

MASTER OF PUBLIC HEALTH (MPH)

Proposal and Supporting Documents

Submitted to:

Stockton University Faculty Senate

April 17, 2020

MASTER OF PUBLIC HEALTH

Brief Overview

Master of Public Health Program Proposal

April 17th, 2020

MPH Proposal

Purpose of an MPH Degree Program at Stockton University

(Degree Structure/Alignment)

Target Population

Basic Curriculum Outline

Assessment & Resources

Staff Resources & Summer Courses

Current public health internship coordinator (Dr. Tara Crowell) will oversee & implement the graduate internship (see pg. 18 of proposal document)

- **2 peer reviewed published manuscripts**
- **BS ExSci and Minor in Cannabis Studies use our same model**
- **PUBH already has 50-sites with relationships with Stockton University**

Summer Intensive Courses

- **Will be delivered prior to June 30th, which is within the 10-month contract for faculty**
- **Precedence set by EdD and other graduate programs that require summer internships, clinical rotations, fieldwork, etc. (see pgs. 16-17)**

Faculty Lines & Teaching Loads

Faculty Lines

- 2 FT faculty are needed per concentration for CEPH accreditation
- All 4 faculty lines (2 per concentration) are not needed initially
 - Must be in place by the time the program goes up for accreditation (at least 3-4 years)

3-Credit Graduate Courses

- Graduate courses bearing 3-credits for students earn 4 TCH for graduate faculty (see Memorandum of Agreement on Faculty Teaching Load)

General Studies Courses

- It is understood that faculty will meet Stockton University's General Studies requirements
- As with other graduate programs, faculty teaching load will be scheduled in order to meet these requirements
- CEPH expects adjunct faculty will be utilized in MPH programs

Consultation with SOWK & Clinical Nature

- This request has not been made during any previous APP reading, nor was it ever made when proposal was reviewed by Dean's Council
- Dr. Tara Crowell has engaged in discussion with SOWK faculty regarding this issue
- Public Health is its own unique, separate, and distinct field of practice and academic study
- Working professionals within clinical and non-clinical roles seek out graduate studies in public health
 - Proposal clearly states that this is not a clinical program

Course Sequencing

- MPH programs are rarely structured in Cohort models
- Most students are already working professionals within their various roles within the greater field of public health
- CEPH does not have any requirements for MPH programs to be cohorted in their structure

MASTER OF PUBLIC HEALTH

Proposal

**New Program Proposal for a Master of Public Health Degree
Offering Two Initial Concentrations in Community Nutrition & Substance Abuse**

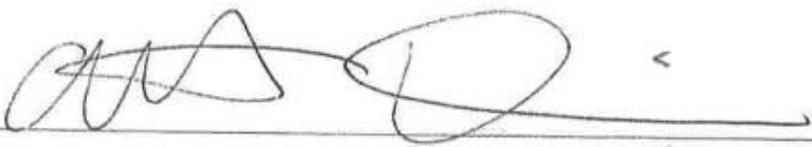
Stockton University
Galloway, New Jersey

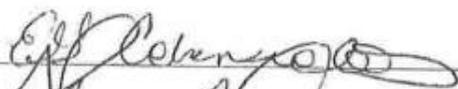
Submitted by

Anthony Dissen
Elizabeth Calamidas
Tara Crowell

April 2020

On behalf of
School of Health Sciences

Anthony Dissen 

Elizabeth Calamidas 

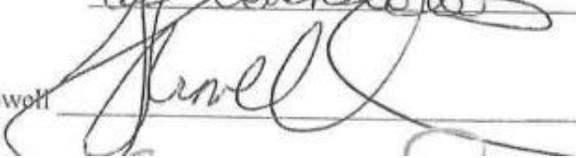
Tara Crowell 

TABLE OF CONTENTS

SECTION	PAGE NUMBER
A. Program Objectives	3
<i>Introduction</i>	3
<i>Academic Objectives</i>	4
<i>Professional Objectives</i>	5
B. Evaluation and Learning Outcomes Assessment Plan	5
<i>Program Level Goals</i>	5
C. Relationship of the Program to the Institutional Strategic Plan and its Effect on Other Programs at the Same Institution	7
<i>Alignment with University Strategic Plan</i>	7
<i>Competition with Existing Programs at Stockton University</i>	7
D. Justification of Need & Regional Competition	8
<i>Justification of Need</i>	8
<i>Evaluation of Need and Support</i>	9
<i>Competition with Programs Within the Region</i>	10
E. Students	11
<i>Primary Student Target Populations</i>	11
F. Program Resources	13
<i>Faculty Needs</i>	13
<i>Program Location & Delivery</i>	14
<i>Necessary Materials & Resources</i>	15
G. Degree Requirements	16
<i>Program Overview</i>	16
<i>MPH Required Core Courses</i>	17
<i>200-Hour Practicum</i>	18
<i>Accreditation</i>	18
Appendix A. 10 Essential Public Health Services	19
Appendix B. Hanover Report	20
Appendix C. Competencies for Public Health Professionals – Council on Linkages Between Academia and Public Health Practice	39
Appendix D. CEPH Foundational Public Health Knowledge Learning Objectives	44
Appendix E. CEPH MPH Foundational Competencies	45
Appendix F. Guiding Statement of the MPH Program	47
Appendix G. Alumni, Current Student, and Site Supervisor Survey Data	50
Appendix H. Professor Anthony Dissen’s CV	57
Appendix I. Course Descriptions & Faculty Mapping	66
Appendix J. Master of Public Health Curriculum Mapped to CEPH Accreditation Standards & Council on Linkages Between Academia and Public Health Practice Core Competencies	71

A. Program Objectives

Introduction

Public health can be best defined as the art and science of preventing disease and promoting quality of life by not only focusing on the habits and practices of the individual, but by working with communities, private and public organizations, and society at large. As defined by the CDC, “public health is the science of protecting and improving the health of people and their communities. This work is achieved by promoting healthy lifestyles, researching disease and injury prevention, and responding to infectious diseases” ([CDC Foundation](#)). Unlike a clinical model of health care, which often focuses on disease managing and post-diagnosis intervention by a clinician, public health focuses on protecting the health of entire populations, and identifying root causes of societal influences on health, and engaging stakeholders to take the necessary actions to remedy these issues and promote greater wellbeing and vitality of all who are potentially impacted.

At its core, public health education trains future professionals to analyze the health of entire populations (which can be small or large scale in number) and to identify current or future threats that these populations may face. Health, as described by the World Health Organization, takes not just the biological/physical aspects of health into consideration, but social and environmental factors as well ([WHO](#)). Furthermore, the field of public health reiterates over and over the important distinction that health is not merely the absence of infirmity or disease, but the integration and advancement of all the various dimensions that make up the wellbeing of people and communities through health education and advocacy ([BLS](#) and [NCHEC](#)).

The proposed Master of Public Health Degree (CIP code 51.2299; Public Health, Other) is designed to educate and prepare students to be competent, well prepared public health professionals ready to address the needs of communities and populations at risk for health-related issues or barriers. This graduate Master of Public Health (MPH) program, will provide our students with the foundational skills, education, and expertise necessary to be ready to work in a variety of public health employment settings including state and county health departments, non-profit agencies, hospital population health departments/offices, wellness centers, and academic institutions. Graduates will have gained the necessary academic and professional skills necessary to enter the workforce as entry-level public health professionals by mastering the 10 Essential Public Health Services (see Appendix A). A core component of this program will be a 200-hour practicum/internship, which will provide an extended opportunity through which students will gain the kind of practicum experiences and knowledge necessary to succeed in the public health field.

The MPH program will seek accreditation from the Council on Education for Public Health (CEPH), the nationally recognized body that established the rigorous standards and oversight for public health programs and schools at the undergraduate and graduate levels. It should also be noted that it is the intention of this committee that the MPH program will begin to seek accreditation from CEPH in tandem with the already existing BS in Public Health program. In this way, both the current undergraduate program and the new graduate program will undergo the process of accreditation at the same time, which will allow for better coordination with

CEPH, as well as better utilization of resources. This accreditation will fall under the category of a Public Health Program which contains both an undergraduate degree and a graduate degree, as defined by CEPH.

Additionally, the academic competencies and curriculum of the MPH will be aligned with the requirements put forward by the National Board of Public Health Examiners (NBPHE) to sit for the examination to become Certified in Public Health (CPH). By seeking CEPH accreditation, the MPH program curriculum will also be eligible for approval by NBPHE for graduates to sit for the CPH exam.

Schools and Universities offering MPH degrees often provide further educational specialization (concentrations) to provide students with not only the foundational graduate education in public health that is needed, but additional coursework in an area of content specialization. These specializations do not limit the scope of work that a graduate would then be able to pursue. Rather, they offer an opportunity for students to develop expertise within a specialized content area of public health. All students entering the MPH program will choose a concentration category that best matches their personal and/or professional interests.

According to a Market Analysis conducted in April 2019 by Hanover, specifically prepared for Stockton University (see more in Section C: Justification of Need & Regional Competition), there are two concentrations that appear to be in high demand, and therefore would be of great benefit to our students. The first would be a concentration in Nutrition, and the second would be in Substance Abuse. According to the report (see Appendix B):

Among potential concentration areas, student completions in these field have grown rapidly in recent years. Only one local competition intuition offers a concentration in nutrition, and no MPH programs in New Jersey or Philadelphia offer a concentration in substance abuse. This presents Stockton with an opportunity to distinguish its program. Market Analysis, page 3.

The following academic objectives represent the overall academic learning outcomes of the proposed MPH program, and each of the two proposed concentrations.

Academic Objectives

The MPH program's objective is to prepare students academically and professionally to become evidence-based practitioners within the field of public health. The foundation of the curriculum is based on the five core competencies of public health: Biostatistics, Public Health Administration, Epidemiology, Environmental Health, and Social and Behavioral Sciences.

More specifically, the academic objectives of the MPH program are designed to be in line with the Core Competencies for Public Health Professionals as described by the Council on Linkages Between Academia and Public Health Practice (Appendix C). Academic objectives and course curriculum will align with these Core Competencies in order to fully assess student mastery of the 8 Domains for entry-level work within the field of public health. The 8 Domains for entry-level work within the field of public health are: Analytical/Assessment Skills, Public Development/Program Planning Skills, Communication Skills, Cultural Competency Skills,

Community Dimensions of Practice Skills, Public Health Sciences Skills, Financial Planning and Management Skills, and Leadership and Systems Thinking Skills.

Professional Objectives

National Certification. Graduates of the program will be qualified to sit for the examination to become Certified in Public Health (CPH), which is administered by the National Board of Public Health Examiners (NBPHE). Additionally, graduate students will be qualified to sit for the Certified Health Education Specialist (CHES) examination, administered by the National Commission for Health Education Credentialing (NCHEC).

B. Evaluation and Learning Outcomes Assessment Plan

Program Level Goals

The MPH program is designed in accordance with the [CEPH 2016 Accreditation Criteria](#) standards, and will be assessed via the following methods:

- Graduates will demonstrate competence in the Foundational Public Health Knowledge learning objectives as shown in Appendix D.
- Graduates will demonstrate competence in the MPH Foundational Competencies as shown in Appendix E.
- Graduates who elect the Community Nutrition Concentration will demonstrate competence in the additional 5 Concentration-Specific Competencies:
 - Demonstrate proficiency of science-based knowledge related to basic human nutritional requirements, as well as demonstrate a clear ability to appropriately communicate nutrition-related information to professionals and the public
 - Explain the importance of cultural competency in identifying and addressing nutrition-related health disparities
 - Demonstrate how to research, analyze, and assess public health related data in order to identify nutrition-related needs within a community for the betterment of a community/population's wellness.
 - Demonstrate how to plan, develop, conduct, and evaluate nutrition-related community outreach and education programming for the better of community wellness that is conscious of budgetary and managerial requirements.
 - Engage in activities that show the development of leadership skills and competencies necessary to engage in public health promotion across all health-related systems.
- Graduates who elect the Substance Abuse Concentration will demonstrate competence in the additional 5 Concentration-Specific Competencies:
 - Demonstrate proficiency of science-based knowledge related to the biological and physiological processes in the development of addiction and substance dependency, as well as demonstrate a clear ability to appropriately communicate addiction-related information to professionals and the public

- Explain the importance of cultural competency in identifying and addressing racially-based societal influences on the development of substance abuse within a community, as well as barriers to prevention, care, and treatment
- Demonstrate how to research, analyze, and assess public health related data in order to identify substance abuse-related needs within a community for the betterment of a community/population's wellness.
- Demonstrate how to plan, develop, conduct, and evaluate community outreach and education programming for the better of community wellness that is conscious of budgetary and managerial requirements.
- Engage in activities that show the development of leadership skills and competencies necessary to engage in public health promotion across all health-related systems.
- Program faculty will evaluate the program objectives by ongoing assessment using a Systematic Evaluation Plan to track outcomes. This plan will include aggregate student assessment data that address student knowledge, skills, and professional readiness, as well as continual follow-up studies of graduates, site supervisor, and employers of MPH program graduates. This assessment data will include the percentage of graduates who choose to take and successfully pass the CHES and/or CPH credentialing examinations. This Systematic Evaluation Plan will be formulated and put into place as part of the accreditation requirements set forth by CEPH.
- Program faculty will provide evidence of the use and analysis of this evaluation data to provide insight for any necessary program modifications and/or improvements via its annual Program Director Report and the Five-Year Program Review. An annual report will be published on the program website within the School of Health Sciences, and all key stakeholders (currently matriculated students, program faculty, institutional administrators, site supervisors, employers of program graduates, etc.) will be immediately notified that the report is available. The annual report will include:
 - Summary of the Program Evaluation Results
 - Subsequent Program Modifications, as Needed
 - Any other Substantial or Significant Changes to the Program
- Faculty will annually post the number of graduates for the past academic year, pass rates on credentialing examinations, completion rates, and job placement rates (as determined by alumni surveys) on the program's website beginning after the first set of graduating students complete the program.
- All faculty will be evaluated using the IDEA survey system and will be provided with institutional procedures for administering student evaluations of faculty.
- Students will be provided with all institutional opportunities and procedures by which to evaluate program faculty and practicum/site supervisors. For practicum/site supervisors who are not affiliated as faculty within Stockton University, an additional form will be developed for students to utilize in evaluating their site. In addition, all site supervisors will be provided with a form by which to evaluate student professionalism, achievement of practicum goals/objectives, and professional readiness.
- All graduating students, during their final semester, will be given the opportunity to provide feedback on the MPH program (knowledge, skills gained, values, professional readiness, etc.) as a way to collect student perceptions and help to guide program evaluation and improvement.

C. Relationship of the Program to the Institutional Strategic Plan and its Effect on Other Programs at the Same Institution

Alignment with University Strategic Plan

The MPH program and its design, organization, and implementation will be fully aligned with the Strategic Plan of Stockton University. The Mission, Vision, and Values of the University is addressed within the Guiding Statement of the MPH program (see Appendix F). In particular, the MPH program addresses the Mission of the University by preparing future public health professionals to serve the needs of our local and state communities, as well as offer the opportunity for graduates to make an impact at the national level.

What is more, by educating and training a group of public health professionals who are versed and prepared to specifically address the unique needs, challenges, and concerns of the residents of our region, our students (and the University as a whole) will be able to improve the overall health and wellness of our regional, state, and national populations in a uniquely non-clinical manner.

Competition with Existing Programs at Stockton University

It is unlikely that the MPH program will compete with any existing graduate programs within Stockton University. Public health is uniquely designed to address the various health-related needs of a community/region/population that exist outside of the typical clinical professions (i.e. Occupational Therapy, Medicine, Nursing, Physical Therapy, Communication Disorders, Social Work, Counseling, etc.). As such, students who are considering graduate programs at Stockton University should not find themselves in a situation where they would need to choose between the MPH program and another graduate program in order to meet their specific health profession goals. Public Health is a distinctly **non-clinical** profession and would not compete with programs that are clinical in their nature.

This committee wishes to present a distinction between the MPH degree and the Master of Social Work (MSW) degree. While social work focuses on individuals, families, groups, and communities to enhance their social functioning and social roles, public health focuses on the health of the general public by studying the interaction between disruption to a community's wellbeing and the political, economic, educational, biological, and other environmental factors at play. While both fields look at the health and wellbeing of communities, social work professionals work to ensure that individual or groups are able to connect to different social services, whereas public health focuses more on driving changes in policy, research, and practice at the larger community-focused level. As such, the MPH degree program would not compete with our MSW program, as the careers and jobs available to students with an MSW degree are uniquely different from those with an MPH degree. To quote from a statement in Social Work Today which addressed the differences between these two distinct professions:

~Social workers are trained to be caseworkers and provide individual intervention, while public health professionals focus on prevention at the population level and look at the larger significance of health issues.

Additionally, this committee asserts that the MPH degree would not compete with the MA in Counseling program. The MPH program does not provide the educational or experiential requirements necessary to become a mental health professional, therapist, or counselor. This is especially important to emphasize regarding the proposed concentration in Substance Abuse. Unlike Substance Abuse Counseling, which would involve working with individuals in a clinical setting to address issues related to mental health, behavior patterns, and treatment options, a public health professional with education in substance abuse would **not** be qualified to provide this kind of care. Rather, students who elect the Substance Abuse Concentration within the MPH degree would be qualified to address the impact on the health and function of a community that is dealing with substance abuse issues, as well as address the changes to legislation, policy and education required to aid an entire community's ability to prevent and manage substance abuse-related issues. It is not anticipated that faculty from either program will be asked to teach within this program.

The MPH program will be an excellent option for graduate education for those students who are interested in entering a **non-clinical** health profession. For example, this program would be an excellent graduate option for students enrolled within the BS in Public Health Program. These graduates would most likely find the MPH program attractive and desirable in enhancing the public health education they received at the undergraduate level (see Section E for greater information on pathways for BS Public Health students to complete the MPH program). Additionally, students enrolled in the BS in Health Science (BSHS) program who are not interested in pursuing clinical careers in the health field may also find the MPH program to be an exciting and appropriate graduate program. Students from other undergraduate fields of study who may be interested in addressing the health of communities of people from a non-clinical perspective (i.e. Political Science, Communication, Economics, Sociology and Anthropology) may also be guided towards graduate education in public health. Lastly, working healthcare professionals and clinicians who wish to gain graduate education in public health (i.e. Dietitians, Nurses, Occupational Therapists, Physicians, Health Educators, etc.) may find this graduate program attractive, as well as students who wish to enter medical school.

D. Justification of Need & Regional Competition

Justification of Need

The Market Analysis provided by Hanover shows compelling information and data that indicates not only the need for public health professionals within our community, but the growth and demand of the public health job market. Please refer to the Market Analysis for complete information. This committee wishes to highlight several key points:

- 1) From 2016-2026, employment opportunities for MPH graduates are projected to increase by 17.6% in the Mideast, higher than 9.0% average growth expected for all occupations. This would equate to about 14,980 public health-related job openings each year during

this 10-year projected period. Within the state of New Jersey, this area of employment growth is projected to be high as well, approximately 14.0%.

- a. National trends also show a projected growth rate of 17.6% for public health occupations.
- 2) Between 2013 and 2017, regional master's completions in public health increased at an annualized rate of 4.1%, which is faster than the 1.4% average growth rate across all master's programs in the Mideast.
- 3) Demand trends suggest favorable conditions for a new master's in public health degree in New Jersey and the Mideast Region.

In addition to the report prepared by Hanover, the US Department of Labor Bureau of Labor Statistics estimates a 16% increase in job prospects between the years of 2016 and 2026 for Health Educators and Community and Public Health Workers, further confirming the positive growth expected for public health professionals.

A number of employers and employment settings are looking to specifically hire Certified Health Education Specialists as opposed to clinically trained nutrition and health professionals. According to the Health Education Specialist Practice Analysis (2015), the skillsets of CHES are valuable assets in a variety of career settings including: Community/Non-Profit Organizations, Government Offices and Programs, School Health, Academia/University, Business, and Outpatient Hospital/Health Care Environments. NCHEC will only evaluate academic preparation for eligibility to sit for the CHES examination, so offering an MPH program whose curriculum is aligned with the NCHEC educational requirements will be a highly valuable attribute.

Evaluation of Need and Support

To evaluate whether current Stockton University students, as well as community sites and professionals, would support an MPH program at Stockton University, a survey was distributed to current students enrolled at Stockton University, alumni of Stockton University, as well as professionals within the community. The purpose of this survey was to better determine the potential level of interest and support in a Master of Public Health program. The results of these surveys (see Appendix G), show that current students, alumni, and community professionals see value in this program, with many current students and alumni showing interest in matriculating into the MPH program once it is operational.

To summarize the survey results:

- ❖ Approximately 48.8% of alumni indicated interest in graduate school in fields related to MPH
- ❖ Alumni results show 50.77% of surveyed alumni “Somewhat Agree” to “Strongly Agree” in an interest in learning more about the MPH program
- ❖ Approximately 82.35% of surveyed current students have plans on attending graduate school after graduation.

- ❖ Approximately 80.93% of current students surveyed plan to attend graduate school within two years (or much sooner) of graduation.
- ❖ Approximately 59.66% of students surveyed show between a general interest to a strong interest in learning more about the MPH program.
- ❖ Approximately 46.02% of surveyed students showed a general consideration to a strong consideration of applying to the MPH program.
- ❖ Approximately 91.66% of surveyed site supervisors indicated “Moderately Likely” to “Extremely Likely” to have an MPH student intern at their location.
- ❖ 75% of surveyed supervisors indicated “Somewhat Agree” to “Strongly Agree” about the need for individuals with an MPH degree within our region.
- ❖ Approximately 83.33% of surveyed supervisors indicated “Somewhat Agree” to “Strongly Agree” about the need for individuals with an MPH degree within the surrounding area.
- ❖ Approximately 83.33% of surveyed supervisors indicated “Moderately Positive” to “Extremely Positive” about their attitude towards Stockton University creating this MPH program.

Competition with Programs Within the Region

A search of 4-year colleges and universities within the general area provides excellent insight as to how this MPH program would find itself situated within the region. Using an approximate radius of 125-miles, the following educational institutions offer a Master of Public Health degree:

Rutgers University (New Brunswick & Newark, NJ) – Offers a CEPH accredited MPH degree with concentrations available in Epidemiology, Social and Behavioral Health Sciences, Health Systems & Policy, Biostatistics, Urban Public Health, Environmental Health Sciences, Occupational Safety, and Global Public Health. Program is approximately 42-48 credits in length.

Montclair State University (Montclair, NJ) – Montclair University offers a CEPH accredited MPH degree. There are two concentrations available: Community Health Education and Health Systems Administration and Policy. The program is 42 credits in length.

Arcadia University (Glenside, PA) – Offers a CEPH accredited MPH degree with one concentration available in Community Health, and the only other graduate degrees offered by the College of Health Sciences is Genetic Counseling, Physical Therapy, and Medical Science.

Drexel University (Philadelphia, PA) – Offers a CEPH accredited MPH degree with concentrations available in Community Health, Environmental and Occupational Health, Epidemiology, and Health Management.

La Salle University (Philadelphia, PA) – Offers a CEPH accredited MPH degree with a specific emphasis on Health Disparities in Urban Communities. The program is approximately 51 credits in length.

Temple University (Philadelphia, PA) – Offers a CEPH accredited MPH degree with concentrations available in Biostatistics, Environmental Health, Epidemiology, Health Policy/Management, and Social and Behavioral Science.

Thomas Jefferson University (Philadelphia, PA) – Offers a CEPH accredited MPH program. No specific concentrations are offered, program is 45 credits in length.

University of Pennsylvania (Philadelphia, PA) – Offers a CEPH accredited MPH with concentrations available in Global Health, Environmental Health, and a Generalist concentration. Program is approximately 42 credits in length.

Colleges and universities that offer a degree that is potentially similar to the MPH degree are:

Rowan University (Glassboro, NJ) – Offers an MA in Wellness and Lifestyle Management. Program is focused on health and wellness coaching. Offers 1 course in program planning, no courses specifically in public health. Total program is 30-credits, single semester dedicated to Capstone project (note: this program is not CEPH accredited).

Thomas Jefferson University (Philadelphia, PA) – Offers an MS in Population Health program. A total of 39 credits in length, courses are focused in health economics, population health, health policy, and health law.

This comparison of programs within the region shows that there are no MPH programs within a 125 mile radius from Stockton University that offers an MPH degree with any significant focus or emphasis in nutrition or substance abuse. For students who may wish to pursue graduate education that provides a Master of Public Health foundation with an emphasis in community and public health nutrition, or substance abuse, there are essentially no options available within Southern New Jersey, or even in the Western and Central region of the state. Therefore, Stockton University would be a pioneer within the region by offering an MPH degree with concentrations in Community Nutrition and in Substance Abuse. According to the Market Analysis provided by Hanover:

High student demand combined with strong labor projections and low unemployment rates will likely continue to drive future demand for MPH degrees in the region. *Market Analysis, page 8.*

E. Students

Primary Student Target Populations

The primary target population for this MPH program will be individuals who have completed a bachelor's degree from an accredited college or university who are seeking to further develop and refine their skills to become more marketable professionals within the fields of public health and community health promotion. Specific and targeted marketing would focus on current Stockton University BS in Public Health students and alumni, as well as Stockton University BS in Health Science students and alumni. Additionally, individuals already working within the fields of public health care who wish to obtain graduate education in order to enhance their professional qualifications and take on greater leadership roles within their field of work, are another potential target population.

Working professionals in other fields of health care and medicine (i.e. health educators, physicians, nurses, psychologists, dietitians, etc.), as well as working professionals in fields such as public policy and health policy would be excellent candidates for the program. Additionally, those seeking to strengthen their applications for medical school admission would be a potential target population.

Offering an MPH program, housed within the School of Health Sciences at Stockton University, will allow our institution to provide a quality, graduate-level educational experience in the health field that is a non-clinical option. Unlike our current graduate-level programs in clinical fields (i.e. Physical Therapy, Occupational Therapy, Communication Disorders, and Nursing), a graduate option within the field of public health allows those who are not seeking a clinical career to gain the education and knowledge necessary to work within the broader field of public health. For those working professionals who in clinical fields (i.e. Physicians, Nurses, Dietitians, etc.) who wish to advance their education in the area of community and public health, this degree can provide them with the educational credentials and experience to expand their present career.

In order to be as attractive and accessible to as many students as possible, the program and its curriculum will not be cohort based. This program is designed to allow individuals who are part-time and full-time workers to be able to complete the program curriculum and requirements in a way that is compatible with their work and family responsibilities. Additionally, this allows students to apply for their enrollment in either the Fall or Spring semester. It is estimated that initial student enrollment will be 10-15 students in the first academic year for each concentration, with 10-15 additional students enrolling each additional year in each concentration.

Given the interdisciplinary nature of the field of public health, a variety of different eligibility criteria will be considered when reviewing applicants. Incoming students must meet one or more of the following two sets of criteria in order to be considered eligible for consideration for program admittance.

Criteria 1 – Completed Bachelor's degree with a cumulative GPA of 3.0 or higher, at least one undergraduate course in Biology **AND** one undergraduate course in Statistics;

OR

Criteria 2 – Completed Bachelor’s degree with a cumulative GPA of 3.0 or higher **AND** at least 2 years of professional experience in public health related work.

For the initial semester of the program, the enrollment goal is 10-15 students for the first academic year for each concentration. As the program continues to build and interview a greater number of students, a larger number of newly enrolled students will be expected to begin each semester.

F. Program Resources

Faculty Needs

To meet the standards set forth by The Council on Education in Public Health (CEPH), faculty must spend a majority of their time/effort (i.e. 0.50 FTE or greater) on activities associated with the program, including instruction. Research and service efforts must also be included in faculty responsibilities. Faculty must have, at a minimum, a master’s degree in a public health-related field, with appropriate experience in the concentration to which they will be designated. One Primary faculty member will be designated the MPH Program Coordinator for the MPH degree and will require release time for directing and coordinating the MPH program, including accreditation management, in accordance with the MOA in effect and CEPH requirements.

As needed, non-Primary faculty members must have, at a minimum, a graduate degree in a field related to community and public health, and relevant experience in the field of public health, with additional specialization in concentration-related courses as needed. Program faculty members who provide supervision for practicums will have relevant experiences related to the unique skillset and responsibilities associated with practicum supervision, planning, and assessment. All faculty within the program will have workloads consistent with Stockton University graduate faculty, three courses per semester.

According to page 12 of the [2016 CEPH Accreditation Criteria](#) in regards to the specific requirements surrounding the required faculty members:

Two primary instructional faculty members are required for each concentration and must be allocated to the program at 1.0 FTE and not be shared with other educational programs. For the remaining (non-primary) faculty members, they may be of any type (i.e. faculty from another university unit, adjunct faculty, part-time faculty or primary instructional faculty associated with another concentration area) provided that they meet the requirements as specified above.

This would mean that for the initial offering of this MPH program, there must be two full-time primary faculty members associated with each concentration within the graduate degree, or four full-time faculty members in total. The proposed breakdown of these four faculty members (as required by CEPH) is as follows:

Faculty Member 1 – designated to the Community Nutrition Concentration

Faculty Member 2 – designated to the Community Nutrition Concentration

Faculty Member 3 – designated to the Substance Abuse Concentration

Faculty Member 4 – designated to the Substance Abuse Concentration

This would necessitate four full-time faculty lines in total for the two concentrations within the MPH program, as put forth by CEPH accreditation standards. As needed, adjunct (non-Primary) faculty members will be hired, based on student needs and demand.

For the two Primary faculty lines needed for the Community Nutrition Concentration, Professor Anthony Dissen is expected to apply and transition from his role as a Tenure Track Instructor within the BSHS program to fill one of the faculty lines within the MPH degree. Professor Dissen is qualified for this position based on his education and credentials (please see CV in Appendix H). This transition is following a past precedent of current faculty who propose new programs and then move over to those programs once they have been approved. For example, Patrick Hossay with Sustainability, Kelly Dougherty with Exercise Science, and Donnie Allison with Africana Studies. It is understood that the founding the director will be a faculty member who is eligible for the position according to the MOA.

If the proposed MPH is approved, it would require an approved Search for 1 additional faculty member within the Community Nutrition concentration. For the two Primary faculty lines needed for the Substance Abuse concentration, Searches for 2 faculty members would be required. This would require 4 tenure track searches to take place to deliver both concentrations.

In accordance with the guidelines put forth in the *Memorandum of Agreement: Coordinators and Other Designated Faculty In Leadership Roles*, a Primary program faculty member from either concentration will be selected to serve as graduate Program Coordinator.

Program Location & Delivery

The MPH program will be housed within the School of Health Sciences. The delivery of course instruction will take place in a hybrid format, with 3 of the required core MPH courses being offered in-person in a 1-week intensive format each summer. This would equate to 20% of the courses being offered in this 1-week intensive, in-person format, and the remaining 80% being offered online. To ensure high quality design and delivery of online courses, faculty will work in concert with the Center for Learning Design to ensure best-practices in providing online delivery of courses. The summer intensive course will be offered prior to June 30th each summer to ensure that this course will fall within the 10-month full-time faculty teaching contract timeframe.

This method of program delivery is supported by the Market Analysis prepared by Hanover, which states:

Consider an online or hybrid delivery format. From 2013 to 2017, the number of public health master's programs offering a distance learning format grew faster than the number of programs offered only on-campus. These trends may suggest emerging student demand for a distance format. Offering an online or hybrid option would also allow

Stockton to effectively market the program to working professionals. *Market Analysis, page 3.*

The 3 on-campus courses (Cultural Competency & Health Disparities, Health Care in the United States, and Current Issues in Public Health) will be taught at the Atlantic City (AC) Campus location. This will allow those courses to invite in community partners, working professionals, legislatures, and other key individuals from the Atlantic City community to enhance the quality and the richness of the educational material being shared in these courses. Additionally, this will allow for this graduate program to develop connections and relationships within the AC community and serve Stockton University's goal to serve the AC region. As needed, optional lodging for students during the summer intensive will be made available.

All other courses will be delivered in an online format. The reason for this is to remain competitive with the ever-increasing number of Master of Public Health programs that are being offered fully online. By offering our remaining course curriculum via an online delivery format, it allows us to 1) increase our outreach to potential students throughout the region that may otherwise be limited geographically to attend courses on campus in a regular way, and 2) be more accommodating to those students who work full-time or even part-time jobs that would otherwise prevent their ability to physically attend courses at our physical campus location each semester. Course curriculum can be offered and delivered via either synchronous or asynchronous components per the course instructor's preference. Offering the MPH coursework with a blend of in-person and online delivery formats is fully supported within the guidelines of CEPH accreditation standards and requirements.

Necessary Materials & Resources

The only materials and resources necessary for the MPH program are faculty access to dedicated office spaces in order to carry out their course offerings and work that are comparable any full-time faculty members within the University. Online course delivery will be offered via the Blackboard platform software, which can also be utilized for offering synchronous curriculum delivery (i.e. Blackboard Collaborate), which is already included within basic IT offerings at the University.

All other necessary materials and resources (i.e. Stockton University Library Databases, Computer and Telecommunication Services, Internet Access, etc.) are already available and can be accessed by faculty and students alike. All faculty members will have access to computers and printers. Our current Library journal subscriptions meet what would be required and needed by students. The following is a sample of relevant subscriptions currently held by Stockton's library:

- Journal of Public Health Medicine
- Journal of Public Health
- American Journal of Public Health
- PubMed
- Environmental Health Perspectives
- Health Education
- Health Promotion International

- Health Informatics Journal
- Science & Medicine
- Journal of Substance Abuse Treatment
- Journal of Ethnicity in Substance Abuse
- Nutrition
- Journal of Nutrition Education and Behavior

Additionally, faculty will be able to rely upon inter-library loan and open-access resources.

For those required courses that will be offered on the AC campus during the summer semester, lecture room space on the AC campus will be required. However, no other equipment or materials (i.e. lab space, physical technology, simulation suites, etc.) are necessary.

To seek CEPH accreditation for both undergraduate and graduate together, the initial accrediting fee schedule (as of 2019) is as follows:

Accreditation Step	Associated Fee
Initial Application Submission Fee	\$1,000
Applicant Fee for a Public Health Program	\$2,500
Accreditation Review Fee (Preliminary Self-Study & Site-Visit)	\$3,000
Total Initial Accreditation Costs	\$6,500

Additionally, a \$4,472 Annual Support Fee will be due each calendar year as part of CEPH's requirements for a Public Health Program offering two-degree levels (Master's Degree & Baccalaureate Degree). This annual fee will go into effect after accreditation has been granted. The application process for accreditation can begin once faculty can project the graduation date for at least one student in each concentration. This process allows us to receive retroactive accreditation to the date of the original application. Any additional fees for ongoing re-accreditation would be based on whatever the accrediting body requires moving forward into the future.

G. Degree Requirements

Program Overview

Students must complete a total of 45 credit hours to satisfy the curriculum criteria outlined below. All courses must be completed with a final grade of "B" or higher. Additionally, all students must complete a 200-hour practicum that is related to their concentration or area of interest within public health. To reiterate, there will be 3 courses offered each summer that will be delivered in an in-person format. Those courses marked with an asterisk (*) are those that will be offered in a 1-week intensive, on-campus format in the summer semesters that will be delivered prior to June 30th to remain within the 10-month contract of faculty. Precedence has been set for graduate programs here at Stockton that require summer internships, clinical rotations, fieldwork and / or classes over the summer. It is understood that full-time faculty are not required to teach in the summer. It is also understood that faculty will need to meet

Stockton's General Studies requirements. All other courses will be offered in an online format.

Below is the list of required core courses for the MPH program, followed by the required courses for each of the two proposed concentrations. All courses will be 3-credits. Students enrolled will have the opportunity to complete the program in a part-time or full-time status, based on their need for financial aid (requisite number of credits per semester would be 9-credits, or 3 courses), work availability, and overall availability of time to dedicate to the program coursework. See Appendix I for sample course descriptions and course mapping and see Appendix J for curriculum mapping to CEPH accreditation standards and Council on Linkages standards.

MPH Required Core Courses

Public Health Core Courses
Cultural Competency & Health Disparities*
Environmental Public Health
Biostatistics
Epidemiology
Grant Writing
Health Care in the United States*
Current Issues in Public Health*

Total Credits: 21

Community Nutrition Concentration Courses
Foundations of Human Nutrition
Community & Public Health Nutrition
Food Safety
Community Health Education: Theory & Practice
Community Health Program Planning, Assessment, and Evaluation

Concentration Total Credits: 15

Substance Abuse Concentration Courses
The Biology of Addiction & Substance Abuse
Health Policy & Advocacy
Public Health Approaches to Understanding Substance Abuse
Legal & Ethical Issues in Substance Abuse
Substance Abuse & Addiction Across the Lifespan

Concentration Total Credits: 15

Concentration Practicum
200-hour Field Practicum
Capstone Experience

Capstone I – Planning & Proposal
Capstone II – Project Implementation & Evaluation

Total Credits: 9

Total Program Credits: 45 credits

Course descriptions and course map can be found in Appendix I and Appendix J, which demonstrates alignment between course curriculum and the Core Competencies for Public Health Professionals and CEPH Accreditation Requirements.

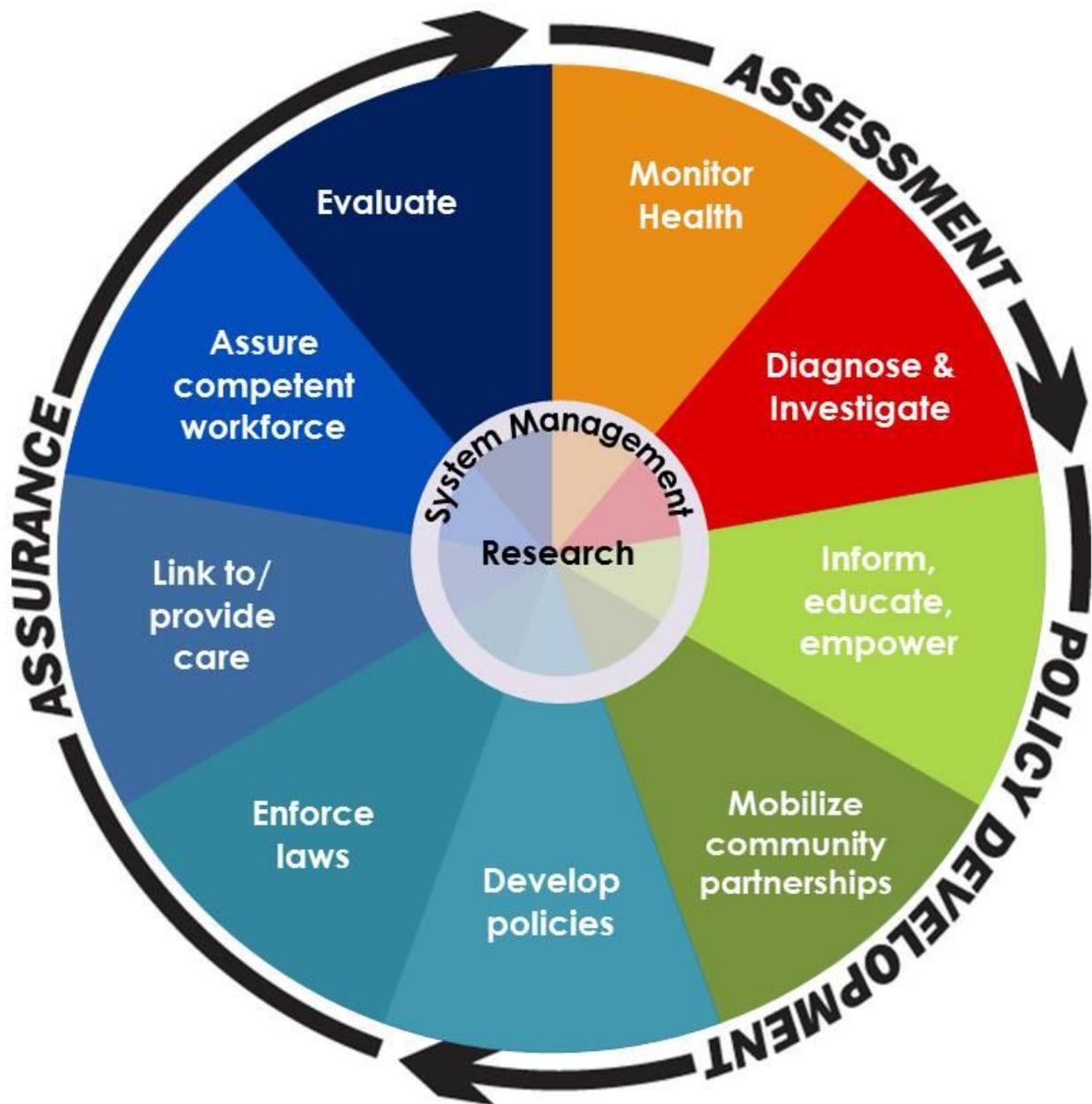
200-Hour Practicum

Students are required by CEPH to complete a minimum of 200 hours of a Public Health Practicum (aka Internship). Students will be eligible to enroll in the Concentration Practicum after they have completed at least 21 credits within the MPH program. Practicum experience can take place in a number of different settings including Food Banks, Health Agencies (local, state, and federal), Hospitals, Academic Settings, Non-Profit Organizations, Governmental Offices, and Wellness Centers, providing that the nature of the practicum experience is fully in line with meeting all necessary objectives. Practicum can be completed at the same location at which a student may already be employed if the practicum experience falls outside of their already assigned work responsibilities. Practicum experiences can be paid or unpaid. Students will confirm their practicum site and project with their practicum faculty member. For students who are local to the region, local practicums that focus on public health needs of the Atlantic City and Galloway areas will be encouraged. The graduate internship will be implemented using the same process as the undergraduate internship (a process which has been in place for the last 12 years). We do not anticipate a need for additional resources at this time, the faculty and office staff can handle the administrative aspect of the internship. In addition, the current public health internship coordinator will oversee the graduate internship. In the long-term future, if numbers increase greatly, this may need to be re-evaluated.

Accreditation

Accreditation will be sought from the Council on Education for Public Health (CEPH). To begin the process of applying for accreditation, the program will need to have been in operation for approximately 3-5 years in order to gather the necessary data and information required of new programs seeking accreditation. Once the application is submitted, it will take approximately 1 additional year to include time for site visits, institutional responses, and ultimate approval by CEPH. The self-evaluation and program evaluation/data collection will begin in the month the program begins to enroll students. Full details on accreditation procedures can be found in the [CEPH 2017 Procedures Document](#). The application process for accreditation can begin once faculty can project the graduation date for at least one student in each concentration. This process allows us to receive retroactive accreditation to the date of the original application for the graduate program. The accreditation process for both the undergraduate and the graduate program occur at the same time. A more formalized timeline cannot be predicted until the MPH program is approved and ready to begin admitting students, for only then can a consultant from CEPH be brought on to begin the process of seeking accreditation. Once this process begins, it will be possible to more specifically estimate a timeline as to when the MPH program will become fully accredited.

Appendix A. 10 Essential Public Health Services



Appendix B. Hanover Report

Market Analysis: Master's in Public Health

Prepared for Stockton University

April 2019

In the following report, Hanover assesses demand for master's degree programs in public health, specifically highlighting demand trends within the Mideast region. This report includes an examination of student and labor market demand and an analysis of potential competitor programs.



<u>Executive Summary</u>	<u>Page 3</u>
<u>Degree Completions Analysis: Public Health Master's Degrees</u>	<u>Page 4</u>
<u>Degree Completions Analysis: Concentration Fields</u>	<u>Page 5</u>
<u>Labor Market Analysis</u>	<u>Page 6</u>
<u>Real-Time Job Postings Intelligence</u>	<u>Page 7</u>
<u>Competitor Analysis</u>	<u>Page 8</u>
<u>Competitor Overview: Program Fast Facts and Tuition</u>	<u>Page 9</u>
<u>Competitor Overview: Curriculum Trends</u>	<u>Page 10</u>
<u>Online Program Profile: Temple University</u>	<u>Page 11</u>
<u>Program Benchmarking: New Jersey</u>	<u>Page 12</u>
<u>Program Benchmarking: Greater Philadelphia</u>	<u>Page 13-14</u>

Executive Summary

Master's in Public Health

Recommendations

Based on an analysis of degree completions, labor market demand, and market competitors, Hanover recommends that Stockton University (Stockton):

① **Develop a master's program in public health.** Student demand for master's degrees in public health has experienced above-average growth in the Mideast region. Employment projections indicate strong labor demand for public health professionals, which will likely support future student demand.

② **Offer concentrations in nutrition and substance abuse.** Among potential concentration areas, student completions in these fields have grown rapidly in recent years. Only one local competitor institution offers a concentration in nutrition, and no MPH programs in New Jersey or Philadelphia offer a concentration in substance abuse. This presents Stockton with an opportunity to distinguish its program. Other promising concentrations are biostatistics, health services administration, and healthcare management.

③ **Consider an online or hybrid delivery format.** From 2013 to 2017, the number of public health master's programs offering a distance learning format grew faster than the number of programs offered only on-campus. These trends

may suggest emerging student demand for a distance format. Offering an online or hybrid option would also allow Stockton to effectively market the program to working professionals.

Fast Facts



4.1%

Annualized growth in public health master's conferrals in the Mideast region from 2013 to 2017.



17.6%

Projected regional employment growth in public health-related occupations from 2016 to 2026.



18.9%

Annualized growth in regional substance abuse/addiction counseling master's conferrals from 2013 to 2017.

Regional Benchmark Analysis

Comparison of public health master's completions and relevant labor market to all completions and all occupations in the Mideast region



Annualized Degree Completions Growth Rate, 2013-2017

Key Findings and Program Demand Forecast

For master's in public health programs in the Mideast region

Demand trends suggest favorable conditions for a new master's in public health degree in New Jersey and the Mideast Region. From 2013 to 2017, master's conferrals have experienced above-average growth regionally and nationally. Labor demand for public health professionals is projected to grow far above the average at all geographic levels, with a 17.6% expected increase in employment in the Mideast. **Nine out of 10 local MPH programs maintain accreditation from the Council on Education for Public Health (CEPH).** CEPH accredits over 200 public health schools and programs, and the organization is currently reviewing applications from 54 other

institutions. This suggests that CEPH accreditation is standard among master's in public health programs. Stockton should factor this in its decision to develop the proposed program. **Only three competitors in the region target working professionals.** Over half of all local competitors allow students to enroll part-time, yet none explicitly target working professionals on their program's landing page. Temple University, Montclair State University, and Thomas Jefferson University are the only competitors that market directly to working professionals elsewhere on their program website. This provides

Executive Summary

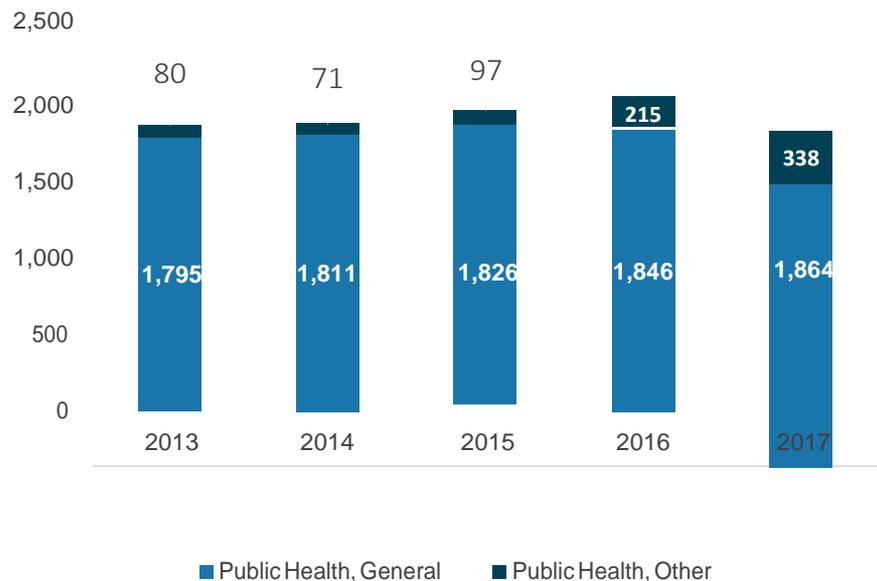
Master's in Public Health



an opportunity to differentiate its marketing messaging.

Regional Degree Completions Volume

Regional distribution of master's degree completions from 2013 to 2017



Total Degree Completions

Aggregate master's degree completions by geographic level (2017)

	State	Region	National
Public Health, General	111	1,864	9,442
Public Health, Other	0	338	857
Total	111	2,202	10,299
Growth Rate	-8.7%	4.1%	5.4%

Analysis of Findings

Student demand for master's degrees in public health has experienced above-average growth in the Mideast region.

From 2013 to 2017, regional master's completions in public health fields increased at an annualized rate of 4.1 percent. This is faster than the 1.4 percent average growth rate observed across all master's programs in the Mideast. While master in public health (MPH) conferrals experienced an annualized decline of 8.7 percent in New Jersey, this decrease is driven by the closure of the University of Medicine and Dentistry of New Jersey (UMDNJ) in 2013. After accounting for UMDNJ's departure from the state market, the annual growth

rate for MPH completions rises to 5.4 percent for New Jersey. National trends are similarly favorable. Public health master's completions experienced an annualized increase of 5.4 percent, faster than the 1.6 average growth observed across all master's programs in the nation.

The proportion of MPH programs reporting a distance learning option is growing.

In the Mideast, the number of programs reporting master's completions under public health degree fields grew at an annualized rate of 1.0 percent. Over the same period, the number of programs indicating that they offer a distance learning option increased by 30.3 percent. In 2013, there were only four programs reporting a distance learning option, representing less than nine percent of all MPH programs in the region. By 2017, the number of distance learning programs rose to 12, corresponding to nearly a quarter of all MPH programs. These trends suggest strong demand for online and hybrid delivery formats. Nonetheless, Montclair State University offers the only MPH in New Jersey with online and hybrid courses. This indicates that Stockton could be a first-mover in New Jersey's distance learning market for public health.

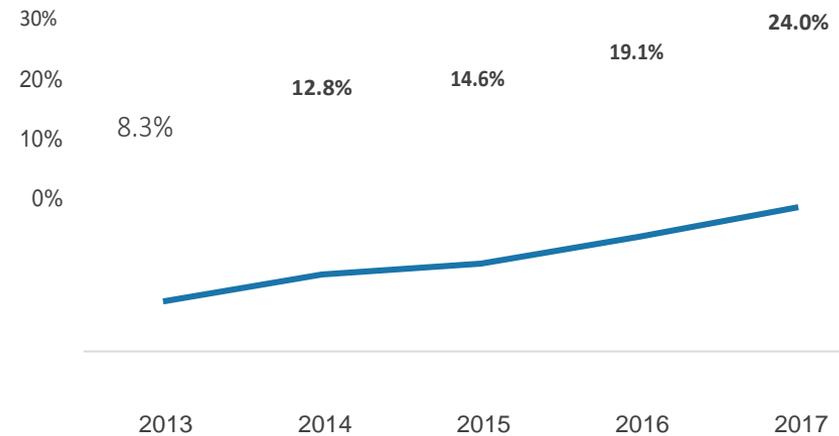
Source: [IPEDS](#)

Methodology Note

States included in the Mideast region are Delaware, the District of Columbia, Maryland, New Jersey, New York, and Pennsylvania.

Proportion of Distance Learning Programs

Proportion of public health master's programs reporting a distance learning option from 2013 to 2017

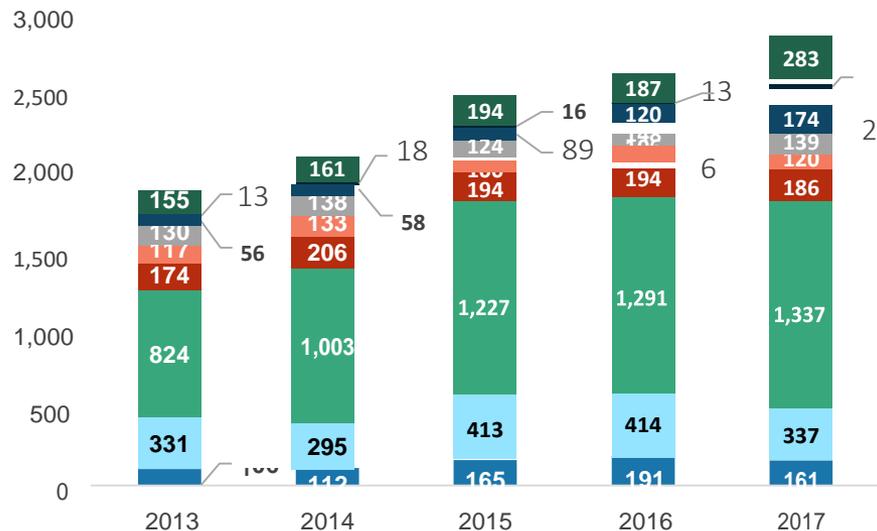


Degree Completions Analysis: Concentration Areas

Master's in Public Health

Regional Degree Completions Volume

Regional distribution of master's degree completions from 2013 to 2017



- Nutrition Sciences
- Substance Abuse/Addiction Counseling
- Health Services Administration
- International Public Health/International Health
- Public Health Education and Promotion
- Environmental Health
- Health/Health Care Administration/Management
- Epidemiology
- Biostatistics

Analysis of Findings

Concentration areas associated with public health have experienced strong growth in recent years, especially health administration, substance abuse counseling, nutrition, and biostatistics.

The graph to the left and the table below show student conferral data for the fields closest to Stockton's proposed concentrations, as well as common concentrations among MPH programs. While the data represent all master's conferrals in each degree field, these trends can be used as a proxy for student demand for MPH concentrations.

From 2013 to 2017, master's completions in all related degree fields experienced above-average growth at all geographic levels, with particularly strong growth in the Mideast (9.7 percent). At the regional level, the fastest growth is observed in health services administration (32.8 percent), substance abuse/addiction counseling (18.9), nutrition sciences (16.2), healthcare management (12.9), and biostatistics (11.0). With the exception of healthcare management, the total volume of conferrals in these fields remains relatively low. Completions in public health education experienced muted growth over the same period (0.6 percent), indicating relatively weak student demand for this concentration area.

Source: [IPEDS](#)

Methodology Note

To measure student demand for Stockton's concentration areas of interest, Hanover selected the most relevant and most established degree fields by conferral volume and growth for each concentration. The closest available CIP code for substance abuse is Substance Abuse/Addiction Counseling (51.1501). Hanover also added CIP codes for other common concentrations among MPH programs. A complete list of CIP codes and their descriptions is published by the [National Center for Education Statistics](#).

Degree Completions Analysis: Concentration Areas

Master's in Public Health

Total Degree Completions

Aggregate master's degree completions by geographic level (2017)

	State	Region	National
Biostatistics	7	161	681
Epidemiology	0	337	1,312
Health/Health Care Administration/Management	103	1,337	9,619
Environmental Health	0	186	641
Public Health Education and Promotion	3	120	877
International Public Health/International Health	0	139	540
Health Services Administration	0	174	891
Substance Abuse/Addiction Counseling	0	26	390
Nutrition Sciences	3	283	1,016
Total	116	2,763	15,967
Growth Rate	6.8%	9.7%	6.4%

Regional Current and Projected Job Availability

Regional public health-related positions as of 2016 and 2026 (projected)



Total Labor Market

Aggregate public health-related job availability by geographic level

	State	Region	National
Estimated Employment (2016)	19,580	135,010	752,400
Projected Employment (2026)	22,320	158,820	884,700
10-Year Growth Rate	14.0%	17.6%	17.6%
Total Annual Openings	1,950	14,980	83,100

Source: [Projections Central](#)

Analysis of Findings

Employment in public health-related occupations is projected to experience

above-average growth at all geographic levels.

From 2016 to 2026, employment opportunities for MPH graduates are projected to increase by 17.6 percent in the Mideast, higher than the 9.0 percent average growth expected for all occupations. This corresponds to 14,980 public health-related job openings each year. Employment growth is also strong in New Jersey, with a projected increase of 14.0 percent. National trends are similarly favorable, with a projected growth rate of 17.6 percent for public health occupations, well above the national average for all occupations.

Regionally, Substance Abuse and Behavioral Disorder Counselors will experience the fastest employment growth among public health professionals.

At all geographic levels, Medical and Health Services Managers will continue to account for the majority of the public health workforce. Nonetheless, Substance Abuse and Behavioral Disorder Counselors are projected to experience the fastest employment growth regionally (21.6 percent) and nationally (23.2 percent).

According to the Bureau of Labor Statistics ([BLS](#)), this growth is driven by state criminal justice systems, which now commonly require that drug offenders attend treatment and

counseling programs as part of their sentence. Additionally, there will be a continued need for counselors to work with military veterans. The [National Institute on Drug Abuse](#) estimates that 7.1 million individuals in the US are dependent on or abuse illicit drugs, yet only 15 percent receive treatment. The organization highlights that new healthcare technologies and legislation, such as the Excellence in Mental Health Act, have produced “unprecedented opportunities” for substance use disorder research and treatment. To work in private practice, counselors must obtain state licensure. Requirements vary by state, but all [states require](#) that counselors hold a master’s degree, complete 2,000 to 4,000 hours of supervised clinical work, and pass a state-issued exam.

New Jersey Job Postings Analysis

State public health-related positions by occupational group during the past 180 days as of April 2018



New Jersey Employment Facts

State public health-related positions by occupational group

Analysis of Findings

Nearly all recent public health job openings in New Jersey are for Medical and

Health Services Managers.

Over the past 180 days, JobsEQ identified 7,303 public health job openings in the state. Of these, nearly 84 percent are for Medical and Health Services Managers. According to the [BLS](#), demand for health services managers is expected to increase as the baby-boomer population ages and people remain active later in life. While a bachelor's degree is usually the minimum education required for this position, master's degrees are common. Professionals with master's degrees in health administration or a related field and knowledge of healthcare information technology systems are expected to have the most promising job prospects.

MPH graduates will likely find the most opportunities in Princeton and Newark.

Among job postings that specify a location, Princeton and Newark are the most commonly listed areas in New Jersey. Within the local South Jersey area, Camden offers the most job opportunities for MPH graduates. The top employers in South Jersey are Cooper University, Centers Health Care, Trinity Health, Genesis Healthcare, and BAYADA Home Health Care. The most in-demand hard skills for job postings in New Jersey include computer programming, business development, teaching, and Spanish language ability.

Occupation	Average Salary		Unemployment Rate	
	New Jersey	U.S.	New Jersey	U.S.
Medical and Health Services Managers	\$118,300	\$111,700	1.2%	1.3%
Epidemiologists	\$103,500	\$76,200	0.7%	0.8%
Environmental Scientists and Specialists, Including Health	\$86,700	\$76,200	1.9%	2.1%
Occupational Health and Safety Specialists	\$80,200	\$73,600	2.8%	13.0%
Health Educators	\$60,800	\$59,000	1.7%	1.9%
Substance Abuse and Behavioral Disorder Counselors	\$57,200	\$46,600	1.7%	1.9%
Community Health Workers	\$51,500	\$42,300	3.4%	3.8%

Source: [JobsEQ](#) and [BLS](#)



Top Employers in New Jersey

1. Hackensack Meridian Health
2. Barnabas Health
3. Bristol-Myers Squibb
4. Johnson & Johnson
5. Novartis



Top Hard Skills in New Jersey

1. Computer Programming/Coding
2. Business Development
3. Teaching/Training, Job
4. Spanish
5. Change Management

Competitor Analysis

Based on an analysis of regional peers, Hanover concludes the following:

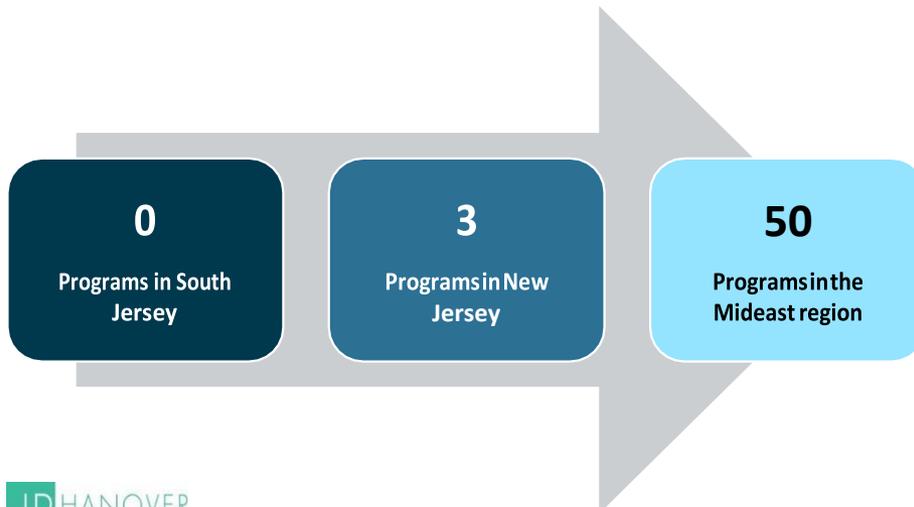
Regional market conditions indicate a viable market for Stockton's proposed MPH program.

From 2013 to 2017, public health master's *completions* increased at an annualized rate of 4.1 percent in the Mideast region, faster than the average for all regional master's programs (1.4 percent). This indicates strong student demand in favor of an additional program. The number of relevant *programs* in the region grew at a slower rate of 1.0 percent. High student demand combined with strong labor projections and low unemployment rates will likely continue to drive future demand for MPH degrees in the region. Additionally, less than a quarter of programs in the region offer a distance learning option. If Stockton pursues a hybrid or online delivery format, this would distinguish its program from others in the market.

To provide Stockton with a better understanding of the competitor landscape, Hanover benchmarked 10 regional institutions offering master's degrees in public health. Programs were selected based on conferral volume (2017), conferral growth (2013-2017), and proximity to Stockton University. More details on each program can be found in the tables on pages 12 to 14.

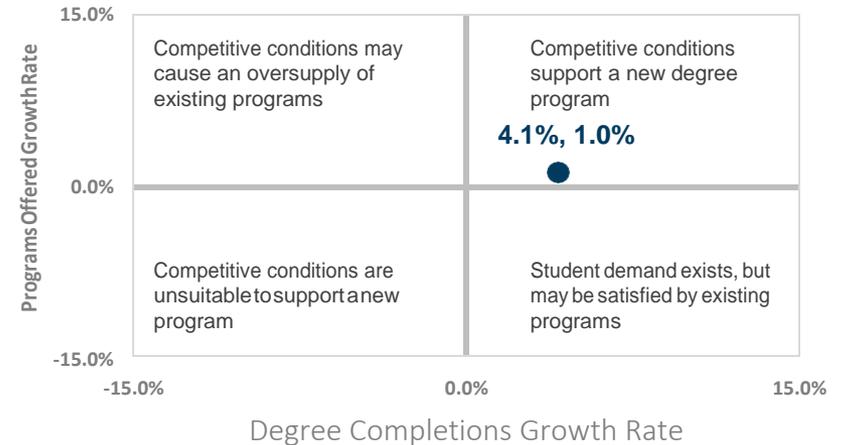
Number of Programs by Geographic Level

The number of public health master's programs in the local area, state, and region (2017)



Regional Market Saturation (2013-2017)

Within the Mideast, do competitive conditions support an additional MPH program?



Map of Competitors

The location of benchmarked programs (blue markers) relative to Stockton (red marker)



Source: Google Maps

Program Fast Facts



Distance learning formats are uncommon among benchmarked programs. West Chester University (West Chester) and Montclair State University (Montclair) are the only benchmarked competitors that have hybrid delivery options. While Montclair does not explicitly market its MPH as a distance learning program, its [website](#) notes that “courses within the program may be offered fully or partly online.” Temple University (Temple) is the only competitor that offers a fully online MPH. This suggests that there is likely an opening in the regional market for an additional online or hybrid MPH.



Three competitors target working professionals. Though over half of benchmarked programs allow students to study part-time, no competitors explicitly market their MPH degrees to working professionals. Temple’s College of Public Health advertises convenient class times for working professionals on its “[About Us](#)” webpage, and Montclair states that its MPH was designed with working professionals in mind on its program [FAQ](#) page. Thomas Jefferson University (Thomas Jefferson) does not explicitly mention working professionals, but notes that students can take [one course at a time](#) for continued work. This presents Stockton with an opportunity to differentiate its marketing messaging from regional competitors.



Nine out of 10 benchmarked programs maintain accreditation from the Council on Education for Public Health (CEPH). The College of New Jersey is the only benchmarked competitor that does not hold CEPH accreditation. Among competitors that maintain accreditation, the majority advertise this status on their program landing page. CEPH currently [accredits](#) over 200 public health schools and programs (bachelor’s and master’s) and is [reviewing applications](#) from 54 educational institution. Twenty of these applications were [submitted in 2017](#). These trends indicate that obtaining CEPH accreditation may be an important consideration in developing a MPH program.

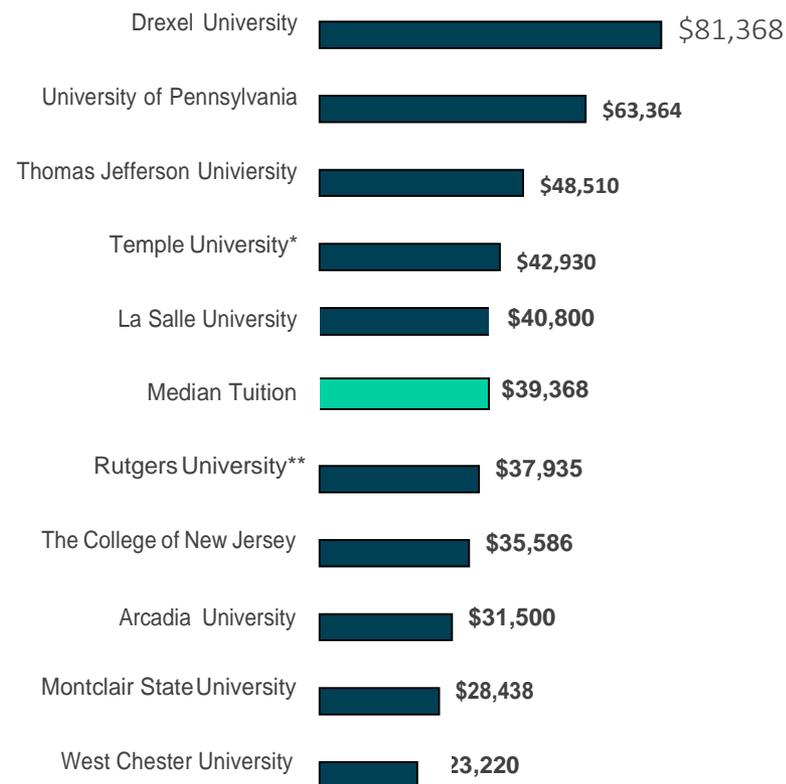


Few programs advertise a curricular focus. Only three benchmarked different focus. Montclair markets an emphasis on population health, Arcadia University’s (Arcadia) MPH focuses on community health, and La Salle University (La Salle) indicates an emphasis on health disparities in urban

Total Program Tuition

Stockton faces a favorable tuition landscape.

The median tuition among benchmarked competitors is \$39,368. This number is based on the in-state, on-campus tuition rate at competitor institutions and excludes fees. Based on Stockton’s on-campus, graduate per-credit rate ([\\$623.69](#)), a 45-credit MPH program would have a total cost of roughly \$28,066. The only competitor with a lower tuition cost is West Chester (\$23,220).



Competitor Overview: Program Fast Facts and Tuition

Master's in Public Health

Source: Institutional Websites. Note: *Tuition estimate is based on part-time, per-credit rate. **Tuition estimate assumes 45 credits for completion.

Competitor Overview: Curriculum Trends

Master's in Public Health

Concentrations

Seven programs provide students with the opportunity to pursue a concentration, and one program offers an embedded specialization in community health.

Arcadia's curriculum includes a required three-course specialization in community health. The program offers no additional concentrations, but allows students to complete six elective credits. Among competitors that provide students with the opportunity to choose a concentration, the number of concentration options ranges from a low of two at Montclair to a high of eight at Rutgers University (Rutgers). Half of benchmarked competitors offer three or four concentrations. Rutgers offers the only MPH program that allows students to pursue two concentrations.

Half of benchmarked competitors offer a concentration in health management and policy, while none offer concentrations in substance abuse.

The two most common concentrations are health systems, management, and policy (offered by five programs) and environmental health sciences (offered by four programs). Other common specialization options (offered by three programs each) are shown in the figure to the right. Less common concentrations include nutrition, precision health, health communication, and health education. No competitors offer a substance abuse concentration, providing Stockton with an opportunity to distinguish its MPH program.

Program Structure

The median minimum credits required for completion among benchmarked programs is 45.

Half of competitors require 45 credits, and almost all credit requirements fall within the range of 42 to 48. The University of Pennsylvania (UPenn) is an outlier among benchmarked programs, with only 14 required credits. However, this is due to the fact that each course within its MPH curriculum counts for one "credit." Drexel University has the highest requirement among competitors at 56 credits.

Though all programs require fieldwork experience in accordance with CEPH accreditation standards, the number of required hours varies across competitors.

Among the seven programs that publish details on their fieldwork component, the median number of required hours is 125. While four competitors require that students complete 120 to 125 hours, three competitors require more than 200 hours. Rutgers has the most extensive fieldwork experience, requiring students to complete 400 hours.

Common Concentrations



Health Systems, Management, and Policy



Environmental Health Sciences



Community Health



Epidemiology



Global Public Health

Source: Institutional Websites.

2

Programs offer an **accelerated 5-year** bachelor's to MPH program: *The College of New Jersey and West Chester University*



3

Competitors offer MPH **dual degree** programs: *Arcadia University, Drexel University, and Temple University*



Sample Curriculum: Online MPH in Health Policy and Management

Year 1 – 18 credits, 3 credits per course
Leadership and Management in Non-Profit Organizations (Fall) Fundamentals of Public Health (Fall) Fundamental of Epidemiology (Spring) Political and Economic Aspects of Health (Spring) Biostatistics (Summer) Theoretical Foundations of Health Behavior (Summer)
Year 2 – 18 credits, 3 credits per course
Environmental Health (Fall) Technology for Population Health* (Fall) Public Health Program Evaluation* (Spring) Public Health Program Planning* (Spring) Health Economics (Summer) Public Health Policy and Legal Issues (Summer)
Year 3 – 9 credit hours, 3 credits per course
MPH Fieldwork I (Fall) Elective (Fall) MPH Fieldwork II (Spring)
Total Credits: 45

Source: [Temple University](#). Note: *Course is not part of on-campus MPH in Health Policy and Management program.

“Temple’s online MPH is built for working professionals who want the same high-quality education that Temple offers in its in-person program... Perfect for students returning to the classroom while balancing work and family.”

Program Overview



3

Years required for program completion. Students enroll on a part-time basis.



45

Credits required, the same number as the on-campus program.



\$975

Per-credit tuition for online MPH. This is slightly higher than the \$954 per-credit rate for the on-campus MPH.

Temple University Program Characteristics

Online courses are accelerated and taught by the same faculty as on-campus courses.

In marketing its [online MPH](#), Temple emphasizes program quality and the convenience of online learning. Courses are taught by the same public health faculty, and a low student-to-faculty ratio provides “personalized instruction and advising” opportunities. Students move through the program asynchronously, allowing for flexible scheduling. Courses are delivered in an accelerated, six-week format, and are available via live streaming to provide students with the opportunity to connect with their professors.

The curriculum and available concentrations differ for online and on-campus students.

While Temple’s on-campus MPH offers four potential concentrations to students, the online MPH has only two: Health Policy and Management and Social and Behavioral Science. Online students are required to complete a “local fieldwork experience” similar to on-campus students; however, online students do not have to take the College of Public Health’s [core course](#) in Current and Emerging Issues in Public Health and Health Professions. Additionally, as noted in the table to the left, concentration requirements differ across delivery method.



Available On-campus Resources

- University libraries
- Writing center
- Career center

Master's in Public Health Competitor Benchmarking

Benchmarked programs are institutions located in New Jersey, offering a master's in public health.

Institution	Location	Program	Conferrals (2017)	Growth Rate (2013-2017)	Concentrations	Credits	Delivery Mode	Tuition	Accreditation	Notable Features
Rutgers University	New Brunswick, NJ	Master's in Public Health (MPH)	93*	23.5%*	<ul style="list-style-type: none"> • Biostatistics • Environmental Health Sciences • Epidemiology • Global Public Health • Health Systems & Policy • Public Health Nutrition • Occupational Safety & Health • Social & Behavioral Sciences 	45-48	On-campus	\$37,935**	CEPH	<ul style="list-style-type: none"> • Students can count up to 6 credits towards a certificate, including options in population health, maternal and child health, and urban public health • Students can pursue two concentrations • Preventative medicine residency program for physicians • 400-hour fieldwork requirement • Practicum capstone project
Montclair State University	Montclair, NJ	MPH	18	4.7%	<ul style="list-style-type: none"> • Community Health Education • Health Systems Administration & Policy 	42	Hybrid	\$28,438	CEPH	<ul style="list-style-type: none"> • Population health focus • Part-time or full-time study • Designed for the working adult: most courses offered in the evening and some on Saturdays • 360-hour fieldwork requirement
The College of New Jersey	Ewing, NJ	MPH	--	--	<ul style="list-style-type: none"> • Precision Health • Health Communication • Global Health 	45	On-campus	\$35,586	--	<ul style="list-style-type: none"> • Bachelor's/MPH 4+1 accelerated programs • Part-time (4 to 5 years) or full-time study (2 years) • 40+ partners that "provide rich professional opportunities" • 120-hour fieldwork requirement • Capstone project

Source: Institutional Websites. Note: *Rutgers also reported MPH completions at its Camden and Newark locations through 2015. The program's current website indicates that the program is still in operation at the Newark campus, but not in Camden. **Assuming 45 credits for completion.

Master's in Public Health Competitor Benchmarking

Benchmarked programs are institutions located in Philadelphia, offering a master's in public health. Programs were selected based on conferral volume (2017), conferral growth (2013-2017), and proximity to Philadelphia and Stockton.

Institution	Location	Program	Conferrals (2017)	Growth Rate (2013-2017)	Concentrations or Tracks	Credits	Delivery Mode	Tuition	Accreditation	Notable Features
Arcadia University	Glenside, PA	MPH	29	3.8%	<ul style="list-style-type: none"> Community Health (required) 	42	On-campus	\$31,500	CEPH	<ul style="list-style-type: none"> Four dual degree programs such as MPH/Physician Assistant Focus on community health Students are eligible to sit for the national Certified in Public Health (CPH) and the national Certified Health Education Specialist exam Opportunity to pursue international service projects and internships Required fieldwork experience Capstone project
Drexel University*	Philadelphia, PA	MPH	53	-19.0%	<ul style="list-style-type: none"> Community Health and Prevention Environmental and Occupational Health Epidemiology Health Management and Policy 	56	On-campus	\$81,368	CEPH	<ul style="list-style-type: none"> 21-month Executive MPH program Three dual degree programs, including MPH/Master of Business Administration Part-time or full-time (5 quarters) study 120 to 240-hour fieldwork requirement Additional field-based experienced required once a month, such as short-term volunteer opportunities Capstone project
La Salle University	Philadelphia, PA	MPH	17	20.7%	--	48	On-campus	\$40,800	CEPH	<ul style="list-style-type: none"> Focus on health disparities in urban communities 2- and 3- year tracks 200-hour fieldwork requirement Capstone project

Source: Institutional Websites. Note: *Drexel University redesigned its MPH curriculum in 2017.

Master's in Public Health Competitor Benchmarking

Benchmarked programs are institutions located in Philadelphia, offering a master's in public health. Programs were selected based on conferral volume (2017), conferral growth (2013-2017), and proximity to Philadelphia and Stockton.

Institution	Location	Program	Conferrals (2017)	Growth Rate (2013-2017)	Concentrations or Tracks	Credits	Delivery Mode	Tuition	Accreditation	Notable Features
Temple University	Philadelphia, PA	MPH	24	-4.6%	<ul style="list-style-type: none"> Applied Biostatistics* Epidemiology* Health Policy and Management Social and Behavioral Science 	45	On-campus, Online	\$42,930**	CEPH	<ul style="list-style-type: none"> MPH/Master of Social Work and MPH/Master of Science in Health Informatics dual degree programs Courses "offered at convenient times" for working professionals Required fieldwork experience with one of 175+ partners Final paper
Thomas Jefferson University	Philadelphia, PA	MPH	60	23.3%	--	45	On-campus	\$48,510	CEPH	<ul style="list-style-type: none"> Part-time (up to 5 years) or full-time study (as little as 1 year) Students can take one course at a time to allow for continued work 120-hour fieldwork requirement, but most placements last longer
University of Pennsylvania	Philadelphia, PA	MPH	74	32.5%	<ul style="list-style-type: none"> Generalist Global Health Environmental Health 	14***	On-campus	\$63,364	CEPH	<ul style="list-style-type: none"> Part-time (3 years) or full-time study (2 years) 125-hour fieldwork requirement Capstone project
West Chester University	West Chester, PA	MPH	80	-2.6%	<ul style="list-style-type: none"> Community Health⁺ Health Care Administration Environmental Health 	45	On-campus, Hybrid	\$23,220	CEPH	<ul style="list-style-type: none"> Bachelor's/MPH 4+1 accelerated degree program Part-time or full-time study Required fieldwork experience

Source: Institutional Websites. Note: *Available only on-campus. **Calculated using part-time per-credit rate. ***All courses are equivalent to one credit or "course unit." ⁺Concentration available in accelerated format

Appendix C. Core Competencies for Public Health Professionals – Council on Linkages Between Academia and Public Health Practice

8 Domains – Tier 1: Front Line Staff/Entry Level. Tier 1 competencies apply to public health professionals who carry out the day-to-date tasks of public health organizations and are not in management positions. Responsibilities of these professionals may include data collection and analysis, fieldwork, program planning, outreach, communications, customer service, and program support.

1. Analytical/Assessment Skills

- a. 1A1. Describes factors affecting the health of a community (i.e. equity, income, education, environment)
- b. 1A2. Identifies quantitative and qualitative data and information (i.e. vital statistics, electronic health records, transportation patterns, unemployment rates, community input, health equity impact assessments) that can be used for assessing the health of a community
- c. 1A3. Applies ethical principles in accessing, collecting, analyzing, using, maintaining, and disseminating data and information
- d. 1A4. Uses information technology in accessing, collecting, analyzing, using, maintaining, and disseminating data and information
- e. 1A5. Selects valid and reliable data
- f. 1A6. Selects comparable data (i.e. data being age-adjusted to the same year, data variables across datasets having similar definitions)
- g. 1A7. Identifies gaps in data
- h. 1A8. Collects valid and reliable qualitative and quantitative data
- i. 1A9. Describes public health applications of quantitative and qualitative data
- j. 1A10. Uses quantitative and qualitative data
- k. 1A11. Describes assets and resources that can be used for improving the health of a community (i.e. Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs)
- l. 1A12. Contributes to assessments of community health status and factors influencing health in a community (i.e. quality, availability, accessibility, use of health services, access to affordable housing)
- m. 1A13. Explains how community health assessments use information about health status, factors influencing health, and assets and resources
- n. 1A14. Describes how evidence (i.e. data, findings reported in peer-reviewed literature) is used in decision making

2. Policy Development/Program Planning Skills

- a. 2A1. Contributes to state/Tribal/community health improvement planning (i.e. providing data to supplement community health assessments, communicating observations from work in the field)
- b. 2A2. Contributes to development of program goals and objectives
- c. 2A3. Describes organizational strategic plan (i.e. includes measurable objectives and targets, relationship to community health improvement plan, workforce development plan, quality improvement plan, and other plans)
- d. 2A4. Contributes to implementation of organizational strategic plan

- e. 2A5. Identifies current trends (i.e. health, fiscal, social, political, environmental) affecting the health of a community
 - f. 2A6. Gathers information that can inform options for policies, programs, and services (i.e. secondhand smoking policies, data use policies, HR policies, immunization programs, food safety programs)
 - g. 2A7. Describes implications of policies, programs, and services
 - h. 2A8. Implements policies, programs, and services
 - i. 2A9. Explains the importance of evaluations for improving policies, programs, and services
 - j. 2A10. Gathers information for evaluating policies, programs, and services (i.e. outputs, outcomes, processes, procedures, return on investment)
 - k. 2A11. Applies strategies for continuous quality improvement
 - l. 2A12. Describes how public health informatics is used in developing, implementing, evaluating, and improving policies, programs, and services (i.e. integrated data systems, electronic reporting, knowledge management systems, geographic management systems)
- 3. *Communication Skills***
- a. 3A1. Identifies the literacy of populations served (i.e. ability to obtain, interpret and use health and other information; social media literacy)
 - b. 3A2. Communicates in writing and orally with linguistic and cultural proficiency (i.e. using age-appropriate materials, incorporating images)
 - c. 3A3. Solicits inputs from individuals and organizations (i.e. chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community-based organizations, various populations served) for improving the health of a community
 - d. 3A4. Suggests approaches for disseminating public health data and information (i.e. social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)
 - e. 3A5. Conveys data and information to professionals and the public using a variety of approaches (i.e. reports, presentations, email, letters)
 - f. 3A6. Communicates information to influence behavior and improve health (i.e. uses social marketing methods, considers behavioral theories such as the Health Belief Model or Stages of Change Model)
 - g. 3A7. Facilitates communication among individuals, groups, and organizations
 - h. 3A8. Describe the roles of governmental public health, health care, and other partners in improving the health of a community)
- 4. *Cultural Competency Skills***
- a. 4A1. Describes the concept of diversity as it applies to individuals and populations (i.e. language, culture, values, socioeconomic status, geography, education, race, gender, age, ethnicity, sexual orientation, profession, religious affiliation, mental and physical abilities, historical experiences)
 - b. 4A2. Describes the diversity of individuals and populations in a community
 - c. 4A3. Describes the ways diversity may influence policies, programs, services, and the health of a community

- d. 4A4. Recognizes the contribution of diverse perspectives in developing, implementing, and evaluating, policies, programs, and services that affect the health of a community
- e. 4A5. Addresses the diversity of individuals and populations when implementing policies, programs, and services that affect the health of a community
- f. 4A6. Describes the effects of policies, programs, and services on different populations in a community
- g. 4A7. Describes the value of a diverse public health workforce

5. *Community Dimensions of Practice Skills*

- a. 5A1. Describes the programs and services provided by governmental and non-governmental organizations to improve the health of a community
- b. 5A2. Recognizes relationships that are affecting health in a community (i.e. relationships among health departments, hospitals, community health centers, primary care providers, schools, community-based organizations, and other types of organizations)
- c. 5A3. Suggests relationships that may be needed to improve health in a community
- d. 5A4. Supports relationships that improve health in a community
- e. 5A5. Collaborates with community partners to improve health in a community (i.e. participates in committees, shares data and information, connects people to resources)
- f. 5A6. Engages community members (i.e. focus groups, talking circles, formal meetings, key informant interviews) to improve health in a community
- g. 5A7. Provides input for developing, implementing, evaluating, and improving policies, programs, and services
- h. 5A8. Uses assets and resources (i.e. Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs) to improve health in a community
- i. 5A9. Informs the public about policies, programs, and resources that improve health in a community
- j. 5A10. Describes the importance of community-based participatory research

6. *Public Health Sciences Skills*

- a. 6A1. Describes the scientific foundation of the field of public health
- b. 6A2. Identifies prominent events in the history of public health (i.e. smallpox eradication, development of vaccinations, infectious disease control, safe drinking water, emphasis on hygiene/hand washing, access to health care for people with disabilities)
- c. 6A3. Describes how public health sciences (i.e. biostatistics, epidemiology, environmental health sciences, health services administration, social and behavioral sciences, and public health informatics) are used in the delivery of the 10 Essential Public Health Services
- d. 6A4. Retrieves evidence (i.e. research findings, case reports, community surveys) from print and electric resources (i.e. PubMed, *Journal of Public Health Management and Practice*, *Morbidity and Mortality Weekly Report*, *The World Health Report*) to support decision making
- e. 6A5. Recognizes limitations of evidence (i.e. validity, reliability, sample size, bias, generalizability)

- f. 6A6. Describes evidence used in developing, implementing, evaluating, and improving policies, programs, and services
- g. 6A7. Describes the laws, regulations, policies, and procedures for the ethical conduct of research (i.e. patient confidentiality, protection of human subjects, Americans with Disabilities Act)
- h. 6A8. Contributes to the public health evidence base (i.e. participating in Public Health Practice-based Research Networks, community-based participatory research, and academic health departments; authorizing articles; making data available to researchers)
- i. 6A9. Suggests partnerships that may increase use of evidence in public health practice (i.e. between practice and academic organizations, with health sciences libraries)

7. *Financial Planning and Management Skills*

- a. 7A1. Describes the structures, functions, and authorizations of governmental public health programs and organizations
- b. 7A2. Describes government agencies with authority to impact the health of a community
- c. 7A3. Adheres to organizational policies and procedures
- d. 7A4. Describes public health funding mechanisms (i.e. categorical grants, fees, third-party reimbursement, tobacco taxes)
- e. 7A5. Contributes to the development of program budgets
- f. 7A6. Provides information for proposals for funding (i.e. foundations, government agencies, corporations)
- g. 7A7. Provides information for development of contracts with other agreements for programs and services
- h. 7A8. Describes financial analysis methods used in making decisions about policies, programs, and services (i.e. cost-effectiveness, cost-benefit, cost-utility analysis, return on investment)
- i. 7A9. Operates programs within budget
- j. 7A10. Describes how teams help achieve programs and organizational goals (i.e. the value of different disciplines, sectors, skills, experiences, and perspectives; scope of work and timeline)
- k. 7A11. Motivates colleagues for the purpose of achieving program and organizational goals (i.e. participating in teams, encouraging sharing of ideas, respecting different points of view)
- l. 7A12. Uses evaluation results to improve program and organizational performance
- m. 7A13. Describes program performance standards and measures
- n. 7A14. Uses performance management systems for program and organizational improvement (i.e. achieving performance objectives and targets, increasing efficiency, refining processes, meeting *Healthy People* objectives, sustaining accreditation)

8. *Leadership and Systems Thinking Skills*

- a. 8A1. Incorporates ethical standards of practice (i.e. Public Health Code of Ethics) into all interactions with individuals, organizations, and communities

- b. 8A2. Describes public health as part of a larger inter-related system of organizations that influence the health of populations at local, national, and global levels
- c. 8A3. Describes the ways public health, health care, and other organizations can work together or individually to impact the health of a community
- d. 8A4. Contributes to development of a vision for a healthy community (i.e. emphasis on prevention, health equity for all, excellence and innovation)
- e. 8A5. Identifies internal and external facilitators and barriers that may affect the delivery of the 10 Essential Public Health Services (i.e. using root cause analysis and other quality improvement methods and tools, problem solving)
- f. 8A6. Describes the need for professional development (i.e. training, mentoring, peer advising, coaching)
- g. 8A7. Participates in professional development opportunities
- h. 8A8. Describes the impact of changes (i.e. social, political, economic, scientific) on organizational practices
- i. 8A9. Describes ways to improve individual and program performance

Appendix D. CEPH Foundational Public Health Knowledge Learning Objectives

Profession & Science of Public Health

- A. Explain public health history, philosophy, and values
- B. Identify the core functions of public health and the 10 Essential Services
- C. Role of quantitative and qualitative methods and sciences in describing and assessing a population's health
- D. List major causes and trends of morbidity and mortality in the US or other community relevant to the program
- E. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.
- F. Explain the Critical importance of evidence in advancing public health knowledge

Factors Related to Human health

- Explain...
- G. Effects of environmental factors on a population's health
 - H. Biological and genetic factors that affect a population's health
 - I. Behavioral and psychological factors that affect a population's health
 - J. The social, political and economic determinants of health and how they contribute to population health and health inequities
 - K. How globalization affects global burdens of disease
 - L. An ecological perspective on the connections among human health, animal health and ecosystem health

Appendix E. CEPH MPH Foundational Competencies

Evidence-Based Approaches to Public Health

- A. Apply epidemiological methods to the breadth of settings and situation in public health practice
- B. Select quantitative and qualitative data collection methods appropriate for a given public health context
- C. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate
- D. Interpret results of data analysis for public health research, policy, or practice

Public Health & Health Care Systems

- E. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings
- F. 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 level

Planning & Management to Promote Health

- G. Assess population needs, assets, and capacities that affect communities' health
- H. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
- I. Design a population-based policy, program, project or intervention
- J. Explain basic principles and tools of budget and resource management
- K. Select methods to evaluate public health programs

Policy in Public Health

- L. Discuss multiple dimensions of the public policy-making process, including the roles of ethics and evidence
- M. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes
- N. Advocate for political, social or economic policies and programs that will improve health in diverse populations
- O. Evaluate policies for their impact on public health and health equity

Leadership

- P. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
- Q. Apply negotiation and mediation skills to address organizational or community challenges

Communication

- R. Select communication strategies for different audiences and sectors
- S. Communicate audience-appropriate public health content, both in writing and through oral presentation
- T. Describe the importance of cultural competence in communicating public health content

Interprofessional Practice

U. Perform effectively on interprofessional teams

Systems Thinking

V. Apply systems thinking tools to a public health issue

Appendix F. Guiding Statement of the MPH Program

Vision: Our vision is to provide a comprehensive, evidence-based, student-centered program that will be a source of community health enhancement and promotion that will impact the state of New Jersey and beyond. The Master of Public Health program will lead the region and state towards optimal health and wellbeing by empowering and educating the communities we serve through scholarship, engaged service, and community-based learning and practice.

Mission Statement: The mission of the Master of Public Health Program at Stockton University is to ready our students to enter the field of public health as evidence-based professionals who are prepared to address the complex health needs of the population. The program is committed to helping all our students to develop the skills and knowledge base necessary to be lifelong learners, as well as leaders within the interdisciplinary field of public health. Students learn in a variety environments and methods that allow for the development of critical thinking, problem-solving, and leadership skills that are both didactic and practical in nature. As such, the Program also integrates scholarship and research activities throughout the curriculum to better educate our students in the importance of evidence-based practice, as well as contributing to the evidence and peer-reviewed literature within the field. By doing so, the Master of Public Health Program will prepare its graduates to enter into their communities and areas of work with the knowledge, competencies, values, and skills necessary to advance the field of public health, and to enhance the health, safety, and wellbeing of the communities they serve.

Goals: The goals of the Master of Public Health program are:

1. To create an educational environment that provides students with the latest in best-practices and evidence-based education in order to be able to know and practice the most modern and quality information available.
2. To provide the highest quality educational experience possible by offering curricular and co-curricular learning experiences designed and offered by well-qualified faculty and working public health professionals, as well by continuously incorporating faculty, student, and community feedback for ongoing evaluation and improvement.
3. To foster an appreciation and desire for lifelong learning in order for students to recognize the need and value for ongoing education, training, and development to be high quality nutrition and public health professionals.
4. To empower all students to become leaders within their field and their communities by supporting student learning, scholarship, and community engagement.
5. To enhance public health knowledge at the local, national, and global scale by engaging students in scholarship and research opportunities and experiences, both inside and outside of the program curriculum.
6. To instill a deep sense of the need, value, and purpose of service and engagement with the local community among faculty and students.

Values: Our program is guided by the values of:

Teaching Excellence – Commitment to providing a high quality, modern education that prepares our students for the complex world of public health work. Faculty and staff recognize their

shared responsibility to engage our students in the development of skills, knowledge, and professional ideals, both inside and outside of the classroom, necessary to be not only successful public health professionals, but leaders within their communities as well. The program strives to enhance the totality of the student learning experience by integrating evidence-based research, proven pedagogical methods, student engagement, and technological advancements to support the process of life-long learning.

Experiential Learning – The Master of Public Health program believes that students learn best by doing. As such, a core value to our program is Experiential Learning, in which students learn not only through didactic study, but by critically reflecting on the experience of putting academic knowledge into practice. Program faculty and staff work to support all of our students to learn actively and in an engaged fashion, not only reflecting on the course topic or content, but on the process by which information is actually learned and understood.

Community Engagement – The Master of Public Health program is committed to the positive development of health status of the communities in which our students live and work. Accomplished through research/scholarship, teaching, and the development of community partnerships and collaborations, the Program actively seeks to address those social, economic, and political issues that are most impactful on the health and wellbeing of our communities and find ways to address them in a way that brings the voice and presence of the community and its stakeholders into the process.

Interprofessional Collaboration – The field of healthcare is complex and multi-dimensional, and representatives from a variety of fields, environments, and skillsets must be present to begin to address the significant nutrition and health concerns of our communities. Our Program supports and encourages the tenants of interprofessional collaboration and teambuilding in order to stress the importance of networking, consensus building, and professional collaboration in order to create meaningful and sustainable solutions to these problems.

Scholarship & Lifelong Learning – The Program values and emphasizes the key roles that scholarship and lifelong learning play in achieving the improvement of a community's wellbeing. Students are expected and encouraged to advance the field of public health by sharing their experiences in the form of poster and abstract presentations at professional conferences, peer-reviewed journal articles, town hall presentations, professional and community presentations, and other methods of sharing scholarship-based findings and information within their communities and regions. In this way, students will begin the process of becoming lifelong learners by valuing the need for continuous professional and academic development, and the improvement of their knowledge and skills necessary for personal and professional development.

Social Justice and Emphasizing Diversity – Our Program advocates for the betterment of all members of our local and regional communities. As such, students, faculty, and staff all will be committed to the building and support of a community that values differences of race, religion, gender and gender identity/expression, ethnicity, national origin, socio-economic status, affectional or sexual orientation, marital status, age, and ability. Our Program sees it as a responsibility to create an environment that strives for social justice and inclusivity, and one that

sees and emphasizes the inherent dignity for all human life.

Appendix G. Alumni, Current Student, and Site Supervisor Survey Data

ALUMNI DATA

N=66

PUBH Majors = 58

BIO Majors = 1

Pre-PT Majors = 1

Business Finance = 1

BSHS = 5

Fields of Graduate Programs (Current or Already Obtained)

MBA = 4

MSEHS = 1

OT = 4

MPH = 6

PT = 6

MSW = 1

Nursing = 3

Regulatory Affairs: 1

Clinical Trials Science: 1

Fields of Graduate Schools that are being considered

MBA = 10

Unsure = 5

MPH = 15

Health & Wellness = 2

Nutrition = 3

OT = 1

Nursing = 1

Healthcare = 1

Organizational Leadership = 1

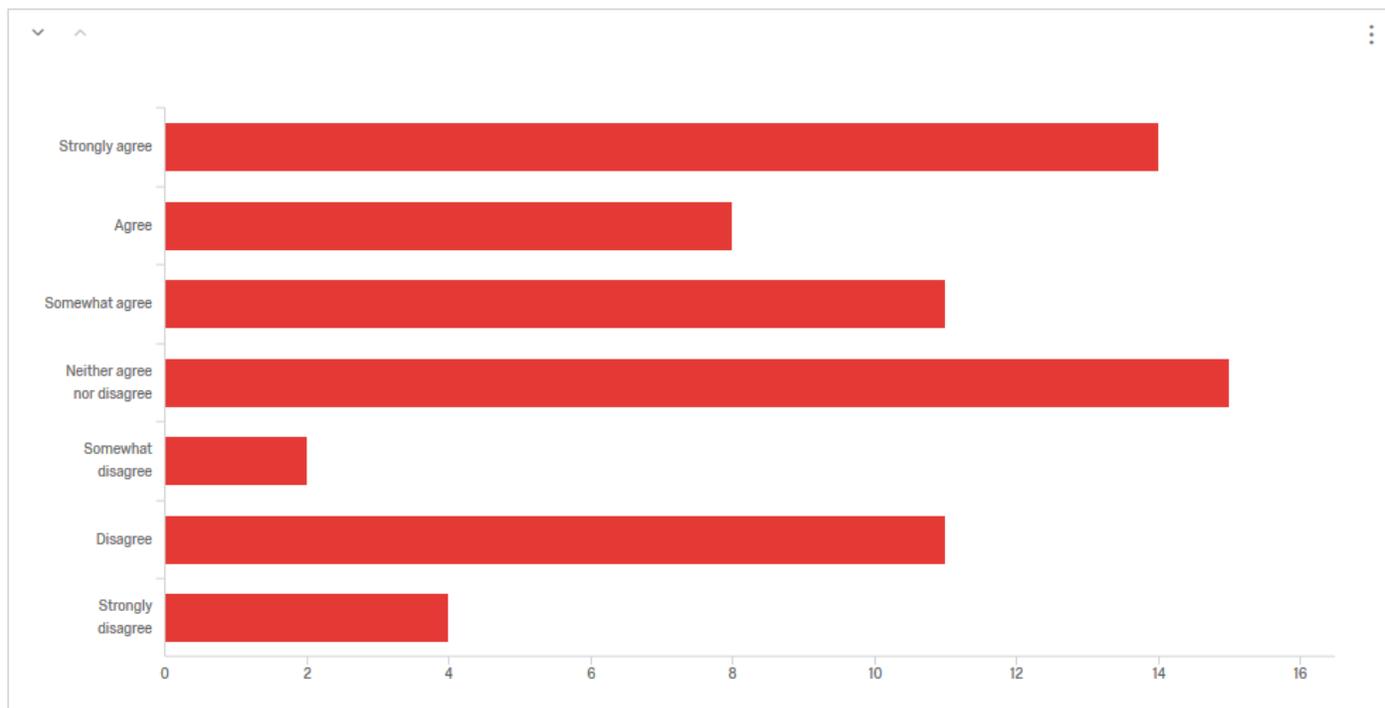
Radiology = 1

Behavioral Psychology with Public Health = 1

Approximately 48.8% of alumni indicated interest in graduate school in fields related to MPH

Q11 - You are interested in learning more about a Master in Public Health Degree (MPH) in Communi...

Page Options ▾



Alumni results show 50.77% of surveyed alumni “Somewhat Agree” to Strongly Agree in an interest in learning more about the MPH program

CURRENT STUDENT DATA

N = 170

PUBH Majors = 25

BSHS Majors = 113

Nursing Majors = 1

Health Science & Psychology Majors = 3

Sports Medicine Majors = 1

Pre-PT Majors = 4

Comm Disorders Majors = 2

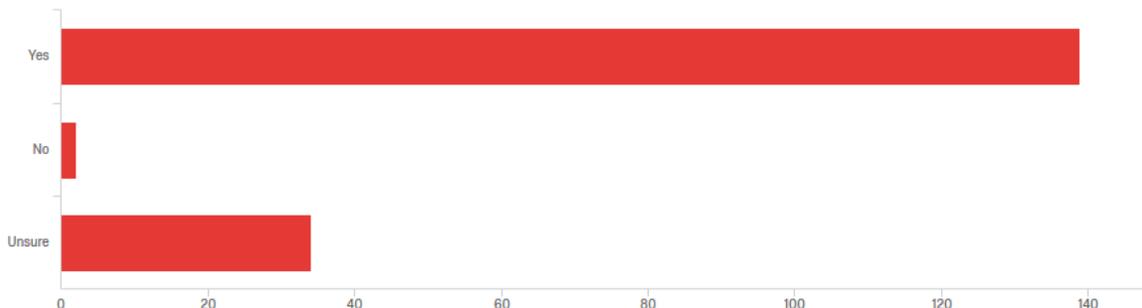
Pre-Veterinary Majors = 1

Pre-PA Majors = 3

Pre-OT Majors = 7

Q6 - Do you have plans to go to graduate school?

Page Opti



Approximately 82.35% of surveyed current students have plans on attending graduate school after graduation.

Fields of Interest for Graduate School

Public Health = 36

Unsure = 4

PT = 32

Nursing = 17

OT = 20

Comm Disorders = 17

Medical School = 10

PA = 10

Chiropractic - 1

Health Science - 5

Biology - 1

Sport Exercise - 1

Veterinary - 2

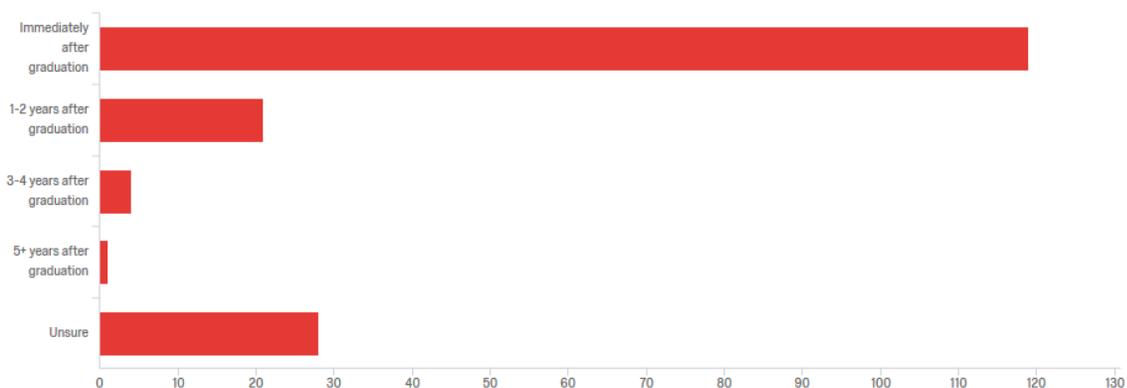
Business - 1

Counseling - 1

Student Affairs - 1

!7 - If yes, how long do you plan on waiting until after completion of undergraduate degree:

Page Options ▾

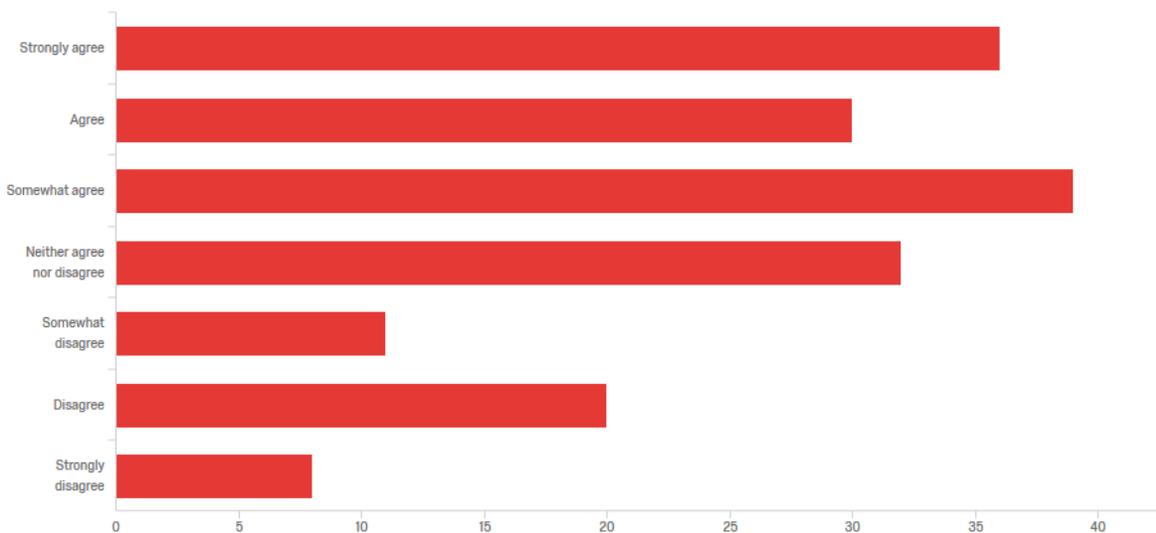


Approximately 80.93% of students surveyed plan to attend graduate school within two years (or much sooner) of graduation.

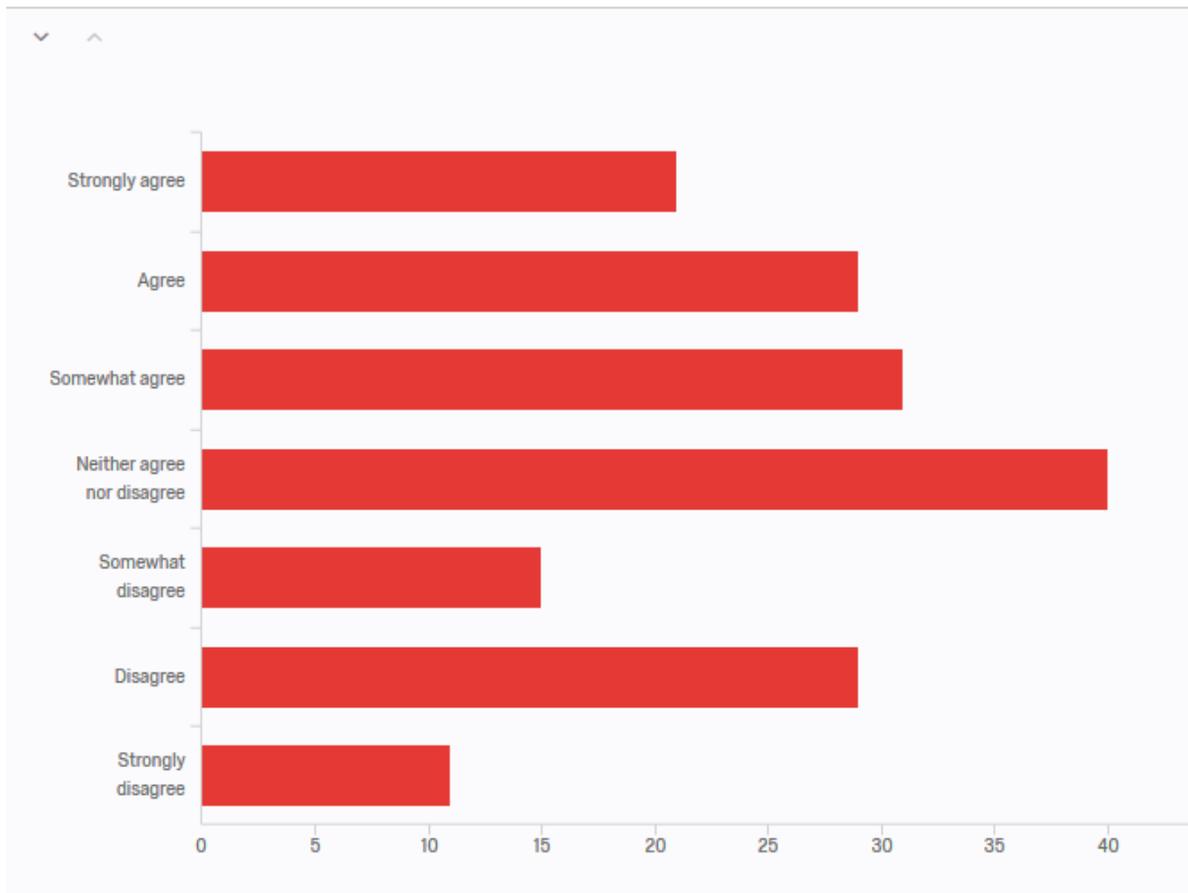
!10 - I am interested in learning more about a Master in Public Health Degree (MPH) in Communit...

Page Options ▾

▾ ^



Approximately 59.66% of students surveyed show between a general interest to a strong interest in learning more about the MPH program.



Approximately 46.02% of surveyed students showed a general consideration to a strong consideration of applying to the MPH program.

INTERNSHIP SITE SUPERVISORS DATA

N = 10

AtlantiCare = 5

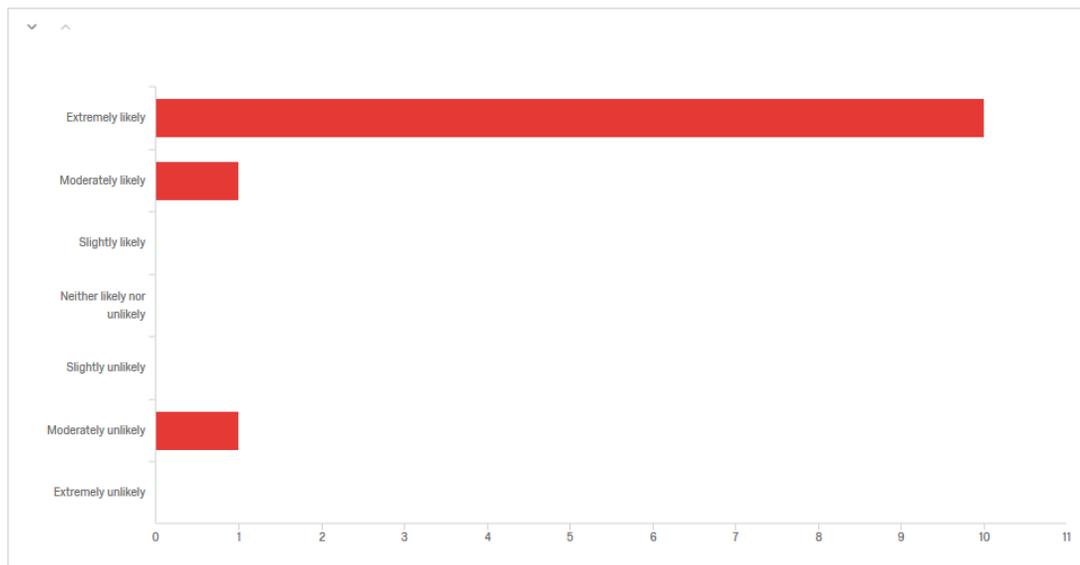
Department of Health = 1

BAYADA = 3

Cape Regional = 1

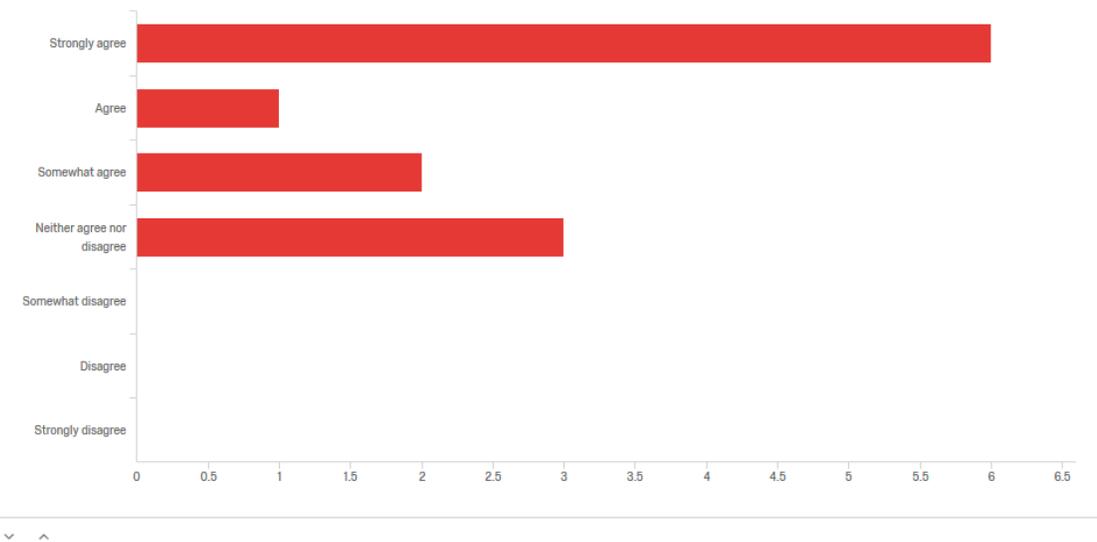
Q4 - Availability / Likelihood to be able to have Stockton's Master of Public Health (MPH) graduate s...

Page Options



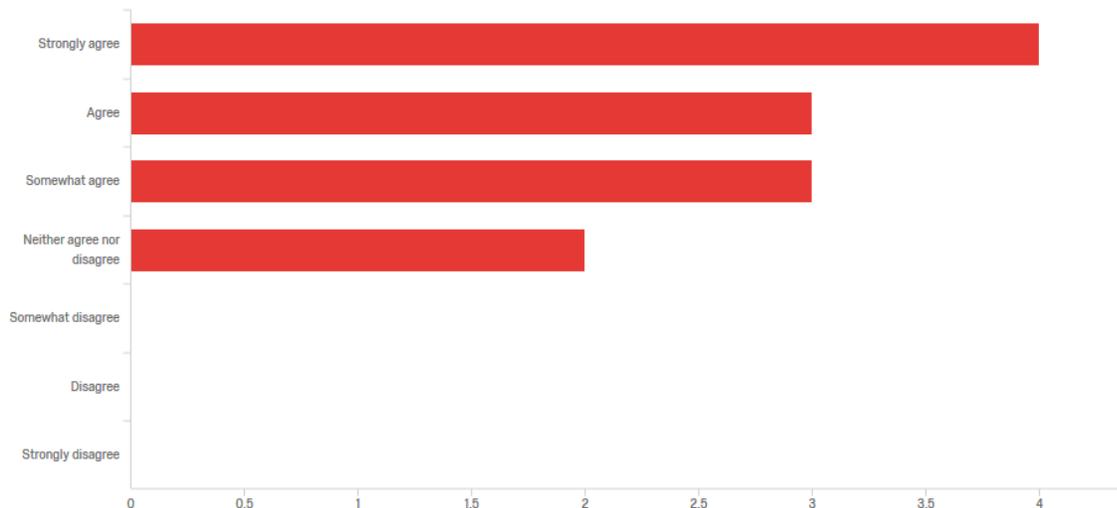
Approximately 91.66% of surveyed site supervisors indicated “Moderately Likely” to “Extremely Likely” to have an MPH student intern at their location.

75% of surveyed supervisors indicated

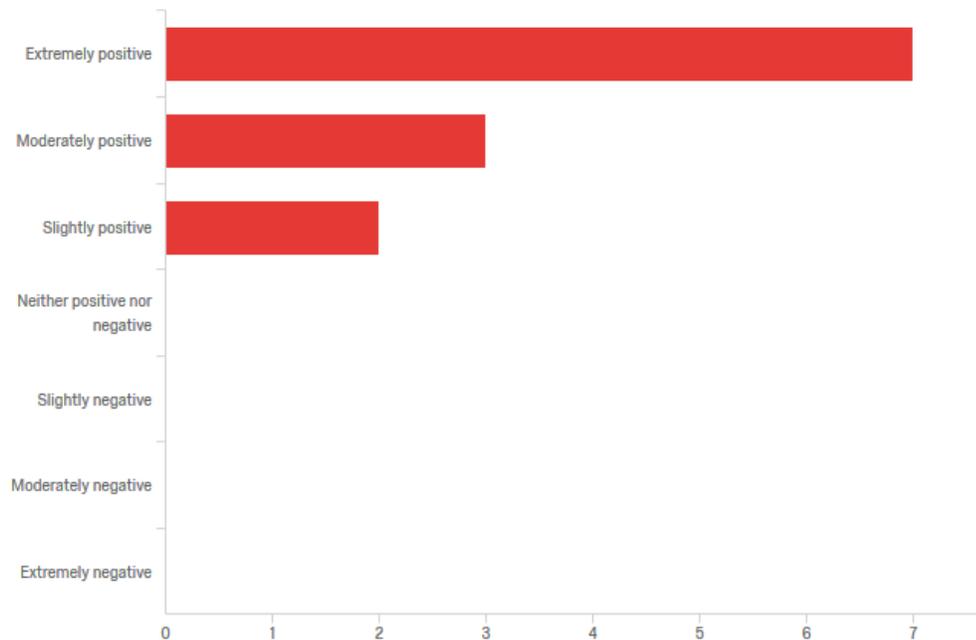


“Somewhat Agree” to “Strongly Agree” about the need for individuals with an MPH degree within our region. Approximately 83.33% of surveyed supervisors indicated “Somewhat Agree” to “Strongly Agree” about the need for individuals with an MPH degree within the surrounding area.

5 - Based on your experience in the health field, you feel there is a need for individuals with an MP... Page Options ▾



7 - Based on your experience in the health field, your attitude to... Page Options ▾



Approximately 83.33% of surveyed supervisors indicated “Moderately Positive” to “Extremely Positive” about their attitude towards Stockton University creating this MPH-CN program.

Appendix H. Anthony Disson's CV

EDUCATION

- 2019-Present **Doctor of Education**, Organizational Leadership
Stockton University, Galloway, NJ
Expected Graduation: December 2022
- 2016-2018 **Master of Public Health**, Public Health Nutrition Concentration
University of Massachusetts-Amherst, Amherst, MA
Capstone Title: Public Health Consequences of Conflicts of Interest within the
Academy
of Nutrition and Dietetics
- 2012-2014 **Master of Arts**, Holistic Health Studies
Georgian Court University, Lakewood, NJ
Thesis: Effectiveness of Qigong as a Means of Increasing Feelings of Self-
Empowerment: A Qualitative Study
- 2008-2009 **Post-Baccalaureate Certificate**, Dietetic Internship
University of Medicine and Dentistry of New Jersey, Scotch Plains, NJ
- 2004-2008 **Bachelor of Science (Cum Laude)**, Nutritional Sciences – Dietetics Option
Rutgers, The State University of New Jersey, New Brunswick, NJ

CREDENTIALS, LICENSES, AND CERTIFICATIONS

- 2009-Present Registered Dietitian Nutritionist, Commission on Dietetic Registration
Registration Number - #980247

TEACHING AND RESEARCH INTERESTS

- Health Information Literacy
- Interprofessional Education & Collaboration in Healthcare
- Implementation of Plant-Based Nutrition and Lifestyle Medicine on Disease Prevention and Management
- Understanding Motivation for Behavior Changes in Lifestyle Habits
- Community & Public Health Nutrition
- Holistic and Integrative Health

CURRENT ACADEMIC APPOINTMENT

- 2014 - Present **Instructor of Health Science** (2017-Present), Stockton University – Galloway,
NJ
- Visiting Instructor* (2016-2017)
Adjunct Instructor (2014-2016)
Courses Taught to Date:
- The Politics of Food (GIS 3406) – Undergraduate Level
 - The Medical Humanities (GIS 4626) – Undergraduate Level
 - Introduction to Health Sciences (HLTH 1101) – Undergraduate Level
 - Teamwork & Collaboration in Healthcare (HLTH 2501) – Undergraduate Level
 - Eastern Approach to Nutrition & Movement (HLTH 3412) – Undergraduate Level
 - Basic & Therapeutic Nutrition (HLTH 3413) – Undergraduate Level

- 2014 - Present **Adjunct Faculty Member**, Georgian Court University – Lakewood, NJ
 Courses Taught to Date:
- Research Methods (HH 530) – Graduate Level
 - Eastern Approach to Nutrition & Movement (HE 220) – Undergraduate Level
 - Qigong – The Art of Self-Healing (HH 570) – Graduate Level

PREVIOUS ACADEMIC APPOINTMENTS

- 2014 **Part-Time Lecturer**, Rutgers University – New Brunswick Campus
 Courses Taught to Date:
- Nutrition Communications (11:709:442) – Undergraduate Level
 - Nutrition Counseling (11:709:499) – Undergraduate Level

- 2012-13 *Community Nutrition Instructor, Stockton University – Galloway, NJ*
Adult Continuing Education
Class Topics Presented:
- *Sustainable Agriculture and “Green” Eating*
 - *Science and Superfoods*
 - *Breads and Culture*
 - *Herbs, Spices, and Health*

- 2010-2011 *Community Nutrition Instructor, Middlesex County College – Edison, NJ*
Adult Continuing Education
Class Topics Presented:
- *Food as Medicine*
 - *Sustainable Weight Loss*
 - *Eating Green, Eating for Type 2 Diabetes*
 - *Vegetarian Nutrition*

PUBLICATIONS

Peer Reviewed

- 2020 **Dissen, A.**, & Crowell, T. (2020). We are what we eat: Assessing the use of a documentary film as an educational tool to change students’ nutritional attitudes and behaviors. *American Journal of Lifestyle Medicine*.
<https://doi.org/10.1177/1559827620903701>
- 2011 **Dissen, A.**, Policastro, P, Quick, V., & Byrd-Bredbenner, C. (2011). Interrelationships among nutrition knowledge, attitudes, behaviors, and body satisfaction. *Health Education*, 111:4, 283-295.
- 2008 Mackesy, C., Bennett, L., **Dissen, A.**, Kim, M., & Kardan, N. (2008). Male and female college students’ perspective on nutrition fact labels. *JADA*, 108(9), A100
- 2007 Miller, C., Bethmann, K., **Dissen, A.**, & Kardan, N. (2007). College wellness program effective in increasing students’ physical activity, wellness awareness, and nutrition knowledge. *JADA*, 107(8), A96

In-Progress

- 2020 Crowell, T., **Dissen, A.**, Calamidas, E., & Englemann, L. Virtual grocery store: Analyzing food purchases of Atlantic City senior residences.
- 2020 Foti, M., **Dissen, A.**, & Bloshtein, L. Nutrition at the end of life: Assessing the perceived value of nutrition among hospice workers.
- 2020 **Dissen, A.**, Garcia, A., Galantino, M.L., & Perks, J. Holistic health minor assessment: ELOs critical thinking and information literacy.

Other

- 2017 **Dissen, A.** (2017). VN Students – Success as a Vegan RDN. Vegetarian Nutrition Update. Volume XXIV, Number 4.
- 2017 **Dissen, A.**, & Saliski, T. (2017). Healthy eating & weight management intervention: A case study with centrastate healthcare system. Wellness Council of America.

ADDITIONAL SCHOLARSHIP ACTIVITIES

- 2018-2019 Clinical Dietitian Researcher for study on plant-based diets and type 2 diabetes through Ohio University
- 2017-2019 Nutrition Core Curriculum Design, Survey Development, & Pilot Group Data Collection for Cardiac Prevention Program Study

FELLOWSHIPS

- 2019-Present Bonner Faculty Fellow at Stockton University
- 2018-2019 Interprofessional Education Committee Faculty Fellow at Stockton University

HONORS & AWARDS

- 2016 CBIZ Employee Services Organization Great Beginnings Self-Leadership Award
- 2016 American Heart Association Fit-Friendly Worksite Innovation Award
- 2014 NJ Dietetic Association Recognized Young Dietitian of the Year Award
- 2014 Laurie Nichols Memorial Award for Student of Excellent Character
- 2008 George H. Cook Honors Scholar
- 2006-2008 Kappa Omicron Nu Honors Society

MENTORSHIP & ADVISEMENT TO STUDENT RESEARCH

- 2020 Advisor to Kevin Gil-Clara
Research Project Title – Assessment of Latino/a Business Owners in Atlantic County
- 2019 Advisor to Stephanie Sharo
Research Project Title – Climate Change Action Through the Eyes of College Students
- 2019 Advisor and Co-Investigator to Veronica Rowland
Research Project Title – Student Leadership and Interprofessional Education and Collaboration

- 2017-2018 Advisor to Bonner Leader Flor Cruz-Morillo, recipient of BOT Fellowship for Distinguished Student Award
Research Project Title – New Jersey Education Opportunity Fund (EOF) and College Pursuit
- 2017-2018 Advisor to Bonner Leader Jodie Davis, recipient of BOT Fellowship for Distinguished Student Award
Research Project Title – Low Graduation Rate and Food Insecurity in New Jersey

ADDITIONAL MENTORSHIP

- 2019 Advisor to Heather Watskins-Jones for Independent Study on Eastern Nutrition Therapies
- 2019 Mentor to BSHS Alumni Marion Pasiglao in preparation for entry into the Physical Therapy Profession
- 2018 Internship Supervisor for Heather Watskins-Jones for PUBH 4950: Public Health Internship & Fieldwork
- 2018 Advisor to Samantha Fallick for Independent Study on Nutrition Research
- 2018 Advisor to Laura Bylone on LIBA Capstone Experience in Holistic Health
- 2017-2019 Future Career in Dietetics Mentor to BSHS Alumni Ryan Galan

PROFESSIONAL CONFERENCE POSTER PRESENTATIONS

- 2018 New Jersey Society for Public Health Education 2018 Annual Meeting, *Health Communication: Strategies for Maximum Impact, Connections & Self Awareness*
Poster Title: Assessing Undergraduate College Students' Ability to Evaluate the Quality of Web-Based Sources of Health Information
Authors: Anthony Dissen, Qudratullah Qadiri, CJ Middleton
- 2018 Association of Schools of Allied Health Professionals 2018 Annual Conference, St. Petersburg, FL
Poster Title: Service Learning for Pre-Professional Undergraduates: Cultivating a Deeper Understanding of the Social Determinants of Health
Authors: Michele Previti, Margaret Slusser, Luis Garcia, Anthony Dissen
- 2017 New Jersey Society for Public Health Education 2017 Annual Meeting, *Credentialing in Health Education: Professional Development Throughout Your Career.*
Poster Title: Mapping the Relationship Between Low Graduation Rates and Food Insecurity
Authors: Anthony Dissen, Jodie Davis
- 2016 American College of Sports Medicine – Greater New York Area Annual Conference
Poster Title: Effectiveness of Qigong as a Means of Increasing Feelings of Self-Empowerment: A Qualitative Study

Authors: Anthony Dissen

- 2010 Food and Nutrition Conference & Exposition, Boston, MA
Poster Title: Young Adults' Nutrition Knowledge, Healthy Eating Attitudes, Dietary Intake and Body Image Satisfaction
Authors: Dissen, Anthony; Byrd-Bredbenner, Carole; Quick, Virginia

INVITED PROFESSIONAL PRESENTATIONS

- 2019 Bonner Summer Leadership Institute
Presentation Title: Faculty-Led Mentorship With Bonner Leaders: Lessons Learned & Best Practices
- 2018 CentraState Medical Center Multiple Sclerosis Clinic
Presentation Title: Nutrition and Lifestyle Medicine Best Practices in Multiple Sclerosis
- 2018 Stockton Center on Successful Aging
Presentation Title: Lessons in Longevity: Research from the World's Longest Lived Populations
- 2018 Moderated Professional Panel Discussion at the 2018 Food & Nutrition Conference & Exposition
Panel Topic: Plant Politics – How Policies Impact Plant-Based Food & Nutrition
- 2018 Stockton Center on Successful Aging
Presentation Title: Anti-Inflammatory Foods and Long-term Health
- 2018 Civic Learning and Democratic Engagement Annual Meeting
Presentation Title: Utilizing Alumni Affairs to Support Service-Learning Courses
- 2018 Hackensack Meridian Health Southern Ocean Medical Center
Presentation Title: The Impact and Role of Nutrition in the Management of Multiple Myeloma
- 2018 New Jersey Department of Human Services Nutrition Conference
Presentation Title: Diet and Autoimmune Disease: Prevention & Management
- 2018 Stockton University Manahawkin Instructional Site
Presentation Title: Conflicts of Interest Within Nutrition: The Impact on Public Health
- 2017 New Jersey Department of Human Services Nutrition Conference
Presentation Title: Integrative Medicine and Dietetics: Holistic Methods for Patient & Client Empowerment
- 2017 Ocean Monmouth Health Alliance – Surviving the Cancer Challenge Body, Mind, and Spirit
Presentation Title: Nutritional Medicine: The Power in Our Plates

- 2017 Holistic/Integrative Care for People Experiencing Cancer: Speaker/Panel Member – Georgian Court University
- 2017 New Jersey Academy of Nutrition and Dietetics 85th Annual Meeting
Presentation Title: Integrative Medicine & Dietetics: Holistic Methods for Patient & Client Empowerment
- 2017 Biology Seminar Invited Lecturer – Stockton University
Presentation Title: Diet and Divinity: The Role of Nutrition and Spirituality in Medicine and Healthcare
- 2016 Stockton University Manahawkin Instructional Site
Presentation Title: Diet, Lifestyle, and Prostate Health
- 2016 Kushi Institute Macrobiotic Summer Conference
Presentation Title: Humans as Microcosms of the Environment: Saving Ourselves to Save the Planet
Presentation Title: Plant-Based Nutrition Cooking Demonstrations
- 2016 Robert Wood Johnson 2nd Annual Nutrition Symposium
Presentation Title: The Role of Holistic Health in Nutrition & Dietetics: Traditional Practices with Modern Applications
- 2015 Kushi Institute Macrobiotic Summer Conference
Presentation Title: Yoga – Healing Theory & Spiritual Practice
Presentation Title: Plant-Based Nutrition Cooking Demonstration
- 2015 New Jersey Association for Food Protection
Presentation Title: GMO's – What's In Our Food?
- 2014 Kushi Institute Macrobiotic Summer Conference
Presentation Title: Plant-Based Nutrition Cooking Demonstration
Presentation Title: Healing with the 5 Elements of Classical Chinese Medicine
Presentation Title: Igniting Your Immune System

PROFESSIONAL CONFERENCES ATTENDED

- 2019 Food and Nutrition Conference & Exposition, Philadelphia, PA
- 2019 International Conference on Nutrition in Medicine, Washington, DC
- 2019 Bonner Summer Leadership Institute, Waynesburg, PA
- 2019 Plant-Based Prevention of Disease (PPOD) Conference, Raleigh, NC
- 2018 New Jersey Society for Public Health Education Annual Meeting, New Brunswick, NJ
- 2018 Food and Nutrition Conference & Exposition, Washington, DC
- 2018 New Jersey Public Health Association Annual Conference, Newark, NJ
- 2018 International Conference on Nutrition in Medicine, Washington, DC
- 2018 Civic Learning and Democratic Engagement Meeting, Anaheim, CA
- 2017 Food and Nutrition Conference & Exposition, Chicago, IL
- 2017 New Jersey Dietetic Association Annual Meeting, Morristown, NJ
- 2016 Food and Nutrition Conference & Exposition, Boston, MA
- 2016 New Jersey Dietetic Association Annual Meeting, Long Branch, NJ

2014	New Jersey Dietetic Association Annual Meeting, Somerset, NJ
2009	New Jersey Dietetic Association Annual Meeting, New Brunswick, NJ
2007	Food and Nutrition Conference & Exposition, Philadelphia, PA

PROFESSIONAL MEMBERSHIPS

2018-Present	New Jersey Society for Public Health Education
2018-Present	New Jersey Public Health Association
2016-Present	Professional Team Member, American College of Lifestyle Medicine
2010-2011, 2016-2018	Dietitians in Integrative and Functional Medicine Dietetics Practice Group
2008-2011, 2013-Present	Vegetarian Nutrition Dietetics Practice Group
2005-2011, 2013-Present	Academy of Nutrition and Dietetics

PROFESSIONAL FIELD EXPERIENCE

2018-Present	Vice President of Nutrition, WellStart Health, Santa Monica, CA
2013-2019	Integrative Dietitian & Community Health Educator, CentraState Medical Center: Health Awareness Center & Employee Wellness, Freehold, NJ
2011-2013	Lead Health Educator & Plant-Based Chef, Whole Foods Market Wellness Club, Princeton, NJ
2010-Present	Health Educator, Breast Cancer Resource Center of New Jersey, Princeton, NJ
2009-2011	Outpatient & Community Education Dietitian, University Medical Center of Princeton at Plainsboro, Plainsboro, NJ

PROFESSIONAL TRAINING

2018-2019	Professional Training Modules , Quality Matters Professional Development 2018 Training – Applying the QM Rubric 2019 Training – Teaching Online: An Introduction to Online Delivery; Evaluating Your Course Design
2018	Certificate of Training , Developing Your Role as a Leader, Academy of Nutrition and Dietetics, Chicago, IL
2015	Training & Professional Development Certificate , Plant-Based Nutrition Cornell University, Ithaca, NY

SERVICE TO PROFESSION

2020-Present	American Vegan Society, Speakers Bureau Member (Nutrition & Lifestyle Medicine)
2019-Present	Advisory Council Member, Universal Meals Program, Physicians Committee for Responsible Medicine
2019-2020	Past-Chair, Vegetarian Nutrition Dietetics Practice Group
2018-2019	Chair, Vegetarian Nutrition Dietetics Practice Group
2017-2019	Core Team Member, Cardiac Prevention Program, AtlantiCare
2017-2018	Chair Elect, Vegetarian Nutrition Dietetics Practice Group
2016-2019	Research Committee Member, American College of Sports Medicine – Greater New York Region Chapter

2015-2017	Appointed Officer, Student Member Coordinator, Vegetarian Nutrition Dietetics Practice Group
2014-Present	Georgian Court University Holistic Health Planning Committee
2010-2018	Rutgers University-SHP Dietetic Internship Admissions Committee

SERVICE TO STOCKTON UNIVERSITY

Faculty Advisor to Student Clubs

Fall 2018-Present	Lifestyle Medicine Student Group at Stockton University
Fall 2017-Present	Collaborative Learning Advocates of Wellness at Stockton
Spring 2017-Spring 2018	Arts and Crafts for Children
Spring 2017-Fall 2018	Stockton University College Diabetes Network Club
Fall 2016-Present	Stockton Vegan and Vegetarian Student Group

Committee Membership

Fall 2017-Fall 2018	ADP/IDHE Campus Climate Assessment Coalition Member
Fall 2017-Present	Academy Honesty Appeals Board – School of Health Sciences Representative
Fall 2017-Present	Curriculum Committee Member for BSHS Program
Fall 2017-Present	Advising Council Member
Spring 2017-Present	Health Advisory Board (Wellness Committee)
Fall 2016-Present	Stockton University Interprofessional Education Committee, Holistic Health Representative
Fall 2016-Present	Holistic Health Minor Committee

Other Service

Summer 2018	Organizer for Bone Marrow Donor Drive at National Night Out
Spring 2018	School of Health Science Banner Carrier – Spring 2018 Undergraduate Commencement Ceremony
Spring 2018	Day in the Life – BS in Health Science Faculty Representative
Spring 2017	Day in the Life – BS in Health Science Faculty Representative
Spring 2017	Team Leader – MLK Day of Service
Fall 2016	Team Leader – New Student Day of Service
Spring 2016	Team Leader – MLK Day of Service

PROFESSIONAL INTERVIEWS

2019	Podcast: Medical Myths: Further Investigation of the Link Between Soy and Thyroid Disease, Part 3 with Anthony Dissen
2019	Podcast: Mentorships in Education, Episode 6, Released May 7 th
2018	Podcast: Never Binge Again: Plant Based Nutritionist Interview, Released November 7 th
2015	Podcast: Modernity and Absurdity – Episode 5: Food with Anthony Dissen, MA, RDN, Released December 19 th
2015	Podcast: Plant Yourself Podcast – Episode 131: Anthony Dissen, RD, on Empowering vs Preaching, Released December 1 st

ADDITIONAL TRAININGS AND CERTIFICATIONS

2020	Certificate in Chinese Dietary Therapy – Pacific Rim College
2014	Certified Hatha Yoga Teacher – Inner Light Yoga Teacher Training Program

2013 Qi Healer Clinical Qigong Intensive – Fran Maher & Brain Coffey
2010 Five Animal Frolics Qigong Level I Training – Eastern School of Acupuncture
and Traditional Medicine
2007 Master/Teacher Reiki Attunement in Usui Reiki – C. Lynn Carr
2005 Usui Reiki Level I, Level II, and Level III – Adela Rubio

Ongoing Continuing Education in Plant-Based Nutrition, Medical Qigong, Mindfulness, Lifestyle Medicine, and Integrative Healthcare

Appendix I. Course Descriptions & Faculty Mapping

Master of Public Health Core Course Descriptions

PUBH 5100 *Cultural Competency & Health Disparities*

This course focuses on the multi-factorial ways in which health disparities impact the health of communities and populations, and work to increase the costs associated with healthcare delivery in the United States. Coursework aims to build cultural competency among learners by examining theoretical, analytical, and practical applications of cultural competence in the public health arena, as well as examines the historic and present-day roots of health disparities and cultural incompetency.

PUBH 5200 *Environmental Public Health*

This course provides an in-depth exploration in the field of environmental health, and the ways in which a community's health can be positively or negatively impacted by the environment in which it is located. Specific topics will include environmental toxicology, non-point source pollution, exposure assessment, risk assessment, and environmental health policy and legislation. Focus will also be paid to assessing healthcare disparities that exist regarding which communities are most impacted by poor environmental health in the United States.

PUBH 5300 *Biostatistics*

Biostatistics is the domain within statistics that focuses on the processes and methods involved with collecting, analyzing, and interpreting data from biological and living organisms, and how this data can be utilized in the fields of medicine and healthcare. This course will cover the basic tools and skillsets necessary to perform statistical analysis of biological data, as well as how this data can be translated into forming and shaping public health policies and practices.

PUBH 5400 *Epidemiology*

The field of epidemiology works with studying and analyzing data in order to determine the causes of diseases and health outcomes in populations, as well as understanding how the distribution and determinants of states of health and health-related events can be used to manage the health of populations and communities in the present, as well as in the future. Students will learn basic skills and concepts of epidemiology, and practice conducting epidemiologic assessment and evaluation of specific case studies.

PUBH 5500 *Grant Writing*

In this course, students will learn how the process of conceiving of and writing a grant proposal operates within the public health field. Students will obtain the skills necessary to write successful grants including planning, budget development, evaluation tools, research, and clarity in communication.

PUBH 5600 Health Care in the United States

This course will provide an in-depth introduction to the history, design, philosophy, and nature of the US Healthcare System. Particular focus will be directed towards an understanding as to the way in which healthcare delivery is organized and governed, how healthcare delivery is financed, and how legislative and political decisions at the local, state, and national levels impact healthcare.

PUBH 5700 Current Issues in Public Health

This course is designed to provide students with a contemporary understanding of public health needs, issues, concerns, and debates that are happening in real time. Current research findings will be shared along with best practices for public health professionals, and how interdisciplinary teams work to solve these issues.

PUBH 5800 200-Hour Field Practicum

This in-the-field practicum will require students to obtain hands-on experience in the field of public health by applying their academic knowledge and skills obtained in an area of public health practice. Students will work with guidance from practicum faculty, as well as their site supervisor, to propose, design, and implement a practicum experience that works to address a public health need.

PUBH 5950 Capstone I – Planning & Proposal

The first part of the culminating experience of the MPH program will focus on identifying a problem of practice within the field of public health and developing a proposal to address this problem in the next semester. Capstone I will require students to conduct an extensive literature review as part of their proposal development.

PUBH 6000 Capstone II – Project Implementation & Evaluation

This second part of the culminating experience of the MPH program will consist of students implementing the proposal they developed in the first semester and evaluating the outcomes of the initial proposal to address their problem of practice. Students will be required to give a final presentation and answer questions from faculty and fellow students, as well as submit a final document consisting of all work done in developing their capstone project.

Community Nutrition Concentration Course Descriptions

PUBH 6010 Foundations of Human Nutrition

This course will provide students with an understanding of basic human dietary needs and requirements, as well as the ways in which dietary habits and intake influence health and disease

risk. Course content will include digestion and absorption, macronutrient and micronutrient requirements, and dietary therapy for common chronic diseases.

PUBH 6020 Community & Public Health Nutrition

This course will focus on the role of nutrition in promoting health and wellbeing in the community and public health arenas. Students will learn the kinds of public health efforts that are implemented in a number of different settings (i.e. non-profit agencies, senior centers, hospitals, schools, health centers, worksites, grocery stores) that can provide nutrition-focused support, as well as the kinds of policy and legislative programs that are in existence (i.e. SNAP, WIC).

PUBH 6030 Food Safety

This course will focus on issues related to food safety, food security, and common foodborne illnesses. Additional attention will be paid to the basics of food safety preparation and sanitation, as well as emerging topics related to food safety such as genetically modified foods, lab-grown foods, and food allergens.

PUBH 6040 Community Health Education: Theory & Practice

This course will focus on basic theories related to health education and behavior change, as well as different models of behavior change. Additional attention will be paid to examining the steps required to develop an educational agenda, objectives, and educational experiences, as well as different sites and settings in which community health education can take place.

PUBH 6050 Community Health Program Planning, Assessment, and Evaluation

This course will focus on the practical steps in designing and implementing a health education experience. Students will design, implement, and evaluate an actual health education lesson, and report back overall findings and outcomes of the experience.

Substance Abuse Concentration Course Descriptions

PUBH 6060 The Biology of Addiction & Substance Abuse

This course will educate students as to the basic biology surrounding substance abuse and addictions. Topics of specific emphasis will include how addictive substances influence brain chemistry, neurochemistry, major classes of addictive drugs (i.e. stimulants, opioids, hallucinogens), and genetic influences.

PUBH 6070 Health Policy & Advocacy

This course explores the role of research and analysis used in developing healthcare policy. Course curriculum will focus on the processes involved in the development and implementation of policy agendas, and how key stakeholders and professionals are involved in the process of developing, advocating for, and implementing health policy. Students will be guided in how to

identify how gaps in knowledge and policy, and how to become an active advocate for policy change in one's community.

PUBH 6080 Public Health Approaches to Understanding Substance Abuse

An epidemiologic approach to understanding how substance abuse and addiction tracking has taken place within the United States, and how this data is used in current efforts to better understand and combat addiction trends. Additional attention will be paid to how social inequities and healthcare disparities impact addiction rates and risk for substance abuse, and how other cultural and socio-political issues are at play in addiction rates.

PUBH 6090 Legal & Ethical Issues in Substance Abuse

This course will introduce students to the legal issues that impact those who are suffering from addiction and substance abuse. These topics include state and federal classifications of controlled substances, incarceration rates in the United States for substance use, racial and social justice disparities, and barriers that exist to obtaining counseling and recovery therapy for addiction and dependency. This course will also explore the changing societal perceptions and opinions surrounding controlled substances, and how this is impacting the future of policies and laws pertaining to addictive substances.

PUBH 6100 Substance Abuse & Addiction Across the Lifespan

This course will explore the impact on health and wellbeing across the lifespan related to the use of addictive substances. Topics include rates and types of addictions found across the lifespan, impact on fetal and child development, community impacts and the influence of poverty and socioeconomic status, and increasing rates of substance abuse among older adults. Additional course emphasis will be paid to the kinds of prevention, recovery, and support systems that exist for individuals at different points along the lifespan.

Faculty Member 1 – Community Nutrition Concentration

Faculty Member 2 – Community Nutrition Concentration

Faculty Member 3 – Substance Abuse Concentration

Faculty Member 4 – Substance Abuse Concentration

Fall Semester	Spring Semester	Summer Semester
Community Health Education: Theory & Practice	Environmental Public Health	Cultural Competency & Health Disparities
Foundations of Human Nutrition	Capstone II	Health Care in the US
Capstone I	Grant Writing	Current Issues in Public Health
Community & Public Health Nutrition	Practicum	
Community Health Program Planning, Assessment, and Evaluation	Capstone II	
Food Safety	Biostatistics	
The Biology of Addiction & Substance Abuse	Public Health Approaches to Understanding Substance Abuse	
Health Policy & Advocacy	Practicum	
Capstone I	Epidemiology	
Legal & Ethical Issues in Substance Abuse		
Substance Abuse Across the Lifespan		
Grant Writing		

Appendix J. Master of Public Health Curriculum Mapped to CEPH Accreditation Standards & Council on Linkages Between Academia and Public Health Practice Core Competencies

	Performance Domains	CEPH Foundational Public Health Knowledge Learning Objectives (See Appendix C)	CEPH Foundational Competencies (See Appendix D)	Courses in the Curriculum Where Outcomes are Assessed <i>Black = Core MPH Course</i> <i>Blue = Community Nutrition Course</i> <i>Purple = Substance Abuse Course</i>
	Domain 1. Analytical/Assessment Skills			
1.1	Describes factors affecting the health of a community (i.e. equity, income, education, environment)	D, E, F, G, H, I, J, K, L	A, B, C, D, F, G, H, N, O	Current Issues in Public Health Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health Capstone II <i>Foundations of Human Nutrition</i> <i>Community & Public Health Nutrition</i> <i>Food Safety</i> <i>Community Health Education: Theory & Practice</i> <i>Community Health Program Planning, Assessment, and Evaluation</i> <i>The Biology of Addiction & Substance Abuse</i> <i>Public Health Approaches to Understanding Substance Abuse</i>

				Substance Abuse & Addiction Across the Lifespan
1.2	Identifies quantitative and qualitative data and information that can be used for assessing the health of a community	C, E, F, H, I, J, K, L	A, B, C, D, G, K	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
1.3	Applies ethical principles in accessing, collecting, analyzing, using, maintaining, and disseminating data and information	C, F, J, K	A, B, C, D, G	Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation The Biology of Addiction & Substance Abuse Public Health Approaches to

				<p>Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
1.4	Uses information technology in accessing, collecting, analyzing, using, maintaining, and disseminating data and information	C, F, J, K	A, B, C, D, G, R, S	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
1.5	Selects valid and reliable data	C, F	A, B, C, D, G	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Foundations of Human Nutrition Community & Public Health Nutrition Food Safety The Biology of Addiction & Substance Abuse Public Health Approaches to</p>

				<p>Understanding Substance Abuse & Addiction Across the Lifespan</p>
1.6	Selects comparable data	C, E, F	A, B, C, D, G	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
1.7	Identifies gaps in data	C, F	A, B, C, D, G	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
1.8	Collects valid and reliable qualitative and quantitative data	C, F	A, B, C, D, G	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I</p>

				Community & Public Health Nutrition Food Safety The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
1.9	Describes public health applications of quantitative and qualitative data	C, E	A, B, C, D, G	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
1.10	Uses quantitative and qualitative data	C, F	A, B, C, D, G	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Community & Public Health Nutrition Food Safety

				The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
1.11	Describes assets and resources that can be used for improving the health of a community	D, E, F, G, H, I, J, K, L	A, B, C, D, G, J	Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health Capstone II Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
1.12	Contributes to assessments of community health status and factors influencing health in a community	C, E, F, J, K, L	A, B, C, D, G, I, K, U	Environmental Public Health Biostatistics Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health

				<p>Capstone II</p> <p>Foundations of Human Nutrition</p> <p>Community & Public Health Nutrition</p> <p>Food Safety</p> <p>Community Health Education: Theory & Practice</p> <p>Community Health Program Planning, Assessment, and Evaluation</p> <p>Public Health Approaches to Understanding Substance Abuse</p> <p>Substance Abuse & Addiction Across the Lifespan</p>
1.13	Explains how community health assessments use information about health status, factors influencing health, and assets and resources	C, D, E, F, J, K, L	A, B, C, D, G, I, J, K, Q	<p>Environmental Public Health</p> <p>Biostatistics</p> <p>Epidemiology</p> <p>Grant Writing</p> <p>Health Care in the United States</p> <p>Current Issues in Public Health</p> <p>Capstone II</p> <p>Community & Public Health Nutrition</p> <p>Community Health Education: Theory & Practice</p> <p>Community Health Program Planning, Assessment, and Evaluation</p> <p>Public Health Approaches to Understanding Substance Abuse</p> <p>Substance Abuse & Addiction Across the Lifespan</p>

1.14	Describes how evidence (i.e. data, findings reported in peer-reviewed literature) is used in decision making	C, D, E, F, G, H, I, J, K, L	A, B, C, D, G, I, L, Q	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Capstone II Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
Domain 2. Policy Development/Program Planning Skills				
2.1	Contributes to state/Tribal/community health improvement planning	C, D, E, F, J	E, F, G, H, I, L, N, O, P, U	Cultural Competency & Health Disparities Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II

				Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.2	Contributes to development of program goals and objectives	E, F, J	G, I, L, P, U	Epidemiology Grant Writing 200-hour Field Practicum Capstone I Capstone II Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.3	Describes organizational strategic plan	J	E, I, L, P, U	Grant Writing 200-hour Field Practicum Capstone II

				Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.4	Contributes to implementation of organizational strategic plan	J	E, I, L, P, U	Grant Writing 200-hour Field Practicum Capstone II Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.5	Identifies current trends affecting the health of a community	D, E, G, H, I, J, K, L	F, H, I, L, N, O	Cultural Competency & Health Disparities Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone I Foundations of Human Nutrition

				Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.6	Gathers information that can inform options for policies, programs, and services	D, E, F, G, H, I, J, K, L	A, B, C, D, G, I, L	Environmental Public Health Biostatistics Epidemiology Grant Writing 200-hour Field Practicum Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse

				Substance Abuse & Addiction Across the Lifespan
2.7	Describes implications of policies, programs, and services	E, J, K	E, G, I, L, N, O	Environmental Public Health Biostatistics Grant Writing 200-hour Field Practicum Capstone I Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.8	Implements policies, programs, and services	E, J, K, L	E, G, I, L	Environmental Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation

				Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.9	Explains the importance of evaluations for improving policies, programs, and services	E, F, I, J, K, L	B, C, D, G, I, K, L	Environmental Public Health Grant Writing 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
2.10	Gathers information for evaluating policies, programs, and services	C, E, F, G, H, I, J, K, L	B, C, D, G, I, K, L	Environmental Public Health Grant Writing 200-hour Field Practicum Capstone I Community & Public Health Nutrition

				<p>Community Health Education: Theory & Practice</p> <p>Community Health Program Planning, Assessment, and Evaluation</p> <p>Health Policy & Advocacy</p> <p>Public Health Approaches to Understanding Substance Abuse</p> <p>Legal & Ethical Issues in Substance Abuse</p> <p>Substance Abuse & Addiction Across the Lifespan</p>
2.11	Applies strategies for continuous quality improvement	E, F, J	E, I, L	<p>Health Care in the United States</p> <p>Current Issues in Public Health</p> <p>200-hour Field Practicum</p> <p>Capstone II</p> <p>Community & Public Health Nutrition</p> <p>Food Safety</p> <p>Community Health Program Planning, Assessment, and Evaluation</p> <p>Health Policy & Advocacy</p> <p>Public Health Approaches to Understanding Substance Abuse</p> <p>Substance Abuse & Addiction Across the Lifespan</p>
2.12	Describes how public health informatics is used in developing, implementing, evaluating, and	E, F, G, H, I, J, K, L	B, C, D, G, I, K, L	<p>Environmental Public Health</p> <p>Biostatistics</p> <p>Epidemiology</p>

	improving policies, programs, and services			Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone I Community & Public Health Nutrition Food Safety Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
	Domain 3. Communication Skills			
3.1	Identifies the literacy of populations served	E, J, K	F, G, I, N, O, R, S, T	Cultural Competency & Health Disparities Grant Writing Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan

3.2	Communicates in writing and orally with linguistic and cultural proficiency	J, K	F, H, I, N, O, R, S, T	Cultural Competency & Health Disparities Grant Writing Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
3.3	Solicits inputs from individuals and organizations for improving the health of a community	E, F, I, J, K	E, G, I, N, O, Q, R, S, T, U	Cultural Competency & Health Disparities Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to

				<p>Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
3.4	Suggests approaches for disseminating public health data and information	E, F, J, K	A, D, I, R, S, T	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone I Capstone II</p> <p>Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
3.5	Conveys data and information to professionals and the public using a variety of approaches	E, F, G, H, I, J, K, L	A, D, G, I, Q, R, S, T	<p>Environmental Public Health Biostatistics Epidemiology Grant Writing</p>

				200-hour Field Practicum Capstone II Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
3.6	Communicates information to influence behavior and improve health	D, E, F, H, I	D, G, I, R, S, T	Environmental Public Health Biostatistics Epidemiology Grant Writing 200-hour Field Practicum Capstone II Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation

				Public Health Approaches to Understanding Substance Abuse & Addiction Across the Lifespan
3.7	Facilitates communication among individuals, groups, and organizations	F, I, J, K, L	G, I, Q, R, S, T, U	Cultural Competency & Health Disparities Grant Writing 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse & Addiction Across the Lifespan
3.8	Describe the roles of governmental public health, health care, and other partners in improving the health of a community	J, K, L	E, I, Q, R, S, T, V	Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Foundations of Human Nutrition Community & Public Health Nutrition

				Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
	Domain 4. Cultural Competency Skills			
4.1	Describes the concept of diversity as it applies to individuals and populations	A, D, E, I, J, K	F, H, N, O, P, T, U, V	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
4.2	Describes the diversity of individuals and	E, I, J, K	F, H, N, O, P, T, U, V	Cultural Competency & Health Disparities

	populations in a community			Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
4.3	Describes the ways diversity may influence policies, programs, services, and the health of a community	D, E, G, I, J, K	F, H, N, O, P, T, U	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
4.4	Recognizes the contribution of diverse perspectives in developing, implementing, and evaluating policies,	E, G, I, J, K	F, G, H, K, N, O, P, Q, T, U	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health

	programs, and services that affect the health of a community			Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
4.5	Addresses the diversity of individuals and populations when implementing policies, programs, and services that affect the health of a community	E, G, I, J, K	F, H, N, O, P, T, U	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan

4.6	Describes the effects of policies, programs, and services on different populations in a community	D, E, F, I, J, K, L	E, F, G, H, N, O, P, T, U, V	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
4.7	Describes the value of a diverse public health workforce	A, E, I, J, K	E, F, H, N, O, P, Q, T, U	Cultural Competency & Health Disparities Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan

	Domain 5. Community Dimensions of Practice Skills			
5.1	Describes the programs and services provided by governmental and non-governmental organizations to improve the health of a community	E, J, K, L	E, I, P, U, V	Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone I Capstone II Foundations of Human Nutrition Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.2	Recognizes relationships that are affecting health in a community	D, E, I, J, K, L	F, G, H, I, M, N, O, P, Q, U	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States

				200-hour Field Practicum Current Issues in Public Health Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.3	Suggests relationships that may be needed to improve health in a community	D, E, I, J, K, L	F, G, H, I, M, N, O, P, Q, U	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning,

				Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.4	Supports relationships that improve health in a community	E, I, J, K, L	F, G, H, I, M, N, O, P, Q, U	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.5	Collaborates with community partners to improve health in a community	D, E, J, K, L	F, G, H, I, N, O, P, Q, U	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States

				Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.6	Engages community members to improve health in a community	E, G, J, K, L	F, G, H, I, N, O, P, U	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to

				<p>Understanding Substance Abuse & Addiction Across the Lifespan</p>
5.7	Provides input for developing, implementing, evaluating, and improving policies, programs, and services	E, F, J, K	G, I, K, P, Q	<p>Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II</p> <p>Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse & Addiction Across the Lifespan</p>
5.8	Uses assets and resources to improve health in a community	D, E, J, K, L	F, G, H, I, J, N, O, P, V	<p>Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II</p>

				Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
5.9	Informs the public about policies, programs, and resources that improve health in a community	D, E, G, J, K, L	E, G, I, J, P, Q, U	Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse

				Substance Abuse & Addiction Across the Lifespan
5.10	Describes the importance of community-based participatory research	E, F, I, J, K, L	A, D, E, G, I, U	Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Substance Abuse & Addiction Across the Lifespan
	Domain 6. Public Health Sciences Skills			
6.1	Describes the scientific foundation of the field of public health	A, E, F, G, H, I, J, K, L	A, B, C, D	Environmental Public Health Biostatistics Epidemiology Health Care in the United States Current Issues in Public Health Foundations of Human Nutrition The Biology of Addiction & Substance Abuse Public Health Approaches to

				Understanding Substance Abuse
6.2	Identifies prominent events in the history of public health	A, E, G, H, I, J	F, H, L, N, O, T	Cultural Competency & Health Disparities Environmental Public Health Epidemiology Health Care in the United States Current Issues in Public Health Foundations of Human Nutrition Community & Public Health Nutrition The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse
6.3	Describes how public health sciences are used in the delivery of the 10 Essential Public Health Services	B, E, F, G, H, I, J, K, L	G, I, P	Environmental Public Health Biostatistics Epidemiology Health Care in the United States Current Issues in Public Health Capstone I Foundations of Human Nutrition The Biology of Addiction & Substance Abuse
6.4	Retrieves evidence from print and electric resources	F	A, B, C, D, G	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Foundations of Human Nutrition Community & Public Health Nutrition The Biology of Addiction & Substance Abuse

				Public Health Approaches to Understanding Substance Abuse
6.5	Recognizes limitations of evidence	F	A, B, C, D	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Foundations of Human Nutrition Community & Public Health Nutrition The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse
6.6	Describes evidence used in developing, implementing, evaluating, and improving policies, programs, and services	E, F, J, K, L	A, B, C, D, G, K, L, P	Environmental Public Health Biostatistics Epidemiology Grant Writing Capstone I Foundations of Human Nutrition Community & Public Health Nutrition Food Safety The Biology of Addiction & Substance Abuse Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse
6.7	Describes the laws, regulations, policies, and procedures for the ethical conduct of research	F	B, C, D, E, F, G, H, I, N, O, P, V	Cultural Competency & Health Disparities Environmental Public Health Grant Writing

				Foundations of Human Nutrition Community & Public Health Nutrition Food Safety The Biology of Addiction & Substance Abuse Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse
6.8	Contributes to the public health evidence base	C, E, F, G, H, I, J, K, L	A, B, C, D, G, I, L	Environmental Public Health Biostatistics Epidemiology Grant Writing Foundations of Human Nutrition Community & Public Health Nutrition The Biology of Addiction & Substance Abuse Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse
6.9	Suggests partnerships that may increase use of evidence in public health practice	E, F, J, K, L	A, D, E, F, G, H, I, L, M, N, O, P, Q, U, V	Cultural Competency & Health Disparities Environmental Public Health Epidemiology Grant Writing Health Care in the United States Current Issues in Public Health Foundations of Human Nutrition Community & Public Health Nutrition

				<p>The Biology of Addiction & Substance Abuse Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse</p>
	<p>Domain 7. Financial Planning and Management Skills</p>			
7.1	<p>Describes the structures, functions, and authorizations of governmental public health programs and organizations</p>	B, J, K, L	E, I, P, U, V	<p>Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health Capstone I Capstone II Food Safety Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse</p>
7.2	<p>Describes government agencies with authority to impact the health of a community</p>	D, E, G, H, I, J, K, L	E, I, P, U, V	<p>Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health Capstone I Capstone II Food Safety</p>

				Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.3	Adheres to organizational policies and procedures	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Public Health Approaches to Understanding Substance Abuse
7.4	Describes public health funding mechanisms	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to

				Understanding Substance Abuse
7.5	Contributes to the development of program budgets	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.6	Provides information for proposals for funding	G, H, I, J, K, L	D, E, I, J, P	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.7	Provides information for development of contracts with other agreements for programs and services	G, H, I, J, K, L	D, E, I, J, P, U	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice

				Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.8	Describes financial analysis methods used in making decisions about policies, programs, and services	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone I Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.9	Operates programs within budget	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse

7.10	Describes how teams help achieve programs and organizational goals	G, H, I, J, K, L	E, I, P, U	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.11	Motivates colleagues for the purpose of achieving program and organizational goals	G, H, I, J, K, L	E, I, P, U	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.12	Uses evaluation results to improve program and organizational performance	F, G, H, I, J, K, L	E, I, K, P, U	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation

				Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.13	Describes program performance standards and measures	G, H, I, J, K, L	E, I, P, U	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
7.14	Uses performance management systems for program and organizational improvement	G, H, I, J, K, L	E, I, J, P	Grant Writing 200-hour Field Practicum Capstone II Community Health Education: Theory & Practice Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse
	Domain 8. Leadership and Systems Thinking Skills			
8.1	Incorporates ethical standards of practice	E, G, H, I, J, K, L	E, F, H, I, L, M, N, O, P	Cultural Competency & Health Disparities

	(i.e. Public Health Code of Ethics) into all interactions with individuals, organizations, and communities			Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone I Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.2	Describes public health as part of a larger inter-related system of organizations that influence the health of populations at local, national, and global levels	E, G, H, I, J, K, L	E, F, G, H, I, N, O, P, U, V	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy

				Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.3	Describes the ways public health, health care, and other organizations can work together or individually to impact the health of a community	D, E, G, H, I, J, K, L	E, F, H, I, N, O, P, Q, U, V	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.4	Contributes to development of a vision for a healthy community (i.e. emphasis on prevention, health equity for all,	D, E, G, H, I, J, K, L	E, F, G, H, I, N, O, P, V	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States

	excellence and innovation)			Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.5	Identifies internal and external facilitators and barriers that may affect the delivery of the 10 Essential Public Health Services	B, D, E, G, H, I, J, K, L	E, F, G, H, I, N, O, P, V	Cultural Competency & Health Disparities Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Capstone II Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse

				<p>Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
8.6	Describes the need for professional development	G, H, I, J, K, L	E, P, U	<p>Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan</p>
8.7	Participates in professional development opportunities	G, H, I, J, K, L	E, P, U	<p>Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse</p>

				Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.8	Describes the impact of changes (i.e. social, political, economic, scientific) on organizational practices	G, H, I, J, K, L	E, I, P, V	Environmental Public Health Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
8.9	Describes ways to improve individual and program performance	G, H, I, J, K, L	E, I, P, U	Grant Writing Health Care in the United States Current Issues in Public Health 200-hour Field Practicum Community & Public Health Nutrition Community Health Program Planning, Assessment, and Evaluation Health Policy & Advocacy

				Public Health Approaches to Understanding Substance Abuse Legal & Ethical Issues in Substance Abuse Substance Abuse & Addiction Across the Lifespan
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MASTER OF PUBLIC HEALTH

Response to the Academic Programs and Planning Committee

Response to the Academic Programs and Planning Committee Questions Regarding the
Proposal for a Master of Public Health (MPH) degree

April 3, 2020

The following comments are in response to the concerns posed by Academic Programs and Planning Committee (APP) via email on March 27, 2020 regarding the proposal for a Master of Public Health (MPH) degree.

1. **APP concern: Resources:**

- a. *Staff “... the office staff can handle the administrative aspect of the internship.” Most externally accredited programs run much smoother if they have a full time support person. Evidence is needed that staff were consulted and that current office staff are able to support clinical placements. It may be wise to state that full time support staff will be required to assist with internships.*

Committee Response:

- i. *The current public health internship coordinator will oversee and implement the graduate internship the same way the undergraduate internship has been managed for the past 13 years. The current PUBH internship model was established by Dr. Crowell and its success has been acknowledged in 2 peer reviewed manuscripts which are available for your review.*
- ii. *The process is in full compliance with CEPH guidelines. In addition, the PUBH internship model has been adopted for use by the Exercise Science program and the Minor in Cannabis Studies. The PUBH program does not anticipate a need for additional resources at this time. If enrollment numbers increase greatly, this may need to be re-evaluated in the future. Please refer to page 18 of the MPH proposal for a more detailed discussion.*
- b. *Faculty (Item # 14 in the response) – The response indicates that “it is understood that full time faculty are not required to teach in the summer...”, yet the table on page 70 indicates that it is expected that full time faculty will teach in the summer. The table on page 70 also does not indicate credit allocation per course or faculty. The lack of clarity leads to question if the room for General Studies courses is being maintained; for instance, faculty #3 is teaching three courses in fall and spring according to the chart.*

Committee Response:

- i.** It is understood that full-time faculty are not required to teach in the summer. Summer semester courses will be delivered prior to June 30th to remain within the 10-month contract of faculty. Precedence of this procedure has been set by other graduate programs at Stockton that require summer internships, clinical rotations, fieldwork and / or classes over the summer. Please refer to pages 16 and 17 of the MPH proposal for more detail.
- ii.** The narrative on page 17 of the proposal indicates all courses, including the internship, are 3 credits. This is consistent with other graduate programs. Faculty course load will abide by the guidelines put forth by the MOA on Faculty Teaching Load which states “Faculty workload is 24 teaching credits (TCH) per academic year. For faculty who teach primarily 4-credit courses, the normal way of meeting the 24-credit total will be to offer six 4-credit courses. (Graduate courses bearing 3 credits for students will earn 4 TCH.)” ([Memorandum of Agreement on Faculty Teaching Load](#))
- iii.** Section 2.1.2 of the Stockton Faculty Evaluation Policy includes General Studies Teaching as a requirement of all faculty. ([Faculty Evaluation Policy \(2016\) Policy File Number: II-10.5](#)). Therefore, it is understood that faculty will need to meet Stockton’s General Studies requirements and faculty courses will be scheduled to ensure that the requirement is fulfilled.
- iv.** A concern was voiced regarding the request for 4 faculty lines. CEPH requires 2 faculty per concentration for a program to be eligible for accreditation. Please refer to pages 13-14 of the proposal. The initial MPH proposal that was submitted to the Dean’s Council included only one concentration, Nutrition Education, and requested 2 faculty. However, feedback received from the Dean’s Council and the administration based on Hanover data encouraged the incorporation of an additional concentration in Substance Abuse. In light of the current opioid crises in our communities, the program strongly supported the recommendation and included the additional concentration. Hence, the addition of the concentration required us to increase the number of faculty from 2 to 4. It is important to note, however, that the program does NOT need to have all 4 faculty in place until it applies for accreditation. Therefore, the increase in faculty does not need to occur all at once, but rather it can be phased in as the program grows.

- c. **Internships** – *Further clarification and evidence (letters of support) are needed as to available resources for internships. How will these be managed? How many hours per week?*

Committee Response

- i. As previously stated, the graduate internship will be managed the same way the undergraduate internship has been managed for the past 13 years. The process is in full compliance with CEPH guidelines
- ii. Approximately 80-85% of undergraduate PUBH students complete a 200-hour, 4 credit internship in a single semester. The remaining 15-20% of students complete either a 5 Credit (250 hours) or 6 credit (300 hours) internship during the same time frame Therefore, the 200-hour graduate level internship that is required by CEPH is completely obtainable. The number of “hours per week” can be variable, based on the needs of the site, as long as the required number of hours is completed within the semester.
- iii. Dr. Crowell reached out to the graduate director of Stockton’s Social Work Program on Friday, March 27th to provide a verbal explanation of the internship process and to clearly convey the abundance, and occasional surplus, of internship sites that are currently established for undergraduate public health interns. The demand for PUBH interns at these sites often exceeds the number of available students. When there is an insufficient number of senior public health interns to fill all of the requests we get from our internship sites, we often place *select* BSHS, PUBH minors, and/or junior PUBH students at the sites, with internship goals adapted to their level of educational experience, in order to fulfill as many requests as possible from our sites for interns. The PUBH internship director also has a “waiting list” of established sites that reach out to her to ask for students when they have been “skipped” over for a semester or two. Considering our years of experience with internship placement, we do not anticipate a shortage of sites.
- iv. The PUBH program can provide a list of almost 50 sites at which undergraduate PUBH interns have completed their internships over the last decade. Our country is in the middle of a dire pandemic. Therefore, we are unwilling to reach out to any of the sites to request letters of support. Their time, energy, and resources are currently strained as they work tirelessly to keep our country safe and we believe it would place an unnecessary burden on the sites at this time of crisis. We trust that their participation in our internship program for the last 13 years, will be testimony enough for the Faculty Senate.

- d. **Library** – *The list of Library resources could be more comprehensive. A more comprehensive analysis of needs is suggested, including journals, databases,*

books, and other library holdings, and the cost included. A letter of support from the Library would also strengthen this proposal

Committee Response:

- i. A “flash find” search on Stockton’s library website of the term “HEALTH” among available Peer Reviewed sources resulted in 25,691,569 sources.; a search of “NUTRITION “ resulted in 1,043,878 available sources; and a search of “SUBSTANCE ABUSE” resulted in 298,172 available sources.
- ii. The following is a sample of relevant subscriptions currently held by Stockton’s library:

Journal of Public Health Medicine
Journal of Public Health
American Journal of Public Health
PubMed
Environmental Health Perspectives
Health Education
Health Promotion International
Health Informatics Journal
Science & Medicine
Journal of Substance Abuse Treatment
Journal of Ethnicity in Substance Abuse

- iii. If additional resources are needed, students and faculty will be able to utilize interlibrary loan and open-access resources.

2. **APP Concern: Program credit allocation per course requires clarification (Table on page 70)**

Committee Response:

- i. The narrative on page 17 indicates all courses, including the internship, are 3 credits. This is consistent with other graduate programs at Stockton.
3. **APP Concern: Course sequencing** - *(mapping) per track across fall, spring, and summer. What does a typical student’s curriculum look like in each track? What about a part time track? What would it look like for the student to be able to get all necessary courses in a reasonable time frame?*

Committee Response:

- i. CEPH does not require accredited programs to enroll cohort groups. Therefore, sequencing for individual students is not required.
 - ii. Students must complete a total of 45 credit hours to satisfy the to be eligible for graduation. Students may attend full time or part time as their schedules and finances permit.
 - iii. The course offerings for Fall, Spring, and Summer can be found in Appendix I, Page 70, of the proposal. *The Master of Public Health Curriculum Mapped to CEPH Accreditation Standards & Council on Linkages Between Academia and Public Health Practice Core Competencies* can be found in Appendix J, page 71.
4. **APP Concern: Consultation with Social Work** (Item #6)– *It does not appear from the 'Responses' that Social Work was directly consulted as the descriptions of the role are inaccurate. Consider consulting directly with Social Work as a faculty for clarification of the role and areas of potential collaboration.*

Committee Response:

- i. On March 27, 2020 Dr. Crowell, PUBH Program Coordinator, engaged in a telephone conference with Dr. Barney, Graduate Director of SOWK program. In their discussion they recognized that, frequently, there are nuances in definitions, even among individuals within the same profession, and a singular, specific definition of a profession is often elusive. To insure accurate information is included in the MPH proposal, Dr. Crowell requested from the Graduate Director of SOWK the preferred definition for “Social Work” to include in the proposal to clearly delineate the differences between disciplines of Public Health and Social Work.
- ii. On 4/1/20 Dr. Crowell received an email from the graduate director that included varying definitions from multiple sources including The International Federation of Social Workers , National Association of Social Workers Code of Ethics, Ruth and Marshall (2017), and the National Association of Social Workers Standards for Social Work Practice in Health Care Settings (2016). A copy of the email is included for the Faculty Senate review.
- iii. Conclusion: Once again, the search for a single definition, even from the professionals, eludes us. Therefore, we trust that the fluidity of the

definition of “Social Work” will not preclude the faculty senate from approving this proposal for a Master of Public Health.

5. **APP Concern: Non-clinical versus clinical nature of the role** – *There is some discrepancy as to the clinical nature of the substance abuse counselor role as the Jobs Analysis refers to this role as “clinical.” This too, requires clarification.*

Committee Response:

- i. **The Labor Market Analysis Areas and Realtime Postings Intelligence** on pages 6-8 of the Hanover Analysis indicate Substance Abuse/Addictions Counseling as possible job opportunities for individuals with an MPH degree. However, this information must be viewed within a broader context. As discussed in the proposal on page 4, MPH degrees are generally content specific. Contrary to some disciplines, not all curricula for MPH degrees are the same. This is further exemplified by the MPH degrees on page 5 of the Hanover report which lists the common areas of study in MPH programs. For your convenience, the chart is included below.

Degree Completion Analysis: Concentration Areas

Biostatistics	7	161	681
Epidemiology	0	337	1,312
Health/Health Care Administration/Management	103	1,337	9,619
Environmental Health	0	186	641
Public Health Education and Promotion	3	120	877
International Public Health/International Health	0	139	540
Health Services Administration	0	174	891
Substance Abuse/Addiction Counseling	0	26	390
Nutrition Sciences	3	283	1,016
Total	116	2,763	15,967
Growth Rate	6.8%	9.7%	6.4%

Clearly, the content areas are quite diverse and can only truly be understood by close examination of the curriculum. While some MPH programs prepare counselors, the proposed MPH will not prepare, nor claim to prepare, students to serve as substance abuse or addiction *counselors*. A review of the core and concentration courses for the proposed Substance Abuse concentration clearly demonstrates an emphasis on developing an understanding the complexities of substance abuse within the lens of public health principles. It does not include courses in counselor preparation. Therefore, graduates of the MPH will not be competing for clinical jobs with graduates from counselor preparation programs.

- ii. The aforementioned distinction is elucidated on page 8 of the proposal and reads as follows: *“Unlike Substance Abuse Counseling, which would involve working with individuals in a clinical setting to address issues related to mental health, behavior patterns, and treatment options, a public health professional with education in substance abuse would not be qualified to provide this kind of care. Rather, students who elect the Substance Abuse Concentration within the MPH degree would be qualified to address the impact on the health and function of a community that is dealing with substance abuse issues, as well as address the changes to legislation, policy and education required to aid an entire community’s ability to prevent and manage substance abuse-related issues.”*

6. **APP Concern: Lack of clarity as to the education concentration of the Public Health role.** A suggestion was made to consult the Southern Connecticut State University MPH program.

Committee Response:

- i. The proposed MPH is content specific and will focus on the following two areas: nutrition education and substance abuse. The MPH does not offer a generic “education concentration”. The current curriculum was developed using criteria put forth by Core Competencies for Public Health Professionals as described by the Council on Linkages Between Academia and Public Health Practice, the National Commission for Health Education Credentialing, and the National Board of Public Health Examiners. The aforementioned bodies recognize the diverse areas of specialization within the field of public health and acknowledge that qualified graduates from different programs are eligible to pursue examinations for the same credentials, such as CPH and/or CHES. One might compare this to the practice of medicine, some physicians are generalists, such as primary care physicians, while others are specialists, such as neurosurgeons. They each have a common core of knowledge, but have “content specific” specialties; yet, they are all physicians, the “same, but still different.”
- ii. A review of the MPH offered at Southern Connecticut State University demonstrates several aspects that have been addressed in this committee’s comments to the concerns previously brought forth by APP. The current proposal and the MPH at Southern Connecticut share some similarities, such as the degree title (MPH) and the inclusion of courses in the core principles and practices in public health: however, the content areas of emphasis are quite different. Therefore, since Stockton proposes studies in nutrition education and substance use, and Southern Connecticut concentrates on health care systems, management, and policy a

comparison of the two programs must be done within the appropriate frameworks and caution must be exercised in drawing global conclusions.

Attached, please find email correspondence verifying the concerns posed by APP that are addressed in the current document and the information regarding the definition of Social Work. Dr. Crowell's manuscripts are available under separate cover.

The committee appreciates the opportunity to respond to the questions put forth by the Academic Programs and Planning committee and welcomes the opportunity to respond to any additional questions.

Dr. Elizabeth Calamidas

Dr. Tara Crowell

Mr. Anthony Dissen

Attachments

Attachment 1: Academic Programs and Planning Committee Concerns

Harvey, Douglas

Fri 3/27/2020 10:57 AM

Dissen, Anthony R.;

Calamidas, Elizabeth;

Crowell, Tara;

Zucconi, Laura;

Madan, Manish

Dear Anthony,

After reviewing the resubmission of the proposal for a Masters of Public Health, the members of the Academic Programs and Planning Committee believe the proposal needs further work before it is ready to go before Faculty Senate. Specifically the committee requests further clarification and revision on the following points and sections:

1. Resources – staff, faculty, internships, and the Library;
2. Program credit allocation per course
3. Course sequencing per track across fall, spring, summer
4. Consultation with Social Work
6. Non-clinical versus clinical nature of the role
7. Lack of clarity as to the education concentration of public health -

Specifically -

1. **Resources –Staff** “... the office staff can handle the administrative aspect of the internship.” Most externally accredited programs run much smoother if they have a full time support person. Evidence is needed that staff were consulted and that current office staff are able to support clinical placements. It may be wise to state that full time support staff will be required to assist with internships.

Faculty (Item # 14 in the response) – The response indicates that “it is understood that full time faculty are not required to teach in the summer...” , yet the table on page 70 indicates that it is expected that full time faculty will teach in the summer. The table on page 70 also does not indicate credit allocation per course or faculty. The lack of clarity leads to question if the room for General Studies courses is being maintained; for instance, faculty #3 is teaching three courses in fall and spring according to the chart.

Internships – Further clarification and evidence (letters of support) are needed as to available resources for internships. How will these be managed? How many hours per week?

Library – The list of Library resources could be more comprehensive. A more comprehensive analysis of needs is suggested, including journals, databases, books, and other library holdings, and the cost included. A letter of support from the Library would also strengthen this proposal.

2. **Program credit allocation** per course requires clarification (Table on page 70).
3. **Course sequencing** (mapping) per track across fall, spring, and summer. What does a typical student's curriculum look like in each track? What about a part time track? What would it look like for the student to be able to get all necessary courses in a reasonable time frame?
4. **Consultation with Social Work** (Item #6)– It does not appear from the 'Responses' that Social Work was directly consulted as the descriptions of the role are inaccurate. Consider consulting directly with Social Work as a faculty for clarification of the role and areas of potential collaboration.
5. **Non-clinical versus clinical nature of the role** – There is some discrepancy as to the clinical nature of the substance abuse counselor role as the Jobs Analysis refers to this role as "clinical." This too, requires clarification.
6. **Lack of clarity as to the education concentration** of the Public Health role. A suggestion was made to consult the Southern Connecticut State University MPH program.

Grammatical and typographical errors remain in the document.

The committee believes that this proposal would be challenged at the Senate review for these items, so it is in the best interest of the proposal to revise and resubmit to the committee. The committee has one more meeting this term, on April 23rd. Please provide revisions by April 9th for the proposal to be taken up at the April 23rd meeting. Otherwise the next meeting of the committee will be in September of 2020.

Sincerely,

Douglas M Harvey, D.Ed.

Director of the Institute for Faculty Development

Associate Professor of Instructional Technology

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Attachment 2: Correspondence on the Definition of Social Work

From: "Barney, Robert" <Robert.Barney@stockton.edu>

Date: April 1, 2020 at 5:44:57 PM EDT

To: "Crowell, Tara" <Tara.Crowell@stockton.edu>

Subject: Re: Definition of social work

Tara,

I'm happy to help. You've asked for a definition of social work, so I'll start by offering that. The International Federation of Social Workers (2014) have defined the profession as the following: "Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels". (<https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/>)

The National Association of Social Workers Code of Ethics (2017) help to build on definitions like this, and offers a statement on what the mission of social work is. They state "The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession's focus on individual well-being in a social context and the well-being of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living." (<https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>).

Both of these definitions emphasize that social workers simultaneously are charged with addressing the well being of individual clients, while also addressing challenges and problems at the societal level. I realize that you are interested in exploring how this relates specifically to the fields of health care and public health. Ruth and Marshall (2017) state: "Dedicated to improving human well-being, social workers use ecological, clinical, and biopsychosocial approaches to work at multiple levels of society, ranging from individuals and families to neighborhoods, organizations, and government. The umbrella of health social work includes numerous subdisciplines, such as public health, behavioral health, oncology, nephrology, and palliative care social work. Most health social workers serve in direct care roles, such as counseling, health education, and crisis intervention. However, social workers also practice at intermediary levels as navigators and care managers and at the macro level in health administration, prevention and health promotion, research,

advocacy, and policy".

(<https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2017.304005>)

The National Association of Social Workers (2016) also has a set of Standards for Social Work Practice in Health Care Settings that details the roles and responsibilities of social workers in the field of health. This might help clarify how the social work profession functions in this arena (<https://www.socialworkers.org/LinkClick.aspx?fileticket=fFnsRHX-4HE%3d&portalid=0>)

Feel free to let me know if I can be of further help on this!

Robert J. Barney, PhD, MSW
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MASTER OF PUBLIC HEALTH

Supporting Literature

Academic Internships: To Take or Not to Take? Students' Assessments of Public Health Fieldwork

Tara L. Crowell, PhD¹

Pedagogy in Health Promotion: The Scholarship of Teaching and Learning 2018, Vol. 4(1) 19-34

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DOI: 10.1177/2373379916684850

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Abstract

While academic internships can play irreplaceable roles by providing students hands-on learning opportunities, allowing them to collaborate with faculty, and strengthening ties between colleges and their communities, continued assessment of these experiences is still imperative. An academic internship has been described as a three-way partnership among a college or university, the internship site, and the student, but the role the institution plays can differ significantly. Several years ago, the Association of Schools of Public Health included field experience (such as internships) as a *Critical Components Element of an Undergraduate Major in Public Health*. Hence, this study investigates not only how Public Health students evaluate their internship site but also their experience with their school during the internship process. Survey data from 219 undergraduate students, on completion of their internships from Fall 2012 to Spring 2016, were collected. Results posit that public health students report the academic institution provided support and guidance, while their internship site provided a valuable learning experience both interpersonally and professionally. Also, students recommend this experience and provide valuable feedback for future internship partnerships. Considering internships are integral parts of many preprofessional degree programs, it is imperative that programs develop and implement systematic ways to assess these programs. This study provides valuable insight into this process along with identifying students' perceptions of the academic internship and the role that both the site and the institution played in facilitating their learning.

Keywords

public health internships and fieldwork, student assessment, academic learning

Internships are integral parts of many academic programs that contribute significantly to students' educational and personal growth in numerous ways. Specifically, internships are a graduation requirement for many universities and colleges because they increase students' employability as well as provide educational value (Galvan, Fisher, Casman, & Small, 2013). An academic internship has been described as a three-way partnership among an institution of higher education, the internship site, and the student, but the role the institution plays can differ significantly. Thus, the purpose of this study is twofold: first, to investigate students' perception of their internship site as related to their academic growth; and second, identify students' perception of the role their institution plays during their internship process. This study provides insight into the impact the internship experience had on their personal skills along with their professional development. In addition, this study goes one step further by also including the impact the institution played in facilitating students' internship experience and ultimately their learning. Specifically, to obtain a

more holistic evaluation of the entire process, public health students provide self-assessment of their experiences while at the internship site, along with assessing the internship coordinator and added classroom components and assignments associated with their required semester-long internship.

Literature Review

Academic Internships

Academic internships are defined as an opportunity to integrate work-related experience into graduate education by participating in scheduled and supervised work (Gault, Leach, & Duey, 2010). These real-world experiences are

¹Stockton University, Galloway, NJ, USA

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Email: tara.crowell@stockton.edu

an integral component of an academic program and provide students with the opportunity to develop not only work skills but also an understanding of the workplace (Gerken, Rienties, Giesbers, & Könings, 2012). An internship experience, due to its very nature, is as different as the disciplines in which students are obtaining their major and the school in which they are attending. In support, the National Association of Colleges and Employers has found that only 28% of colleges in the United States associate classroom experience with academic credit for internships, while 25% do not require any kind of written assignments, 15% do not require any faculty supervision, and 6% require nothing at all (as cited in Ross, 2011). In addition, the study reports that university policies on credit vary widely with respect to internships, study abroad, and coursework at other accredited institutions, and the value of their credits are more highly guarded by elite college versus more permissive institutions.

Numerous past studies provide solid evidence on the benefit of internships reporting a variety of added value from experience-based learning activities associated with academic internships. Galvan et al. (2013) provide an excellent review of these benefits, and although they are not specifically internships in the field of Public Health, results paint a clear picture of these benefits. Specifically, completion of an academic internship has been positively correlated with characteristics that future employers seek: essential skills and attributes (Knouse, Tanner, & Harris, 1999; Siegel, Blackwood, & Landy, 2010; Taylor, 1988), personal competencies (Knechel & Snowball, 1987; Scholz, Steiner, & Hansmann, 2004), transferable skills (Gault et al., 2010; Jiusto & DiBlasio, 2006; Knouse et al., 1999; Koehler, 1974; Scholz et al., 2004; Taylor, 1988), job qualifications (Siegel et al., 2010; Taylor, 1988), work knowledge (Callanan & Benzing, 2004; Knechel & Snowball, 1987), professional development (Siegel et al., 2010), and adaptability and mobility to a new position (Callanan & Benzing, 2004; Scholz et al., 2004; Siegel et al., 2010; Tovey, 2001). In addition, previous studies indicate the following benefits to students who engaged in academic internships: improved their academic performance (Blair, Millea, & Hammer, 2004; Knouse et al., 1999; Koehler, 1974; Siegel et al., 2010), students come back to the university after an internship with more motivation (Blair et al., 2004; Knouse et al., 1999; Koehler, 1974; Siegel et al., 2010), and provided real-life professional experience (Knechel & Snowball, 1987). Furthermore, these studies posit that internships foster employability characteristics: (a) essential attributes such as self-discipline, positive attitude and performance at work, and ability to reconcile conflicts of interest; (b) association with personal competencies such as motivation and autonomy; (c) assessment of transferable skills, such as interpersonal communication, oral presentations,

computer, research, critical thinking, creative thinking, time management, report writing, problem-solving abilities, and organization of work. Finally, these results reveal that students participating in internships are more likely to have an attitude to improve the status quo; better job qualifications such as professional training for specific jobs; better ability to deal with ambiguous situations; increases likelihood of obtaining the *first job after graduation*; more equipped to evaluate and accept job opportunities as a result of socialization and acculturation gained during the internship; a better starting salary; better current salary; better job satisfaction; and higher promotion rates.¹ Overall, the above lends support, regardless of discipline, to Narayanan, Olk, and Fukami's (2010) claim that internships are one of students' most important curricular experiences to learn about occupational environments. However, although the potential value of an academic internship can be limitless, there is still a need for a systematic process to be implemented to evaluate the internship and the roles that each party plays in the process.

Assessing Internships

According to Walvoord (2010), by definition "assessment is the systematic collection of information about student learning, using the time, knowledge, expertise, and resources available, in order to inform decisions that affect student learning" (p. 2). In a more simplistic understanding, it is a way to measure the effectiveness of the course being taught and the methods of doing so; or as a whole—an academic program. It holds the purpose to constantly improve instructing methods and student learning. A recent study conducted by the National Institute for Learning Outcomes Assessment (Glenn, 2011) discovered that there was an evident difference in the types of assessment depending on the academic program. The types of assessment considered in their study were as follows: locally developed, licensure, and standardized exams; alumni and employer surveys; student interviews or focus groups; capstone courses; culminating projects or demonstrations; and portfolios. Assessment, in its various forms, has become a standardized tool to continuously evaluate and reevaluate instructional methods and student learning. Thus, given the internship may be one of academia's most valuable learning experiences, it is reasonable to question how this may be validated.

The value of an internship experience is enhanced when that experience is carefully and systematically assessed (Weimer, 2010). For example, Beard (2007) notes that the evaluations of the accounting internship experience she describes "provide information about students' traits, knowledge, skills, and behaviors as well as perspectives on coursework, activities, and suggested

curriculum changes" (p. 211). Thus, the challenge is finding those assessment mechanisms that work well to assess internship experiences. For the current study, the undergraduate Public Health Program began by identifying a set of goals and objectives for their internship experience. These goals are used to help place students in appropriate internships and provide the overarching framework for the assessment of their performance in the internship. In the current study, the goal of this student evaluation is to assess students' perceptions of not only the benefits of their internship to their personal, academic, and career growth but also assessing the role their institution played in this process. The following gives a brief overview of this internship along with specific research questions.

Public Health Internship

As a result of a growing interest in undergraduate for public health, the Association of Schools of Public Health charged an expert panel with providing guidance for those seeking to start a new undergraduate program in public health or to expand or improve an existing program. A broad cross-section of experts from the practice sector, from academia, and from a range of partner organizations developed a set of critical component elements for bachelor degrees in public health that would prepare students to enter the workforce and/or to pursue advanced studies in public health or other health professions. As part of this *Critical Components Element of an Undergraduate Major in Public Health*,² there is a *Capstone and Field Experience* component. Specifically, this document states,

Students should have opportunities to integrate, apply, and synthesize knowledge through cumulative and experiential activities that include: 1) Capstone: Students should have a cumulative, integrative, and applied experience or inquiry project that serves as a capstone to their educational experience; and 2) Field Experiences: As an integral part of their education, students should be exposed to local level public health professionals and/or to agencies that engage in population health practices.

The Public Health Program at Stockton University offers undergraduate students an opportunity obtain these critical component elements by taking PUBH 4950. Stockton University, founded in 1969, is a comprehensive university with a strong liberal arts tradition. It currently enrolls 8,674 undergraduate and graduate students on its main campus situated on 1,600 forested acres within a 1.1 million acre Pinelands National Reserve, 12 miles from the Jersey shore. Stockton has been recognized as a key educational leader in the region. The University is ranked as one of the top 10

public colleges and universities in the North by *U.S. News & World Report*, as a "Best in the Northeast" college by *The Princeton Review*, and as sixth in the nation by the *Military Times* "Best for Vets: Colleges 2016." It has also been designated as an anchor institution for the state of New Jersey.

PUBH 4950 Internship and Fieldwork is four credits and is required for all public health majors. This course is a traditional internship with an additional classroom element to expose students to both fieldwork and a "senior-capstone" experience geared toward starting a career in the field of public health. In the past, students were required to complete 200 hours at their chosen organization. Students are still required to complete 200 hours; however, 175 hours will be completed on-site, while the other 25 hours are made up of traditional classroom time (5-6 classes) and completion of several assignments relating to their internship and future career in the field of public health (see Appendix A for full description, including core and track competencies and student assignments).

The objective of the current study is to obtain data regarding students' perception of the above internship experience. Specifically, the following research questions were posed:

Research Question 1: What are students' perceptions of their academic internship experience with regard to facilitating their learning?

Research Question 2: What are students' perceptions of their academic internship experience with regard to acquiring career experience?

Research Question 3: What are students' perceptions of the role their academic institution played in their internship experience?

Methodology

Weimer (2010) states that the value of an internship experience is enhanced when that experience is carefully and systematically assessed. Specifically, Beard (2007) notes "that the evaluations of the accounting internship experience she describes provide information about students' traits, knowledge, skills, and behaviors as well as perspectives on coursework, activities, and suggested curriculum changes" (p. 211). Similarly, a blog on the best practices in assessment states that assessment of an internship experience is important, not only for evaluating the performance of specific students and assigning grades but also for determining whether the characteristics of a given internship (e.g., the experiences provided at a given site, or the timing of the internship within the context of the academic program) adequately address a program's student learning

outcomes. However, the challenge is finding those assessment mechanisms that work well to assess internship experiences. Given this challenge, the author researched other types of internship evaluations and developed the current survey with questions specifically tailored to public health students' experiences with regards to their internship experience.

The survey (see Appendix B for the complete survey) is compiled of three different sections: (a) site identification information, including how students obtained their site; (b) questions regarding the internship site; and (c) questions focusing on the students' perception of the role the institution played in the process. Specifically, a 5-point Likert-type scale, *strongly disagree* to *strongly agree*, was used to ascertain both students' perception of how their internship opportunity helped facilitate personal skill development along with a variety of tasks interns may have performed. For the 6 items assessing the role in internship played in developing personal skills, a Cronbach's alpha of .81 was found. For the 11 items assessing interns' task behavior, a Cronbach's alpha of .90 was found. In addition, a similar format was used to obtain students' perception of the role the internship coordinator played in setting up the internship and during the internship. Reliability for questions assessing students' perception of the role of the internship coordinator a Cronbach's alpha on 9 questions (the question on site visits was not used, given the lower number of responses on this item) reports a .84 reliability. Next, students provided information regarding the classroom element that goes along with their internship site hours. These six questions were designed using a 10-point systematic differential scale from 1 (*not beneficial*) to 10 (*very beneficial*). For the 6 items use to assess students' perception of the classroom component of the internship, a Cronbach's alpha of .89 was found. Finally, the survey ended with several open-ended questions to allow students the ability to provide some qualitative feedback about their experience, along with whether the internship was paid and if a job offer was made. Given that scale development was not the purpose of this study, issues of validity are not addressed, although face validity can be seen. In support, Artino, La Rochelle, Dezee and Gehlback (2014) posit that survey instrument validation may be the most difficult task for a scientist starting to conduct educational research.

In the fall of 2007, the Public Health Program was approximately 65 students, a rather small program at a mid-size liberal arts college. However, over the years, as the college grew, so did the Public Health Program, averaging approximately 150 students in this one major (during which time, Stockton also became a university). Since Fall 2007, the Public Health Program has offered undergraduate students the opportunity to engage in

internship/fieldwork experience. Given the commitment by the institution, the Public Health Internship was redesign to help meet the needs of the students. Specifically, 4 out of 12 teaching credits each semester were designated toward the internship—creating the internship coordinator position. The internship coordinator meets with each student the semester prior taking their internship. The internship coordinator verbally discusses the internship process with the students and provides them ample corresponding written documentation regarding both the academic and administrative aspects associated with the internship. In addition, the internship coordinator provides a lengthy (continuously growing) list of possible internship site with job descriptions and contact information. This not only allows students a starting point when determining their possible internship site and creates a process for possible future sites. Specifically, when individuals from new organizations contact the institution, they are forwarded to the internship coordinator. A standard form requesting internship description and contact information are obtained, and if approved, sites are added to the list.

Starting in the Fall 2012, till Spring 2016, the public health internship coordinator began collecting student assessment data to identify students' perceptions regarding their experience with their internship site, along with the role their institution played in the academic internship process. During these 4½ years, assessment data were collected on a total of 219 students, 169 (77%) female, and 50 (23%) male, interning at a little over three dozen different sites—health care, government, nonprofit, and corporate organizations. Students were in the following academic tracks within the public health major: 33% Community Education Track; 27% Administrative Track; 10% Environmental Track; and the remaining 30% of students were in Pre-OT (Occupational Therapy) and Pre-PT (Physical Therapy). In addition, data indicate that in almost 61.3% of the cases, students obtained their internship site from institutional resources, with internship coordinator and faculty accounting for almost 60%. Additional demographics regarding students' internship site indicate that while only 9.3% of interns received monetary compensation, 21% of students were offered a full- or part-time position from their internship site. In addition, just over 80% of students recommend or highly recommend their internship site to other students (see Table 1).

Results

In order to answer Research Question 1 regarding students' perceptions of their academic internship experience with regards to facilitating their learning, the author

Table 1. Sample Description.

How students obtained their internship site		Frequency	Percentage	Valid percentage	Cumulative percentage
Valid	Career services	3	1.4	1.4	1.4
	Internship coordinator	74	33.8	34.1	35.5
	Faculty	56	25.6	25.8	61.3
	Internet	13	5.9	6.0	67.3
	Family/friend	52	23.7	24.0	91.2
	Employer	6	2.7	2.8	94.0
	Other	13	5.9	6.0	100.0
	Total	217	99.1	100.0	
Missing	99.00	2	0.9		
Total		219	100.0		

Student recommendation of internship site		Frequency	Percentage	Valid percentage	Cumulative percentage
Valid	Would not recommend	8	3.7	3.8	3.8
	Recommend with reservations	24	11.0	11.4	15.2
	Recommend	42	19.2	19.9	35.1
	Highly recommend	137	62.6	64.9	100.0
	Total	211	96.3	100.0	
Missing	99.00	8	3.7		
Total		219	100.0		

ran several descriptive statistics. Results indicate high levels of learning, skill development, and positive experience. Tables 2–4 show specific results.

Finally, students responded to open-ended questions in order to receive additional feedback with regarding suggestions for future interns and the internship coordinator. Table 5 shows the general themes that were present from these responses.

Discussion

Academic internships play a critical role in students learning and can serve as a bridge for students to connect classroom learning to personal fields, while facilitating both personal and career-related skills. However, this three-way relationship among students, academic institutions, and organizations can be complex and should be designed and implemented in a systematic format. This study assesses students' perception of their academic internship from both the organizational and institutional level. Results of this study indicate that students positively evaluate their academic internships at both levels.

Specifically, results of descriptive statistics indicate that the academic institution was the predominant factor in securing their public health internship site. In addition, over 80% of the students report that they would recommend or highly recommend their site and it was a good or excellent learning experience. Students posit high personal skill development too, specifically ranking interpersonal and human relations skills the highest, followed by

oral presentation, critical thinking and problem solving skills, and creativity and writing skills just a bit lower. Although these results are consistent with past studies indicating the numerous benefits to students from academic internships (see Note 1), it is important to continue to evaluate internships to ensure benefits remain consistent. In addition, this study now extends the benefits of internships to public health students; this is especially pertinent given that *fieldwork* has been defined as a *critical component* of the undergraduate public health curriculum.

Similar to the above results, public health students also rate their internship experience favorably with regard to development of career and professional skills. Specifically, students indicate that their internships provided high opportunity for all aspects. Among the highest were that the internship site provided students responsibility consistent with their ability and then they were given additional responsibility as their experience increased. Also, students report that supervisors were available and accessible for questions, they were treated on the same level of other employees, and had a good working relationship with coworkers, ample opportunity for learning, and that the experience prepared them to enter the work force. Students also posit that they were provided adequate training, a realistic preview of the public health field, and a better understanding of the discipline's theories, concepts, and skills. Finally, although still high, students ranked the work they performed at their internship as challenging and stimulating the lowest.

Table 2. Results for Research Question 1.

Overall learning experience		Frequency	Percentage	Valid percentage	Cumulative percentage
Valid	Poor learning	5	2.3	2.4	2.4
	Below average	11	5.0	5.2	7.6
	Average	15	6.8	7.1	14.7
	Good learning	52	23.7	24.6	39.3
	Excellent learning experience	127	58.0	60.2	99.5
	10.00	1	0.5	0.5	100.0
	Total	211	96.3	100.0	
Missing	99.00	8	3.7		
Total		219	100.0		

Internship site provided the opportunity to use and develop	<i>N</i>	Range	<i>M</i>	<i>SD</i>
Interpersonal/human relations skills	217	2-5	4.74	0.540
Oral communication/presentation skills	212	1-5	4.28	1.00
Creativity	214	1-5	4.08	1.07
Problem-solving abilities	214	2-5	4.21	0.868
Critical thinking skills	217	1-5	4.28	0.854
Writing skills	214	1-5	3.98	1.06

Table 3. Results for Research Question 2.

Internship experience	<i>N</i>	Range	<i>M</i>	<i>SD</i>
Realistic preview of field of interest	218	1-5	4.37	0.882
Better understanding of concepts, theories, and skills in course of study	215	1-5	4.36	0.875
Given adequate training	218	1-5	4.23	1.04
Regular meetings with supervisor and received constructive, ongoing feedback	219	1-5	4.40	0.869
Provided levels of responsibility consistent with ability and given additional responsibility as experience increased	218	1-5	4.50	0.809
Supervisor was available and accessible for questions/concerns	218	1-5	4.64	0.779
The work was challenging and stimulating	217	1-5	4.08	0.958
Treated on the same level as other employees	217	1-5	4.55	0.832
Good working relationship with coworkers	217	2-5	4.80	0.529
Ample opportunities for learning	217	1-5	4.52	0.836
Better prepared to enter the world of work after this experience	217	1-5	4.53	0.748

Further findings of this study reveal students positively evaluated their academic institution, specifically the role of the internship coordinator and the classroom components. Public health students indicate the overall effectiveness of the internship coordinator very high.

Table 4. Results for Research Question 3.

Internship coordinator-provided assistance	<i>N</i>	Range	<i>M</i>	<i>SD</i>
Paperwork	213	2-5	4.83	0.444
Registering for internship	206	3-5	4.82	0.454
Site selection	202	1-5	4.56	0.809
Questions regarding starting internship	210	3-5	4.86	0.367
Internship coordinator				
Available during office hours	210	3-5	4.82	0.434
Responded to e-mails/phone calls	207	3-5	4.93	0.270
Available to visit site	120	1-5	4.40	1.16
Assisted with problems/concerns	203	3-5	4.85	0.403
Provided guidance/support when needed	209	3-5	4.84	0.398
Overall effective	200	4-5	4.93	0.255
PUBH 4950 classroom components beneficial to learning experience	<i>N</i> ^a	Range	<i>M</i>	<i>SD</i>
Class meetings	170	1-10	7.11	2.92
Classroom discussion	170	1-10	7.24	2.82
Career services workshop	170	1-10	7.57	2.96
Resume and cover letter assignment	210	1-10	8.85	2.05
e-Portfolio and summary paper		1-10	8.33	2.26
Final presentation	170	1-10	7.89	2.77

^a*N*s are lower for classroom components because students taking their internship in the summer did not have a classroom component to their internships.

Specifically, students report that their internship coordinator was helpful in their site selection, internship

Table 5. Results for Open-Ended Questions.*Recommendations for future students*

Comments regarding scheduling/logistics of the internship

- Internship is time consuming—lighter course load and work schedule; stressing organization/time management
- Be prepared, there may be a lot of driving
- Plan a set schedule with your site supervisor early on; easier to have the same day and times every week
- Knowing how to speak Spanish is extremely helpful in many public health internships

Comments regarding skills needed during the internship

- Interpersonal skills—working with others, coworkers, supervisor; ability to interact/social skills
- Computer skills, research, creativity, and problem-solving skills
- Ability to work independently

Additional comments

- Do not be shy—ask questions, provide ideas, get involved, ask to go out in the field and shadow, ask for responsibilities, and be an initiator
- Students in the *Community Health Education Track*—have an area of interest in public health for when you develop and implement educational programs
- Students in the *Administrative Track*—be prepared to suggest your own projects, based on what you have learned in the classroom, coupled with the needs of the organization (sites do not always have a specific project in mind, so you may need to create one with your supervisor)

Feedback for internship coordinator

- Internship was a rewarding, positive experience that increased learning both personally and professionally
- Interns appreciated assistance with getting a site and all the paperwork to get it started with the internship
- Interns strongly acknowledged the availability of the coordinator to answer questions and respond to e-mails in a timely manner
- Interns felt coursework prepared them for their internship experience
- Interns indicated some scheduling difficulties between attending their internship sites and attending the internship class meetings
- Interns commented about track specific sites; specifically which sites are more appropriate for students in the *Administrative Track* versus students in the *Community Health Education* track

paperwork, internship registration, and available to answer questions prior to starting their internship. In addition, during the time the students were completing their internship, the coordinator also was available for office hours, responded to e-mails and phone calls, was available if/when problems or concerns arose and was available for site visits. As for the classroom component, students posit slightly lower scores for these, although still fairly high. Specifically, students ranked elements they perceived as more directly related to their internship and future career, such as their internship portfolio, resume and cover letter assignment, and final presentation, slightly higher than more traditional classroom components, such as class meetings and discussions.

A study that evaluated students' perception of the value of business internships found similar results. Overall findings reveal that internships are an important part of the business school curriculum (Hergert, 2009). Specifically, results reveal that internships play a crucial role in helping students make the connections between their traditional coursework and the workplace. This study found that students place a great value on the internship experience when the internship has a direct connection to their ultimate career goals, relates to the institution's pedagogical approach, and when educators provide the appropriate structure for the internship. In comparison, one study found students indicated negative

feedback on the overall structure of the internship program. Specifically, students were dissatisfied with this program when it failed to provide overall training for different departments and when certain elements of the institutional internship format were subpar (Karunaratne & Perera, 2015). Results indicate a need for more dialogue between the university and the internship sites, along with a more defined and supportive structure of the institution's internship program. In short, these results support the positive benefits that come from a well-defined and supported public health internship component to their curriculum. In addition, continuing to collect student evaluations of internships can help with identifying possible needs for specific public health curriculum development, classroom preparation, program assessment, and assessment for accreditation bodies.

Finally, qualitative data reveal insightful student feedback for both the program and to future public health students. Students' feedback to future interns provided valuable suggestions on numerous aspects of the internship process. First, regarding the specific logistics of the internship, students recommend having a lighter course load and work schedule because the internship is very time consuming. Students stress time management and organization, along with having a set weekly schedule are highly advisable. Also, during the internship, students may need to factor in time and gas for driving and

be advised that there is a great need for those in the public health field to speak Spanish. Second, students indicated that future interns will need the following skills while participating at their internship site: strong interpersonal and social skills to work with others, along with ability to work independently. In addition, students identify several skills that interns will need to possess: computer, research, problem solving, and creativity. Last, students provided several other comments to help guide future interns such as, the importance of being outgoing, asking questions and seeking ways to get involved, and the importance of having your own ideas and topics in mind to help maximize your learning experience.

Students' qualitative feedback to the internship supports a positive learning experience and illustrates students' appreciation for strong administrative and academic institutional support. Specifically, students felt their academic coursework prepared them for their internships and valued their guidance both before and during their internship experience; students commented most frequently about responses to e-mails in a timely manner and availability for questions and problems. In addition, students' feedback about track-specific internship sites that would help guide appropriate placement for future internships are especially helpful. Finally, students provide helpful administrative comments regarding some of the logistics of the class meetings during the semester.

In conclusion, although this study is limited by only addressing one internship program at one academic institution, nonetheless it provides valuable insight. Specifically, public health students assess both the internship site and the academic institution and provide helpful feedback for future students. Overall, both quantitative and qualitative data support the positive benefits for students on both a personal and professional level and contribute to the body of research on internships, by identifying the value of experiencing a strong, systematic internship component during their academic career. The public health field pinpoints the inclusion of field work as a critical component to undergraduate institutions and this study chronicles the values of developing, implementing, and assessing these field work experiences.

Appendix A

PUBH 4950: Public Health Internship and Fieldwork

Description: PUBH 4950 Internship and Fieldwork is four credits and is required for all public health majors. This course is a traditional internship with an additional classroom element to expose students to both fieldwork and a "senior-capstone" experience geared toward

starting a career in the field of public health. In the past, students were required to complete 200 hours at their chosen organization. Students are still required to complete 200 hours; however, 175 hours will be completed on-site, while the other 25 hours are made up of traditional classroom time (5-6 classes) and completion of several assignments relating to their internship and future career in the field of public health. In *rare cases*, if a student needs to enroll for additional internship credits, he/she may do so with the approval of the faculty member and the internship supervisor. For each additional credit, an additional 50 hours of internship must be fulfilled. This course is offered in the fall, spring, and summer. **Special Note:** Students pursuing a GERO certificate may use this course for both as long as the facility/organization specializes in treating the elderly; students are also responsible to obtain site approval by the GERO faculty coordinator.

Requirements: Effective Spring 2015, all PUBH students will need to have a background check completed before the start of the semester in which they will do their internship. This will eliminate a number of problems we have encountered with sites and also will allow for parity in the requirements needed among students seeking internships. The individual internship sites will determine if anything that might come up on the check is egregious enough to warrant refusing the student a position. During preceptorial advising, students will be given the protocol to follow to complete the background check and directions are also included at the end of this document (PUBH 4950 packet). The onus will be on the **STUDENT** to insure that the background is completed and submitted to the SHS by the **first day of the semester. Students will also be responsible for paying for the background check (this policy is consistent with all other programs in the SHS that require internships or field placements of any kind). If the background check is not completed, the student will be automatically dropped from the internship course and will be required to wait until the following semester to register again. There will be NO EXCEPTIONS.** In this day and age of litigation and liability, we need to have a consistent policy that is equitably enforced

Prerequisites:

Community Education Track

All the PUBH CHED students MUST complete PUBH 1100 (intro), PUBH 2432 (contemporary health issues) and PUBH 3102 (CHED theory and practice) BEFORE they do their internship. Any other courses in PUBH may be taken concurrently or after the internship.

Environmental Track

All of the ENVIRONMENTAL HEALTH students MUST complete PUBH 2530 Basic Environmental Health, plus a minimum of one 2,000+ environmental health course

related to their internship: PUBH 3111 Food Safety, PUBH 3640 Risk Assessment, or PUBH 3620 Occupational Health. Any other courses in PUBH may be taken concurrently or after the internship.

Administration Track

All of the HEALTH ADMINISTRATION students MUST complete PUBH 2402 (Health Policy and Issues), PUBH 3225 (Health Insurance) and PUBH 3415 Writing for Health Professionals BEFORE they do their internship. Any other courses in PUBH may be taken concurrently or after the internship.

Pre-OT Track and Pre-PT Track

All of the PRE-OT and PRE-PT students MUST be seniors in order to enroll in their internship. Any of their PUBH may be taken concurrently or after the internship.

Enrolling in Internship: After receiving permission of instructor from the internship coordinator, students need to register for PUBH 4950—Public Health Internship and Fieldwork (4 credits, 175 hours for spring and fall and 200 hours for summer). In *rare cases*, if a student needs to enroll for additional internship credits, he/she may do so with the approval of the faculty member and the internship supervisor. **For each additional credit, an additional 50 hours of internship must be fulfilled.** Once a student registers for the internship, it is his/her responsibility to secure an internship site.

- PUBH 4950, Section 001 = 4 credits
- PUBH 4950, Section 002 = 5 credits
- PUBH 4950, Section 003 = 6 credits

Internship Placement: Students are responsible for obtaining an internship and should do so one semester before anticipate enrolling in the internship. In choosing a site that would complement their interests, students should consider the following:

- a. The setting in which he/she would like to work
- b. The health issue in which he/she are most interested
- c. The population group with which he/she would like to work

A list of places that students have done internship in the past and/or are willing to take future interns can be requested from the internship coordinator via e-mail. This list is by no means exclusive and other additional places **CAN** be approved. If students would like to complete their internship at a location not listed below, he/she need to seek faculty approval first. Securing an internship site, **may involve submitting a resume and or participating in an interview; please be prepared.**

Students should visit the potential sites to determine the fit each one might have with regard to the aforementioned considerations. In addition, students should discuss his/her potential responsibilities with his/her prospective site supervisor(s).

In order to fulfill the PUBH program requirements for a **Community Health Education Track**, a student needs to be involved in one or more of the following activities during his or her internship:

- a. Development of educational program(s)
- b. Implementation of educational program(s)
- c. Evaluation of educational program(s)
- d. Grant writing for health/health education services
- e. Health counseling with supervision
- f. Development of educational materials
- g. Community needs assessment

In order to fulfil the PUBH program requirements for a **Health Administration Track**, a student must employ one or more of the following competencies during his/her internship:

- a. Communication skills (written or verbal)
- b. Computer or computation skills
- c. Accounting or financial management
- d. Grant writing
- e. Marketing
- f. Management or managerial skills
- g. Planning (strategic, community-based, program)

In order to fulfil the PUBH program requirements for an **Environmental Health Track**, a student must employ one or more of the following competencies during his/her internship:

- General knowledge of the basic areas of environmental health (sanitation, risk assessment and management, occupational health, epidemiology, etc.) with a working knowledge of at least one area
- Basic investigative skills—The ability to formulate strategies for solving scientific problems
- The ability to carry out strategies for solving scientific problems
- An understanding of the principles and applications of modern investigative and regulatory tools
- The ability to read, understand, and use scientific literature
- An awareness of the broader implications of environmental health issues (e.g., resource management, economic factors, and ecological considerations).
- The ability to work with others as part of a team to solve scientific problems

Required Paperwork: Once an internship site is secured, the student needs to fill out and sign **the Internship Contract**. This document clearly outlines the responsibilities of the student as well as the contact information regarding the internship site. Students will find a copy of the contract at the end of this document (PUBH 4950 packet). Finally, students need to fill out the **Student Affiliation Agreement** (fillable PDF file that was e-mailed to students)

BEFORE they can start their internship. **Students may not begin their internship until this is done!** Information from this form will be used to draw up a legally binding contract with the internship site and Stockton College for liability purposes. Once students fill out these forms they need to return them to the **Public Health Internship Coordinator**; the sooner this is done, the sooner this process can begin.

PLEASE NOTE: The actual dates that a student attends his/her internship may not necessarily conform to the academic calendar. It is important that students clearly negotiate with their site supervisor and the internship coordinator when they will start and finish their internship. Also, students are to become an integral part of the organization. Therefore, there may be days in which classes are not held at the college, but students would be required to report to their internship (i.e., spring break, Friday after Thanksgiving) unless otherwise negotiated with their site supervisor. It is understandable that students may need to maintain jobs in addition to their internships. However, it is the student's responsibility to insure that they maintain a professional attitude and balance and fulfil both responsibilities.

Evaluation/Assignments: Evaluation of the internship experience will be based on the following:

1. Internship Site (50% of Grade):

- **Hours:** Completion of the specified number of internship hours (students will receive a grade of F if total number of hours are not completed in full).
- **Site Supervisor Evaluation:** A standardized evaluation form will be directly sent to your site supervisor. It must be completed by your supervisor **and sent directly to the internship coordinator—it is not acceptable for the intern to turn the form in personally.** A sample of this evaluation can be found on the last page of this packet.
- **Internship Portfolio—Sample of Student Work:** Students **MUST** include all the materials the student used, created, distributed, etc. during the internship (include letters, educational materials, surveys, etc.). They may also include any samples of work that they completed during past work experience and/or coursework that will illustrate their knowledge and skills.

2. Administrative Duties (10% of Grade):

- **Biweekly Reports:** Biweekly reports will be filled out by the student and the site supervisor. It is the responsibility of the student to submit the Biweekly Reporting Sheets to their site supervisor and, once completed, to the internship coordinator. A copy of the Bi-Weekly Report Sheet is at the end of this

document (PUBH 4950 packet). You can make copies of the sheet or the Internship Coordinator can e-mail you a copy of it.

- **E-mail update:** On the weeks that students do not meet with the internship coordinator, he/she is expected to e-mail the internship coordinator to update her on the internship and what projects/activities the student has been working on.
- **Student Evaluation of Internship Experience:** Students fill out at the end of the semester and turn in after their final presentation.

3. **Presentation (20% of Grade):** At the end of the semester, you will be required to give a presentation highlighting your internship experience. Presentation will last approximately 15 to 20 minutes and should illustrate the skills you acquired during your internship as well and the pros and cons of your fieldwork experience. You are required to dress professional for the presentation and include the use of technology for your visual aids. Your presentation will be open to the public and many, if not all public health faculty will attend. Class time will be designated to discuss your presentation in depth and provide you with a tutorial on public speaking and presentation—both the written and verbal. Also, time will be spent in the computer lab, putting together effective visual aids for your presentation.

4. Additional Material in Internship Portfolio (20% of Grade):

- **Summary Paper:** A 5-page written summary of the entire internship experience that gives the student's personal reaction to the experience, evaluates his/her strengths weaknesses, positive, and negative aspects of the internship. This summary paper must include a detailed discussion about how well the student was academically prepared for his or her internship. In other words, how well did the classroom experience prepare the student for the various tasks assigned during the internship? The student should be as specific as possible (i.e., citing specific opportunities or examples where they were able to apply what they have learned in class or were able to learn something new during the internship).
- **Resume, Cover Letter, References, and Thank You Letter:** Students should create the above items for future job search. The cover letter could be for a real or hypothetical job that *you* are/will be applying for. Thank you letter could be for an interview you have recently be on or could be to your internship

site supervisor (sending him/her a copy is highly recommended).

Site Responsibilities/Duties: At the internship site, students must fulfill as many of the following responsibilities. This can be accomplished by providing evidence that the students have completed the competencies that accompany each responsibility. Students should document (internship work) and reflex in your summary paper regarding as many of the following that are applicable.

Core Competencies

A. Students will demonstrate effective oral and written communication skills

- Students will demonstrate effective oral communication skills and effectively utilize electronic methods for communication
- Students will demonstrate effective written communication skills

B. Students will have an understanding of the principles of public health practice

- Understanding of fundamental techniques relevant to research in public health.
- Perform basic computational analysis: Portfolio includes examples of student generated analysis of data for internship site projects.
- An understanding of epidemiological methodology: Students will be able to accurately describe in the epidemiological principles that are utilized in their internship experiences.
- Demonstrate an understanding of basic marketing principles: Students will demonstrate the ability to apply marketing principles when planning, implementing, and evaluating public health initiatives.
- Students will have knowledge of public health in relation to social historical, political, and/or economic contexts: Demonstrate personal knowledge of the social (i.e., the influence of cultural beliefs on health care practices), historical (i.e., evolution of existing health care structure), political (i.e., influence of governmental policies on access to health care), and economic (i.e., influence of socioeconomic status on the quality and quantity of available health care) dynamics that influence public health practice.

C. Students will be able to demonstrate appropriate, ethical and professional behavior when in a role as a public health professional

- Appropriate behavior: Shows up for work consistently and on-time, follows instructions by carrying out duties, and displays professional

behavior and attitude while working as a public health professional.

- The use critical thinking in professional decision making: a proficient critical thinker employs not only *logic* but broad *intellectual* criteria such as clarity, *credibility*, *accuracy*, precision, *relevance*, depth, *breadth*, significance, and fairness, when making decisions or during problem solving.
- Students will demonstrate cultural competence when working in the public health sector: "Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations" (U.S. Department of Health and Human Services, The Office of Minority Health, 2005).
- Students will develop the ability to demonstrate leadership when applicable: Leadership is a process whereby an individual influences a group of individuals to achieve a common goal (Northouse, 2007).

Track Competencies

Community Education Track

1. Assess individual and community needs for health education
 - Access existing health-related data
 - Collect health-related data
 - Distinguish between behaviors that foster and hinder well-being
 - Identify factors that foster or hinder the process of health education
 - Infer needs for health education from obtained data
2. Plan health education strategies, interventions, and programs
 - Involve people and organizations in program planning
 - Incorporate data analysis and principles of community organization
 - Formulate appropriate and measurable program objectives
 - Develop a logical scope and sequence plan for health education practice
 - Select appropriate strategies to meet objectives
 - Assess factors that affect implementation
3. Implement health education strategies, interventions, and programs
 - Initiate a plan of action
 - Demonstrate a variety of skills in delivering strategies, interventions, and programs

- Use a variety of methods to implement strategies, interventions, and programs
4. Conduct evaluation and research related to health education
 - Develop plans for evaluation and research
 - Review research and evaluation procedures
 - Design data collection instruments
 - Carry out evaluation and research plans
 - Interpret results from evaluation and research
 5. Administer health education strategies, interventions, and programs
 - Exercise organizational leadership
 - Manage human resources
 6. Serve as a health education resource person
 - Use health-related information resources
 - Respond to requests for health information
 - Select resource materials for dissemination
 - Establish consultative relationship
 7. Communicate and advocate for health and health education
 - Analyze and respond to current and future needs in health education
 - Apply a variety of communication methods and techniques
 - Promote the health education profession individually and collectively
 - Influence health policy to promote health
3. Students will be able to critically discuss the social dimensions (political, economic, and cultural) of
 4. American health care and policy-making
 - Understand major health-related trends and concerns
 - Understand major approaches to health care reform
 - Perform simple diagnostic and procedural coding
 5. Demonstrate the ability to work effectively and efficiently with a health care organization
 - Appropriate utilization of specific field instruments, forms, and procedures
 - Effective interaction with public and private sector health organizations
 - Working effectively within administrative and political constraints of an organization
 - Productivity and confidence in handling technical problems

Environmental Track

1. *General Knowledge of the field:* The capacity to demonstrate a general knowledge of the basic areas of environmental health (sanitation, risk assessment and management, occupational health, epidemiology, etc.) with a working knowledge of at least one area.

Competency—Students will be able to:

- Describe at least five basic areas of environmental health
- Be able to conduct a food establishment inspection, devise an emergency preparedness plan, conduct an environmental risk assessment, report the steps to an epidemiological investigation, or conduct a workplace inspection

2. *Basic investigative skills:* The capacity to identify and compile relevant information to solve a problem, and the knowledge of where to go to obtain the relevant information.

Competency—Students will be able to:

- Research literature through national databases on the internet and through the library (e.g., in response to a telephone call asking about fecal contamination of a swimming pool)
- Demonstrate that they know what types of questions to ask in an epidemiological investigation by successfully gathering data through interviews and medical databases

The above are the seven areas of responsibility as outlined by the National Commission for Health Education Credentialing for entry level Health Educators. These are also the criteria utilized to certify health education specialists.

Administration Track

1. Students will be able to do the following: apply theories and practices of health administration
 - Write and explain mission statements, goals and objectives
 - Construct and use budgets and financial ratios
 - Employ the latest health information technologies
 - Understand at least three major health-related trends or concerns
2. Students will be able to effectively communicate in writing and speaking
 - Present a 5-7 minute extemporaneous speech
 - Write clear, cogent, and correct sentences and paragraphs

- Find and use appropriate reference material (e.g., statutes, regulations, reference books, scientific journals, web-based programs, and databases)
3. *Problem solving skills*: The capacity to understand and solve problems.
Competency—Students will be able to
- Determine the nature of a problem in broader context by asking appropriate questions and reviewing documentation
 - Clearly articulate the problem
 - Be able to take appropriate measures to resolve the problem and/or present a range of solutions
4. *Data analysis and interpretation skills*: The capacities to analyze data, recognize meaningful test results, interpret results, and present the results in a meaningful way to different types of audiences.
Competency—Students will be able to
- Read and summarize technical papers, understand tabular and graphical presentations of data, and translate them for a non-technical audience (e.g., reading papers published in academic journals and translating the data into public information materials or a presentation for classmates)
 - Analyze data generated using simple statistics (e.g., percentages, averages, medians, etc.), understand how statistical data is collected and what results mean (e.g., develop and administer an epidemiological survey for food-borne outbreaks)
 - Represent results in a meaningful way to different types of lay and practitioner audiences, using appropriate graphics (e.g., summarizing inspection reports for a particular location on a spreadsheet, then using Excel to create a graphic for a public meeting; developing PowerPoint presentations on well water contamination for homeowner meetings)
5. *Demonstrate an awareness of the broader implications of environmental health issues (e.g., resource management, economic factors, and ecological considerations)*: The capacity to understand and appropriately use information concerning the economic and political implications of decisions.
Competency—Students will be able to
- Understand and maintain awareness of basic economic issues (e.g., balancing small business and community resource issues with environmental concerns and regulations)
 - Understand local history and community demographics, as well as cultural and political issues and sensitivities
 - Enforce regulations equitably and consistently once they are out in the field—but with an awareness of the political realities of the work
 - Develop and present options and recommendations that demonstrate an understanding of environmental, as well as, economic and political conditions, in an effort to find appropriate solutions and prioritize actions
 - Understand the economic and political underpinnings and implications of broader agency priorities/decisions
- PLEASE NOTE:** All materials must be received by the internship coordinator at least 1 week prior to the end of the semester in order to receive a grade for the internship. Failure to complete any of the above requirements will be grounds for failure. Final grades are assigned based on the fulfillment of the appropriate number of internship hours; quality and timeliness have the work received throughout the semester, the final portfolio, and the site supervisor evaluation.

Appendix B

Student Evaluation of Internship Experience

The questions below are intended to help us determine if you gained practical experience, knowledge, and/or skills from your recent internship experience and would you recommend this internship to other students.

Name: _____ Semester of Internship: _____

Organization where you interned: _____

Department: _____

City: _____ State: _____

Supervisor: _____

What resources did you use to find your internship? (Circle all that apply)

- Career Services
- Office/Internship Coordinator
- Faculty
- General Internet Sites
- Family/Friend
- Previous Employer
- Other: _____

Please rate the following questions about your internship using the following scale:
Through this internship I had the opportunity to use and develop my:

• Interpersonal/human relations skills	5	4	3	2	1	N/A
• Oral Communication/presentation skills	5	4	3	2	1	N/A
• Creativity	5	4	3	2	1	N/A
• Problem Solving abilities	5	4	3	2	1	N/A
• Critical thinking skills	5	4	3	2	1	N/A
• Writing skills	5	4	3	2	1	N/A

5 = Strongly agree	4 = Agree	3 = Neutral	2 = Disagree	1 = Strongly disagree	NA = not applicable	
This experience gave me a realistic preview of my field of interest.	5	4	3	2	1	N/A
As a result of my internship, I have a better understanding of concepts, theories, and skills in my course of study.	5	4	3	2	1	N/A
I was given adequate training.	5	4	3	2	1	N/A
I had regular meetings with my supervisor and received constructive, on-going feedback.	5	4	3	2	1	N/A
I was provided levels of responsibility consistent with my ability and was given additional responsibility as my experience increased.	5	4	3	2	1	N/A
My supervisor was available and accessible when I had questions/concerns.	5	4	3	2	1	N/A
The work I performed was challenging and stimulating.	5	4	3	2	1	N/A
I was treated on the same level as other employees.	5	4	3	2	1	N/A
I had a good working relationship with my coworkers.	5	4	3	2	1	N/A
There were ample opportunities for learning.	5	4	3	2	1	N/A
I feel that I am better prepared to enter the world of work after this experience.	5	4	3	2	1	N/A

The PUBH Internship Coordinator provided assistance with:

- | | | | | | | |
|---|---|---|---|---|---|-----|
| • Paperwork regarding internship requirements | 5 | 4 | 3 | 2 | 1 | N/A |
| • Registering for internship | 5 | 4 | 3 | 2 | 1 | N/A |

- Site selection 5 4 3 2 1 N/A
- Questions regarding starting your internship 5 4 3 2 1 N/A

During the semester, the PUBH Internship Coordinator was:

- Available during office hours 5 4 3 2 1 N/A
- Responded to correspondence (e-mail/phone calls) 5 4 3 2 1 N/A
- Able to visit your site 5 4 3 2 1 N/A
- Assisted with any problems or concerns 5 4 3 2 1 N/A
- Provided guidance/support when needed 5 4 3 2 1 N/A
- Overall, an effective internship coordinator 5 4 3 2 1

The following PUBH 4950 classroom components were beneficial to your learning experience, on a scale from 1 to 10:

	<u>Not beneficial</u>					<u>Very beneficial</u>				
• Class Meetings	1	2	3	4	5	6	7	8	9	10
• Classroom Discussions	1	2	3	4	5	6	7	8	9	10
• Career Service Workshop	1	2	3	4	5	6	7	8	9	10
• Resume/Cover letter	1	2	3	4	5	6	7	8	9	10
• Portfolio/Paper	1	2	3	4	5	6	7	8	9	10
• Final Presentation	1	2	3	4	5	6	7	8	9	10

1. Overall how would you rate this internship? (Please circle one)
- Excellent learning experience
 - Good learning experience
 - Average learning experience
 - Below-average learning experience
 - Poor learning experience

Additional Comments: _____

2. Would you recommend this internship to other students? (Please circle one)
- Highly recommend
 - Recommend
 - Recommend with reservations
 - Would not recommend

Additional Comments: _____

3. Please provide suggestions you may have for future interns who select this site.
4. Please provide any additional feedback for the PUBH internship coordinator.
5. Were you offered a full-time, part-time or permanent position with the organization providing the internship?
6. Was the internship paid? If yes, what type of compensation did you receive: hourly wage, stipend, or other?

Declaration of Conflicting Interests

The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The author received no financial support for the research, authorship, and/or publication of this article.

Notes

1. Knouse, Tanner, and Harris (1999), however, mentioned that there is only a limited window of time (6 months) following graduation during which students who are looking for a job and who did an internship have an advantage over students who did not.
2. Frequently asked questions about the CCEs are found at <http://www.asph.org/document.cfm?page=1209>. For details about the project, visit <http://www.asph.org/FramingtheFuture>. This project was supported under a cooperative agreement from the Centers for Disease Control and Prevention (CDC) through the Association of Schools of Public Health (ASPH) Grant Number CD300430.

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Full Length Research

Internships Pay Off, Even if Unpaid: Public Health Graduates Well-Equipped to Enter Workforce

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Accepted 19 May 2015

An academic internship is a three-way partnership among an institution of higher education, the internship site, and the student. Internships play an irreplaceable role in academia by providing students hands-on learning opportunities, allowing them to collaborate with faculty, and strengthening ties between colleges and their communities (Westerberg and Wickersham, 2011). The current study's use of alumni data collected via the internet and emails, to investigate the impact of students' academic internships on their professional life after college. Specifically, this study focuses on how the internship experience may have impacted students' career path after college, along with how equipped students were to enter the workforce upon graduation. Results indicate that over the last 7 years, approximately 70% of public health graduates are working in health-related jobs, 21% obtained their first job from their internship site; 28.5% are currently or have pursued advanced degrees; and half of the 16% that are employed in non-health related jobs, are working in fields related to their degree. In light of the debate regarding educational value vs. financial aspects of the academic internship, results from this study help illustrate the invaluable experience that can result from a properly developed and implemented academic internship experience.

Keywords: Academic Internships; Assessment; Public Health Program; Health-Related Careers; College Graduates.

INTRODUCTION

An academic internship is a three-way partnership among an institution of higher education, the internship site, and the student. Internships play an irreplaceable role in academia by providing students hands-on learning opportunities, allowing them to collaborate with faculty, and strengthening ties between colleges and their communities (Westerberg & Wickersham, 2011). These authors posit that internships are definitely worth it regardless of whether or not students are getting paid. The article concludes by stating that "carefully conceived, academically informed internships provide that kind of added value—a good return on the investment of the students' energy, intelligence, and time, whether or not they are paid." However, while the benefit of an

Academic Internship is most often undeniable, the debate over the financial aspects surrounding has been a controversial topic of debate. Given the financial aspects intertwined within the internship experience, colleges and the Labor Department are often on opposite sides of the fence when it comes to how they should be compensated. This discrepancy is illustrated by the first of the six criteria set forth in the Labor Department's memo clarifying the government's position under the Fair Labor Standards Act: "To qualify as a legitimately unpaid internship, the position must provide instruction that "is similar to training which would be given in an educational environment."

Along with various financial aspects of internships

(Ross, April 2, 2011), other administrative concerns are starting to creep into the debate regarding internships. In today's world of academia, program and student assessment has become as much of a staple as course syllabi. Specifically, are internships essential learning tools or can they be optional or replaced by an additional class. Thus, the value of the academic internship is being questioned and the ability to assess the impact of internship is being requested. In a time when institutions are faced with skyrocketing administrative cost and students with rising tuition bills and mounting student loans, measures of internship assessment are sought to solidify their value. The future survival of this partnership among an institution of higher education, the internship site, and the student may in part, rest upon the ability to quantify its worth; the rationale for this current study was exactly this case. Over the last decade, administrations call for faculty to assess and document curriculum and student learning has been a priority in academia. This study was conducted as a result of administrations' request. Administration requested data to validate the need for a required academia internship and to provide implications of such an experience on students' learning and career path after graduation. Specifically, the study poses the following two research questions: "Is the internship process pivotal in the success of students' careers in health-related fields after they graduate"; and second, "Do internships, along with program curriculum, adequately prepare students to enter the workforce in health-related fields and / or health-related graduate programs."

Assessment

According to Walvoord (2010), by definition "assessment is the systematic collection of information about student learning, using the time, knowledge, expertise, and resources available, in order to inform decisions that affect student learning"(p. 2). In a more simplistic understanding, it is a way to measure the effectiveness of the course being taught and the methods of doing so; or as a whole – an academic program. It holds the purpose to constantly improve instructing methods and student learning. A recent study conducted by the National Institute for Learning Outcomes Assessment (Glenn, 2011) discovered that there was an evident difference in the types of assessment depending on the academic program. The types of assessment considered in their study were as followed; locally developed, licensure, and standardized exams; alumni and employer surveys; student interviews or focus groups; capstone courses; culminating projects or demonstrations; and portfolios. Assessment, in its various forms, has become a standardized tool to continuously evaluate and re-evaluate instructional methods and student learning. Thus, given the internship may be one of academia's

most valuable learning experiences, it's reasonable to question how this may be validated.

The current study uses alumni data in order to assess the impact of student internships on students' career path after college, along with program assessment on how equipped students are to enter the workforce after graduation. Specifically, are internships pivotal in the success of students' careers after they graduate and do these internships, along with program curriculum, adequately prepare students to enter the workforce in health-related fields? This study investigates this topic in hopes to add valuable information into the debate of academic internships and their value in the student learning process.

Public Health Academic Internship

"Professor, I need to speak with you, it's urgent"; "Professor, I am freaking out, I need help"; or "Professor, I am so confused, I am completely lost where to even start." Frazzled seniors, frantically trying to schedule appointments with me is a scenario I encounter way too often. Students seek me out in my office, the hallways, and before or after class in a desperate fact finding mission regarding the too often dreaded required internship. Many students are so bogged down by the logistics of the internships; they lose sight of the long-term value on this experience. Who? What? Where? When? and Why? are being fired at me so fast, sometimes I feel like I am the target of my children's Nerf gun wars. In addition, students' schedules are already so jammed packed with work, classes, sports, activities and social life that fitting in an academic internship seems about as realistic to them as a day without their iPhone."

The transition from traditional "classroom learning" as a student to the world of "internships learning" is not always easy and can bear a lot of difficulties. Students have to adapt to a new working world when they enter their internship and struggle between the ability to apply their theoretical knowledge to a work-related context while learning a new organizational culture. Academic internships are defined as an opportunity to integrate work-related experience into graduate education by participating in scheduled and supervised work (Gault, Leach & Duly, 2010). These real-world experiences are an integral component of an academic program and provide students with the opportunity to develop not only work skills but also an understanding of the workplace (Gerken, Rienties, Giesbers & Könings, 2012). However, before assessment of an internship experience can be addressed, defining it needs to be clear.

An internships experience, due to its very nature, is as

Table 1: Internship Description

Internship Description: Public Health undergraduates at a mid-size liberal arts college have the opportunity to complete a 200-300 hour (4-6 credits) internship experience before graduation. All Public Health majors are required to take the Internship / Fieldwork course. This course is a traditional internship with an additional classroom element to expose students to both fieldwork and a “senior-capstone” experience geared towards starting a career in the field of Public Health. Students are responsible for obtaining an internship and should do so one semester before anticipating enrolling in the internship. In choosing a site that would complement their interests, students should consider the following:

- a). the setting in which he/she would like to work;
- b). the health issue in which he/she are most interested; and
- c). the population group with which he/she would like to work. During this time, students, under the supervision of an Internship Director, secure a site and proceed to complete their on-site hours, while meeting as a class several times throughout the semester (See Appendix A for Semester Schedule).

different as the disciplines in which students are obtaining their major and the institution in which they are attending. In support, The National Association of Colleges and Employers has found that only 28 percent of colleges associate classroom experience with academic credit for internships, while 25 percent do not require any kind of written assignments, 15 percent do not require any faculty supervision, and 6 percent require nothing at all (as cited in Ross, April 24, 2011).. In addition, the study reports that university policies on credit vary widely with respect to internships, study abroad, and coursework at other accredited institutions, and the value of their credits are more highly guarded by elite college versus more permissive institutions. Thus, given that academic internship experiences vary on many different levels, to better understand the current internship experience, the following description, requirements and evaluations are provided. Table 1

As clearly stated above, work-based learning, in the form of internships is a valuable educational tool. However, the design and implementation of the internship experience can make or break this experience. As stated in study by Narayanan, Olk, and Fukami (2010) the quality of internship learning heavily depends on the quality of feedback and supervision by both the company and the business schools. In order to enhance the learning experience of students while at internships, both companies and schools have to find a way to effectively support, facilitate, and supervise students while they take and complete their internship. The College’s (name taken out for blind review) Public Health Internship Program has created and implemented a fieldwork experience that has the potential to provide a win-win opportunity for all three parties in the internship process (institute of higher education, internship sites and students). Evaluation on this process will provide data to indicate the following:

RQ1: Is the internship process pivotal in the success of students’ careers in health-related fields after they graduate; and

RQ2: Do internships, along with program curriculum, adequately prepare students to enter the workforce in health-related fields and / or health-related graduate programs

METHODOLOGY

In the fall of 2007, at a mid-size liberal arts college on the east coast, the Public Health Program was approximately 65 students, a rather small program. However, over the years as the college grew, so did the Public Health Program. By Fall of 2013, the Public Health Program, with a faculty of four, had almost 250 majors, with five different tracks (Health Administration, Community Health Education, Environmental Health, Pre-Occupational Therapy and Pre-Physical Therapy) and sustainability had become a serious issue. One recommendation from administration was eliminating the demands of the internship or at least changing it from a mandatory requirement to an elective. Given the invaluable nature of the internship, neither of these was an appealing option. Hence, a way to quantify the worth of the internship was imperative.

Since Fall 2007, the Public Health Program has offered undergraduate students the opportunity to engage in internship / fieldwork experience (described in previous section) prior to graduating. Between Fall 2007 and Fall 2014, 240 students have participated in the internship class and graduated with a Bachelor of Science in Public Health. A list of students names were obtained from class rosters creating a sampling frame. From this sampling frame, information from 189 students was obtained.

Over the course of a year, 189 Public Health majors were tracked down using a network sampling approach. Two major data collection procedures were employed. First, with the use of the internet and social media such as LinkedIn and Facebook, alumni demographics were obtained. Specifically, acquired data included the following variables: alumni job titles and companies, graduate school information and contact information. This

data was entered into a spread sheet to illustrate and calculate frequencies of jobs and graduate schools.

A second data collection procedure was through emails. Emails were sent out to alumni through Facebook, LinkedIn, emails addresses provided by alumni offices and students prior to graduation and a Public Health Society Facebook page. These emails acquired data included the following variables: 1. current employment and past employment since graduation; 2. any additional schooling or certificates they have obtained since graduation; 3. location of their internship and did it result in a job offer; and 4. Did alumni feel that their internship was a benefit to their employment after graduation. The email clearly stated why the information was being solicited and whether or not students would have any problem with the information they provided being shared publically. Not one participate had a problem or concern with the sharing the information they provided in their email.

Out of the 189 Public Health Alumni in the study, demographic on approximately 60 percent were obtained through Social Media sites and therefore, are missing qualitative data. Therefore, alumni data for all 189 students provides demographics on these individuals; some more comprehensive than others. For example, there may be individuals that have their job title listed on Facebook or LinkIn, but are also attending graduate school and vice versa. Thus, although each alumnus on the list has at least one demographic listed for him / her, others may have several. In addition, although each of the alumni was sent an email via these sites or from a list of email address, some emails were responded to and some were not. Thus, contact information is not available for all participants. Therefore, information for these alumni may be missing or incomplete. In addition, information regarding the value of the internship experience was only obtained from alumni responding to the email and answering question number 4. However, internship sites for each of the alumni were available from when they were enrolled in the course. Examples of this qualitative data from question number four are provided below to illustrate the quantitative data obtained via both the websites and emails.

RESULTS

In order to provide administration with meaningful assessment data of not only students' internship experience, but program assessment as well, a total sample of 189 alumni was obtained. Basic descriptive statistics provide the following information from these alumni to help better understand the pivotal role that internships played in their career path after college, along with how prepared they were to enter the workforce. In addition, qualitative data is also provided to illustrate the quantitative data and student responses. Finally, a list of

companies and job titles are provided to showcase alumni job placement.

Research Question #1 explores whether or not the internship process is pivotal in the success of students' careers in health-related fields after they graduate. Basic statistics indicate the following about participants' career path after graduation: 130 / 189 (68.7%) - working in Health Related Fields; 40/189 (21%) - 1st job hired from Internship; 54/189 (28.5 %) - Graduate Programs; and 30/189 (16%) - Employed in non-health related fields; 15/30 jobs using college degree.

First, data obtained from alumni provides us insight into not only life after college for our students, but how life in college has played a role. Specifically, 21% of our students' first jobs after graduation came directly from the sites where they interned:

"Dear Professor; Hope all is well, it's been quite the roller coaster ride since graduating, but thankfully all for the better. My internship was with the Southern Shore Chapter of the American Red Cross where I shadowed the Disaster Program Specialist for Atlantic & Cape May counties. I would assist her with Sandy recovery efforts, disaster victim relief (from house fires, flooding, etc.), and attend volunteer meetings. A few months after graduating, the Disaster Specialist position became available and since I was already trained in the functions of the office and had a rapport with the volunteers, I was contacted to see if I was interested in the position. Now, I operate as the Disaster Program Specialist for both counties."

"I graduated back in the spring and I did my internship with BAYADA Home Health Care in the Linwood visits office. After applying to a few different BAYADA locations around New Jersey, I was hired as an Associate at the North Brunswick office. I used a lot of the professionals I work with at my internship as my professional references in order to be hired for this position. My internship really showed me what BAYADA was all about and led me to want to work with the company."

"Without my internship there would have been no possible way I would have obtained this job position. Your internship truly is a 16 week job interview and should be treated as an interview. I can't emphasize enough how important internships are and how my internship experience really benefited me in many different aspects of my current job."

In addition, many other students commented that even though they did not get hired by their internship, the

Table 2: Graduate Program Data

<u>Graduate Programs</u>	<u>Certifications</u>
1. Occupation Therapy – 16 graduates	CHES (Certified Health Education Specialist) – 8 graduates
2. Physical Therapy – 11 students	REHS: Registered Health Specialist – 3 graduates
3. Nursing – 11 graduates	Certified Assisted Living Administrator – 1 graduate
4. Masters Programs	
• Counseling	
• Criminal Justice	
• Business Administration	
• Health Administration	
• MPH (3)	
• Nutrition (2)	
• Social Work (3)	
5. Medical School (2)	
6. Chiropractic School	
7. Beauty School	

experience: 1. was a key factor in getting their first job; 2. helped them network to get their first job; and 3. provided professional references that helped them get their first job. The following alumni comment highlights the above:

“I am a student that graduated from the public health program in May. I am thrilled to let you know that I have received a job at the County of Cape May Department of Health. I am doing outreach under their Cancer Education and Early Detection grant, and will be working under their Family Planning Grant starting in January. “College name” gave me the necessary tools to get the job. I was able to make the right connections through my internship at Cape Regional Medical Center.”

Research Question #2 investigates whether internships, along with program curriculum, adequately prepares students to enter the workforce in health-related fields and / or health-related graduate programs. Results reveals that 28.5% of our students are currently attending or have completed graduate schools, top degrees: Physical Therapy, Occupational Therapy, Nursing and Master’s degrees in various disciplines. The following is a detail account of the Graduate Programs and Certificates of these alumni. Table 2

Student comments also support that for many, internships played a role in deciding to further their academic career.

“I finished the public health program at “College Name” in fall 2010 and was immediately hired at

Atlanti Care Health Engagement (where I completed my internship for the program). I feel that my ability to get a job so quickly after graduating is definitely a testament to the fantastic education and preparation I received as a public health student at “College Name”. I worked for Atlanti Care for a year, passed the CHES exam, and then decided to go back to school for clinical nutrition and dietetics, in hopes of becoming a registered dietitian. Working at Atlanti Care gave me plenty of opportunities to shadow dietitians in clinical and non-clinical settings, as well as at Atlanti Care's outpatient diabetes center, which further solidified my interest in the field. I entered a post-bachelor nutrition program (known in the nutrition field as a Didactic Program in Dietetics, or DPD) at Montclair State University and sought employment at the school's office of Health Promotion. I was hired as a student assistant and have been working for Health Promotion for the past two years while I've finished my DPD courses. My title recently changed to health promotion supervisor and I am currently finishing up my last three courses in my program!”

“I am currently beginning pre-med courses for my masters in human nutrition. I’ll be applying for the fall 2015 program at Drexel University for human nutrition. My hope is to have my registered dietician license at the end of the program. I also wanted to update you on my internship turned job... I left Green Street after managing for 6 months. It was on good

terms and I still shop there! Thanks to the internship I now have Manager on my resume. It was a very rewarding experience and I learned so much.”

Finally, and maybe most impressive, almost 70% of our alumni are working in health-related fields putting both their classroom knowledge and hands-on experience to practice. In addition, half of the students working in non-related health fields are still working in jobs where they are applying knowledge and skills obtained from their undergraduate degree.

The PUBH program is a great program that helps students become well rounded and prepared to take on a variety of roles in the job market after graduating. It is well worth any student's time to intern while in school. It is the best way for a student to gain insight into a business and gives the student a tremendous opportunity to be hired or considered for future employment. I am extremely fortunate to have found fulltime employment working at Bayada. After graduating school and waiting 4 months I was finally accepted into Bayada's Associate Leadership Development Program. This 6 month program is an accelerated training program that prepares an associate for management at Bayada within a few years. Without my internship there would have been no possible way I would have obtained this job position. Your internship truly is a 16 week job interview and should be treated as an interview. I can't emphasize enough how important internships are and how my internship experience really benefited me in many different aspects of my current job.”

“I currently handle all the recruiting and compliance for the office. I LOVE my job and feel so grateful that “College Name” was able to assist me with this career change. If there is anything you need please let me know. You were always wonderful. About offering more specific tracks in PUBH, I definitely think this is a great idea and that the students would benefit from this. The internship prepares students for the real world. That's something you cannot learn in the classroom. By doing my internship, I realized that occupational therapy wasn't for me. The education that “College Name” provided, especially in the Public Health program, helped me rediscover my passion for life. I loved the program and I am happy to hear that it is growing so more students can benefit from it.”

In addition, many times students cited that the internship was pivotal in “kick-starting” their career. Below is a list of almost 90 companies and job titles where alumni are employed. Table 3

DISCUSSION

Through the use of alumni data collected via the internet and emails, the current study investigates the impact of students' academic internships on their professional life after college. Specifically, the study focuses on how the internship experience may have impacted students' career path after college, along with how equipped students were to enter the workforce upon graduation. In light of the educational value vs. financial aspects of the academic internship, results from this study help to illustrate the invaluable experience that can result from a properly developed and implemented internship experience. Results provide answers to both research questions and indicate support for the internship process in preparing students for life after college; the following provides elaboration on these results.

Over the course of 7 years, alumni that participated in Public Health Internship Program were identified through social media sites and emails; data was obtained on 189 alumni. The main contribution of the study is that data posits that the internship for many students was pivotal in the success of students' health-related careers after graduation. Specifically, that 21% of alumni received their first job offer from their internships. These are impressive statistics, especially in the recent economic climate. Based on The Internships.com survey, conducted between Dec. 1 and Dec. 4, 2012, which polled more than 7,300 students and recent graduates, as well as over 300 human resources and recruitment professionals, results show 54% of recent graduates are unemployed or underemployed.

In addition, another important contribution of this study is that although alumni who did not receive job offers from their internship sites, did indicate that their internship was a key factor in getting their first job, helped them network to get their first job and provided professional references that helped them get their first job. These are factors that are critical in the job searching process. Results from the Internships.com study show that internships truly have become the “new interview” in the job search process for students and employers alike and the best chance students have not to be one of the unemployed, is to do an internship (Stuart Lander, chief marketing officer at Internships.com). Furthermore, since “Entry level employees are the future of a company and so, in many ways, the most important recruiting decisions an employer can make (Landers), the internship experience is beneficial in this process. As Smith (2012) states, not only undergraduate students land jobs through internships, but “they also get a chance to test-drive a

Table 3: List of Companies**Companies & Job Titles**

1. A Plus Care – Behavior Support Specialist
2. Alaris Health of Cherry Hill – Recreational Therapy Supervisor
3. Allies, Inc. – Assistant Supervisor
4. Ameri Health Insurance – Associate Account Executive
5. American Nephrology Nursing Association – Education Service Coordinator
6. Ancora Psychiatric Hospital
7. ARC – Program Assistant
8. Atlantic Adult Day Healthcare
9. Atlantic Care: approximately 12 graduates
10. Atlantic County Division of Public Health
11. Atlantic County Office of Emergency Preparedness - County EMS Coordinator
12. Atlantic Resource Prevention - (5 graduates)
13. Bankbridge Elementary School; 1:1 Aide
14. Barnabus Health Behavioral Health
15. Bayada: approximately 15 graduates
16. Biometric Screener for Health Advocate - Health Educator
17. Brandywine Senior Living - Move-in Coordinator,
18. Burlington & Camden YMCA – Public Health Program Coordinator
19. Burlington County Health Department
20. Cammack Health – Account Manager
21. Cape May County Health Department - Outreach Coordinator (under the NJCEED grant); Environmental Specialist
22. Capital Health Medical Center
23. CareStation Medical Group - Patient Care Coordinator
24. Department of Community Affairs – Case Manager
25. Dupont Hospital
26. Eagleview Health & Rehab
27. Environmental Services
28. Family Resources Network
29. Fox Rehabilitation - Clinical Operations Coordinator; Sales Support Specialist
30. Garden State Environmental Services – Industrial Hygienist
31. Healthy Woman OBGYN - Front Desk
32. HIV Services
33. Hope Health Care, Inc. – Operations Manager
34. Hybrid Health Care Communication – Account Coordinator
35. Integrated Medicine Alliance – IT Administration
36. Inspira Medical Center - School Based Program
37. Jewish Community Center Early Childhood
38. Jones Lang LaSalle on the Merck Account - Facilities Coordinator
39. Keystone Industries – QA/ Regulatory Associate; Environmental Health Specialist
40. Kessler Institute for Rehabilitation
41. LEA Environmental LLC - Industrial Hygienist/Marketing Manager
42. Lead and Healthy Homes - Health Educator
43. Marlton Rehabilitation
44. Maxim Healthcare Services - Healthcare Recruiter
45. Mental Health Association
46. Meridian Rehabilitation @ Neptune
47. Merwick Nursing Home
48. Ocean County Foot and Ankle Surgical Associate – Manager
49. Ocean County Public Health Department – Health Educator
50. Penn Medicine, Woodbury Heights NJ – Patient Service Representative
51. Pharmacy Services Representative

Continuation of Table 3

- | | |
|-----|---|
| 52. | Public County Health Department in Massachusetts – Public Health Officer |
| 53. | Red Cross, Pleasantville - Occupational Safety and Health Administration |
| 54. | Robert Wood Johnson Hospital – Patient Care Tech |
| 55. | Row New York – School Program Director |
| 56. | Salem County Public Health Department and Human Services – Environmental; Health Educator |
| 57. | Seashore Gardens - Admissions Coordinator; other positions (4 graduates; 2 hired from internship) |
| 58. | Shore Medical Center – Patient Access Trainer |
| 59. | SNAP ED – Rutgers Cooperative Extension – Health Educator; Marketing |
| 60. | South Jersey AIDS Alliance |
| 61. | South Jersey Family Medical Center – OB Coordinator |
| 62. | Southwest Council – Prevention Specialist |
| 63. | Thomas Jefferson Hospital – Clinical Research Lab Coordinator |
| 64. | <u>Thompson Healthcare & Sports Medicine</u> - Rehabilitation Assistant |
| 65. | <u>TruCare Physical Therapy</u> - Office Manager; Licensed Massage Therapist |
| 66. | Twin Boro PT (Physical Therapy) |
| 67. | University of Maryland – Environmental Health and Safety Officer |
| 68. | Vancouver, Washington Hospital – Financial Counselor |
| 69. | Vineland Public County Department of Health – REHS; Health Educator |
| 70. | <u>Virtua Health</u> – Approximately 6 graduates |
| 71. | Water's Edge Healthcare & Rehabilitation Center |
| 72. | Well Call – Health Educator |

Non-Health Companies

- | | |
|-----|--|
| 1. | American Institute Holding – Financial AID Advisor |
| 2. | Cornerstone - Professional Training and Coaching |
| 3. | Criminal Background Research – Marlton |
| 4. | Dermatologist office – Administrative Assistant |
| 5. | Financial Service Professional |
| 6. | Grimley Financial Insurance |
| 7. | Harris School of Business – Instructor |
| 8. | Lincoln Financial Group – Associate |
| 9. | Liberty Mutual Insurance |
| 10. | Lightspeed Research – Project Manager |
| 11. | Ocean County College – Accounting Department |
| 12. | Rock the Aisle – Director of Marketing and Strategy |
| 13. | Six Flags – Human Resource Representative |
| 14. | Teaching - Early Childhood Education; Substituted Teaching |
| | Stockton University – Computer Services |

career before committing, while employers get the opportunity to find the talent they need to help grow their business without relying on just a short interview". In support, according to the Chronicle of Higher Education, when employers recently named the most important elements in hiring a recent graduate, college reputation, GPA, and courses finished at the bottom of the list, but outside experience of academics: Internships, jobs, volunteering, and extracurricular, were at the top of the list (Thompson, 2014).

Another contribution and important finding of the study to the field of health professionals is that almost 70% of graduates are working in health-related fields and out of the 16% that are employed in non-health related fields, half are still working in jobs that are applicable to their degree. The sheer number of alumni working in jobs

directly or indirectly relating to their undergraduate degree, is not only impressive, but strongly correlates with student preparedness to enter the workforce upon graduation. Qualitative data, from alumni emails, support claims that students were well equipped to enter the workforce after completing their Public Health degree. Specifically, alumni indicated their degree adequately prepared them to enter the job force and they possessed the knowledge, skills and experience to start building their career path.

In support of the current results, the Internships.com study found that 66% of employers believe interview performance and relevant work experience are the most important factors in their hiring decisions. Employers noted that an important factor when deciding who to hire is interview performance because they want to make sure

that the student will be a good fit for their organization. However, experience is also important, but that doesn't necessarily mean just previous internship or work experience. The employer noted that they look at what the student has been learning at school, relevant projects, course work and extracurricular activities.

In addition to being equipped to enter the workforce, data shows that alumni are also prepared and motivated to further their educational learning. Results indicate that just fewer than 30% of alumni are currently attending or completed graduate work. Data indicates that alumni are obtaining degrees in Occupational Therapy, Physical Therapy, Nursing, and Master's degrees in a variety of disciplines. Many of these fields require advanced degrees and acceptance into their programs is extremely competitive (many schools choose only 30 students from over 200 to 600 applicants). Alumni's acceptance into these programs, also adds support to their preparedness. In addition, a small number of alumni applied and passed exams for certification in their areas of specialty. Students seeking certification, by both the mean of a CHES (Certified Health Education Specialist) and REHS (Registered Environmental Health Specialist), need to have completed specific class and fieldwork requirements during undergraduate degrees to be eligible.

This data contributes to the growing body of literature that supports academic internships. Student anxiety along with the time, effort and legal issues surrounding internships can certainly make them a taxing process; however, the benefits far outweigh the cost. Well developed internship programs that include strong communication lines between all three parties are vital to the success of these partnerships. In addition, assessment of internship experience is critical in highlighting the academic benefits, along with ensuring its survival in an ever-changing academic world. Hence, in the day of rising tuition, astronomical student loans and a less than desirable economic climate, both students and academic institutions are wise to remember that internships can be an extremely valuable investment that pays off in the long-run!

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Appendix A for Semester Schedule

Internship Requirements: In order to fulfill the PUBH program requirements for a **Community Health Education Track**, a student needs to be involved in one or more of the following activities during his/her internship:

- a. development of educational program(s)
- b. implementation of educational program(s)
- c. evaluation of educational program(s)
- d. grant writing for health/health education services
- e. health counseling with supervision
- f. development of educational materials
- g. community needs assessment

Health Administration Track, a student must employ one or more of the following competencies during his/her internship:

- a. communication skills (written and verbal)
- b. computer or computation skills
- c. accounting or financial management
- d. grant writing
- e. marketing
- f. management or managerial skills
- g. planning (strategic, community-based, program)

Environmental Health Track, a student must employ one or more of the following competencies during his/her internship:

- a. General knowledge of the basic areas of environmental health (sanitation, risk assessment and management, occupational health, epidemiology, etc...) with a working knowledge of at least one area
- b. Basic investigative skills - The ability to formulate strategies for solving scientific problems
- c. The ability to carry out strategies for solving scientific problems
- d. An understanding of the principles and applications of modern investigative and regulatory tools.
- e. The ability to read, understand, and use scientific literature
- f. An awareness of the broader implications of environmental health issues (e.g., resource management, economic factors, and ecological considerations).
- g. The ability to work with others as part of a team to solve scientific problems

Internship Evaluation: Evaluation of the internship experience is based on the following:

1. Internship Site (50% of grade):

- **Hours:** completion of the specified number of internship hours
- **Site Supervisor Evaluation.**
- **Internship Portfolio - Sample of Student Work*:** Students MUST include all the materials the student used, created, distributed, etc. during the internship, (include letters, educational materials, surveys, etc.). They may also include any samples of work that they completed during past work experience and / or coursework that will illustrate their knowledge and skills. This material will be presented as an e-portfolio using Adobe Pro.

Continuation of **Appendix A** for Semester Schedule**2. Administrative Duties (10% of grade):**

- **Bi-Weekly Reports:** Bi-Weekly reports will be filled out by the student and the site supervisor. It is the responsibility of the student to submit the Bi-Weekly Reporting Sheets to their site supervisor and, once completed, to the Internship Coordinator
- **E-mail update:** on the weeks that students do not meet with the Internship Coordinator, he/she is expected to e-mail the Internship Coordinator to update her on the internship and what projects / activities the student has been working on.
- **Student Evaluation of Internship Experience:** students complete at the end of the semester and submit in after their final presentation.

3. Presentation (20% of grade): At the end of the semester, you will be required to give a presentation highlighting your internship experience. Presentation will last approximately 8-10 minutes and should illustrate the skills you acquired during your internship as well and the pros and cons of your fieldwork experience.**4. Additional Material in Internship Portfolio (20% of grade):**

- **Summary Paper:** a 5 page written summary of the entire internship experience that gives the student's personal reaction to the experience, evaluates his/her strengths weaknesses, positive and negative aspects of the internship. This summary paper must include a detailed discussion about how well the student was academically prepared for his or her internship. In other words, how well did the classroom experience prepare the student for the various tasks assigned during the internship? The student should be as specific as possible (i.e. citing specific opportunities or examples where they were able to apply what they have learned in class or were able to learn something new during the internship).
- **Resume, Cover Letter, References, and Thank You Letter:** Students should create the above items for future job search. The cover letter could be for a real or hypothetical job that you are/will be applying for. Thank you letter could be for an interview you have recently been on, or could be to your internship site supervisor (sending him/her a copy is highly recommended).