in Jackson and the state.

Table G1-3 Comparative Public Health and University-wide Student Diversity

Race/Ethnicity	Public Health	University	Public Health	University	Public Health	University
	2020-2021		2021-2022		2022-2023	
African American	153 (2.4%)	6302	142 (2.1%)	6666	129 (2.0%)	6518
Caucasian	6 (1.6%)	383	2 (.9%)	216	4 (2.0%)	204
Hispanic/Latino	3 (4.1%)	74		47	1 (3.6%)	28
Asian	8 (14.8%)	54	6 (8.3%)	72	6 (7.8%)	77
American Indian	2 (6.7%)	30		19	1 (5.3%)	19
Pacific Islander		1		7		10
Multiracial	2 (2.6%)	77	1 (1.9%)	53	1 (.02%)	50

Table G1-3 demonstrates the comparative public health and university-wide student diversity over the three-year period (2020-2023). In comparison to the university, the public health students are mostly represented by African Americans, followed by Asian and Caucasian.

Table G1-4 Gender of Public Health Students, 2020-2023

Group Category	2020-2021	2021-2022	2022-2023
Total PH Students	172	151	150
DrPH Females	71	64	70
DrPH Males	21	15	15
Total	92	79	85
MPH Females	66	56	40
MPH Males	14	16	17
Total	80	72	57

Table G1-1 illustrates a fairly balanced ratio of male to female faculty members from 2020-2023. However; Tables G1-2 and G1-4 show that the ratio of male to female staff members and students is imbalanced, with much larger percentages of females than males. This tends to be the pattern within several of the public health disciplines, particularly behavioral health promotion and education, occupational health, public health nursing, public health social work, and at schools of public health.

- 2) Provide student and faculty (and staff, if applicable) perceptions of the school's climate regarding diversity and cultural competence.

Based on students, faculty, and staff conversations during meetings, social events, and extended learning opportunities in the CHS, students, faculty, and staff have positive perceptions of the CHS climate regarding diversity and cultural competence.

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

**Strengths:** JSU has the only CEPH accredited College of Health Sciences in Mississippi and at an HBCU. This factor is appealing to a wide range of prospective and current students, including those who are underrepresented.

**Challenges:** The college needs to pursue more aggressive recruitment of a diverse student body throughout the academic year and better retention of faculty. The college will need to secure additional resources to implement the related diversity policies and plans effectively.

**Plans:** The college has a mandate to achieve more diverse faculty, staff, and student populations, and intends to meet this challenge. The college's Leadership Team has reviewed the most recent diversity data and is planning additional recruiting strategies. The CHS will design and implement a climate survey in 2023-2024 to examine student, faculty, and staff perceptions of diversity and cultural competence within the college.

## H1. Academic Advising

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

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

At the beginning of each semester (fall and spring), the CHS provides a new and returning students orientation program. The orientation program includes a short presentation by each PH department; MPH and DrPH Coordinators provide an overview of program requirements, policies, graduation requirements, and support systems available for student success.

Undergraduate orientation occurs throughout the academic year per university policies. Orientation to the BSPH program of study is coordinated through the CHS Director of UG programs.

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

Academic advising services occur at two levels:

- a. Assignment of a Faculty Advisor for each student in the BSPH, MPH, or DrPH program. Assignments are made by the Department Chairs.
- b. Program Coordinators (MPH, DrPH, and BSPH) also advise students through informal Q&A sessions or by scheduled appointment.

Advising services are conducted virtually or in person at scheduled times within each department. Faculty Advisors post their schedules on syllabi and on office doors. The CHS requires that each student meet with his/her faculty advisor at least once each semester. All students are required to meet with their faculty advisors prior to registration in each semester.

- 3) Explain how advisors are selected and oriented to their roles and responsibilities.

Advisors are selected and oriented to their roles and responsibilities through each PH Department (BSPH, HPM, BEH, and Epi/Biostats). Department Chairs are responsible for the education and training of all faculty who have full-time (1.0 FTE) appointments in the departments. Usually chairs assign and update faculty advisors on their roles and responsibilities at the beginning of each semester. Chairs advise on best practices for advising graduate students.

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

***DOCUMENTATION IN ERF (MPH, DrPH, and BSPH handbooks); Advising Session Reports) H1.4***

- 5) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable. Schools should present data only on public health degree offerings.

**BSPH** First cohort started in fall 2022. Preliminary BSPH data should be available in Fall 2024.

**MPH** Collection and Analysis

All data contained in this report was based on students completing graduation requirements during the fall and spring of the 2022-2023 academic year. The responses to the survey were from students completing their final semester of the program. There were twenty-nine graduates for the 2022-2023 academic year. Twenty-eight graduating MPH students completed the exit survey.

Survey Demographics

A total of twenty-eight students 19 (67.9 %) females and nine (32.1%) males participated in the exit survey. The graduating students' areas of concentration included 21.4 % Behavioral Health Promotion and Education, none from Biostatistics, 10.7 % Environmental and Occupational Health, 39.3% Epidemiology, and 28.6% Health Policy and Management.

Students were asked to rate their satisfaction in three areas, advice, and counseling, curriculum and instructions, and resources and facility. The students could choose from five viable options: Very Satisfied, Satisfied, Slightly Satisfied, Dissatisfied, and Very Dissatisfied. Seventy-five (42.9%) of the students indicated that they were very satisfied with their Department Chair's accessibility and availability for assistance, and 53.6% were very satisfied with their faculty advisor's availability for advisement and assistance. The students were very satisfied (50%) with the faculty advisor being an effective academic mentor.

**ERF\_MPH Exit Survey D7.4**

**DrPH** The DrPH 2022-2023 Exit Survey results will be available during the site visit.

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

***Not Applicable***

## H2. Career Advising

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

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

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

Career Advising occurs at multiple levels that include the university, college, and academic departments. Career Services offers a "Graduate and Professional School Day" for students during the Fall semester each year. Students engage with professionals from an array of universities to learn about their graduate programs.  
<https://www.jsums.edu/careers/>

*The Career Services Center* aims to provide career services in a supportive and proactive manner for Jackson State University students and alumni; including information and counseling on career choices, graduate and professional school, co-op and internships and part-time and permanent employment opportunities. The Center also provides effective and efficient services to employers through recruitment programs and activities.

All full-time faculty in Public Health are engaged in career advising of students. Career advising usually occurs when faculty meet with their assigned advisees at the beginning of each semester. Faculty also connect students with PH professionals in their respective networks.

The College of Health Sciences held a Spring 2023 Career Fair for undergraduate students. Public Health, Communicative Disorders, Healthcare Administration, and Social Work students within the College were the targeted audience for this career fair. These students had the opportunity to engage with representatives from different agencies such as non-profit organizations, healthcare organizations, public health organizations, and organizations related to communicative disorders and social work.

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

Faculty advisors who also serve as career advisors are identified based on their scholarship and research expertise. They are oriented to their roles and responsibilities through Department Chairs, the Interim Dean, Graduate Council, and ongoing professional development opportunities through the Office of Academic Affairs.

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

1. The CHS in collaboration with Office of Academic Affairs sponsored a 2-day event (March 28-29) with the CDC at JSU, "Showcasing CDC opportunities for student and graduates. Students were invited to discuss career opportunities with the CDC.

**Number of students: Approximately 35 public health students attended** the session at the Jackson Medical Mall.

2. The DrPH Practicum course, PHS 750 offers at least one career advising session each academic year. During spring 2023, Mr. Darrius Moore, Project Manager (Office of Tobacco Control) with the Mississippi State Department of Health delivered an interactive career advising session that focused on public health careers related to tobacco and vaping control.

**Number of students attending: 20**

3. October 20, 2022, Gilead Sciences in collaboration with the MPH Internship class, hosted undergraduate and graduate students to learn more about career opportunities with Gilead Sciences.

**Number of students attending: 35-40 students**

4. The Master of Public Health colloquium is held each semester. During the Spring 2023 semester, a "Watch Party" was held for undergraduate students (public health, healthcare administration, and communicative disorders) to learn more about research and internship opportunities.

5. Alumna career advising is usually provided by faculty mentors and faculty advisors. This is an informal process.

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

The CHS has not historically captured data regarding student satisfaction with career advising.

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

**Plans for Improvement:** The CHS has plans to structure career advising under the auspices of the Director of Marketing and Field Placement. The Director will begin to collect data regarding student satisfaction with career advising. The alumni survey can also serve to capture alumna utilization and satisfaction with career advising.



### H3. Student Complaint Procedures

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

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

Jackson State University maintains an academic environment where students can register their concerns or complaints regarding matters related to academic affairs in accordance with the *University's and College's Student Handbooks and Graduate Catalog*. Students are introduced to the College's public health program values and related policies (e.g., grade appeals process, discrimination, etc.) during college-wide orientations held at the start of fall and spring semesters; these policies are also included on the Student Policies and Resources page of the College's website and in the Student Handbook and Graduate Catalog. As such procedures are in place for appealing decisions made by an instructor or by the College. Procedures for appealing a course grade or other academic evaluations are included in the catalog and in the MPH and DrPH student handbooks. The appeals process for a code of conduct decision is described in both the graduate school catalog and the MPH/DrPH handbooks. These are available on the web at <https://www.jsums.edu/chs/resources/>.

The university and the college also provide opportunities for students to propose policies and procedures or to offer input about existing policies and procedures. This ordinarily occurs under the auspices of the Graduate Student Association (GSA), which represents the interests of graduate students in the College and university-wide. At the College level, the GSA president, on behalf of the student body, may propose policies and procedures, or engage in discussions of related issues, while attending meetings of the College's leadership. Each College has a representative on the University's GSA's executive committee.

Students also are represented on program and College committees and may provide input in the development of policies and procedures or other College functions through those avenues. Finally, the Master of Public Health Student Association and the Doctor of Public Health Student Association represent the interests of the graduate students in public health. The leadership of these two organizations meets with the dean at least one or more times per semester to discuss general student matters and any areas of concern.

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

If a complaint or grievance is about an academic matter, students first present their concerns to the course instructor or project advisor and, if not satisfied with the response, the student may appeal to their department chair. The next step of appeal, if necessary, is the dean of the College.

For other types of complaints or grievances, students are ordinarily expected to present their concern to their department chair. If the issue is not resolved satisfactorily at this level, or if the complaint is outside the scope of the departmental unit, the procedures allow students to submit a formal complaint directly to the College's dean or to the university office of academic affairs or student affairs.

Procedures for submitting complaints and grievances are included in the MPH and DrPH student handbooks and the university's catalog

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

Generally, student complaints pertain to grades, disrespect of staff, or advising. These issues are usually resolved informally at the program level, and rarely reach the dean's, ombudsman's, or provost's office. When and if student complaints are expressed beyond the College Dean's Office, it is the result of students failing to follow the College's guidelines for reporting.

Further, most student complaints pertain to grades and advising. These complaints are usually resolved at the Department level and most often does not rise to the level of the College Dean's office.

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

***NOT APPLICABLE***

#### H4. Student Recruitment and Admissions

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

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

The CHS graduate recruitment activities are conducted in collaboration with the Division of Graduate Studies. The Director of Marketing and Field Placement participates in local, regional, and national career fairs at universities, health care organizations, and professional conferences.

The undergraduate BSPH recruitment is conducted in collaboration with the Division of Undergraduate programs. For example, the BSPH program director regularly participates in the JSU High School Day and Campus tours; and other university sponsored recruitment events.  
<https://www.jsums.edu/recruitment/>

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

The undergraduate BSPH program admissions policies and procedures are detailed in the Undergraduate admissions website  
<https://www.jsums.edu/admissions/admissions-home/>

Graduate admissions and policies are coordinated through the Division of Graduate Studies. Both MPH and DrPH applicants apply through the Graduate Studies Admissions Pro. The completed application includes a transcript, statement of purpose, and 3 recommendations. MPH applicants must minimally have an UG GPA 2.8.  
<https://www.jsums.edu/graduateschool/masters-admissions/>

DrPH Applicants must have minimum 3.0 GPA in a Master's program to be considered for admission to the DrPH program of studies.  
<https://www.jsums.edu/graduateschool/doctoral-admissions/>

Details are in the MPH Student Handbook and the DrPH Student Handbook. ERF\_D5.2 D6.3\_\_

- 3) Provide quantitative data on the unit's student body from the last three years in the format of Template H4-1, with the unit's self-defined target level on each measure for reference. In addition

to at least one from the list that follows, the school may add measures that are significant to its own mission and context. Schools should focus data and descriptions on students associated with the school's public health degree programs.

**INSERT TEMPLATE H4-1 HERE**

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

**Not Applicable**

#### **H5. Publication of Educational Offerings**

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

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

academic calendar

<https://www.jsums.edu/academicaffairs/files/2023/08/Edited-7-26-2023-Academic-Calendar-2023-2024-1.pdf>

admission policy - undergraduate

<https://www.jsums.edu/admissions/requirements/freshman/>

graduate

<https://www.jsums.edu/graduateschool/prospective-students-home/>

graduate grading policy

<https://www.jsums.edu/graduateschool/grade-policy-for-graduate-students/>

undergraduate grading policy - nothing updated since COVID

<https://www.jsums.edu/registrar/files/2021/03/Undergraduate-Alternative-Grading-Policy-0504020-Revised.pdf>

academic integrity

<https://www.jsums.edu/graduateschool/files/2012/08/acadpolicy.pdf?06d966>

degree completion

<https://www.jsums.edu/informationtechnology/degree-works/>