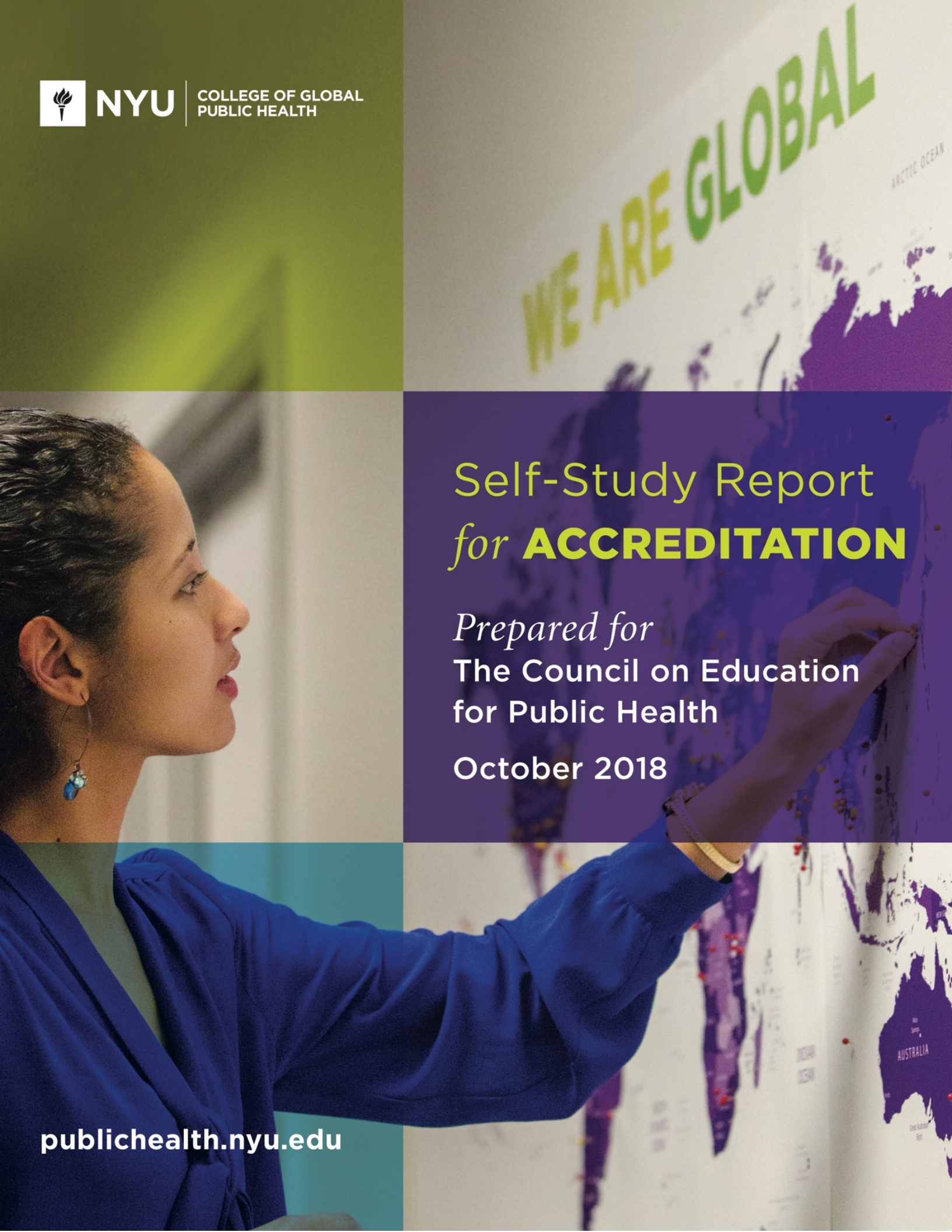
NYU | COLLEGE OF GLOBAL PUBLIC HEALTH



Self-Study Report *for* ACCREDITATION

Prepared for

The Council on Education for Public Health

October 2018

publichealth.nyu.edu

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List of Acronyms

AAC	Academic Affairs Committee
AFAR	Advisors on Foreign Activities and Research
APE	Applied Practice Experience
APHA	American Public Health Association
ASPPH	Association of Schools and Programs of Public Health
AY	Academic Year
BIOS	Biostatistics
CBO	Community Based Organizations
CBPR	Community Based Participatory Research
CC	Cross Continental
C-CFSC	Continuing Contract Faculty Senators Council
CEPH	Council on Education for Public Health
CHES	Certified Health Education Specialist
CHSP	Community Health Science and Practice
CITI	Collaborative Institutional Training Initiative
CTSI	Clinical and Translational Science Institute
COC	Culture of Collegiality Committee
CUNY	City University of New York
DALYs	Disability-Adjusted Life Years
DEI	Diversity, Equity, and Inclusion
EPI	Epidemiology
ERF	Electronic Resource File
FAP-C	Faculty Appointments and Promotions-Clinical
FAP-T	Faculty Appointments and Promotions-Tenure
FEMA	Federal Emergency Management Agency
FTE	Full-time Equivalent, Full-time Equivalency
FOA	Funding Opportunity Announcement
GH	Global Health
GIPH	Global Institute of Public Health
GIS	Geographic Information Systems
GLI	(NYU) Global Learning and Innovation Team
GPH	(College of) Global Public Health
HPV	Human Papilloma Virus
IDA	Individual Development Account
ILE	Integrative Learning Experiences
IRB	Institutional Review Board
IT	Information Technology

LEED	Leadership in Energy and Environmental Design
LMIC	Low and Middle Income Countries
LMS	Learning Management System
MPH	Master of Public Health
MSCHE	Middle States Commission on Higher Education
NBPHE	National Board of Public Health Examiners
NGO	Non-Governmental Organization
NIH	National Institutes of Health
NYCDOHMH	New York City Department of Health and Mental Hygiene
NYU	New York University
OBFP	(NYU) Office of Budget and Financial Planning
OECD	Organisation for Economic Co-operation and Development
OIRDI	Office of Institutional Research and Data Integrity
ORC	Office of Research Compliance
OSP	Office of Sponsored Programs
OSHA	Occupational Safety and Health Administration
PAF	Professional Activity Form
PHM	Public Health Management
PHN	Public Health Nutrition
PHP	Public Health Policy
RCT	Randomized Controlled Trials
RFA	Request for Applications
SBS	Social and Behavioral Sciences
SDG	Sustainable Development Goals
SEARCH	Social Epidemiology and Research in Community Health
SEHNAP	School of Education, Health, Nursing and Arts Professions
SGC	Student Governing Council
SNAP	Supplemental Nutrition Assistance Program
SOM	School of Medicine
SOPHAS	School of Public Health Application Service
T-FSC	Tenured/Tenure-Track Faculty Senators Council
UCAIHS	University Committee on Activities Involving Human Subjects
UDW+	University Data Warehouse+
UNICEF	United Nations Children’s Fund
USAID	United States Agency for International Development
WFP	World Food Programme

Electronic Resource File List

Introduction
- Intro.1 New York University Accreditation Documents

A1. Organization and Administrative Processes
- A1.1 Standing Committees and Members
- A1.2.e Faculty Appointment and Promotion Guidelines
- A1.3 Faculty Bylaws
- A1.5 Committee Agendas and Minutes

B1. Guiding Statements
- B1.1 Culture of Collegiality Report
- B1.2 GPH Strategic Plan

B2. Graduation Rates
- B2.3 2018 Exit Survey Reports

B3. Post-Graduation Outcomes
- B3.1 2018 Post-Graduation Survey

B4. Alumni Perceptions of Curricular Effectiveness
- B4.1 Accreditation Committee Minutes
- B4.2 Alumni Survey Documentation

B5. Defining Evaluation Practices
- B5.1a GPH Goals and Objectives
- B5.1b Accreditation Committee Minutes
- B5.1c Evaluation Documentation

B6. Use of Evaluation Data
- B6.1 Committee Minutes

C2. Faculty Resources
- C2.6 Exist Survey Qualitative Data

D1. MPH Foundational Public Health Knowledge
- D1.2 Table D1-1 Documentation

D2. MPH Foundational Competencies
- D2.3 Table D2-2 Documentation

D4. MPH Concentration Competencies
- D4.3 Table D4-1a-j Documentation

D5. MPH Applied Practice Experiences
- D5.1 Tables D5-1 APE Products and Student Samples
- D5.2 APE Materials and Documentation
- D5.4 Practice Committee Minutes

D7. MPH Integrative Learning Experiences
- D7.3 ILE Course Syllabi
- D7.4 ILE Guidelines and Assessment Materials
- D7.5 ILE Student Samples

D14. MPH Program Length
- D14.2 Credit Hour Policy

D18. Academic Public Health Doctoral Degrees
- D18.6 GPH Doctoral Handbook
- D18.7 PhD Deliverables Student Samples
- D18.9 Tables D18-1 and D18-2a-d Documentation

D19. All Remaining Degrees
- D19.3 Introduction to Public Health Syllabus and Assessments

E1. Faculty Alignment with Degrees Offered
- E1.3 Faculty CVs

E2. Integration of Faculty with Practice
- E2.1 FAP-C Draft Guidelines

E3. Faculty Instructional Effectiveness
- E3.3 Instructional Resources for Faculty
- E3.4 FAP-C and FAP-T Draft Guidelines
- E3.5 Documentation for Instructional Quality Indicators

E4. Faculty Scholarship
- E4.1 FAP-T and FAP-C Draft Guidelines

E5. Faculty Extramural Service
- E5.1 Faculty Guidelines
- E5.5 Faculty Service Report
- E5.7 Practice Committee Minutes

F1. Community Involvement in Evaluation and Assessment
- F1.2 Feedback from External Constituents
- F1.3 Committee Minutes
- F1.4 Documentation of External Contributions

F2. Student Involvement in Community and Professional Service
- F2.1 Public Health Post Samples
- F2.2 Student Clubs Documentation
- F2.3 Committee Minutes

F3. Assessment of Professional Development Needs
- F3.2 Course Survey

G1. Diversity and Cultural Competence
- G1.3 DEI Committee Goals and Report
- G1.4 DEI Committee Minutes

H1. Academic Advising
- H1.5 Orientation Materials

Introduction

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

a. Year institution was established and its type (eg, private, public, land-grant, etc.)

Founded in 1831, New York University (NYU) is one of the largest private, nonprofit universities in the United States. The formation of the College of Global Public Health itself was approved by NYU's Board of Trustees in June 2015.

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

NYU comprises three degree-granting campuses in New York City, Abu Dhabi, and Shanghai, along with 11 global academic centers and research programs in more than 25 countries in Africa, Asia, Australia, Europe, North America, and South America. Students come from all 50 states and 133 countries.

NYU encompasses 18 schools and colleges, each offering a variety of degree programs to fit students of all types and levels:

- Bachelor's level: Six degree types and 408 corresponding programs
- Master's level: 20 degree types with 832 programs
- Doctoral level: 14 degree types with 285 programs
- All remaining degrees total eight types at the associate's, certificate, and diploma levels, with a total of 1,235 programs.

c. Number of university faculty, staff and students

NYU employs approximately 19,000 people, including 7,861 full-time faculty that consists of tenured, tenure-track, and non-tenured contract faculty and 11,139 university administrators, support staff, and employees without a faculty appointment. Student enrollment in Fall 2017 was 59,061, including those in undergraduate, graduate, professional, and non-credit programs.

d. Brief statement of distinguishing university facts and characteristics

As of 2017, 36 Nobel laureates, seven Turing Award winners, and four Fields medalists have been affiliated with New York University. In addition, its faculty and alumni include more than 30 Pulitzer Prize winners and Academy Award recipients, as well as hundreds of members of the National Academies of Sciences, Engineering, and Medicine. Alumni include heads of state, royalty, eminent mathematicians, inventors, media figures, Olympic medalists, CEOs of Fortune 500 companies, and astronauts.

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

NYU was accredited by the Middle States Commission on Higher Education (MSCHE) in 2014 for a full 10-year term. The NYU MSCHE Statement of Accreditation is in Electronic Resource File (ERF) Intro.1. The College's MPH degree program has been accredited by the Council on Education for Public Health (CEPH) since 1971. A complete list of University accreditors can be found in ERF Intro.1.

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

The study of public health at NYU began more than 85 years ago when, in 1931, health courses were first offered in the School of Education—now known as the Steinhardt School of Culture, Education, and Human Development—under Physical Education and Health. Exactly 40 years later, in 1971, CEPH accredited the Master's in Public Health (MPH) Degree Program in Public Health at the School of Education, Health, Nursing, and Arts Professions.

NYU's Public Health Program gathered multidisciplinary strength as it evolved across schools from one end of our campus to the other, culminating in the 2006 University-wide Master's Program in Global Public Health. In 2011, this joined with the Steinhardt School's MPH Program to form the Global Institute of Public Health (GIPH) as an interdisciplinary collaboration among eight NYU schools and colleges: the College of Dentistry; the Rory Meyers College of Nursing; the School of Medicine; the Silver School of Social Work; the Steinhardt School of Culture, Education, and Human Development; the Graduate School of Arts and Science; the Robert F. Wagner Graduate School of Public Service, and the Tandon School of Engineering.

The need for and interest in establishing a full college of global public health at NYU quickly became evident. During the last few years of Dr. John Sexton's tenure as President of NYU, the University took up the question of whether GIPH would evolve into a school. Multiple meetings occurred with numerous key committees of the University and its trustees. In June 2015, the Board of Trustees at NYU approved the formation of the College of Global Public Health (NYU GPH). A decision was then made by the Advisory Committee to GIPH, comprising the Deans of the eight collaborating schools, to "back-burner" the Institute until the College has the opportunity to be initiated and accredited.

The creation of GPH is the culmination of senior leadership at NYU and our visionary Dean, Dr. Cheryl Healton, who arrived at NYU in 2012. After serving as a consultant for 16 months, she assumed her position to lead the Global Institute of Public Health full-time on November 1, 2013, as the Director and Dean designate for public health.

Today the College is the culmination of eight decades of passion for this field. The heart of our new College beats with the dedication and diversity derived from world-renowned faculty spanning 10 NYU schools and colleges who together contribute in immeasurable ways to the scholarly pursuit of how to extend and save lives.

As the newest college to be established at NYU for several decades, GPH has a bold vision: to significantly improve the health of populations by pioneering solutions that advance health equity around the world, today and tomorrow. That vision reflects a core belief that global health is not merely a field of study, area of research, or a career, but a goal that will change the world.

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

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

Figure Intro.2a-1 College of Global Public Health Senior Administrative Organization

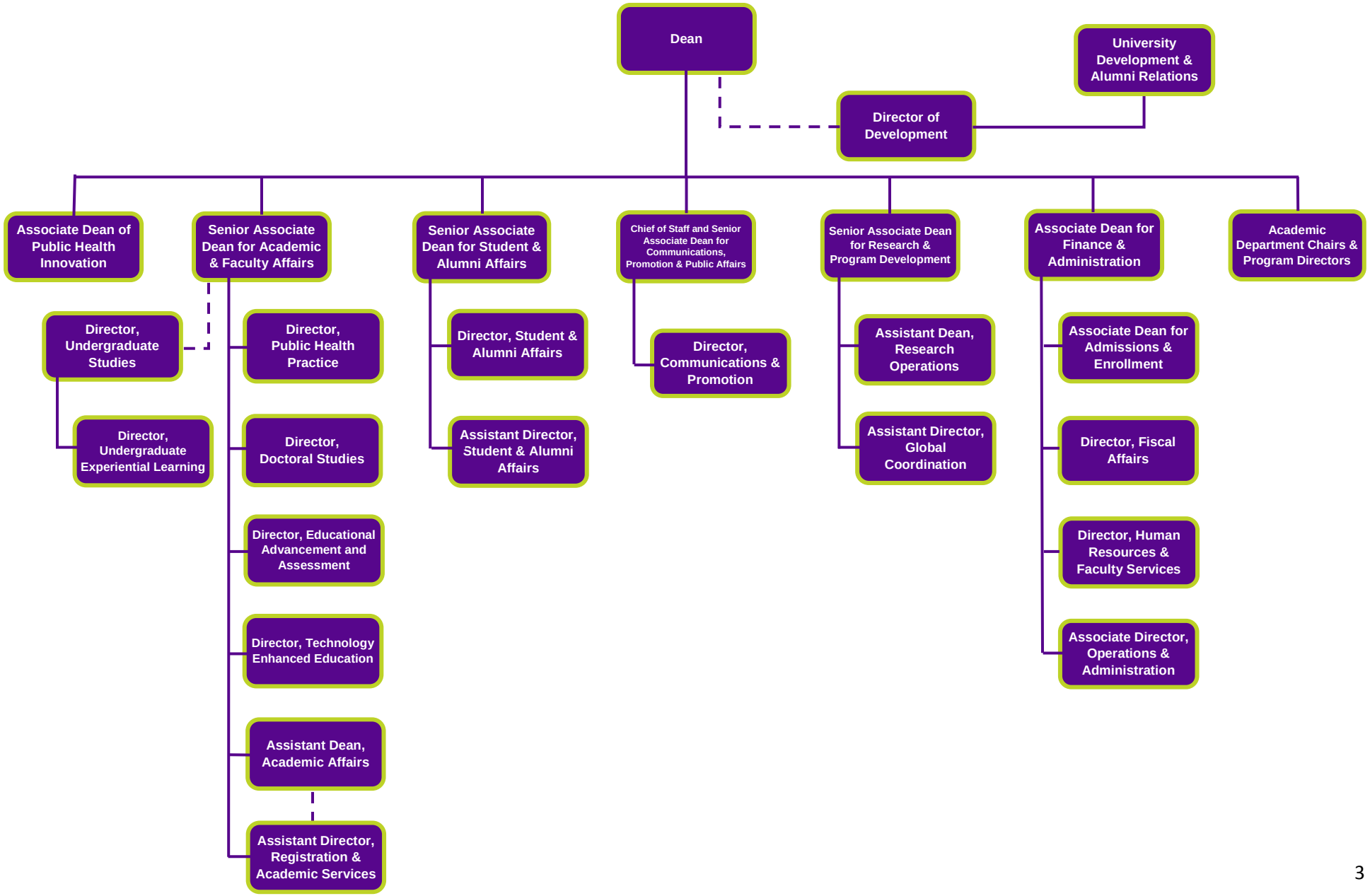
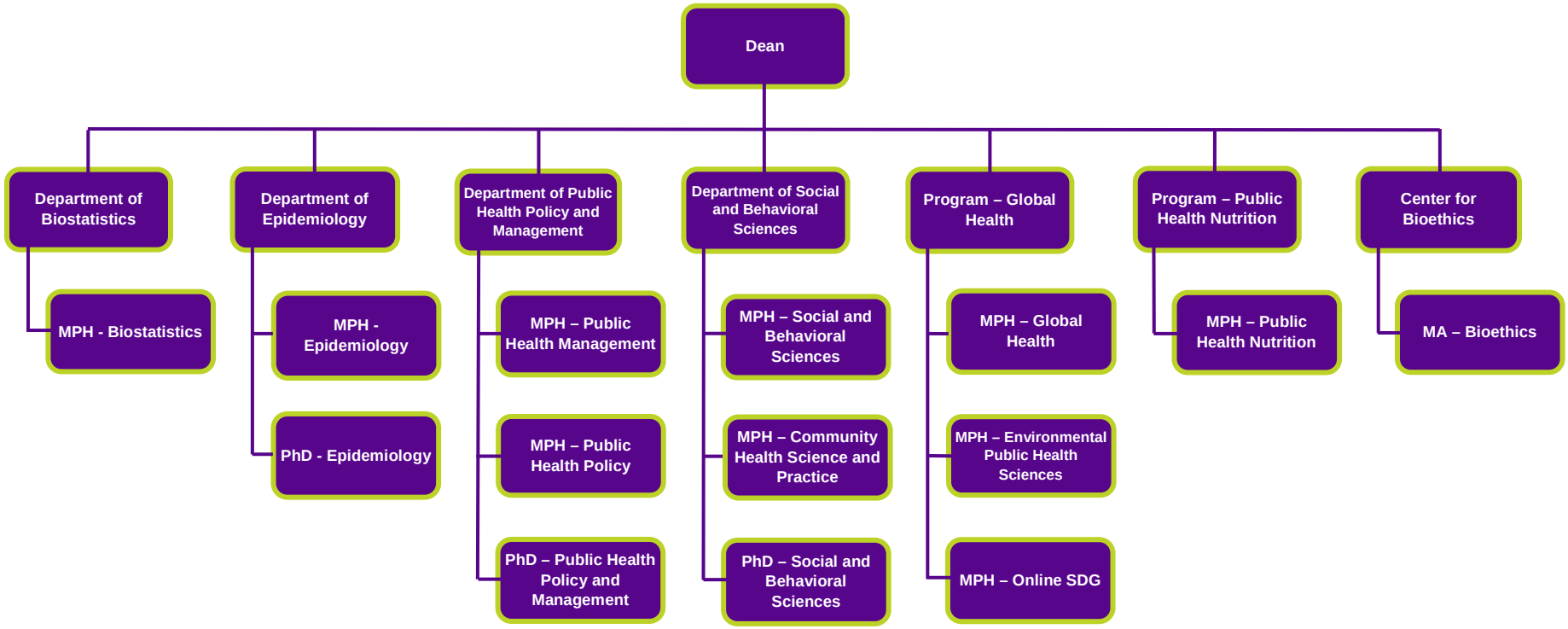


Figure Intro.2a-2 College of Global Public Health Academic Organization



The GPH Dean directly supervises academic, financial, and administrative activities for the College. Reporting directly to the Dean are Associate and Senior Associate Deans for Academic and Faculty Affairs; Communications, Promotions, and Public Affairs; Finance and Administration; Public Health Innovation; Research and Program Development; and Student and Alumni Affairs. For reference, see Figure Intro.2a-1 showing the school's senior administrative organization, including the reporting lines to the Dean.

Each academic department, program or center is headed by a faculty Chair or Director who reports directly to the Dean. For reference, see Figure Intro.2a-2. Each department or program is responsible for its own master's-level programming. Oversight of the PhD Program falls to the Doctoral Program Director, with input from Department Chairs in the three PhD areas of concentration, as it relates to curriculum development and student advising and mentoring.

The Chair or Director of each department or academic program is responsible, through consensus building among the faculty, for developing and overseeing academic programs, setting general strategic goals for the unit's research and practice programs, mentoring faculty, and providing the managerial expertise needed to achieve those aims.

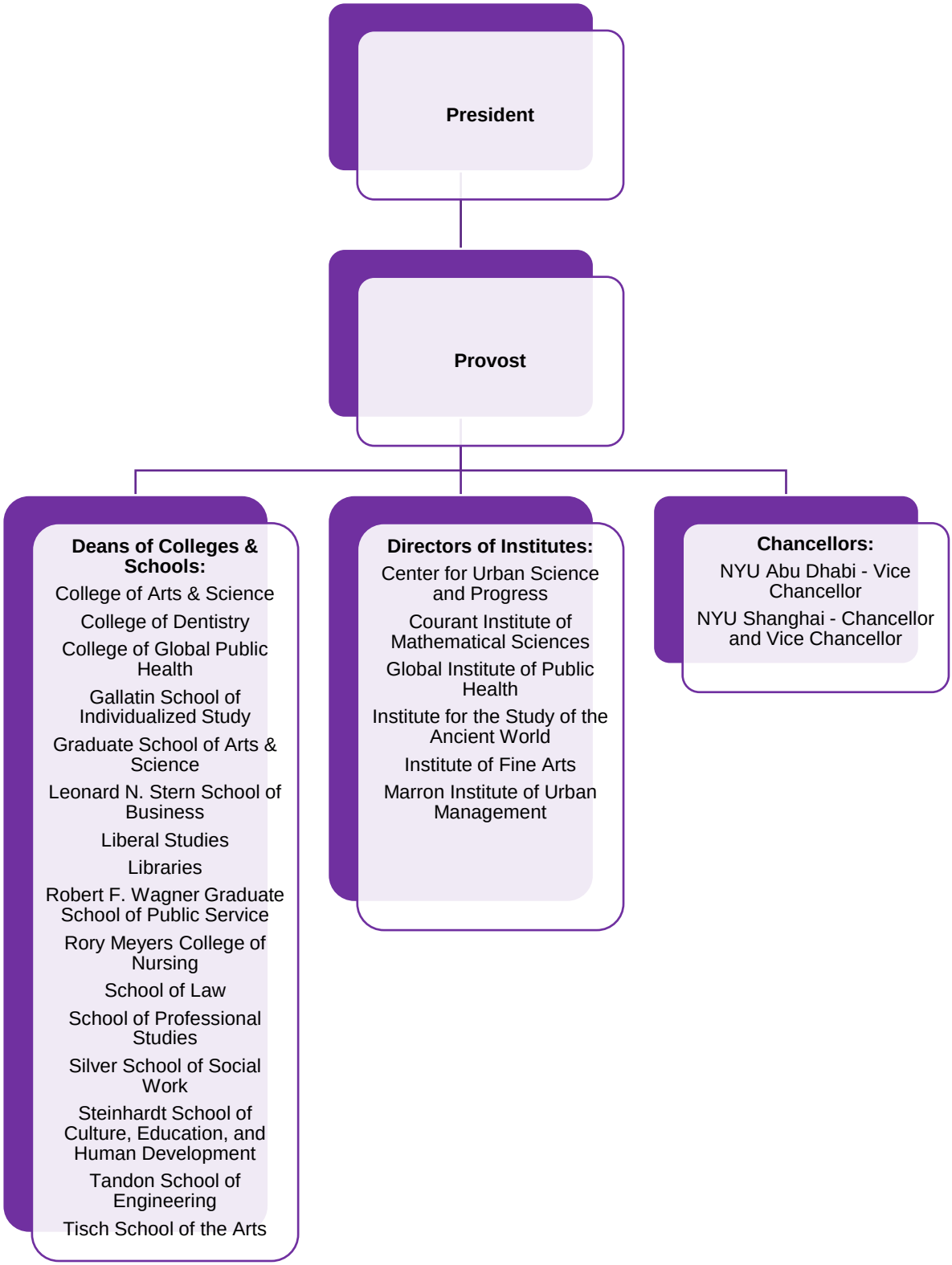
The Dean established a collaborative entity known as the Dean's Policy Committee, presently comprising all Senior Associate, Associate, and Assistant Deans from all major areas of focus (Academic and Faculty Affairs; Admissions and Enrollment; Communications, Promotion, and Public Affairs; Finance and Administration; Public Health Innovation; Research and Program Development; and Student and Alumni Affairs) and permanent Chairs of GPH academic departments. This group provides cross-College counsel to the Dean, and its members serve as connectors and ambassadors for the College's administration, reporting back key issues of interest and concern that this multidisciplinary group then addresses. This group's members also participate in monthly faculty meetings during the academic year and serve as liaisons from the administration to standing committees, providing important and reciprocal input and feedback.

The Dean's Policy Committee reviews key data reports from multiple standing committees and sets policies to ensure continuous quality of education, grant acquisition, research policies, student advisement, and effective management of institution-wide resources and institutional success.

The Dean's Policy Committee also ensures adherence to Affirmative Action policies and advises the Dean regarding University-wide committees to which the Dean makes appointments and provides feedback of policies under review by the NYU central administration leadership.

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

Figure Intro.2b New York University Academic Units' Reporting Lines



GPH exercises autonomy equal to other schools and colleges within NYU, as shown in Figure Intro.2b below. The Provost, who serves as NYU's Chief Academic Officer, is responsible for setting the University's academic strategy and priorities. The Provost supervises the Deans and Directors of all the colleges, schools, institutes, and academic support units, and with their assistance cultivates areas of excellence and enhances collaboration within and between schools. The Provost also allocates financial resources according to academic priorities, in cooperation with University financial officers.

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

See Figure Intro.2b above.

The Office of the President is the highest-ranking office at the University. The GPH Dean reports directly to the President through the Provost. This also applies to the Deans of the other schools and colleges and the directors of the institutes within the University, as well as the Chancellors for the NYU sites in Abu Dhabi and Shanghai. For reference, see the organizational chart showing lines of authority from the GPH Dean to the President of NYU.

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

Not applicable.

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

Table Intro-1 GPH Instructional Matrix - Degrees and Concentrations

Master's Degrees			**Academic**	**Professional**	**Categorized as public health***	**Campus based**	**Executive**	**Distance based**
Bioethics			MA			MA		
Biostatistics				MPH	X	MPH		
Community Health Science and Practice				MPH	X	MPH		
Environmental Public Health Sciences				MPH	X	MPH		
Epidemiology				MPH	X	MPH		
Global Health				MPH	X	MPH		
Public Health Management				MPH	X	MPH		
Public Health Nutrition				MPH	X	MPH		
Public Health Policy				MPH	X	MPH		
Social and Behavioral Sciences				MPH	X	MPH		
Sustainable Development Goals				MPH	X			MPH
Doctoral Degrees			**Academic**	**Professional**				
Epidemiology			PhD		X	PhD		
Public Health Policy and Management			PhD		X	PhD		
Social and Behavioral Sciences			PhD		X	PhD		
Joint Degrees			**Academic**	**Professional**				
	Existing concentration	**Joint-specific concentration**						
Medicine	Global Health			MD/MPH	X	MD/MPH		
Dentistry	Global Health			DDS/MPH	X	DDS/MPH		
Public Administration	Global Health			MPA/MPH	X	MPA/MPH		
Nursing	Global Health			MS/MPH	X	MS/MPH		
Social Work	Global Health			MSW/MPH	X	MSW/MPH		

4. **Enrollment data for all of the school's degree programs, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2. Schools that house "other" degrees and concentrations (as defined in Criterion D19) should separate those degrees and concentrations from the public health degrees for reporting student enrollments.**

Table Intro-2 GPH Current Student Enrollment, AY 2018-19	
Degree	**Current Enrollment**
Master's	
MPH	**505**
MPH Biostatistics	53
MPH Community Health Science and Practice	37
MPH Environmental Public Health Sciences	12
MPH Epidemiology	93
MPH Global Health	122
MPH Public Health Management	61*
MPH Public Health Nutrition	34
MPH Public Health Policy	41*
MPH Social and Behavioral Sciences	16
MPH Sustainable Development Goals	22
MD/MPH w/ Global Health	3
DDS/MPH w/ Global Health	-
MPA/MPH w/ Global Health	-
MS/MPH w/Global Health	2
MSW/MPH w/ Global Health	9
Academic public health master's	N/A
All remaining master's degrees	**45**
MA Bioethics	45
Doctoral	
Academic public health doctoral	**27**
PhD Epidemiology	11
PhD Public Health Policy and Management	8
PhD Social and Behavioral Sciences	8
All remaining doctoral degrees	N/A

*MPH students in the Public Health Policy and Management Department do not choose their concentration until their second year. The enrollment number above represents a 60/40% split between Public Health Management and Public Health Policy based on enrollment in the previous academic year.

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A1. Organization and Administrative Processes

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

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

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

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

GPH Standing Committees:

- Academic Affairs Committee (AAC)
- Admissions Committee
- Culture of Collegiality Committee (COC)
- Diversity, Equity, and Inclusion Committee (DEI)
- Doctoral Advisory Committee (DAC)
- Faculty Appointments and Promotion—Clinical (FAP-C)
- Faculty Appointments and Promotion—Tenure (FAP-T)
- Grievance Committee
- Practice Committee
- Research Committee

Current Significant Ad Hoc Committees:

- Accreditation Committee (convened in 2016)
- Chair Search Committee (convened in 2016)
- GPH New Space Committee (convened in 2016)

Each department and program is represented by at least one member on each committee, with no more than three members coming from any single department or program. All full-time faculty serve on at least two College committees (see GPH committee membership in ERF A1.1).

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

a. degree requirements

The Academic Affairs Committee (AAC) is responsible for decisions affecting program degree requirements and relevant courses, both new and revised. The process for such decisions is as follows:

- Department Chairs or Program Directors, as well as the Senior Associate Dean for Academic and Faculty Affairs, are consulted about new program/concentration proposals and revisions prior to a formal submission to the AAC.
- New programs and concentrations are submitted to the committee at least one year prior to when they plan to be offered. Upon approval by the Department Chair or Program Director, a new program curriculum is submitted to the AAC via the New Program Proposal form. This form outlines all aspects of the program, including degree requirements, the justification for the

new program, how it meets CEPH requirements, and which faculty are involved in the program. New courses are also submitted to the committee with all necessary forms, including the GPH Syllabus Template, GPH New Course Proposal Form, GPH New Course Proposal Instructions, and the Syllabus Guidelines and Checklist, used to assist faculty in building their syllabi.

- While all members of the AAC review the proposal and associated syllabi, each syllabus is assigned to two primary readers for a more in-depth review. These two members also present the course proposals to the committee in person and lead the discussion.
- After a discussion, the committee votes with three possible outcomes: approved with minor revisions, approved with major revisions, and rejected. If the proposal or course is approved with minor revisions, the proposer(s) is asked to make those revisions, which are reviewed only by the original primary readers. If the proposal or course is approved with major revisions, it must be revised accordingly and resubmitted to the committee for another full review. If it is rejected, the Senior Associate Dean for Academic and Faculty Affairs reaches out to the proposer(s) to discuss the merits of re-submitting a revised proposal.
- The process is the same for revised programs and concentrations, but the form used is the Revised Concentration Proposal Form, which compares the previous iteration of the program to the newly proposed one, and also outlines the justification for the change and the course sequence.
- Following approval by the AAC, all new degree programs proposed by GPH need to be presented at the University-level Graduate Program Committee. Our representative to the Graduate Program Committee is typically the Senior Associate Dean for Academic and Faculty Affairs.

b. curriculum design

The Academic Affairs Committee (AAC) and the Doctoral Advisory Committee have the primary charge of providing, evaluating, and planning the MPH and PhD curricula. Each committee reviews proposals for new courses and programs against College-wide criteria for quality and to avoid redundancy.

Faculty in each department and program determine curriculum planning relevant to their MPH and PhD concentrations. Decisions include concentration emphasis, course sequencing, Applied Practice and Integrative Learning Experience requirements, and choice and breadth of electives. Substantial changes are voted on by the concentration faculty and go on to the AAC for review, discussion, vote, and final approval. As with all standing committees, the Chair of the AAC provides an update of all activities at monthly faculty meetings.

c. student assessment policies and processes

The Academic Affairs Committee (AAC) develops student academic policies and procedures for the College and revises existing ones, when needed. The need for a new policy or procedure may be brought to the committee by any faculty or administrator and added to the AAC agenda. In addition, the AAC engages in ongoing discussions about various topics that may lead to developing and refining policies and procedures.

d. admissions policies and/or decisions

The Admissions Committee develops and provides oversight of the policies and procedures that govern admission to the various degree programs offered by GPH. The Admissions Committee, in consultation with the Dean and the Dean's Policy Committee, works with the departments and programs to establish and evaluate their admissions criteria and processes, while monitoring the review and decision process throughout the admission cycle to ensure adequate progress towards enrollment goals. This committee has faculty representation from each department and also includes the Associate Dean for Admissions and Enrollment as a non-voting member. Other

committee work includes policies and procedures, timelines, and evaluating progress towards enrollment targets by each program or concentration. See Section H4 for a full description of student recruitment and admissions.

e. faculty recruitment and promotion

The Dean, Dean's Policy Committee, and Department Chairs and Program Directors have primary responsibility for directing the faculty recruitment efforts of the College. Two standing committees—Faculty Appointments and Promotions-Tenure (FAP-T) and Faculty Appointments and Promotions-Clinical (FAP-C)—are responsible for making recommendations regarding the appointment and promotion of faculty. The committees vote on academic titles and tenure status, and each FAP committee has drafted guidelines for these processes. The FAP-T guidelines are undergoing minor edits and are awaiting final approval by the Provost. We are in the process of addressing the Provost's comments on our draft FAP-C guidelines and will present a final document to our faculty for adoption in Academic Year (AY) 2018–19 (see draft FAP-T and FAP-C guidelines in ERF A1.2.e). Renewal of contracts for clinical faculty is based on evaluation by the Chair or Program Director, Senior Associate Dean for Academic and Faculty Affairs, and Dean of the College.

When the NYU Board of Trustees voted to approve the College of Global Public Health, the GPH Dean and Dean's Policy Committee, in collaboration with the Provost's Office, designed a faculty hiring plan to support the instruction, research, and service activities of the new College. As the College grew, the hiring plan included input from the departments and programs based on student enrollment and their specific areas of growth.

Since 2016, a College-wide, faculty-driven Chair Search Committee and individual department-wide, faculty-driven search committees for department and program faculty have overseen the recruitment process. As a result, the GPH faculty has grown from 25 primary instructional faculty in AY 2015-16 to 52 primary instructional faculty in AY 2018-19.

f. research and service activities

Research Activities: The Research Committee, in collaboration with the Senior Associate Dean for Research and Program Development, has the primary responsibility of setting the goals, policies, and procedures of the College as they relate to research.

Service Activities: The Practice Committee, in collaboration with the Director of Public Health Practice, serves as the planning, evaluation, and coordinating group for all academic and non-academic aspects of practice and service activities at the College, including student service activities, practice-related components of the curriculum, and faculty service.

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

A copy of the Bylaws are in ERF A1.3. The College's bylaws were drafted in Fall 2015 and reviewed and discussed at monthly GPH faculty meetings. Once approved by GPH faculty, they were submitted to the Provost's Office for further vetting and approval. They were officially approved by the Provost's Office in April 2016.

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

GPH faculty have a mandate to serve our College, the University, and the public health community at large. In AY 2017–18, 19 of our 41 full-time faculty served on University-wide committees, task forces, and other bodies contributing to the academic, community, and intellectual life at NYU. Examples include:

- Three GPH faculty are members of the NYU Global Network Site Specific Committees, which represent collaborations at NYU global sites, e.g., Tel Aviv and Buenos Aires.
- Two GPH faculty served on the prior University-wide Diversity Committee. One chairs the University Senate Diversity Equity and Inclusion Committee.
- One GPH faculty member serves on the Being@NYU subcommittee of the NYU Equity, Diversity, and Inclusion Advisory Taskforce.
- The GPH Senior Associate Dean for Research and Program Development is part of the University-wide Research Deans Council.
- A GPH faculty member was elected for the second year in a row to the Executive Committee of the Senate.
- A GPH faculty member chairs, for the second year in a row, the University-wide Academic Affairs Committee.
- Five GPH faculty members serve on the University Senate: two senators and three alternates.
- A number of GPH faculty are represented on, and in some cases chair, various University committees including: Academic Affairs Committee (AAC), Academic Assessment Council, Affordability Committee, Climate Survey Committee, Continuing Contract Faculty Senators Council (C-CFSC), Cross-University Forum, Distinguished Teaching Award Committee, Grievance Committee, Provost's Faculty Advisory Committee on Academic Priorities, Provost's Postdoctoral Fellowship Program Selection Committee, Senate Steering Committee, Sustainability Committee, and Tenured/Tenure-Track Faculty Senators Council (T-FSC).
- Several GPH faculty members serve on committees at other NYU schools, including the School of Medicine and the Tandon School of Engineering.
- The Senior Associate Dean for Academic and Faculty Affairs engages with other Academic Deans and Deans at NYU to discuss all new college programs with the Graduate Program Committee. This gives us the opportunity to keep updated on new initiatives throughout the campus, confirms that there are no redundant offerings, and allows for collaborative thought in moving the University curriculum forward.
- Several faculty members participate in University-wide initiatives, including the Aging Incubator, the Mission-Driven Ventures Roundtable, and the Research and Technology Faculty Advisory Board.

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

- All full-time faculty are required to attend monthly faculty meetings, and part-time faculty are invited to attend one joint faculty meeting each academic year. These meetings provide a forum for discussion, College updates, and faculty voting as appropriate.
- Standing and ad-hoc committees provide faculty with another venue for interaction and discussion. Standing committees meet at least three times per semester and include representation from all departments and programs.
- The GPH Office of Communications maintains a listserv to inform all part-time and full-time faculty, staff, and students about speaker events, receptions, films, panels, town hall meetings, etc.
- In October 2017, we held our first annual retreat for all full-time faculty, senior-level administrators, and senior-level staff, with more than 90% attendance. At the retreat, the GPH Dean presented the College's strategic plan and reviewed our mission and vision.

- The Dean's Weekly Update newsletter is emailed to the entire GPH community, providing a platform for all faculty, staff, and students to be aware of College-wide achievements and events. The newsletter also serves as a springboard for discussion around current public health news and events.

Agendas and minutes from the various committees and faculty meetings are provided in ERF A1.5.

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

Strengths:

Since approval by the NYU Board of Trustees in 2015, the College has enjoyed the full support of the NYU senior leadership and the University's President. The Dean of the College, in collaboration with faculty and senior administrators, has created a robust committee structure to oversee all aspects of College activities, including the recruitment and promotion of faculty, identification of research and service opportunities, and development of a rigorous academic curriculum that meets the new accreditation criteria.

An important strength of being a smaller college in "startup" mode is that there is tremendous awareness and involvement of all faculty in every aspect of the academic, research, and practice components of the college. To that end, all of our faculty have been involved in many levels of collaboration over the past two years, and we have built a real public health community. This sense of community extends to the student body in events that take place each semester, including the Dean's Town Hall, which allows for unrestricted access between students and the GPH Dean.

Weaknesses:

None noted.

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A2. Multi-Partner Schools and Programs

Not Applicable.

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A3. Student Engagement

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

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

Students participate in the decision-making processes of the College in two main ways: 1) through active participation in the Student Governing Council (SGC); and 2) via appointment to standing College committees.

The SGC is the umbrella student organization for all student groups at the College of Global Public Health. The SGC is a group of GPH students representing all degree programs elected to serve on behalf of the general GPH student body. The SGC works to foster a sense of community, promote leadership/professional development opportunities, and oversee the creation of new GPH student groups.

All members of the SGC are elected by the GPH student body. The co-presidents of the SGC are invited to report SGC activities at GPH Faculty Meetings. Additionally, SGC Executive Board members may be asked to review GPH program proposals and new initiatives; participation in these activities is always at the request of GPH faculty and administration. SGC members also serve on the University-wide Student Governing Assembly and the President's Council. SGC co-presidents and members of the Student Affairs team have weekly meetings to discuss upcoming events, changes that impact the student body, and other issues.

In addition to the SGC, members of the current student body are selected, usually by faculty or administration recommendation, to be part of one or more of the following committees:

- the Accreditation Committee (two students, any level), which oversees the process for applying for accreditation and the means of collecting needed data for accreditation and other evaluation purposes
- the Doctoral Advisory Committee (two doctoral students), a standing subcommittee that has decisional prerogatives on all major aspects regarding doctoral studies, as well as being charged with supervising the development of the doctoral programs and enforcing GPH regulations on this matter
- the Space Committee (two students, any level), which develops principles, policies, and procedures for allocating and re-allocating space in the College

In addition to ongoing participation in the above committees, beginning in AY 2018–19 student representatives now serve on three standing committees of the College: Academic Affairs, Collegiality, and Practice. Each of these standing committees includes one or two student representatives. The SGC Executive Board has identified members from the 2018–19 Council to serve on each of these committees.

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

Strengths:

We have a strong and active Student Governing Council (SGC). Students serve on committees both within GPH and University-wide. Reporting by SGC representatives at GPH faculty meetings provides an important opportunity for faculty to better understand the overall interests of our students.

Weaknesses:

To date, students have not served on standing committees.

Plans:

Beginning in AY 2018–19, students serve on specified College standing committees.

A4. Autonomy for Schools of Public Health

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

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

   The Office of the President is the highest-ranking office at the University. As is the case with the Deans from the other schools and colleges within the University, the GPH Dean reports directly to the President through the Provost (see Figure Intro.2b above).

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

   GPH exercises autonomy equal to other schools and colleges within NYU. The Provost, who serves as NYU's Chief Academic Officer, is responsible for setting the University's academic strategy and priorities. The Provost supervises the Deans and Directors of all the colleges, schools, institutes, and academic support units, and with their assistance cultivates areas of excellence and enhances collaboration within and between schools. The Provost also allocates financial resources according to academic priorities, in cooperation with University financial officers.

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

   Strengths:

   GPH is extremely fortunate to have the full backing and support of the University's senior leadership and the University's President. The GPH Dean enjoys a reporting structure equal to that of other Deans of schools and colleges across the University.

   Weaknesses:

   None noted.

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A5. Degree Offerings in Schools of Public Health

A school of public health offers a professional public health master's degree (eg, MPH) in at least three distinct concentrations (as defined by competencies in Criterion D4) and public health doctoral degree programs (academic or professional) in at least two concentrations (as defined by competencies in Criterion D4). A school may offer more degrees or concentrations at either degree level.

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

GPH currently offers an MPH degree in 10 areas of concentration. Each concentration is housed within a particular department or program (see Figure Intro.2a-2 above). Departments were developed along the lines of the five core knowledge areas of public health, with the exception of Environmental Public Health Sciences, which is housed within the Global Health Program. The Global Health and Public Health Nutrition concentrations are free-standing programs that are not housed within a department.

GPH's 10 MPH concentrations are as follows:

1. Biostatistics
2. Community Health Science and Practice
3. Environmental Public Health Sciences
4. Epidemiology

   The Epidemiology curriculum is offered in the traditional two-year full-time (or part-time) format at the University's New York City campus. It is also offered in a Cross-Continental format as a full-time, one-year program taught over three semesters on three continents at three different NYU global sites. The Cross-Continental format includes the Applied Practice Experience at the global sites. Its competencies and curriculum are identical to the NYC-based Epidemiology MPH curriculum and students complete the same total number of credits.

5. Global Health
6. Public Health Management
7. Public Health Nutrition
8. Public Health Policy
9. Social and Behavioral Sciences
10. Sustainable Development Goals (online format)

The College also offers a Doctor of Philosophy (PhD) in three areas of concentration:

1. Epidemiology
2. Public Health Policy and Management
3. Social and Behavioral Sciences

In addition, the College offers the following dual degrees within the Global Health concentration:

1. MD/MPH (with the School of Medicine)
2. DDS/MPH (with the College of Dentistry)
3. MPA/MPH (with the Robert F. Wagner Graduate School of Public Service)
4. MS/MPH (with the Rory Meyers College of Nursing)
5. MSW/MPH (with the Silver School of Social Work)

Dual degree students are required to take a total of 46 credits to complete the MPH portion of the dual degree: 15 to 18 credits of the required MPH core curriculum and 9 credits of required Global Health concentration courses, all at GPH. All dual degree students take four credits of GPH Applied Practice Experience and Integrative Learning Experience, with the exception of MPH/MPA students who complete their Capstone at the Wagner Graduate School of Public Service. The remaining credits are fulfilled by electives that are taken at GPH or the other professional schools. The MPH foundational

competencies are covered in the 15 to 18 credits of core courses and the concentration competencies are covered in the nine credits of Global Health required courses. Information about the allocation of credits for each of the dual-degree programs is available on our website.

A complete list of our academic degree offerings was presented in Table Intro-1 in the Introduction section.

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

See the links below for information regarding GPH's academic degree offerings:

MPH: https://publichealth.nyu.edu/master-public-health/concentrations

Dual Degree MPH programs: https://publichealth.nyu.edu/master-public-health/dual-degrees

- MD/MPH
- DDS/MPH
- MPA/MPH
- MS/MPH
- MSW/MPH

PhD: https://publichealth.nyu.edu/programs/doctorate#stud

MA in Bioethics: https://publichealth.nyu.edu/programs/master-arts-bioethics

B1. Guiding Statements

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

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

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

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

1) A one- to three-page document that, at a minimum, presents the school's vision, mission, goals and values.

The guiding statements of GPH reflect our commitment to science, innovation, health equity, and action on a global scale. As a young college, we seize the opportunity to pursue our aspirations with fresh and original thinking. Achieving grand goals requires both seriousness of purpose and willingness to take action, and at GPH, we believe that investing in committed people and essential resources will bring us closer to addressing future global health crises.

We engaged in a collaborative process to develop and approve a vision, mission, and goals for the College. GPH faculty, administration, students, alumni, and staff were involved throughout, from the initial development stages by the Accreditation Committee, through fine-tuning at GPH senior leadership and faculty retreats, and including feedback from the Advisory Board.

Our mission, vision, and values are presented on our website and below:

http://publichealth.nyu.edu/about/mission-vision-values.

Vision

To significantly improve the health of populations by pioneering solutions that advance health equity around the world today and tomorrow.

This vision reflects a core belief that global health is not merely a field of study, area of research, or a career, but a goal that will change the world.

Mission

To reinvent the public health paradigm by inspiring innovative scholarship, practice, and leadership across boundaries.

Goals

Our goals embody our blueprint for achieving our mission, encompassing the core areas of instruction, scholarship, service, diversity, and academic community. As discussed in Section B5 below, each goal has a set of measurable objectives for monitoring our progress in achieving our goals.

Table B1-A College of Global Public Health Goals	
Area	**Goals**
1. Instruction	*Goal 1.1:* Prepare students for the public health workforce through appropriate practice-oriented curricula *Goal 1.2:* Implement a system that promotes the quality of instruction and education *Goal 1.3:* Provide a supportive and nurturing educational environment that promotes students' personal and professional development
2. Scholarship	*Goal 2.1:* Strengthen our research presence by advancing a relevant and responsive research program *Goal 2.2:* Produce research that has an impact on scholarship, policy, and practice *Goal 2.3:* Develop a system that promotes the quality of research with an emphasis on early career faculty and students
3. Service	*Goal 3:* Develop a culture and system that promote faculty and student participation in service
4. Diversity	*Goal 4:* Develop a culture and system that promote diversity and inclusion in instruction, research, and service
5. Academic Community	*Goal 5:* Support excellence in all endeavors of the College of Global Public Health

Values

Building a culture that values collegiality is one of the most important contributions a new college can make. To address this need, the GPH Dean convened a working group, comprising GPH faculty and staff, to research collegiality issues within higher education. The group's charge was to identify GPH core values and make recommendations to ensure a productive work environment open to efficient discourse. The working group reviewed the current literature and conducted surveys on the College's faculty and staff attitudes regarding workplace collegiality. The group also held several meetings in Spring 2017 and used the information to identify the core values, listed below, that GPH faculty and staff consider the most important (see the Adopting a Culture of Collegiality Report in ERF B1.1).

GPH has the following **Shared Core Values** (in alphabetical order):

Community—Devoting one's career to the field of public health can be hard work and the enormous rewards are often measured less in financial gain than they are in lives improved, extended, and saved. With a career that is more of a "calling" than a job, the nurturing and supportive community that we surround ourselves with here at GPH is paramount, and we work every day to build and strengthen it to underpin our efforts.

Diversity—In global public health, we work to improve the health of all everywhere. Our faculty, staff, and student body hail from more than 30 nations and speak more than 30 languages. We strive for diversity in ideas, perspectives, professors, students, and administrators; solving the complex problems required to improve health demands it.

Happiness—Being happy and fulfilled by one's work, surrounded by people of shared values, is critical. At GPH, we strive to create an environment so that all who work and study here feel inspired, supported, and fulfilled every day.

Integrity – Defined as "adherence to moral and ethical principles" and "the state of being whole and undivided," integrity, along with honesty, ethics, and fairness, is something GPH values and strives for.

Trust and Respect—GPH faculty, staff, and students place great importance in and work to build reciprocated trust and respect. Both are key components of building a cornerstone for the College.

Value Everyone Equally—Regardless of a person's stature, seniority, or appointment, GPH places great emphasis on treating everyone equally and making sure that all who work and study here feel welcome and valued.

We aim to achieve these Shared Core Values by:

- respecting and valuing differences in race; religion; ethnicity; gender identity; sexual orientation; physical, mental, and emotional abilities; and socioeconomic status
- embracing diversity of perspectives, experiences, beliefs, and cultural and social mores
- treating one another with dignity and respect
- fostering a climate of diversity, equity, and inclusion
- enhancing cultural competency and sensitivity through targeted initiatives
- creating a welcoming and safe learning environment for all members of our community

Applying our Guiding Statements

Our mission, vision, and goals help guide allocation of resources to seed, nurture, and support initiatives that advance our guiding statements. An example of one such initiative is the MPH Program in Sustainable Development Goals, which provides generous scholarship funds to scholars in sub-Saharan Africa with the aim of bringing additional educational and training opportunities to remote areas most in need of public health expertise and pioneering solutions.

The Dean's Policy Committee discusses and prioritizes activities to accomplish the primary goals of the College and uses these priorities to guide appropriation of resources. As an example, the first stated goal of the College guides direction of resources towards achieving high-quality instruction, preparing students, and providing a supportive educational environment. Discussions by the Dean's Policy Committee in Academic Year (AY) 2017–18 led to the creation of two new faculty positions responsible for supporting the Applied Practice Experience of our students, including a new Director of Public Health Practice. Additional resources have also been provided for new internship experiences abroad with UNICEF, as a preliminary trial for the expansion of similar unique student service opportunities in AY 2018-19. The Dean's Policy Committee will continue to serve as the central body responsible for discussion and measurement of goals, and for setting priorities and allocating resources to achieve these goals.

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

The GPH strategic plan directs the academic and research agenda of the College. It was developed by the GPH Dean in consultation with the Dean's Policy Committee (see the strategic plan in ERF B1.2).

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

Strengths

The College completed a thoughtful, deliberate, inclusive, and collaborative process to develop and approve our vision, mission, goals, and values.

Weaknesses

Our vision to have an impact on a global level is ambitious and challenging, particularly in the context of a dynamic global public health landscape. We recognize that we would benefit from additional goal setting in order to more fully address our mission to inspire innovation across boundaries and reinvent the public health paradigm.

Plans

Our Advisory Board serves a vital role in helping keep us abreast of global health trends and future directions. As discussed in Section F1 below, *Community Involvement in School Evaluation and Assessment*, our first Advisory Board meeting in October 2017 included an extensive discussion of how we as a college should respond to these developments. In AY 2018–19, the GPH Dean's Policy Committee will identify priorities and develop a plan for addressing them.

In addition, we recently created a new senior leadership position of Associate Dean for Public Health Innovation. Dr. Ralph DiClemente joined our faculty in Fall 2018 to serve in that position. This appointment demonstrates our commitment to facilitating innovative approaches in our pedagogy, scholarship, and service. In AY 2018–19, Dr. DiClemente will help lead the Accreditation Committee in discussions to develop additional goals and measurable objectives to fulfill our mission to advance boundary-spanning innovation in scholarship, practice, and leadership.

B2. Graduation Rates

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

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

1) Graduation rate data for each public health degree. See Template B2-1.

As seen in Table B2-1a below, GPH's graduation rate for MPH students has not dipped below 83% in applicable years since the College's inception in June 2015. GPH has allocated four years for students to complete the MPH degree and five to seven years for students to complete the PhD degree.

Table B2-1a Students in MPH Degree Cohorts Entering Between 2015-16 and 2017-18

	Cohort of Students	AY 14-15	AY 15-16	AY 16-17	AY 17-18
AY 14–15	# Students entered	93			
	# Students withdrew, dropped, etc.	3			
	# Students graduated	0			
	Cumulative graduation rate for FT	0%			
AY 15–16	# Students continuing at beginning of this school year (or # entering for newest cohort)	90	122		
	# Students withdrew, dropped, etc.	2	5		
	# Students graduated	79	0		
	Cumulative graduation rate for FT	85%	0%		
AY 16–17	# Students continuing at beginning of this school year (or # entering for newest cohort)	9	117	220	
	# Students withdrew, dropped, etc.	2	3	6	
	# Students graduated	0	89	14	
	Cumulative graduation rate	85%	73%	6%	
AY 17–18	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	25	200	213
	# Students withdrew, dropped, etc.	0	0	2	3
	# Students graduated	2	15	168	10
	Cumulative graduation rate	87%	85%	83%	5%

Table B2-1b Students in PhD Degree, by Cohorts Entering Between 2011-12 and 2017-18								
	Cohort of Students	AY 11-12	AY 12-13	AY 13-14	AY 14-15	AY 15-16	AY 16-17	AY 17-18
AY 11–12	# Students continuing at beginning of this school year (or # entering for newest cohort)	1						
	# Students withdrew, dropped, etc.	0						
	# Students graduated	0						
	Cumulative graduation rate for FT	0						
AY 12–13	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2					
	# Students withdrew, dropped, etc.	0	0					
	# Students graduated	0	0					
	Cumulative graduation rate for FT	0	0					
AY 13–14	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2	0				
	# Students withdrew, dropped, etc.	0	0	0				
	# Students graduated	0	0	0				
	Cumulative graduation rate for FT	0	0	0				
AY 14–15	# Students entered	0	0	0	4			
	# Students withdrew, dropped, etc.	0	0	0	0			
	# Students graduated	0	0	0	0			
	Cumulative graduation rate for FT	0	0	0	0			
AY 15–16	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2	0	4	6		
	# Students withdrew, dropped, etc.	0	0	0	0	1		
	# Students graduated	0	0	0	0	0		
	Cumulative graduation rate for FT	0	0	0	0	0		
AY 16–17	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2	0	4	5	4	
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	
	# Students graduated	0	0	0	0	0	0	
	Cumulative graduation rate for FT	0	0	0	0	0	0	
AY 17–18	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2	0	4	5	4	9
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	1
	# Students graduated	1	0	0	1	0	0	0
	Cumulative graduation rate	100%	0%	0	25%	0	0	0

2) Data on public health doctoral student progression in the format of Template B2-2.

Table B2-2 Doctoral Student Data for AY 2018			
PhD in Public Health Concentration	Epidemiology	Public Health Policy and Management	Social and Behavioral Sciences
# newly admitted in 2018–19	3	3	1
# currently enrolled (total) in 2018–19	11	8	8
# completed coursework during 2017–18	8	5	7
# advanced to candidacy (cumulative) during 2017–18	6	4	5
# graduated in 2017–18	0	0	2

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

Table B2-1a shows GPH's graduation rate for MPH students exceeds the required 70% outlined by CEPH. Beginning in Fall 2018, GPH had 505 students registered in the MPH Program. The most recent Spring 2018 exit surveys of graduates show 88% of MPH students attend the program full-time (defined as registering for 12 credits or more), with a small percentage of students taking an average of two to three years to graduate from the program (see the 2018 Exit Survey Reports in ERF B2.3).

The PhD in Public Health launched in AY 2014–15. Student activity prior to that academic year reflects the enrollment of students who later transferred into the GPH Program. Table B2-1b begins in AY 2011–12 and includes one part-time student, who began the PhD Program at NYU Steinhardt in AY 2006–07 and later transferred into the GPH Program. The AY 2012 cohort represents two part-time students who began the PhD Program at NYU Steinhardt and later transferred into the GPH Program. The AY 2015–16 entering cohort includes one student who undertook a medical leave of absence (reflected in the table) and is slated to return in AY 2018–19. Time to graduation for doctoral students is five to seven years; the first cohort of GPH doctoral students' maximum time to graduate will be in AY 2019–20.

As shown in Table B2-2, currently there are 27 full-time doctoral students enrolled within the three PhD concentrations: 11 in Epidemiology; 8 in Social and Behavioral Sciences; and 8 in Public Health Policy and Management.

Two doctoral students graduated in May 2018, and 15 have advanced to candidacy. We anticipate two more students, one in Epidemiology and one in Public Health Policy and Management, graduating in Fall 2018.

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

Strengths:

We have a structure in place to successfully graduate master's and doctoral students. The Office of Academic Affairs and the Office of Student and Alumni Affairs work collaboratively to track the progress of our MPH and PhD students as they advance through the program and graduate in a timely fashion.

Weaknesses:

None noted.

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B3. Post-Graduation Outcomes

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

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

1) Data on post-graduation outcomes (employment or enrollment in further education) for each public health degree. See Template B3-1.

Staff in the Office of Academic Affairs are responsible for administering the annual one-year post-graduation survey (disseminated electronically through Survey Monkey) to determine the employment rate of our graduates nine months to one year after Commencement. The survey response rate has been steady for the last three academic years and remains well above the acceptable response rate of 30% as defined by CEPH's technical assistance report on "Collecting and Reporting Job Placement Data" (see 2018 Post-Graduation Survey Report in ERF B3.1):

- 53% response rate for AY 2014–15 graduates (47/88 eligible)
- 57% response rate for AY 2015–16 graduates (53/93 eligible)
- 50% response rate for AY 2016–17 graduates (57/115 eligible)

Table B3-1 MPH Post Graduation Outcomes Data, 2014-2016
Years reflect time of data collection, 9-15 months following students' graduation.

	AY 14-15 Graduates N=47		**AY 15-16 Graduates N=53**		**AY 16-17 Graduates N=57**	
Post-Graduation Outcomes	**#**	**%**	**#**	**%**	**#**	**%**
Employed	40	85%	43	81%	51	89%
Continuing education or training (not employed)	2	4%	2	4%	2	2%
Not seeking employment or not seeking additional education by choice	0	0%	0	0%	0	0%
Actively seeking employment or enrollment in further education	5	11%	6	11%	5	9%
Unknown	0	0%	2	4%	0	0%
Total	47	100%	53	100%	58	100%

There are currently no post-graduate data for doctoral graduates since the College just graduated its first two students in Spring 2018. We will begin soliciting employment information from our PhD alumni in Spring 2019, approximately one year after their graduation.

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

Data presented above in Table B3-1 show a steady employment rate above 80% for the past three years. Results from GPH's most recent one-year post-graduation survey show that:

- 89% of those responding were employed nine months following graduation
- 9% were actively seeking employment (showing a drop from 11% in 2014 and 2015)
- 2% were enrolled in continuing education
- 0% unknown (a number that has remained small year-over-year)

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

Strengths:

GPH has a system in place to track post-graduation outcomes. The survey response rate has been steady for the last three academic years and above the minimum required response CEPH rate of 30%. Respondents consistently demonstrate high rates of employment or continuing education.

Post-graduation survey data are collected, analyzed, and reviewed through various standing committees. The Dean's Policy Committee reviews the data annually to ensure that the 80% employment target is met. The Senior Associate Dean for Student and Alumni Affairs and colleagues from NYU's Wasserman Center for Career Development review the employment data to inform annual career fairs. This information is also used by Wasserman Center to refine its employee database and career counseling services.

Weaknesses:

We are aware of the need to improve the accuracy of our alumni database in order to improve the response rate for the annual surveys and maintain contact with our alumni.

Post-graduation information for PhD students is unavailable at this time as our first two doctoral students graduated in Spring 2018.

Plans:

The Office of Academic Affairs will continue to send reminders to non-responders, up to five times, to encourage survey completion. We will explore the option of offering a small financial incentive for completing the survey to raise future response rates. We have started employing other sources of information to track graduates who do not respond to the survey, e.g., direct outreach through LinkedIn and Facebook pages. These efforts, along with the development of an active alumni network, will continue as we strive to build a robust alumni community and increased survey response rates.

We will include doctoral students in the post-graduation survey to be administered at the end of Academic Year (AY) 2018–19.

B4. Alumni Perceptions of Curricular Effectiveness

For each public health degree offered, the school collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements.

The school defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered.

1) Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation.

In Fall 2017, staff in the Office of Student and Alumni Affairs administered a survey to 405 MPH alumni. We obtained a 31% response rate. The survey targeted graduates from AY 2012–15 and assessed the degree to which alumni felt confident they have achieved each of the new MPH Foundational Competencies specified in the 2016 Criteria, and how well they can apply them.

Main findings indicate a number of areas where a majority of alumni rated themselves 4 or 5 on a scale of 1 to 5, with 5 being the highest. The percentage of alumni responding 4 or 5 for the eight Foundational Competency Domain areas is summarized below.

Table B4-A Alumni Self-Assessment of Competency Attainment, Fall 2017
(124 responding out of 405 eligible)

Foundational Competency Domain	Percentage Responding 4 or 5 on Scale of 1-5 (N= 124)*
Evidence-based approaches to public health	54%
Public health and health care systems	65%
Planning and management to promote health	62%
Policy in public health	49%
Leadership	43%
Communication	56%
Interprofessional practices	72%
Systems thinking	57%

*Percentages calculated by averaging the percent of students answering 4 or 5 across all competencies included under each domain

The alumni survey findings were reviewed by the Accreditation Committee, comprising faculty and student members, at a meeting held on February 26, 2018 (see meeting minutes in ERF B4.1). Committee members noted that the response rate was good, especially when considering that the survey was also sent to alumni who graduated more than three years ago, and that the response rate is comparable to a recent University-wide survey administered by a third party, which was deemed an excellent response.

The Accreditation Committee discussed the findings and noted that they need to be interpreted in context. The alumni included in this survey all graduated before implementation of the new MPH core

curriculum, which now focuses on competencies identified in the revised 2016 criteria. Responses probably reflect the nature of the MPH concentration and jobs that alumni hold, with higher scores likely in areas that alumni are responsible for in their work. The committee made a number of recommendations to improve response rates and competency performance.

There are currently no alumni data for doctoral graduates since the College just graduated its first two students in Spring 2018. We will begin soliciting information from our PhD alumni in Spring 2019, approximately one year after graduation.

2) Provide full documentation of the methodology and findings from alumni data collection.

The Alumni Survey Summary Report and the Alumni Survey Competency Report can be found in ERF B4.2. Documentation of the alumni survey methodology is provided within the reports.

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

Strengths:

The College has in place a mechanism for obtaining feedback on MPH alumni perceptions of their success in achieving defined competencies.

Weaknesses:

We have no outcomes for the first graduating cohort of PhD students. Survey findings suggest that there are a number of competencies for which our first few graduating MPH cohorts are not highly confident in their abilities. Our survey response rates should be improved.

Plans:

The PhD program graduated its first students in AY 2017–18 and will be included in future surveys.

In AY 2018–19, we will implement the following recommendations made by the Accreditation Committee to improve competency performance and response rates:

- The Office of Academic Affairs will identify all foundational competencies for which fewer than 20% of alumni gave the top score of 5. Findings will be shared with Department Chairs and MPH core course instructors so they can review their syllabi and develop plans for addressing specific competencies that may need more emphasis in the core curriculum.
- The Office of Academic Affairs will compare findings across student cohorts to see if responses improve over time, particularly among those entering in AY 2017–18 who are the first to be exposed to the revised core curriculum, which explicitly addresses the 22 foundational competencies.

We will consider offering a small financial incentive for completing the survey and including an alumni newsletter with the survey, to maintain contact with our alumni.

B5. Defining Evaluation Practices

The school defines appropriate evaluation methods and measures that allow the school to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic and well documented. The chosen evaluation methods and measures must track the school's progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

1) Present an evaluation plan that, at a minimum, lists the school's evaluation measures, methods and parties responsible for review. See Template B5-1.

Our evaluation plan is designed to provide a comprehensive approach for ongoing monitoring of the College's performance in a number of areas with review and feedback from multiple stakeholders. The plan builds on existing data systems and review structures, while expanding the scope of data gathering and systematizing processes for review and implementation, reflecting our growth from program to school over the last three years.

The evaluation is based on the College's Goals and Objectives (see Goals and Objectives in ERF B5.1.a), which were developed by the Accreditation Committee. The committee includes representatives from faculty, students, and administration across the College (see list of Accreditation Committee members in ERF B5.1.b). The Goals and Objectives encompass the areas of instruction, scholarship, service, diversity, and academic community and the objectives provide measurable benchmarks for monitoring our performance, including measures required as part of the self-study.

Evaluation measures, data collection methods, and stakeholders responsible for review are presented in Tables B5-1a-e below. Each table focuses on evaluation of a primary area of the College's performance:

- Mission: Table B5-1a
- Instruction: Table B5-1b
- Scholarship: Table B5-1c
- Service: Table B5-1d
- Student Success: Table B5-1e

Measures identified in the tables below are based on new indicators developed by the Accreditation Committee to track progress for each objective. These tables also identify the GPH Goals and Objectives related to each measure based on the document developed by the accreditation committee (see ERF B5.1.a). Many of the measures are drawn from existing assessment mechanisms, e.g., student exit surveys, alumni surveys, employer surveys, and course evaluations.

Responsibility for review of specific evaluation findings is assigned to the appropriate decision-making body. These include the Dean's Policy Committee; the College's standing committees (Academic Affairs; Research; Practice; Admissions; and Diversity, Equity, and Inclusion); and the Student Governing Council. The Dean's Policy Committee provides general oversight for this process and responsibility for monitoring implementation of the evaluation and addressing findings.

Table B5-1a Evaluation of Mission		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Goal 5: Support excellence in all endeavors of the College of Global Public Health		
Measure M1: At least two professional development events for faculty each year **Criterion A1:** Organization and Administrative Process **Objective 5.3:** Implement a department structure that supports faculty and students	Annual events report by Office of Communications summarizing events and activities based on notices, flyers, and other materials	Dean's Policy Committee
Measure M2: At least two departmental events for students each year **Criterion A1:** Organization and Administrative Process **Objective 5.3:** Implement a department structure that supports faculty and students	Annual events report by Office of Communications summarizing events and activities based on notices, flyers, and other materials (report to be developed)	Dean's Policy Committee
Measure M3: Student perceptions of class size **Criterion C2:** Faculty Resources **Objective 5.2:** Achieve a faculty complement to fully support GPH academic programs	Office of Academic Affairs produces summary report based on annual graduate exit surveys	Dean's Policy Committee
Measure M4: Student perceptions of faculty availability **Criterion C2:** Faculty Resources **Objective 5.2:** Achieve a faculty complement to fully support GPH academic programs	Office of Academic Affairs produces summary report based on annual graduate exit surveys	Dean's Policy Committee
Goal 4: Develop a culture and system that promote diversity and inclusion in instruction, research, and service		
Measure M5: Develop and implement a plan for promoting diversity and inclusiveness in recruitment, retention, and leadership of students, faculty, and staff from the three priority underrepresented groups (race; ethnicity; first-generation college) **Criterion G1:** Diversity and Cultural Competence **Objective 4.1:** Develop policies that support a climate of equity and inclusion	Interim Report by Diversity, Equity, and Inclusion Committee	Diversity Committee
Measure M6: Yield from each of the three priority underrepresented groups accepting offers of admission to the MPH and PhD programs **Criterion G1:** Diversity and Cultural Competence **Criterion H4:** Student Recruitment and Admissions **Objective 4.2:** Recruit and retain a diverse student body	Data Report, produced by the GPH admissions administration	Diversity Committee Admissions Committee

Table B5-1a Evaluation of Mission		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Measure M7: Increase the number of enrolled MPH & PhD students from each of the three priority underrepresented groups **Criterion G1:** Diversity and Cultural Competence **Criterion H4:** Student Recruitment and Admissions **Objective 4.2:** Recruit and retain a diverse student body	Data Report, produced by the GPH admissions administration (PhD report to be developed)	Diversity Committee Dean's Policy Committee
Measure M8: Number of tenure-track faculty and clinical faculty at each rank from the two faculty priority groups (race and ethnicity) underrepresented in academia **Criterion G1:** Diversity and Cultural Competence **Objective 4.3:** Recruit and retain a diverse faculty	Office of Academic Affairs produces annual summary report (to be developed)	Diversity Committee Dean's Policy Committee

Table B5-1b Evaluation of Instruction		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Goal 1.1: Prepare students for the public health workforce through appropriate practice-oriented curricula		
Measure IN1: MPH students report Applied Practice Experience made significant contribution to public health and professional skills **Criterion D4:** MPH Concentration Competencies **Objective: 1.1.2:** Ensure that all students have a quality Applied Practice Experience	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Practice Committee
Goal 1.2: Implement a system that promotes the quality of instruction and education		
Measure IN2: Departments review MPH and PhD concentration curricula every four years beginning AY 2018–19 **Criterion E3:** Faculty Instructional Effectiveness **Objective 1.2.1:** Conduct a strategic assessment of the MPH and PhD curricula	Department meeting minutes based on review of concentration competencies, requirements, and syllabi (beginning AY 2018–19)	Department faculty Academic Affairs Committee Doctoral Advisory Committee
Measure IN3: Mentoring and development plans for all instructors rated below "good" by at least 20% of students **Criterion E3:** Faculty Instructional Effectiveness **Objective 1.2.3:** Implement a system for developing excellence in pedagogy among faculty and doctoral students	Office of Academic Affairs produces bi-annual report based on course evaluations in University Data Warehouse+ (UDW+) (To be developed)	Department chairs Senior Associate Dean for Academic and Faculty Affairs

Table B5-1c Evaluation of Scholarship		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Goal: 2.1 Strengthen our research presence by advancing a relevant and responsive research program		
Measure SC1: Annual increase in the number of submissions to new domestic and international sponsors (government agencies, foundations, and global health organizations including USAID, CDC, DOD, Gates, etc.) **Criterion E4:** Faculty Scholarship **Objective 2.1.1:** Promote research that addresses current and emerging public health needs locally and globally	Research Office report	Research Committee
Measure SC2: Annual increase in the number of projects involving research collaborations **Criterion E4:** Faculty Scholarship **Objective 2.1.3:** Promote innovative, interdisciplinary research collaborations across all NYU schools, colleges, and beyond	Research Office report	Research Committee
Goal: 2.2 Produce research that has an impact on scholarship, policy, and practice		
Measure SC3: % of faculty participating in research activity **Criterion E4:** Faculty Scholarship **Objective: 2.2.1:** Promote growth in the sponsored research portfolio	Research Office Report	Research Committee
Measure SC4: Annual increase in the number of presentations at professional meetings **Criterion E4:** Faculty Scholarship **Objective 2.2.2:** Promote dissemination of faculty research	Office of Academic Affairs produces summary report based on annual faculty Professional Activity Forms	Research Committee
Goal: 2.3 Develop a system that promotes the quality of research with an emphasis on early career faculty and students		
Measure SC5: Support for development and mentoring of new and junior faculty **Criterion E4:** Faculty Scholarship **Objective 2.3.1:** Sponsor training activities and mentorship to strengthen research capabilities and productivity among junior faculty and student scholars	Annual events and activities report produced by Research Office based on event notices, flyers, and other materials	Research Committee
Measure SC6: Annual increase in the number of students involved with GPH public health research labs **Criterion E4:** Faculty Scholarship **Objective 2.3.1:** Sponsor training activities and mentorship to strengthen research capabilities and productivity among junior faculty and student scholars	Office of Academic Affairs produces summary report based on annual faculty Professional Activity Forms	Research Committee

Table B5-1d Evaluation of Service		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Goal 3: Develop a culture and system that promote faculty and student participation in service		
Measure SE1: % of faculty providing at least one service activity to the general community (e.g., membership in community organizations or boards; technical support to governmental bodies, NGOs, CBOs, or community-based projects) **Criterion E5:** Faculty Extramural Service **Objective 3.2:** Provide faculty service to the community	Office of Academic Affairs produces summary report based on annual faculty Professional Activity Forms	Practice Committee
Measure SE2: Number of student community service events per year **Criterion F2:** Student Involvement in Community and Professional Service **Objective 3.3:** Provide student service to the community	Event notices, flyers, and other materials	Student Governing Council
Measure SE3: Number of public health workforce members participating in GPH-sponsored training activities **Criterion F4:** Delivery of Professional Development Opportunities for the Workforce **Objective 3.4:** Support the development of the global public health workforce	Office of Academic Affairs produces report based on annual enrollment of public health workforce members in formal GPH training offerings	Practice Committee

Table B5-1e Evaluation of Student Success		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Goal 1.3: Provide a supportive and nurturing educational environment that promotes students' personal and professional development		
Measure SS1: The Student Governing Council (SGC) Executive Board meets monthly throughout the academic year **Criterion A3:** Student Engagement **Objective 1.3.3:** Maintain an active SGC elected by the student body	Student Governing Council Minutes	Student Governing Council
Measure SS2: SGC sponsors student-run clubs and organizations each year **Criterion A3:** Student Engagement **Objective 1.3.3:** Maintain an active SGC elected by the student body	Office of Student and Alumni Affairs produces summary report based on event notices, flyers, and materials (report to be developed)	Student Governing Council
Measure SS3: SGC sponsors one Town Hall each semester in each academic year **Criterion A3:** Student Engagement **Objective 1.3.3:** Maintain an active SGC elected by the student body	Office of Student and Alumni Affairs produces summary report based on event notices, flyers, and materials (report to be developed)	Student Governing Council
Measure SS4: SGC sponsors a minimum of four events or activities each academic year **Criterion A3:** Student Engagement **Objective 1.3.3:** Maintain an active SGC elected by the student body	Office of Student and Alumni Affairs produces summary report based on event notices, flyers, and materials (report to be developed)	Student Governing Council
Measure SS5: % of students report satisfaction with communication methods **Criterion A3:** Student Engagement **Objective 1.3.4:** Develop new avenues for dissemination of information about activities, opportunities, and events utilizing multiple communication and social networking methods	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Student Governing Council
Measure SS6: % of incoming students satisfied with Orientation **Criteria A3:** Student Engagement **Criteria H1:** Academic Advising **Objective 1.3.2:** Develop robust co-curricular activities that support the public health student experience	Office of Student and Alumni Affairs produces report based on orientation surveys	Student Governing Council
Measure SS7: % of students satisfied with academic advising and mentoring **Criterion H1:** Academic Advising **Objective 1.3.1:** Provide comprehensive advising and mentoring for students	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Dean's Policy Committee Student Governing Council

Table B5-1e Evaluation of Student Success		
Evaluation measures	**Data collection method for measure**	**Responsibility for review**
Measure SS8: % of students receive career advisement services **Criterion H2:** Career Advising **Objective 1.3.1:** Provide comprehensive advising and mentoring for students	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Dean's Policy Committee Student Governing Council
Measure SS9: % of students satisfied with career advisement services **Criterion H2:** Career Advising **Objective 1.3.1:** Provide comprehensive advising and mentoring for students	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Dean's Policy Committee Student Governing Council
Goal 1.1: Prepare students for the public health workforce through appropriate practice-oriented curricula		
Measure SS10: MPH students report Applied Practice Experience made significant contribution to public health and professional skills **Criterion D4:** MPH and DrPH Concentration Competencies (SPH and PHP) **Objective: 1.1.2:** Ensure that all students have a quality Applied Practice Experience	Office of Academic Affairs produces annual summary report based on graduate exit surveys	Practice Committee
Goal 4: Develop a culture and system that promote diversity and inclusion in instruction, research, and service		
Measure SS11: % of graduating students from groups underrepresented in public health **Criterion H4:** Student Recruitment and Admissions **Objective 4.2:** Recruit and retain a diverse student body	Office of Academic Affairs produces annual report based on graduation records from University Data Warehouse+ (UDW+) (report to be developed)	Diversity Committee Dean's Policy Committee

2) Briefly describe how the chosen evaluation methods and measures track the school's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success.

The evaluation plan is designed to track our progress in advancing the field of public health and in promoting student success through instructional quality and student support. Our goals and objectives explicitly address: 1) Instruction; 2) Scholarship; 3) Service; 4) Diversity; and 5) Academic Community.

As described above, the evaluation plan is organized around five focus areas addressing mission, instruction, scholarship, service, and student success. The measures noted in Tables B5-1a-e are related to each of these areas and provide indicators for tracking progress in making significant contributions to public health and ensuring that our students are prepared to enter the global public health workforce.

3) Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success.

Data from the evaluation were provided to the appropriate decision-making bodies during Academic Year (AY) 2017–18. Meeting minutes, reports, and other documentation relevant to each evaluation table can be found in the following sections of the ERF. Please note that no documentation is provided for measures for which data collection methods are yet to be developed.

- Table B5-1a Evaluation of Mission—ERF B5.3a
- Table B5-1b Evaluation of Instruction—ERF B5.3b
- Table B5-1c Evaluation of Scholarship—ERF B5.3c
- Table B5-1d Evaluation of Service—ERF B5.3d
- Table B5-1e Evaluation of Student Success—ERF B5.3e

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

Strengths:

We have developed and started implementing a comprehensive evaluation with the involvement of a broad group of faculty, students, and staff. We build on our governance structure to ensure implementation of an ongoing evaluation process.

Weaknesses:

As AY 2017–18 was the first year for planning and conducting the evaluation, some monitoring processes and data collection mechanisms are not yet fully implemented.

Plans:

We will complete development of the infrastructure and mechanisms to support ongoing monitoring, data collection, and reporting for all evaluation measures in AY 2018–19.

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B6. Use of Evaluation Data

The school engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.

The school implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

1) Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself.

Programmatic Changes Related to Curriculum and Instruction:

The evaluation plan calls for developing methods for regular assessment of the MPH curriculum and for implementing a system for continuous curricular improvement. In Fall 2017, the Academic Affairs Committee discussed evaluation findings related to our goal of implementing a system that promotes the quality of instruction and education (see Table B5-1b), resulting in the following:

- Curricular assessment: The committee developed a blueprint for curricular assessment to be initiated in Academic Year (AY) 2018–19. The blueprint calls for annual meetings of instructional faculty to assess implementation of MPH foundational competencies in the curriculum and annual department reviews to examine how concentration curricula can build on the core curriculum (see minutes from the November 29, 2017, meeting of Academic Affairs Committee in ERF B6.1).
- Curricular improvement: The Academic Affairs Committee developed a set of guidelines for continuous quality improvement of the curriculum to ensure that courses maintain fidelity to the approved curriculum and accreditation standards, while also allowing faculty flexibility to make improvements in their courses. The guidelines establish a schedule for regular review of the core and concentration curricula and procedures for making changes to courses (see minutes from the December 13, 2017, meeting of Academic Affairs Committee in ERF B6.1).
- Quality of instruction: The Academic Affairs Committee also developed procedures for developing excellence in pedagogy among faculty and doctoral students, including requiring doctoral students to attend at least two workshops and/or an individual teaching consultation offered by the NYU Center for the Advancement of Teaching , and dissemination in the weekly Dean's Update (sent to faculty, students, and staff) of information regarding upcoming workshops and events offered by the Center (see minutes from the December 13, 2017, meeting of Academic Affairs Committee in ERF B6.1).

Programmatic Changes Related to the MPH Applied Practice Experience:

In Fall 2017, the Practice Committee reviewed evaluation findings indicating that student assessment of the quality of their Applied Practice Experience (APE) fell below the targeted level. The committee developed a number of recommendations to improve the APE for students (see minutes from the November 30, 2017, Practice Committee meeting in ERF B1.6). The newly hired GPH Director of Public Health Practice and her team, based in the Office of Academic Affairs, will be responsible for overseeing implementation of the recommendations, which include the following:

- conduct interviews with a sample of recent graduates in AY 2018-19 to obtain feedback on their perceptions of the APE and how well it prepared them for working in public health
- develop an orientation for preceptors
- develop guidelines for faculty on helping students plan their APE
- develop mechanisms for communicating with each department and program regarding MPH APE requirements

In addition, the Public Health Practice team and Office of Student Affairs will work with the NYU Wasserman Center for Career Development to identify new practice sites and preceptors.

Programmatic Changes Related to Service:

In Fall 2017, the Practice Committee discussed the goals and objectives related to service and developed a number of recommendations for promoting faculty extramural service (see minutes from the October 18, 2017, and November 30, 2017, Practice Committee meetings in ERF B6.1). The Practice team of the Office of Academic Affairs will facilitate implementation of the following recommendations in AY 2018–19:

- survey faculty to inventory current service projects and identify opportunities for involvement by other faculty
- institute an annual Faculty Service Award to be presented at Commencement
- include a Faculty Service Highlights section in the Dean's Weekly Update sent to GPH faculty, students, and staff
- invite faculty to give a presentation on service activities at GPH faculty meetings
- sponsor a GPH Day of Service each year for faculty and students

Doctoral Admissions Changes Related to Diversity:

Based on GPH's commitment to enhance diversity, equity, and inclusion as outlined in our guiding principles (https://publichealth.nyu.edu/about/diversity), a diversity subcommittee of the GPH Doctoral Advisory Committee (DAC) was formed in January 2017 by the DAC Co-Chair and the Chair of the GPH Diversity, Equity, and Inclusion Committee (DEI), in consultation with the Dean and the Senior Associate Dean for Academic and Faculty Affairs.

The subcommittee reviewed doctoral applicants using metrics from the Provost's Office and voted on diversity candidates as well as other candidates who were not included in the initial review pool. As a result, 11 candidates not previously considered for admission were moved forward for inclusion in the 2017 doctoral program applicant Interview Day. After Interview Day, the DAC created a shortlist of 14 candidates to evaluate in terms of final phase criteria. Six of the 14 had come through the subcommittee. Selection criteria for each doctoral cohort now include enhancing the diversity of PhD students in terms of race, ethnicity, socioeconomic status, and gender.

The AY 2017–18 doctoral student cohort, consisting of nine students, is the most diverse in the history of GPH in terms of race, ethnicity, socioeconomic status, nationality and gender. Five of the nine would not have been considered for admission to the doctoral program without the subcommittee initiative, which will now positively impact the diversity of future cohorts.

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

Strengths:

We have implemented a comprehensive and inclusive process for examining evaluation findings regarding mission, instruction, scholarship, service, and student success. This process builds on our governance structure, ensuring regular review and strategic discussion of evaluation findings by standing committees and other bodies. This process has resulted in a number of recommendations that will strengthen our programs and other GPH endeavors.

Weaknesses:

The evaluation plan was developed and partially implemented in AY 2017–18. Therefore, we do not have outcome data yet for a number of indicators.

Plans:

We will implement a system for ongoing evaluation in AY 2018-19. The Dean's Policy Committee has responsibility for general oversight of the evaluation. Standing Committees will continue to be responsible for monitoring progress in meeting relevant goals and objectives, developing recommendations in response to findings and, when appropriate, implementing recommendations. Committees will report progress in meeting relevant goals and objectives and implementing recommendations at designated regular faculty meetings to ensure dissemination of evaluation findings to the full faculty and representatives of the Student Governing Council who attend faculty meetings.

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C1. Fiscal Resources

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

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

The GPH Associate Dean for Finance and Administration and the Director of Fiscal Affairs work with the Dean to establish the College's budget and financial plan, which is presented annually to the University for review and approval. The Dean has ultimate responsibility for the College's finances. GPH's Director of Fiscal Affairs is responsible for operationalizing the College's budget and serves as the primary liaison between GPH and the University's Office of Budget and Financial Planning (OBFP). The financial planning process is an iterative one and involves participation from College leadership (including Senior Associate Deans, Associate Deans and Department Chairs), faculty, and University administrators to assess programmatic resource needs to meet the College's mission, goals, and objectives.

Primary sources of funding include tuition revenue and indirect cost recovery from grants and contracts. A variety of factors go into establishing the College's budget, including, but not limited to: enrollment goals, trends, and predictions; financial aid goals; faculty and student needs; research goals; personnel, program, and University initiatives; inflation rates; and the overall economic environment.

The budget process for NYU is managed through the OBFP. The formal University budget process begins in January of each year, when planning meetings take place between representatives of GPH and the OBFP. The initial planning meetings are an opportunity to discuss University fiscal policy changes, enrollment predictions, program goals, and personnel changes. GPH coordinates with the NYU Office of Institutional Research and Data Integrity (OIRDI) to monitor enrollment trends and make enrollment predictions. These enrollment data feed directly into the budget planning process and are the source of revenue predictions and budget determination.

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

Faculty salaries, which are fully guaranteed, are budgeted annually and included in long-range financial planning. All faculty are encouraged to raise external funding to support their base salary, but external funding is not required. The exception to this policy is for research scientists who hold honorific faculty titles at the College. GPH has several jointly appointed faculty with other schools and colleges across NYU. For those faculty, agreements are established between schools to specify the allocation of salary—often shared equally.

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

All new employee requests for faculty and/or staff are established during the University budget planning cycle, which occurs annually during March and April. Faculty hiring requests are first submitted to the Provost's Office for review and approval, and then included in the budget plan.

c) Describe how the school or program funds the following:

a. operational costs (schools define "operational" in their own contexts; definition must be included in response)

All GPH operational costs are funded internally, though our GPH budget plan is funded primarily through tuition revenue and indirect cost recovery from grants and contracts. Operational costs at GPH include non-capital and non-personnel costs, such as furniture, office supplies, travel, IT, printing, and copying services.

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

Student support is funded primarily through GPH tuition revenue.

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

Faculty development is funded primarily through tuition revenue and indirect cost recovery from grants and contracts. All full-time faculty receive an annual Individual Development Account (IDA) of $2,500 to be used for support of self-development activities, including conferences, professional development, software, and technology.

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

In general, GPH is expected to fund its own operational costs, student support, and faculty development expenses. As a self-supported school, GPH receives 100% of its tuition revenue and indirect cost recovery from grants and contracts. Requests for University financial support are proposed during the annual budget planning cycle.

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

GPH receives 100% of student tuition and fees revenue.

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

GPH receives 100% of indirect cost revenue associated with grants and contracts. In the event of a joint faculty appointment, an agreement concerning allocation of indirect cost revenue is established between appointing entities.

If the school is a multi-partner unit sponsored by two more or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall school budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by public health school faculty appointed at any institution.

Not applicable.

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

Table C1-1 Sources of Funds and Expenditures by Major Category, FY 2014 to 2018					
	FY14	**FY15**	**FY16**	**FY17**	**FY18***
Source of Funds					
Tuition and Fees	$4,411,625	$6,169,096	$10,308,427	$19,329,969	
State Appropriation	0	0	0	0	
University Funds	0	$1,038,155	$2,655,591	$1,823,775	
Grants and Contracts	$3,414,125	$6,316,372	$8,527,411	$6,093,278	
Indirect Cost Recovery	$72,848	$450,000	$1,662,105	$1,396,282	
Endowment	0	0	0	0	
Gifts	0	0	0	$4,320	
Other (misc. fees)	0	$233,412	$168,350	$245,299	
Total	**$7,898,598**	**$14,207,035**	**$23,321,884**	**$28,892,923**	
Expenditures					
Faculty Salaries and Benefits	$1,758,078	$2,949,889	$5,575,151	$7,630,393	
Staff Salaries and Benefits	$1,238,584	$1,919,458	$3,671,681	$4,365,316	
Operations	$1,502,448	$1,807,861	$2,249,295	$4,213,359	
Student Support	$422,925	$723,889	$1,200,658	$3,332,362	
University Tax	$317,496	$1,083,570	$2,046,357	$2,073,396	
Grants and Contract Expenditures	$3,414,125	$6,316,372	$8,527,411	$6,093,278	
Other (University funds)	$54,171	0	0	0	
Total	**$8,707,827**	**$14,801,039**	**$23,270,553**	**$27,708,104**	

*Data for the year ended August 31, 2018, will be updated when available during October 2018.

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

Strengths:

NYU has a well-structured and iterative budget planning system, which incorporates both financial outlook as well as programmatic goals for all academic units, including GPH. The annual budget presentations (held during the budget planning cycle) with University leadership provide an opportunity to discuss strategic initiatives, market trends, and potential risks and opportunities.

GPH has had a steady increase in budget over the past several years, which follows the growth of the College as it transitioned from a University institute to a standalone college at NYU. The financial plan follows the College's growth in academic programming, student enrollment, and faculty recruitment. GPH maintains adequate resources to support its mission, goals, and objectives. As the College grows, so do the planned resources to support that growth.

Weaknesses:

Challenges of a tuition-dependent college such as GPH include potential risks in the market regarding student enrollment and grant award funding.

Plans:

GPH leadership continues to monitor such risks and is in the process of establishing safety nets through innovative academic offerings, grant productivity, and fundraising efforts. The recent recruitment of a full-time Director of Development provides a foundation for ensuring financial resiliency.

C2. Faculty Resources

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

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

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

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

Table C2-1 Primary Instructional Faculty (PIF) Academic Year 2018-19						
	Master's			Doctoral	Bachelor's	Additional Faculty
Concentration	**PIF 1**	**PIF 2**	**FACULTY 3**	**PIF 4**	**PIF 5**	
Biostatistics MPH	Rebecca Betensky 1.0	Stephanie Cook 1.0	Melody Goodman 1.0	NA	NA	PIF: 5 Non-PIF: 2 (0.6 FTE)
Community Health Science and Practice MPH	LeConté Dill 1.0	Cheryl Merzel 1.0	Joyce Moon Howard 1.0	NA	NA	PIF: 4 Non-PIF: 2 (0.4 FTE)
Environmental Public Health Sciences MPH	Jack Caravanos 1.0	Robyn Gershon 1.0	Andrea Silverman 1.0	NA	NA	PIF: 1 Non-PIF: 5 (1.0 FTE)
Epidemiology MPH PhD	Emily Goldmann 1.0	Farzana Kapadia 1.0	Danielle Ompad 1.0	Bernadette Boden-Albala 1.0	NA	PIF: 13 Non-PIF: 13 (3.9 FTE)
Global Health MPH	Julie Avina 1.0	Jo Ivey Boufford 1.0	Chris Dickey 1.0	NA	NA	PIF: 6 Non-PIF: 11 (2.0 FTE)
Public Health Management MPH	Ji Chang 1.0	Cheryl Healton 1.0	José Pagán 1.0	NA	NA	PIF: - Non-PIF: 3 (1.2 FTE)

Table C2-1 Primary Instructional Faculty (PIF) Academic Year 2018-19						
	Master's			Doctoral	Bachelor's	Additional Faculty
Concentration	**PIF 1**	**PIF 2**	**FACULTY 3**	**PIF 4**	**PIF 5**	
Public Health Nutrition MPH	Andrea Deierlein 1.0	Joyce O'Connor 1.0	Niyati Parekh 1.0	NA	NA	PIF: 4 Non-PIF: 4 (0.8 FTE)
Public Health Policy MPH PhD	Andrew Goodman 1.0	Peter Navario 1.0	Jennifer Pomeranz 1.0	Diana Silver* 1.0	NA	PIF: 2 Non-PIF: 2 (0.8 FTE)
SDG (Sustainable Development Goals) MPH	Rudolf Knippenberg 1.0	Emmanuel Peprah 1.0	Yesim Tozan 1.0	NA	NA	PIF: 1 Non-PIF: 1 (0.5 FTE)
Social and Behavioral Sciences MPH PhD	David Abramson 1.0	Virginia Chang 1.0	Raymond Niaura 1.0	Ralph DiClemente 1.0	NA	PIF: 13 Non-PIF: 11 (2.8 FTE)

*Public Health Policy and Management PhD Concentration

TOTALS:		
	Named PIF	33
	Total PIF	52
	Non-PIF	54(14.0 FTE)

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

All non-primary instructional faculty are allocated 0.2 FTE for each class taught. GPH has approximately 54 non-primary instructional faculty for a total of 14.0 FTE. It was determined that full-time GPH faculty with extensive research responsibilities must contribute 17% of their salary to "buy out" of teaching one class; therefore, for the purposes of calculating the FTE of non-primary instructional faculty, the value of 0.2 FTE was attributed to each course taught. Non-primary instructional faculty who do not teach at GPH but advise or mentor students are also allocated 0.2 FTE and included in Table E1-2.

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

As shown in Tables E1-1 and E1-2, GPH has 52 full-time primary instructional faculty and 54 non-primary instructional faculty who are regularly involved in instruction. Both full-time and part-time faculty members have received advanced degrees in a wide variety of disciplines.

Tables C2-1, E1-1, and E1-2 demonstrate that GPH has sufficient faculty to fulfill its instructional goals and objectives.

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

Table C2-2a Faculty Regularly Involved in Advising, Mentoring, and the Integrative Experience, AY 2018-19			
General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Bachelor's	N/A	N/A	N/A
Master's	10.3	3	62
Doctoral	1.5	.5	4.5

Table C2-2b Advising in MPH Integrative Experience, AY 2017-18		
Average	**Min**	**Max**
3	1	9

Table C2-2c Mentoring/primary advising on thesis, dissertation or DrPH integrative project, AY 2018-19			
Degree	**Average**	**Min**	**Max**
DrPH	N/A	N/A	N/A
PhD	1.5	0.5	4.5
Master's other than MPH	N/A	N/A	N/A

General advising and career counseling for MPH students is performed by 49 faculty members (46 primary instructional faculty and 3 non-primary instructional faculty).

PhD students receive general and career counseling from their faculty mentors (or co-mentors). The numbers provided above are based on 19 faculty members (17 primary, 2 non-primary) who served as mentors to 27 PhD students in AY 2018–19.

More information on PhD and MPH general advising and career counseling can be found in sections H1 and H2.

The average number of MPH students supervised in an Integrative Learning Experience (ILE) is shown above in Table C2-2b. Both primary and non-primary faculty serve as ILE advisors. Table C2-2b provides data from AY 2017-18, as faculty ILE advisors for AY 2018-19 are not yet assigned.

As noted in Table C2-2c, the average number of doctoral students advised is 1.5 per faculty, with the maximum number of students 4.5 and the minimum number 0.5. In some instances, students are co-advised by two faculty members and are counted as 0.5 each.

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

a. Class size and its relation to quality of learning (eg, the class size was conducive to my learning)

The following table represents data from the student exit survey administered to graduating MPH and PhD level students in Spring 2018. The overall response rate was 165 (84%) of 196 eligible respondents.

Table C2-A Student Perceptions of Class Size, Spring 2018		
Relation of class size to quality of learning	**Percent of MPH graduates (N= 144 responding to this question)**	**Percent of PhD graduates (N=2 responding to this question)**
The class size was very conducive to my learning	34%	50%
The class size was conducive to my learning	48%	50%
The class size was neither conducive nor detrimental to my learning	14%	0%
The class size was detrimental to my learning	3.5%	0%
The class size was very detrimental to my learning	1%	0%

In relation to class size, the vast majority of MPH and PhD students (82%) rated it "conducive" or "very conducive" to their quality of learning.

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

The table below is from the same survey and shows that the vast majority of students (73%) rated themselves "satisfied" or "very satisfied" with availability of faculty.

Table C2-B Student Perceptions of Faculty Availability, Spring 2018		
How satisfied were you with the availability of faculty?	**Percent of MPH graduates (N= 144 responding to this question)**	**Percent of PhD graduates (N=2 responding to this question)**
Very Satisfied	22%	50%
Satisfied	51%	50%
Neither Satisfied nor Dissatisfied	14%	0%
Dissatisfied	7%	0%
Very Dissatisfied	6%	0%

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

The College has traditionally managed to keep class size on the smaller end, and comments from students to the open-ended question in the graduate exit survey regarding class size show a high level of student satisfaction. For example, one student wrote that *"The classes did not feel overcrowded"* and another student reported, "*There were enough students to facilitate meaningful discussion, but classes never felt so large that discussion was impossible to facilitate."* Based on the spring 2018 exit survey results, student comments show a preference for smaller class size. For example, one student wrote, "*Everything besides Epi was fine—small and intimate. Epi was overwhelming in that huge theater space."* Another student reported, *"Smaller class sizes facilitated better discussion among everyone*

and had more engagement. Large class, like Epi, felt that it moved at different paces due to large gaps in knowledge of students. This should be small."

While we recognize students' preference for smaller size classes, and try to meet it whenever possible, as GPH's student population continues to grow, so too, will the number of students registering for the required core public health courses. This increase in student registration has led to the College's decision to explore the use of larger classes to accommodate this increase.

As a whole, comments to the open-ended question regarding faculty availability were very positive, with one student reporting, "*The professors were always there when I needed them"* and another student wrote, "*I felt as though many of the faculty made every effort to be available to help my learning. I met with professors after class, during office hours, and even over Skype. It felt they truly cared about ensuring the quality of my education."*

Qualitative data from the Spring 2018 graduate exit survey can be found in the ERF C2.6.

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

Strengths:

We have a sufficient number of both primary and non-instructional faculty members to support our student population and the goals and missions of our degree programs.

Based on exit surveys, the vast majority of MPH and PhD students rate both class size and availability of faculty as positives in their educational experience.

Weaknesses:

We recognize the need to improve the faculty advisement ratios and minimum/maximum number of students.

As both enrollment and class sizes in required core public courses continue to rise at GPH, maintaining small class sizes will be a challenge.

Plans:

The Office of Academic Affairs will establish standards for advisement ratios that meet the particular needs of each MPH concentration.

We will continue to make every effort to maintain the small class sizes that are crucial to student satisfaction. This includes ensuring that MPH core courses with large enrollments include either multiple sections or faculty-led smaller recitation sessions to complement large group lecture formats.

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C3. Staff and Other Personnel Resources

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

1) A table defining the number of the school's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation.

Table C3-1 Staff Resources, AY 2018-19	
Role/function (by department)	Full-time equivalency (FTE)
Office of the Dean	4.0
Director, Projects and Programs (currently assisting Global Health program)	1.0
Director, Development	1.0
Administrative Manager	1.0
Administrative Coordinator	1.0
Academic and Faculty Affairs	17.0
Assistant Dean, Academic Affairs	1.0
Associate Director, Technology Enhanced Education	1.0
Assistant Director, Registration and Academic Services	1.0
Program Administrator	5.0
Instructional Technologist	2.0
Administrative Aide II	7.0
Communications, Promotion, and Public Affairs	3.0
Director, Communications and Promotion	1.0
Program Administrator	1.0
Events Planner	1.0

Table C3-1 Staff Resources, AY 2018-19	
Role/function (by department)	Full-time equivalency (FTE)
Finance and Administration	10.0
Associate Dean, Finance and Administration	1.0
Associate Dean, Admissions and Enrollment	1.0
Director (Fiscal Affairs, Human Resources, and Faculty Services)	2.0
Associate Director, Operations and Administration	1.0
Operations Administrator	1.0
Human Resources Generalist	1.0
Financial Analyst	1.0
Admissions Officer	2.0
Research and Program Development	7.0
Assistant Dean, Research	1.0
Assistant Director, Global Coordination	1.0
Grants Manager	1.0
Senior Grants Financial Analyst	1.0
Grants Financial Analyst	1.0
Grants Specialist	1.0
Administrative Aide II	1.0

Table C3-1 Staff Resources, AY 2018-19	
Role/function (by department)	Full-time equivalency (FTE)
Student and Alumni Affairs	4.0
Director, Student and Alumni Affairs	1.0
Assistant Director, Student and Alumni Affairs	1.0
Program Administrator	1.0
Administrative Aide II	1.0
Total	45.0

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

In addition to 45 full-time support staff, other personnel such as part-time Graduate Assistants and temporary employees are hired as needed on a semester-by-semester basis.

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

As Table C3-1 shows, GPH has sufficient staff to effectively operate all aspects of the College. Administrative responsibilities are supported by a robust team divided among five administrative offices, each managing an area of focus integral to the success of our faculty, students, and staff. As the College expands additional staff will be hired as needed.

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

Strengths:

A primary strength is the diversity of our staff at all levels. GPH is proud to employ staff members from all over the world, such as the Dominican Republic, Egypt, Ghana, India, Ireland, Italy, and Turkey.

Over the past few years, GPH has hired multiple individuals at the director level with extensive experience in instructional technology, human resources, communications, student affairs, and development. Other hires include three program administrators and two financial analysts to support the Research Office and the growing Office of Academic and Faculty Affairs, as well as six administrative aides to support faculty research and instruction.

Weaknesses:

None noted.

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C4. Physical Resources

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

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

- **Faculty office space**

  All full-time faculty have private offices of at least 105 square feet that provide sufficient workspace and a small meeting area. Offices are fully equipped with computer, telephone, filing space, and where requested, a local printer.

  Part-time and adjunct faculty are provided access to shared swing spaces, which are equipped with a desktop computer and phone. These spaces are used primarily to hold office hours with students, and they are booked in advance on a semester-by-semester basis through a shared calendar. If the space is not available when needed, these faculty can also use one of the College's many conference rooms for their meetings.

- **Staff office space**

  Full-time staff are provided with either a workstation, shared office, or private office, all of which are fully equipped with computer, telephone, filing space, and where requested, a local printer.

- **Classrooms**

  The University recently completed a five-year, $9.7 million classroom upgrade to support newer classroom pedagogy in its approximately 200 general-purpose classrooms, which range in size from 250 to 1,200 square feet, depending on class size and purpose. Nearly all classrooms meet the "smart classroom" standard, which includes features such as wireless Internet access; a computer with standard software (and, where appropriate, specialized software); inputs for additional computing devices; installed audiovisual equipment; and an A/V media control system. Classroom allocation is centralized at the University level and GPH annually requests classroom space based on projected enrollments. GPH conference rooms have full A/V installations that allow them to be used as training centers and hubs for distance learning activities.

  NYU offers an extensive array of computer and instructional labs. Many teaching labs offer high-tech equipment and state-of-the-art teaching modalities. GPH programs do not have or require any specific laboratory space outside of University teaching/computer labs, but all GPH conference rooms (totaling approximately 1,300 square feet) are fully equipped to be used as training centers for local and distance learning. Furthermore, the plans for GPH's new building include project rooms and multi-purpose rooms with cutting-edge audiovisual equipment on every floor. This will allow for enhanced distance-learning activities and serve as instructional labs and training centers. These rooms will vary in size from small (four to six occupants) to large (>20-person capacity).

- **Shared student space**

  In addition to NYU's main Kimmel Center for University Life and a number of student centers across campus, GPH provides 3,500 square feet of shared space for its student body in the Student Affairs and Admissions suite. This space is heavily used by GPH students for activities such as group and individual study, meetings with tutors and course assistants, meetings with representatives from the NYU Wasserman Center for Career Development, guest lectures, and course info sessions. It is also used by GPH's many student organizations and clubs.

An additional 400 square feet of dedicated shared space is also provided for doctoral students at faculty office locations to ensure proximity to faculty with whom students are doing research or who are acting as mentors.

- **Laboratories, if applicable to public health degree program offerings**

  While there are no specific laboratory requirements in GPH's degree programs, the College has collaborative and interdisciplinary relationships with other colleges at NYU that have sophisticated science and wet laboratories. Examples are the College of Dentistry; the Rory Meyers College of Nursing; the Tandon School of Engineering; the Steinhardt School of Culture, Education, and Human Development; and the School of Medicine, all of which are schools and colleges where many GPH faculty have secondary appointments and with whom we cross-offer courses. These relationships allow our students to have full access to these laboratories both in formal classroom settings and to enhance their scholarship through faculty mentorship.

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

GPH has enjoyed considerable growth from 2012 to 2017, and our physical space has grown to accommodate the consequent increase in faculty, staff, and students. In 2012, GPH occupied approximately 1,600 square feet used solely for administrative purposes as faculty members maintained offices in their respective home schools. GPH now occupies approximately 21,000 square feet, which is used for more than 50 full-time faculty offices, staff work space, shared student space, and all of the other uses listed previously. The 21,000 square feet also includes space for growth to ensure sufficient space and resources for both future hires and growth in student body at all levels.

In a city where space is at a premium for all, the NYU President and Board of Trustees have secured 100,000 gross square feet of space in an upcoming new building for GPH. Of this, more than 50,000 square feet will be available for offices, meeting rooms, training centers, research hubs, recording rooms, clinical research facilities, shared student space, and other amenities. The new building is expected to be ready in approximately two years, and in the interim GPH has factored future growth into its current space planning strategies to guarantee that sufficient space and resources are available, as established by the approved Provost plan.

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

<u>Strengths:</u>

NYU leadership is strongly committed to our growing College as evidenced by providing a new building to house GPH faculty, administration, and operations.

<u>Weaknesses:</u>

NYU experiences a shortage of classroom space throughout the Washington Square campus. This creates many challenges in securing adequate classroom facilities for GPH. Due to the centralized classroom allocation, the Assistant Director of Registration and Academic Services works with departments and programs in requesting classrooms as early as possible for the upcoming semesters as well as scheduling some GPH courses at non-peak times. For example, while classrooms are most utilized between 3–8pm, classroom space is underutilized at 8am and after 8pm.

<u>Plans:</u>

In Fall 2018, GPH offered students the opportunity to register for 8am classes. The early time slot proved to be popular with the student body. We plan to expand course offerings in this time slot.

C5. Information and Technology Resources

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

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

- **library resources and support available for students and faculty**

  The 12-story Elmer Holmes Bobst Library (Bobst) is the flagship of an 11-library, 5.9 million-volume system that provides NYU students and faculty members with access to the world's scholarship and serves as a center for the University community's intellectual life. Bobst itself houses more than four million volumes, 235,000 serial titles, and more than 40,000 linear feet of archives and provides access to thousands of electronic resources both on-site and to the global NYU community via the internet. Bobst offers approximately 2,500 seats for student study and data computing.

  Bobst also offers an "Ask a Librarian" service with dedicated subject librarians, including one for public health. The GPH subject librarian attends the College's new student orientation to inform students of public health-specific library resources and services available to them, and offers guest lectures in public health courses at the request of GPH faculty. Furthermore, Bobst also has a dedicated resources page devoted to public health that provides links to topical databases, metasites, encyclopedias, evidence-based practice and public health podcasts, listservs, and RSS feeds. Through this service, students, faculty, and researchers have access to field experts who assist with developing research strategies and obtaining in-depth knowledge of the print and electronic information resources available at NYU and its many partner libraries across the U.S. and around the world.

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

  NYU has three Student Technology Centers (STCs) in New York that are accessible to all matriculated students. The STCs provide access to a variety of technology resources, including specialized software, printing, video conferencing, video production suites, group study spaces, and both Mac and PC workstations available on a first-come, first-served basis. Student technologists are also available to consult with students on their technology needs in support of teaching and learning. Tutorials and instructional materials are available for use of equipment and specialized spaces.

  NYU's Virtual Computer Lab (VCL), available 24/7, provides online access to a number of academic software programs heavily used by GPH students, such as ArcGIS, ATLAS.ti, Final Draft, Inkscape, JMP, Mathematica, MATLAB, Microsoft Excel, Microsoft PowerPoint, Microsoft Visio, Microsoft Word, Minitab, Notepad++, PSpice, R, SAS Enterprise Guide, SPSS, and Stata.

  In support of research and data collection, NYU Information Technology (NYU IT) also provides students access—often free—to specialized hardware and software, along with personalized training and support. Furthermore, NYU's Data Services lab, High Performance Computing lab, and NYU's Survey Service through Qualtrics offer valuable resources for student researchers. They include software packages for statistical analysis, geographic information systems (GIS), and qualitative data analysis, as well as access to core data resources such as ICPSR, Data-Planet, Statistical Insight, MapPLUTO, the Economist Intelligence Unit (EIU), and Gallup.

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

  All faculty are provided with individual computers (PC or Mac) with either standard or custom configurations depending on their needs. Default software installations include MS Office, Adobe Professional, Stata, and/or SPSS. Additional software required for instructional programs is provided by the College upon request. Faculty are also provided an Individual Development Account (IDA), which can be used to purchase additional computer equipment (e.g., a laptop) and software as needed to further professional development.

  In support of instructional programs, NYU operates a Sakai-based learning management system called NYU Classes, which enables NYU faculty to use web-based collaborative and assessment technologies to enhance the teaching and learning experience. Instructors may use this service to design full-featured online course environments for students to access course materials, collaborate with others, engage with interactive assessments and assignments, and track their progress in a course gradebook. This service is offered at all NYU sites around the world.

  In addition to the resources provided by the College described above, faculty also have full access to the same hardware and software resources made available to students by the University.

- **technical assistance available for students and faculty**

  Students and faculty have full access to NYU's robust technical assistance network. The NYU IT Service Desk, open 24/7, provides personal assistance by phone, email, and, at most NYU locations, in person. The service is available at all NYU locations around the globe.

  NYU IT provides support to faculty, staff, and students for desktop and laptop computer configuration, installation, and troubleshooting for personal computers, technology-equipped classrooms, and public computing workstations. NYU IT also offers a number of online platforms such as Lynda.com, an online video training library with more than 100,000 expert-led videos and thousands of courses on the latest tools, software, and techniques in areas such as business, digital media, design, photography, animation, and development.

  Geared mainly toward faculty and staff, NYU Tech Savvy is a set of 20- to 30-minute e-learning modules designed to introduce the NYU faculty and staff to important technology tools and resources. Additionally, NYU IT, in collaboration with the Center for the Advancement of Teaching, offers a series of instructional technology workshops and programs each semester, which are presented by NYU Instructional Technologists, faculty, and experts on teaching and learning from around the country.

  In addition to what is offered centrally through NYU, GPH also has a Technology Enhanced Education Team consisting of a Director, Associate Director, and two Instructional Technologists. They help faculty develop online courses, assist in setting up NYU Classes for all faculty, and help faculty use web-conferencing software such as WebEx, Zoom, and Google Hangouts for online office hours, webinars, and distance learning courses or individual lesson offerings (for example, if NYU has a snow day). In addition, faculty may reach out to the team for any technical assistance, including one-on-one training sessions.

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

As part of a cutting-edge University, faculty, students, and staff at GPH have extensive access to highly advanced technology. They rely on our robust network of technical support experts in the field of information and instructional technology to advance their knowledge and understanding in these fields. In addition to resources made available by the University, such as state-of-the-art computer labs and

digital studios, GPH also provides its faculty and staff with the most updated computer equipment—upgraded every three years or as needed—and software.

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

Strengths:

The College proactively addresses information and technology resource requirements for faculty and staff.

Weaknesses:

As the number of faculty and courses continues to rapidly grow, there is increasing demand for the services of the GPH IT team.

Plans:

To ensure uninterrupted access to all systems, the GPH Office of Finance and Administration is currently developing a service ticketing system that works in conjunction with NYU IT's service delivery platform to ensure timely resolution of any IT issues. This office is also updating its inventory of software installations, which will be submitted to NYU IT for review and recommendation for updates.

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D1. MPH and DrPH Foundational Public Health Knowledge

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

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

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

The 12 foundational public health learning objectives are addressed in nine courses, comprising part of the core curriculum required of all MPH students. (We currently do not offer a DrPH program.)

Table D1-1 identifies the specific core courses that address each of the introductory public health learning objectives. Course numbers with a prefix of five indicate the online version of the course.

Table D1-1 Content Coverage for MPH

Content	Course number(s) or other educational requirements
1. Explain public health history, philosophy, and values	GPH-GU 5175 Readings in the History and Philosophy of Public Health I GPH-GU 5185 Readings in the History & Philosophy of Public Health III
2. Identify the core functions of public health and the 10 Essential Services	GPH-GU 5175 Readings in the History and Philosophy of Public Health I
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	GPH-GU 2106/5106 Epidemiology GPH-GU 2995/5995 Biostatistics for Public Health GPH-GU 2153/5153 Global Environmental Health
4. List major causes and trends of morbidity and mortality in the U.S. or other community	GPH-GU 2106/5106 Epidemiology
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	GPH-GU 2106/5106 Epidemiology
6. Explain the critical importance of evidence in advancing public health knowledge	GPH-GU 2106/5106 Epidemiology GPH-GU 5171 Global Health Informatics Workshop
7. Explain effects of environmental factors on a population's health	GPH-GU 2153/5153 Global Environmental Health GPH-GU 2190/5190 Essentials of Public Health Biology
8. Explain biological and genetic factors that affect a population's health	GPH-GU 2153/5153 Global Environmental Health GPH-GU 2190/5190 Essentials of Public Health Biology
9. Explain behavioral and psychological factors that affect a population's health	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health

Table D1-1 Content Coverage for MPH	
Content	**Course number(s) or other educational requirements**
10. Explain the social, political, and economic determinants of health and how they contribute to population health and health inequities	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health GPH-GU 5180 Readings in the History and Philosophy of Public Health II GPH-GU 5185 Readings in the History and Philosophy of Public Health III
11. Explain how globalization affects global burdens of disease	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health GPH-GU 2190/5190 Essentials of Public Health Biology
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health	GPH-GU 2153/5153 Global Environmental Health GPH-GU 2190/5190 Essentials of Public Health Biology

2) Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable.

The most recent syllabi, assignments, and exams for the courses listed above are included in ERF D1.2. All assessments are conducted through the required core courses; we do not offer separate tests or other assessment tools or accept a bachelor's degree in public health in fulfillment of this requirement.

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

Strengths:

In Spring 2017, the Academic Affairs Committee engaged in a curriculum mapping process whereby we identified courses currently covering any of the 12 foundational learning objectives as well as gaps in coverage. The committee identified specific courses to address the gaps, and a committee member worked with relevant course instructors to incorporate the learning objectives into course content. Lead course instructors were identified to develop a common syllabus to be used by instructors across all sections of a course, including online versions, in order to maintain consistency of content and assessment.

All 12 foundational public health learning objectives are addresses in the MPH core curriculum.

Weaknesses:

As Academic Year (AY) 2017–18 was the first year of implementation, we have not initiated an assessment of this new aspect of the curriculum.

Plans:

In AY 2018–19, the Academic Affairs Committee plans to review implementation of the foundational learning objectives in the core curriculum based on our experiences in AY 2017–18. The committee will develop approaches to resolve any problems in addressing the learning objectives.

D2. MPH Foundational Competencies

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

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

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

   The required curriculum for each MPH concentration is found in the following links to the GPH website. Please note that dual degree students must take all required courses in the Global Health concentration.

   - Biostatistics
   - Community Health Science and Practice (Formerly Community and International Health)
   - Environmental Public Health Sciences
   - Epidemiology and Cross-Continental option
   - Global Health
   - Public Health Management
   - Public Health Nutrition
   - Public Health Policy
   - Social and Behavioral Sciences
   - Sustainable Development Goals (online program)
   - Dual Degree Programs
     - Dentistry (DDS/MPH)
     - Medicine (MD/MPH)
     - Nursing (MS/MPH)
     - Public Administration (MPA/MPH)
     - Social Work (MSW/MPH)

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

   The 22 foundational competencies are addressed in the required core curriculum taken by all MPH students across all concentrations. Table D2-2 identifies the specific required courses that address each of the competencies and the assessment methods employed. Courses with a prefix of 5 indicate the online version of the course. Syllabi and assessments for courses listed in Table D2-2 are included

in ERF D2.3. Please note that exams and some assignments in the ERF are from AY 2017-18 as the current academic year has recently started.

Several of the foundational competencies are addressed in courses associated with the required Applied Practice Experience (APE) and Integrative Learning Experience (ILE), and are included in Table D2-2. These courses provide all students with structured opportunities for covering didactic material related to the competencies. For example, GPH-GU 2359 Internship I Seminar includes assigned readings related to Foundational Competency 16, covering leadership, governance, management, and collaboration. Foundational Competencies 18 and 19, which cover communication skills, are also covered didactically in the Internship I and II seminars through assigned readings and in-class sessions. GPH-GU 2687 Thesis II includes sessions on writing scientific papers and written guides for writing the thesis and preparing a poster.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Evidence-based Approaches to Public Health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	GPH-GU 2106/5106 Epidemiology	**HW 1:** Calculate key measures of morbidity and mortality; conduct direct and indirect age-adjustment. Explain how these measures provide information on the health status of a given population at a given time. **HW 2:** Compare qualitative and quantitative data collection methods to (1) select methods appropriate for a given public health context, (2) understand factors impacting the health of populations, and (3) ensure ongoing surveillance of the health within and across populations. **HW 3:** Read a peer-reviewed, published paper describing findings from a cohort study; identify key study design characteristics; identify key strengths and limitations of the study. Calculate and compare measures of association and impact. **HW 4:** Read a peer-reviewed, published paper describing findings from a randomized control trial; identify key study design characteristics as presented in the paper; identify key strengths and limitations of the study. **HW 5:** Review descriptions of study findings to identify sources of selection & information bias. Calculate unadjusted and adjusted measures of association to understand how confounding may bias observed results. Read a peer-reviewed, published paper & identify key design characteristics that may have introduced sources of bias. **Midterm Exam** **Final Exam**
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	GPH-GU 2106/5106 Epidemiology	**HW 2:** Compare qualitative and quantitative data collection methods to (1) select methods appropriate for a given public health context, (2) understand factors impacting the health of populations, and (3) ensure ongoing surveillance of the health within and across populations.
	GPH-GU 5171 Global Health Informatics Workshop	**Final:** Develop critical appraisal table of Public Health articles based on chosen research topic.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	GPH-GU 2106/5106 Epidemiology	**HW 1**: Calculate key measures of morbidity and mortality; conduct direct and indirect age-adjustment. Explain how these measures provide information on the health status of a given population at a given time. **HW 3:** Read a peer-reviewed, published paper describing findings from a cohort study; identify key study design characteristics; identify key strengths and limitations of the study. Calculate and compare measures of association and impact. **HW 5:** Review descriptions of study findings to identify sources of selection and information bias. Calculate unadjusted and adjusted measures of association to understand how confounding may bias observed results. Read a peer-reviewed, published paper and identify key design characteristics that may have introduced sources of bias. **HW 6:** Review steps in an outbreak investigation. **Midterm Exam** **Final Exam**
	GPH-GU 2995/5995 Biostatistics for Public Health	**HW 1:** Identify and define key terms in statistics and differentiate between variable types and measurement scales. **HW 2:** Calculate measures of central tendency and variability from a given data set and computations using Stata. **HW 4:** Apply concepts of z-scores, the Binomial distribution, and the normal distribution. **HW 5:** Apply probability rules to data and calculate confidence intervals (by hand and with Stata) for continuous data and proportions. **HW 6:** Use Stata to compute the inferential statistical tests, conduct relevant procedures on data set, and interpret and explain the results. **HW 7:** Two-sample t-tests vs. ANOVA, conduct ANOVA and follow-up tests in Stata and interpret results. **HW 9:** Analyze dataset with two continuous outcomes, simple correlation and simple linear regression in Stata, and interpret results. **HW 10:** Show conceptual understanding of use and application of multiple regression in public health, and apply these concepts to analyze a public health dataset using Stata. **HW 12:** Manually compute a chi-square statistic for a 2x2 contingency table, perform contingency table analysis using Stata. **HW 13:** Show conceptual understanding of appropriateness and application of logistic regression, analyze a public health dataset using the generalized linear model function in Stata. **HW 14:** Assessment of knowledge for basic tenets of survival analysis (e.g., research design), as well as survival and hazard curves, cox regression, and the Kaplan Meier method. **Midterm Exam** **Final Exam**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
	GPH-GU 5171 Global Health Informatics Workshop	**Final:** Develop critical appraisal table of Public Health articles based on chosen research topic.
4. Interpret results of data analysis for public health research, policy or practice	GPH-GU 2106/5106 Epidemiology	**HW 3:** Read a peer-reviewed, published paper describing findings from a cohort study; identify key study design characteristics; identify key strengths and limitations of the study. Calculate and compare measures of association and impact. **HW 4:** Read a peer-reviewed, published paper describing findings from a randomized control trial; identify key study design characteristics; identify key strengths and limitations of the study. **HW 5:** Review descriptions of study findings to identify sources of selection and information bias. Calculate unadjusted and adjusted measures of association to understand how confounding may bias observed results. Read a peer-reviewed, published paper and identify key design characteristics that may have introduced sources of bias. **Midterm Exam** **Final Exam**
	GPH-GU 2995/5995 Biostatistics for Public Health	**HW 1:** Identify and define key terms in statistics and differentiate between variable types and measurement scales. **HW 2:** Calculate measures of central tendency and variability from a given data set and computations using Stata. **HW 5:** Apply probability rules to data and calculate confidence intervals (by hand and with Stata) for continuous data and proportions. **HW 6:** Use Stata to compute the inferential statistical tests, conduct relevant procedures on data set, and interpret and explain the results. **HW 7:** Two-sample t-tests vs. ANOVA, conduct ANOVA and follow-up tests in Stata and interpret results. **HW 9:** Analyze dataset with two continuous outcomes, simple correlation and simple linear regression in Stata, and interpret results. **HW 10:** Show conceptual understanding of use and application of multiple regression in public health, and apply these concepts to analyze a public health dataset using Stata. **HW 12**: Manually compute a chi-square statistic for a simple 2x2 contingency table, as well as perform contingency table analysis using Stata. **HW 13:** Show conceptual understanding of appropriateness and application of logistic regression, analyze a public health dataset using the generalized linear model function in Stata. **HW 14:** Assessment of knowledge for basic tenets of survival analysis (e.g., research design), as well as survival and hazard curves, cox regression, and the Kaplan Meier method. **Midterm Exam** **Final Exam**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW1: Gapminder:** Explore some of the potential social and economic determinants of the health indicators and how they change over time. Choose one health indicator and one social indicator from the Gapminder database. **HW 2:** Contrast socio-demographic and health data in a given neighborhood with borough and city-wide data. Justify why given health outcome is of concern in this neighborhood. Present graphic conceptual framework and accompanying text suggesting relationship between social, cultural, economic, or behavioral factors and the health outcome. **HW6 (Final Exam)**
	GPH-GU 5171 Global Health Informatics Workshop	**Final:** Develop critical appraisal table of Public Health articles based on chosen research topic.
Public Health & Health Care Systems		
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	GPH-GU 2110/5110 Health Care Policy	**GPH-GU 2110** **HW 1:** Explore cross-national differences in relationship between healthcare financing and life expectancy, and use, analyze & describe public data from gapminder.org. **HW 2:** Explore differences in healthcare access and utilization across U.S. states, use, analyze & describe U.S. state county health rankings data **Final Exam** **GPH GU 5110** **HW 1:** Explore cross-national differences in relationship between healthcare financing and life expectancy, and use, analyze & describe public data from gapminder.org. **HW 2**: Explore differences in healthcare workforce, utilization and resources and outcomes across OECD nations. **HW 3:** Explore differences in healthcare access and utilization across U.S. states, use, analyze & describe U.S. state county health rankings data. **HW 4**: Explore differences in physician practice in the U.S. using the Dartmouth Atlas. **Discussion questions:** Submit questions for discussion based on lessons and readings, including background paragraph explaining evidence, concepts, and issues **Final Exam**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
	GPH-GU 2153/5153 Global Environmental Health	**Assignments:** Landfill evaluation—Explore scientific, political, and social issues surrounding this prototypical environmental problem facing LMIC. OSHA/WISQARS lookup—Compare state data and reporting of workplace injuries and variations between localities. Public health Impact of climate change —Discuss how counties and regions will be affected by climate change and various approaches. Global recyclers lookup—Evaluate urban scavenger groups worldwide; present public health risk in terms of social determinants of disease. A Civil Action by Jonathan Harr—Read book and complete 10 question quiz. **Exams—Questions from Lessons**
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 3:** Problem statement and literature review providing theory or evidence how and why social determinants are associated with given health outcome. **HW 5:** Describe geography and socio-demographics of given neighborhood, health outcome of interest. Contextualize data by contrasting neighborhood with borough and city. Present conceptual framework showing relationship between health outcome and social, behavioral, cultural, and economic factors.
	GPH-GU 5180 Readings in the History and Philosophy of Public Health II	**Reflection Essay**—150-word essay on one of following topics: how a health issue is affected by fundamental causes of disease; why interventions that address socioeconomic factors can have a larger impact; how can the U.S. become #1 in health; explain tradeoff between healthcare coverage and health equity faced by LMICs. **Final Quiz**
	GPH-GU 5185 Readings in the History and Philosophy of Public Health III	**Reflection Essay**—150-word op-ed explaining why social justice is necessary to improve global health. **Final Quiz**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Planning & Management to Promote Health		
7. Assess population needs, assets and capacities that affect communities' health	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 2:** Contrast socio-demographic and health data in a neighborhood with borough and citywide data. Justify why health outcome is of concern in neighborhood. Present graphic conceptual framework and text suggesting relationship between social, cultural, economic, or behavioral factors and the health outcome. **HW 5:** Describe geography and socio-demographics of given neighborhood and health outcome of interest. Contextualize neighborhood data by contrasting with borough and city. Present conceptual framework showing relationship between health outcome and social, cultural, behavioral, and economic factors. Discuss how data relate to framework.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 4:** Identify and describe two evidence-based interventions for health outcome in neighborhood targeting individuals and larger social level. Identify evidence suggesting they are effective. Summarize how they address neighborhood factors identified in conceptual framework. **HW 5:** In community Town Hall format, give a presentation describing neighborhood geography, socio-demographics, and health outcome of interest. Contextualize data by contrasting neighborhood with borough and city. Present conceptual framework showing relationship between health outcome and social, cultural, behavioral, and economic factors. **HW 6 (Final Exam)**
9. Design a population-based policy, program, project or intervention	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 4:** Identify and describe two evidence-based interventions for health outcome in neighborhood of interest. Identify evidence suggesting effectiveness. Summarize how interventions address social, behavioral, cultural, and economic factors identified in the conceptual framework. **HW 6 (Final Exam)**
	GPH-GU 2112/5112 Public Health Management and Leadership	**Project Pt 1:** Develop program description. **Project Pt 2:** Create logic model schematic. **Project Pt 3:** Provide narrative describing links between activities and outcomes. **Project Pt 4:** Develop detailed program budget. **Final Memo:** Develop case analysis memo assessing organizational situation and identify and support course of action.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
10. Explain basic principles and tools of budget and resource management	GPH-GU 2112/5112 Public Health Management and Leadership	**In-class budget activity:** Following the process discussed in class, construct a one-page operating budget for the Bay Area Regional Health Initiative. **Project Pt 2:** Create logic model schematic. **Project Pt 3:** Provide narrative describing links between activities and outcomes. **Project Pt 4:** Develop detailed program budget. **Final Memo:** Develop case analysis memo assessing organizational situation and identify and support course of action, including budgeting and resource management.
11. Select methods to evaluate public health programs	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 5:** Describe geography and socio-demographics of given neighborhood and health outcome of interest. Contextualize data by contrasting neighborhood with borough and city. Present conceptual framework and discuss how observations and data relate to the conceptual framework. **HW 6 (Final Exam)**
	GPH-GU 5171 Global Health Informatics Workshop	**Final:** Develop critical appraisal table of Public Health articles based on chosen research topic.
Policy in Public Health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	GPH GU 2110/5110 Health Care Policy	**GPH-GU 2110** **Final Exam** **GPH-GU 5110** **Discussion questions:** Submit questions for discussion based on lessons and readings, including background paragraph explaining evidence, concepts, and issues **Final Exam**
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 6 (Final Exam)**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
	GPH GU 2110/5110 Health Care Policy	**GPH-GU 2110** **Final Exam** **GPH-GU 5110** **Discussion questions:** Submit questions for discussion based on lessons and readings, including background paragraph explaining evidence, concepts, and issues **Final Exam**
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	GPH GU 2110/5110 Health Care Policy	**GPH-GU 2110** **HW 2:** Explore differences in health care access and utilization across U.S. states and make use of, analyze, and describe the U.S. state county health rankings data. **Final Exam** **GPH-GU 5110** **Discussion questions:** Submit questions for discussion based on lessons and readings, including background paragraph explaining evidence, concepts, and issues **Final Exam**
	GPH-GU 5185 Readings in the History and Philosophy of Public Health III	**Reflection Essay—**150-word op-ed explaining why social justice is necessary to improve global health. **Final Quiz**
15. Evaluate policies for their impact on public health and health equity	GPH GU 2110/5110 Health Care Policy	**GPH-GU 2110** **HW 1:** Explore cross-national differences in relationship between health care financing and life expectancy, and make use of, analyze describe public data from gapminder.org. **Final Exam** **GPH-GU 5110** **HW 1:** Explore cross-national differences in relationship between healthcare financing and life expectancy, and use, analyze & describe public data from gapminder.org. **HW 2**: Explore differences in healthcare workforce, utilization and resources and outcomes across OECD nations. **Discussion questions:** Submit questions for discussion based on lessons and readings, including background paragraph explaining evidence, concepts, and issues **Final Exam**

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Leadership		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	GPH-GU 2112/5112 Public Health Management and Leadership	**Leadership survey** **Myers—Briggs Survey** **Mission/Vision Statement:** Find and print out the mission/vision statement of an organization operating in your field of interest. **Mission/Vision assessment and revision:** Using the guidelines for an effective mission statement, write a one-paragraph assessment of the mission statement you prepared before class. Write a revised mission statement, taking into account the readings and lessons in class. **Project Pt 1:** Develop program description. **Final Memo:** Develop case analysis memo assessing organizational situation and identify and support course of action.
	GPH-GU 2359 Internship I: Applied Practice Experience Seminar	**Progress Report #1:** Discuss how you can apply principles of leadership and working in organizations to internship. **Progress Report #2:** Lessons from internship, e.g., how organizations and teams operate; interacting with people from diverse backgrounds; dealing with challenges. **Progress Report #3:** Discuss organizational characteristics influencing agency effectiveness and stability. **Portfolio:** Critical Reflection and Synthesis—Discuss professional skills developed and lessons learned at the internship. Discuss lessons learned re: organizational functioning, community collaboration, teamwork, etc.
17. Apply negotiation and mediation skills to address organizational or community challenges	GPH-GU 2112/5112 Public Health Management and Leadership	**Conflict Resolution Survey** **Negotiation Simulation:** You will participate in a group negotiation simulation. Following the activity, write a memo addressing the following question: Thinking ahead to your professional or personal life over the next month or two, think of a situation or dilemma you will need to work through with someone where you and the other person are likely to begin with different initial positions on the situation/dilemma. For instance, the situation may involve a group assignment for another class, a team project at work, community advocacy efforts related to the beauty industry or another issue you are involved in, or a dilemma with family or friends. Do you think the negotiation skills we have worked on today will be useful? Why or why not? **Final Memo:** Develop case analysis memo assessing organizational situation and identify and support course of action.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Communication		
18. Select communication strategies for different audiences and sectors	GPH-GU 2359 Internship I: Applied Practice Experience Seminar	**Portfolio:** Products prepared for internship agency.
	GPH-GU 2360 Internship II: Culminating Experience Seminar	**Mock Report:** Report to internship agency summarizing the work conducted or a proposal for a new project based on internship work. **Poster:** Visual presentation of internship work/products to a diverse audience.
	GPH-GU 2687 Thesis II	**Thesis:** A manuscript-style final product that addresses a specific public health topic and includes the following sections: Introduction, Methods, Results, and Discussion. In-Class Oral Presentation: Oral presentation of thesis with major components, including results and discussion of findings. **Poster:** Visual presentation of the final thesis to a diverse audience.
	GPH-GU 2622 Capstone II	**Editorial:** Persuasive argument using Capstone experience assessing problem researched, examining both individual and institutional factors.
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 3:** Problem statement and literature review providing theory/evidence how and why social determinants are associated with given health outcome. **HW 4:** Based upon the health problem that you have researched, identify at least two distinct evidence-based interventions (one at individual level, one at community level) that can address this health problem. **HW 5**: In community Town Hall format, give a presentation describing geography and socio-demographics of given neighborhood and health outcome of interest. Contextualize data by contrasting neighborhood with borough and city. Present conceptual framework and discuss how observations and data relate to the conceptual framework. Class members represent various stakeholder groups and communicate different interests and concerns. **HW 6: (Final Exam)**
	GPH-GU 2153/5153 Global Environmental Health	**Environmental Data Project**: Narrated presentations on a given topic. Grading based on content, presentation, and effectiveness. **Scrapyard Case Study:** Using a real-life and active case-study (Scrapyard and E-waste Recycling in Accra, Ghana), students will work with professionals outside public health to understand the role each discipline can provide in solving public health problems and how to apply systems thinking to understand the various relationships within proposed interventions.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
	GPH-GU 2359 Internship I: Applied Practice Experience Seminar	**Portfolio:** Products prepared for internship agency.
	GPH-GU 2360 Internship II: Culminating Experience Seminar	**Mock Report:** Report to internship agency summarizing the work conducted or a proposal for a new project based on internship work. **Poster:** Visual and oral presentation of internship work/products to a diverse audience.
	GPH-GU 2687 Thesis II	**Thesis:** A manuscript-style final product that addresses a specific public health topic and includes the following sections: Introduction, Methods, Results, and Discussion. In-Class Oral Presentation: high-quality oral presentation of the thesis with all the major components, including results and discussion of the findings. **Poster: V**isual presentation of the final thesis to a diverse audience.
	GPH-GU 2622 Capstone II	**Policy Brief:** Program proposal advocating intervention addressing Capstone health issue, written from perspective of program/agency director.
20. Describe the importance of cultural competence in communicating public health content	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	**HW 6 (Final Exam)**
Interprofessional Practice		
21. Perform effectively on interprofessional teams	GPH-GU 2153/5153 Global Environmental Health	**Scrapyard Case Study:** Using a real-life and active case-study (Scrapyard and E -waste Recycling in Accra, Ghana), students will work with professionals outside public health to understand the role each discipline can provide in solving public health problems and how to apply systems thinking to understand the various relationships within proposed interventions.

Table D2-2 Assessment of Competencies for MPH – All Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Systems Thinking		
22. Apply systems thinking tools to a public health issue	GPH-GU 2360 Internship II: Culminating Experience Seminar	**Seminar 5:** Systems thinking exercise—develop an Iceberg Diagram to assess organizational or leadership problem encountered in internship. Submit analysis of the problem including: problem statement; analysis of problem and Iceberg Diagram; recommendations to address problem.
	GPH-GU 2687 Thesis II	**In-Class Group Exercise:** 1) choose a health outcome or public health problem; 2) draw a stock and flow diagram (must include at least two stocks, two flows, and one feedback loop) that characterizes the relationships that are most important to this topic; 3) draw the diagram on board and explain to the class.
	GPH-GU 2153/5153 Global Environmental Health	**Scrapyard Case Study:** Using a real-life and active case-study (Scrapyard and E-waste Recycling in Accra, Ghana), students will work with professionals outside public health to understand the role each discipline can provide in solving public health problems and how to apply systems thinking to understand the various relationships within proposed interventions.
	GPH-GU 2622 Capstone II	**Assignment:** Develop a systems map for student's Capstone project with a written explanation demonstrating understanding of systems thinking concepts, based on instructor's PowerPoint presentation "Application of Systems Thinking to Global Public Health."

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

The most recent syllabus for all required courses referred to in Section D2.1 above is provided in ERF D2.3. Please note that exams and some assignments in the ERF are from AY 2017-18 as the academic year has recently started.

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

Strengths:

In Spring 2017, the Academic Affairs Committee engaged in a curriculum assessment process to identify the specific foundational competencies currently covered in the core curriculum. The committee mapped each competency to specific courses to ensure that all competencies are covered in the core curriculum. A committee member worked with relevant course instructors to facilitate incorporation of new competencies into course content. Lead course instructors were identified to develop a common syllabus for the course to be used by all section instructors, including online versions, in order to maintain consistency of basic content across sections of a given course.

All foundational competencies are addressed in the MPH curriculum that is common to all concentrations.

Weaknesses:

As Academic Year (AY) 2017-18 was the first year of implementation, we have not assessed the incorporation of the new foundational competencies into our core curriculum.

Plans:

In AY 2018–19, the Academic Affairs Committee plans to review implementation of the foundational competencies in the core curriculum as part of a comprehensive review of the core curriculum. The committee will develop approaches to resolve any problems in addressing the foundational competencies and explore approaches for enhancing our instruction in this area.

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D3. DrPH Foundational Competencies

Not applicable.

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D4. MPH & DrPH Concentration Competencies

The school defines at least five distinct competencies for each concentration or generalist degree at each degree level in addition to those listed in Criterion D2 or D3.

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

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

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

   Each MPH concentration has a set of concentration-specific competencies that students develop through required concentration courses. Competencies for the Global Health concentration comprise the competencies for all dual degrees.

   - D4-1a Biostatistics
   - D4-1b Community Health Science and Practice
   - D4-1c Environmental Public Health Sciences
   - D4-1d Epidemiology
   - D4-1e Global Health
   - D4-1f Public Health Management
   - D4-1g Public Health Nutrition
   - D4-1h Public Health Policy
   - D4-1i Sustainable Development Goals (SDG)
   - D4-1j Social and Behavioral Sciences

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
1. Apply descriptive and inferential methodologies according to the type of study design for answering a particular research question	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**HW 1:** Simple Linear Regression Models: Basic Estimation and Assumptions **HW 2:** Simple Linear Regression Models: Transformations **HW 3:** Simple Linear Regression Models: Categorical Predictors **HW 4:** Multiple Linear Regression Models: Introduction **HW 5:** Multiple Linear Regression Models: Inferences and Extended Principals **HW 6:** Multiple Linear Regression: Regression for Prediction **HW 7:** Multiple Linear Regression Models: Importance of Predictors **HW 8:** Moderated Effects I: Interactions **HW 9:** Moderated Effects II: Probing Interactions **HW 10:** Mediation and Path Analysis **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 1:** Review of Regression **HW 2:** 2X2 Tables **HW 4:** Hypothesis testing and interpretation **HW# 5**: Causal inference **HW# 6**: Moderation and categorical outcomes **HW 7:** Bias and confounding **HW 8:** Poisson Models **HW 9**: Multinomial Regression **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis:** write results section of a research paper, including study population, independent, dependent and covariate, and main and related study findings.
	*GPH-GU 2387 Survey Design, Analysis, and Reporting	**Midterm:** secondary data analysis project report. **Final:** primary data collection project presentation.

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
	*GPH-GU 2286 Introduction to Data Management and Statistical Computing	**HW 4:** Data Cleaning **HW 5:** Data Manipulation **HW 6:** Automated Programming **Final Exam**
	*GPH-GU 2480 Longitudinal Analysis of Public Health Data	**HW 9:** Survival Analysis **HW 10:** Model Selection **Midterm Exam** **Final Exam**
2. Harness basic concepts of probability, random variation and commonly used statistical probability distributions	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**HW 1:** Simple Linear Regression Models: Basic Estimation and Assumptions **HW 2:** Simple Linear Regression Models: Transformations **HW 3:** Simple Linear Regression Models: Categorical Predictors **HW 4:** Multiple Linear Regression Models: Introduction **HW 5:** Multiple Linear Regression Models: Inferences and Extended Principals
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 5:** Inference **HW 9:** Multinomial Regression **HW 10:** Model selection **Midterm Exam** **Final Exam**
3. Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions	*GPH-GU 2387 Survey Design, Analysis, and Reporting	**Midterm:** secondary data analysis project report. **Final:** primary data collection project presentation.
	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**HW 2:** Simple Linear Regression Models: Transformations **HW 3:** Simple Linear Regression Models: Categorical Predictors **HW 4**: Multiple Linear Regression Models: Introduction **HW 5:** Multiple Linear Regression Models: Inferences and Extended Principals **HW 6:** Multiple Linear Regression: Regression for Prediction **HW 7:** Multiple Linear Regression Models: Importance of Predictors **HW 8:** Moderated Effects I: Interactions **HW 9:** Moderated Effects II: Probing Interactions **HW 10**: Mediation and Path Analysis **Quizzes 1 and 2** **Midterm Exam** **Final Exam**

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration *Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 5:** Inference **HW 8:** Poisson Models **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Methods and Data Analysis Plan** **Thesis Proposal**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: write results section of a research paper, including study population, independent, dependent and covariate, and main and related study findings.
4. Implement the appropriate analytic methods for calculating key measures of association	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**HW 1**: Simple Linear Regression Models: Basic Estimation and Assumptions **HW 4:** Multiple Linear Regression Models: Introduction **HW 5:** Multiple Linear Regression Models: Inferences and Extended Principals **Midterm Exam**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 5:** Causal Inference **HW 7:** Bias and confounding **HW 8:** Poisson Models **HW 9:** Multinomial regression **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	*GPH-GU 2387 Survey Design, Analysis, and Reporting	**Midterm**: secondary data analysis project report. **Final:** primary data collection project presentation.
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis:** write results section of a research paper, including study population, independent, dependent and covariate, and main and related study findings.
	*GPH-GU 2480 Longitudinal Analysis of Public Health Data	**HW 9:** Survival Analysis **HW 10:** Model Selection **Midterm Exam** **Final Exam**

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
5. Understand and apply ethical principles to data acquisition, management, storage, sharing and analysis	*GPH-GU 2286 Introduction to Data Management and Statistical Computing	**HW 1:** Codebook development **HW 2:** Data management protocol **HW 3:** Debugging Code **HW 4:** Data cleaning **Final Exam**
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	CITI Training
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis:** write a professional-quality, ethically sound thesis that develops a clear argument based on a research question
6. Interpret results of statistical analyses found in public health research studies	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**HW 4:** Multiple Linear Regression Models: Introduction **HW 8:** Moderated Effects I: Interactions **HW 10**: Mediation and Path Analysis **Final Exam**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 6:** Moderation and categorical outcomes **HW 10:** Model selection **Midterm Exam** **Final Exam**
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Statement of Problem/Research Question** **Literature Review** **Thesis Proposal**
	*GPH-GU 2387 Survey Design, Analysis, and Reporting	**Midterm**: secondary data analysis project report. **Final**: primary data collection project presentation.
	*GPH-GU 2480 Longitudinal Analysis of Public Health Data	**Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis:** interpret and discuss results of the research study in the context of existing scientific knowledge, including assessing limitations of the study and public health implications.

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
7. Utilize relevant statistical software for data analysis	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**Conducted Using Stata:** **HW 4:** Multiple Linear Regression Models: Introduction **HW 8:** Moderated Effects I: Interactions **HW 10:** Mediation and Path Analysis **Final Exam**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**Conducted Using Stata:** **HW 1:** Review of Regression **HW 2:** 2X2 Tables **HW 4:** Hypothesis testing and interpretation **HW# 5:** Causal inference **HW# 7:** Bias and confounding **HW# 8:** Poisson models **HW 9:** Multinomial regression **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	*GPH-GU 2286 Introduction to Data Management and Statistical Computing	**Conducted Using Stata, SAS, and R:** **HW 1**: Codebook development **HW 2:** Data management protocol **HW 3:** Debugging Code **HW 4:** Data cleaning **HW 5**: Data manipulation **HW 6**: Automated programming **Final Exam**
	*GPH-GU 2387 Survey Design, Analysis, and Reporting	**Conducted Using Stata:** **Midterm**: secondary data analysis project report. **Final**: primary data collection project presentation.

Table D4-1a Assessment of Competencies for MPH in Biostatistics Concentration *Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	*GPH-GU 2480 Longitudinal Analysis of Public Health Data	**Conducted Using Stata:** **HW 1:** Between- and within- person effect **HW 2:** Fitting a multilevel model **HW 3:** Interclass correlation **HW 4**: Covariance Structure **HW 5**: Random Effects Model **HW 6:** Random Effects Model (contd.) **HW 7:** Time-varying and Time Invariant Predictors **HW 8:** Nonlinear Change Over Time **HW 9:** Survival Analysis **HW 10:** Model Selection **Midterm Exam** **Final Exam**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: write results section of a research paper, including study population, independent, dependent and covariate, and main and related study findings.

Table D4-1b Assessment of Competencies for MPH in Community Health Science and Practice Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Gather and analyze community health data to identify and prioritize issues for program planning that promotes community health	GPH-GU 2218 Assessing Community Health Needs and Resources	**Assignment:** Conduct primary data collection: structured observations, street intercept surveys, and key informant interviews. **Assignment:** Conduct literature review and identify relevant community profile data. **Analytic Memo:** Using a social ecological framework, describe and analyze socio-cultural and economic factors contributing to key health conditions in assigned community. **Intermediate Assignment—Midterm Presentation:** Present preliminary results of data collection and secondary data sources. **Reflection Paper 2:** Describe your role in the assessment: skills acquired and skills to strengthen for reviewing and analyzing secondary data for conducting community health assessments. **Final Paper**
	GPH-GU 2349 Program Planning and Evaluation	**HW 1:** SMART Objectives (Specific, Measureable, Achievable, Relevant, Time-bound) **Group Project 1:** Describe the global health program of your choice. **Exam 1**
2. Apply a social ecological framework to the assessment of behavioral, social, cultural, economic, environmental and institutional factors that contribute to health among diverse populations	GPH-GU 2218 Assessing Community Health Needs and Resources	**Assignment:** Conduct primary data collection: structured observations, street intercept surveys and key informant interviews. **Assignment:** Conduct literature review and identify relevant community profile data. **Analytic Memo:** Using a social ecological framework, describe and analyze socio-cultural and economic factors contributing to key health conditions in assigned community. **Intermediate Assignment—Midterm Presentation:** Present preliminary results of data collection and secondary data sources. **Final Presentation** **Presentation Descriptive Memo:** Short description of group oral presentation. Identify individual student's specific slides from the slide presentation. Team members present on the section of the project for which they have had primary responsibility.
	GPH-GU 2415 Community-based Health Interventions	**Health Topic:** Describe health issue, target population, and importance. Include list of contributing factors corresponding to various social ecological levels of influence (e.g., intrapersonal, interpersonal, community, policy). **Response Paper:** Discuss how recommendation on high school completion informs community interventions to improve population health. **Final Paper**

Table D4-1b Assessment of Competencies for MPH in Community Health Science and Practice Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
3. Apply a social ecological framework to identify evidence-based interventions that promote population and community health	GPH-GU 2415 Community-based Health Interventions	**Summary of evidence-based strategies:** Literature review of evidence-based strategies for chosen topic. For each intervention, summary should include: target population, intervention, critique of intervention effectiveness, and ease of implementation. **Final Paper**
	GPH-GU 2270 Translating Research to Practice	**Assignments:** 2.1 Selection of community health issue with corresponding data 2.2 Matrix appraising intervention evidence from literature to address issue 2.3 Matrix appraising community resources needed for interventions 2.4 Appraisal of best fit evidence-based interventions 2.7 Final Paper
4. Apply a social-ecological framework to the planning and evaluation of population-based intervention strategies to improve health and reduce inequities	GPH-GU 2349 Program Planning and Evaluation	**HW 3:** Evaluation Questions **HW 4:** Indicator Development **Group Project 3:** Develop a logic model and formulate evaluation questions for your program. **Group Project 4:** Propose a list of indicators, develop an evaluation design for your program, and justify the design chosen. Develop timeline for evaluation plan. **Group Project Final Presentation** **Exam 1 and Exam 2**
	GPH-GU 2270 Translating Research to Practice	**Assignment:** 2.6 Program logic model
5. Adapt and implement evidence-based strategies to promote healthy communities and health equity	GPH-GU 2270 Translating Research to Practice	**Assignments:** 2.5 Matrix appraising program adaptations needed 2.6 Program logic model 2.7 Final paper

Table D4-1b Assessment of Competencies for MPH in Community Health Science and Practice Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
6. Design strategies to engage community stakeholders and to develop community partnerships for population-based health programs Note: This competency applies a higher level of learning outcome than Foundational Competency 13, which involves "*proposing* strategies to *identify* stakeholders and build coalitions and partnerships." The concentration competency requires students to create new information by *designing* comprehensive approaches for *engaging* community partners.	GPH-GU 2218 Assessing Community Health Needs and Resources	**Assignment:** List key community stakeholders and conduct key informant interviews. **Assignment:** Conduct street intercepts. **Reflection Paper 1:** Explain rationale for stakeholder selection. Provide three strategies for engaging stakeholders' organization. Reflect on your strengths and challenges in implementing engagement strategies. **Reflection Paper 3:** Identify and describe three stakeholder groups in assigned community and what you thought about them previously compared to what you have learned. How to use your new knowledge to engage them.
	GPH-GU 2415 Community-based Health Interventions	**Theory of Change:** develop theory of change for proposed health intervention. **Program Design Workshop:** Workshop proposed intervention in a "speed dating" setting with fellow students. **Final Paper**
	GPH-GU 2349 Program Planning and Evaluation	**HW 2:** Logic Model **Group Project 2:** Present a stakeholder analysis for your program. **Exam 1**
	GPH-GU 2270 Translating Research to Practice	**Assignment:** 2.7 Final Paper

Table D4-1c Assessment of Competencies for MPH in Environmental Public Health Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Describe the origin and pathways of contaminants in the environment and the mechanisms through which they are introduced	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Forum Posts:** Great East Japan Mega Disaster; Current Trends in Disasters. **Annex 1, Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment, Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and Concept of Operations. Students prepare a 10-minute presentation providing an overview of the plan. **Final Exam**
	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 1** **Homework 1:** Students will be given one peer-reviewed journal article to analyze and write a report using the following identified criteria: background; listing specific environmental problems and possible intervention strategies; and providing a recommendation for mitigation/intervention/public health protection. **Homework 2:** Students will be assigned two papers to differentiate the ethical and moral issues associated with toxicological burdens.
2. Identify the direct and indirect effects of environmental hazards on humans and ecological systems	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Forum Posts:** Great East Japan Mega Disaster; Current Trends in Disasters; Role of memorialization; Resiliency of the Affected Country; Individual Resiliency **Annex 1–3, Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course Instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment, Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and Concept of Operations. Students prepare a 10-minute presentation providing an overview of the plan. **FEMA Trainings** **Final Exam**
	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 1** **Homework 1:** Students will be given one peer-reviewed journal article to analyze and write a report using the following identified criteria: background; listing specific environmental problems and possible intervention strategies; and providing a recommendation for mitigation/intervention/public health protection. **Homework 2:** Students will be assigned two papers to differentiate the ethical and moral issues associated with toxicological burdens.

Table D4-1c Assessment of Competencies for MPH in Environmental Public Health Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 2265 Climate Change and Global Public Health	**Midterm paper** researching a climate science challenge, problem, breaking news, or critique a scientific position. **Final paper** and presentation on an LMIC's approach to renewable energy development and commitment.
3. Assess the qualitative and quantitative aspects of exposure, dose response, and risk characterization of environmental agents	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Case Study Report:** Students will choose their own topics to prepare a brief case study report using the case study inventory materials provided and will also prepare a 10-minute PowerPoint presentation using NYU Stream on the case study of their choice. **Forum Posts:** Dread factors. **Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment [THIRA], Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and CONOPS (Concept of Operations). Students prepare a 10-minute presentation providing an overview of the plan. **FEMA Trainings** **Final Exam**
	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 1** **Homework 2:** Students will be assigned two papers to differentiate the ethical and moral issues associated with toxicological burdens.
4. Critically evaluate, synthesize, and interpret scientific findings in the environmental health literature, including relevant topics in epidemiology, toxicology,	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Forum Posts:** Role of Memorialization; Resiliency of the Affected Country; and Individual Resiliency. **Annex 3 and Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment, Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and Concept of Operations. Students prepare a 10-minute presentation providing an overview of the plan. **FEMA Trainings** **Final Exam**

Table D4-1c Assessment of Competencies for MPH in Environmental Public Health Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
engineering, and medicine	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 1**
	GPH-GU 2265 Climate Change and Global Public Health	**Midterm paper** discussing challenges to public health wrought by enhanced global warming. **Final presentation** using critical analysis of an epidemiologic study in an air pollution paper. Readings are epidemiological studies on exposure-mortality/morbidity relationships.
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	This course will be revised for Spring 2019 to address this competency.
5. Specify approaches for assessing, preventing, and controlling environmental hazards that pose risk to human health and safety	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Forum Posts:** Great East Japan Mega Disaster; Current Trends in Disasters; Discussion on Mitigation; Reports on Katrina and September 11; Red Cross; Three Levels of Preparedness; USAID; Role of Memorialization; Resiliency of the Affected Country; and Individual Resiliency. **Case Study and Presentation** Students will choose their own topics to prepare a brief case study report using the case study inventory materials provided and will also prepare a 10-minute PowerPoint presentation using NYU Stream on the case study of their choice. **Weekly Activities:** Precis on Mitigation, Brief on Mitigation Strategies, Group work-survey on individual preparedness (use of social media for alerts). **Annex 1-3, Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment, Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and Concept of Operations. Students prepare a 10-minute presentation providing an overview of the plan. **FEMA Trainings** **Final Exam**
	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 1** **In-Class Quiz 2** I**n-Class Quiz 3** **Homework 3:** Students will be assigned two papers on global pollution regulations and will prepare a report analyzing the papers using the following criteria: background; listing specific environmental problems and possible intervention strategies; and providing a recommendation for mitigation/intervention/public health protection.
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	This course will be revised for Spring 2019 to address this competency.

Table D4-1c Assessment of Competencies for MPH in Environmental Public Health Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
6. Define the role and impact of national and international environmental health regulatory programs, agencies, and organizations	GPH-GU 5210 Global Health and Disaster Preparedness and Response	**Forum Posts:** Role of Agencies in Disaster Planning and Response; Governmental Structures in Disaster Planning and response. **Final Disaster Plan:** Student will prepare a Disaster Plan on a topic of their choice (in consultation with the course instructor and their collaborating agency) and will include three Annexes to their Plan (Threat and Hazard Identification and Risk Assessment [THIRA], Training Plan for Drills, and Short-Term Recovery Plan). The Disaster Plan includes two large sections: the Base Plan and CONOPS (Concept of Operations). Students prepare a 10-minute presentation providing an overview of the plan. **FEMA Trainings** **Final Exam**
	GPH-GU 2226 Global Toxicology and Community Health	**In-Class Quiz 2** **In-Class Quiz 3** **Homework 3:** Students will be assigned two papers on global pollution regulations and will prepare a report analyzing the papers using the following criteria: background; listing specific environmental problems and possible intervention strategies; and providing a recommendation for mitigation/intervention/public health protection.
	GPH-GU 2265 Climate Change and Global Public Health	**Final presentation** regarding role of renewable energy solutions and promulgating public policies at various governmental levels. Final paper assessing an LMIC's policy approach toward renewable energy and commitments to lower carbon pollution.

Table D4-1d Assessment of Competencies for MPH in Epidemiology Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
1. Identify methods for measuring the distribution of determinants of health outcomes and well-being within and across populations	GPH-GU 2450 Intermediate Epidemiology	**HW 1:** Measures of disease frequency **HW 2:** Design issues in observational studies **HW 3:** Field evaluation of vaccine effectiveness **HW 4:** Bivariable analysis in STATA **HW 5:** Confounding **HW 6:** Agreement and misclassification **Midterm Exam** **Final Exam**
	GPH-GU 2930 Epidemiology Design & Methods	**Project 1:** Cross-sectional analysis with scale **Project 2:** Unmatched and matched case-control analysis **Project 3:** Survival analysis **Exercise:** global burden of disease
	GPH-GU 2225 Psychometric Measurement and Analysis in Public Health Research and Practice	**Practice Problems Sessions: 4, 5, 6** **Midterm Quiz:** Multiple choice and short answer questions in which students are asked to explain, apply, interpret, and evaluate the concepts that we have studied. This will include interpreting output from data analyses. **Final Quiz:** Multiple choice and short answer questions in which students are asked to explain, apply, interpret, and evaluate the concepts that we have studied. This will include interpreting output from data analyses. **Final Project:** Write a paper presenting and analyzing a public health measure including: 1) description of the instrument and the construct or constructs it seeks to measure; (2) historical background on the development of the instrument; (3) utilization of the instrument in research and practice, including populations for which the instrument was intended to be used; (4) description of items and scoring; (5) a detailed description of the psychometric studies and the associated finding of these studies, and (6) your own assessment, based on all you have learned about this instrument, on the utility of this measure in research and practice, and across populations **Final Presentation**
2. Critically evaluate the application of epidemiologic methods to answer public health questions	GPH-GU 2450 Intermediate Epidemiology	**HW 4:** Bivariable analysis in STATA **HW 5:** Confounding **Midterm Exam** **Final Exam**
	GPH-GU 2930 Epidemiology Design and Methods	**Project 2:** Unmatched and matched case-control analysis

Table D4-1d Assessment of Competencies for MPH in Epidemiology Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
	GPH-GU 2686 Thesis I	**Methods in Data Analysis Plan Assignment** **Thesis Proposal**
	GPH-GU 2361 Research Methods in Public Health	**Survey Draft** **Survey Presentations** **Focus Group Exercise** **Focus Group Moderator Guide** **Coding Focus Groups** **Midterm** **Final Project**
3. Identify data sources, manage large datasets, and conduct analyses using appropriate statistical software Note: This competency goes beyond Foundational Competencies in Evidence-based Approaches, as students must learn to manage large datasets and apply advanced level statistics to the analysis.	GPH-GU 2450 Intermediate Epidemiology	**HW 4:** Bivariable Analysis in STATA
	GPH-GU 2930 Epidemiology Design and Methods	**Project 1:** Cross-sectional analysis with scale **Project 2:** Unmatched and matched case-control analysis **Project 3:** Survival analysis
	*GPH-GU 2353 Regression I: Linear Regression and Modeling	**Lecture 6 and HW 5**: Multiple Linear Regression Models: Inferences and Extended Principals **Lecture 7 and HW 6:** Multiple Linear Regression: Regression for Prediction **Lecture 8 and HW 7:** Multiple Linear Regression Models: Importance of Predictors **Lecture 9 and HW 8:** Moderated Effects I: Interactions **Lecture 10 and HW 9:** Moderated Effects II: Probing Interactions **Lecture 11 and HW 10:** Mediation and Path Analysis **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	*GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 6:** Moderation and Categorical Outcomes **HW 7:** Bias and confounding **HW 9:** Multinomial Regression **HW 10**: Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**

Table D4-1d Assessment of Competencies for MPH in Epidemiology Concentration *Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 2687 Thesis II	**Thesis**: write results section of a research paper, including study population, independent, dependent and covariate, and main and related study findings.
	GPH-GU 2225 Psychometric Measurement and Analysis in Public Health Research and Practice	**Practice Problems Sessions: 4, 5, 6, 9** **Midterm Quiz:** Multiple choice and short answer questions in which students are asked to explain, apply, interpret, and evaluate the concepts that we have studied. This will include interpreting output from data analyses. **Midterm Data Analysis:** Students will be asked to answer a series of questions based on several data sets, which are provided. They are to conduct the analysis in SPSS and then thoroughly provide the answers to the questions and append the SPSS output and syntax to the assignment. **Final Quiz:** Multiple choice and short answer questions in which students are asked to explain, apply, interpret, and evaluate the concepts that we have studied. This will include interpreting output from data analyses. **Final Project:** Write a paper presenting and analyzing a public health measure including: 1) description of the instrument and the construct or constructs it seeks to measure; (2) historical background on the development of the instrument; (3) utilization of the instrument in research and practice, including populations for which the instrument was intended to be used; (4) description of items and scoring; (5) a detailed description of the psychometric studies and the associated finding of these studies, and (6) your own assessment, based on all you have learned about this instrument, on the utility of this measure in research and practice, and across populations **Final Presentation**
4. Synthesize the extant epidemiologic literature and identify its limitations and gaps	GPH-GU 2686 Thesis I	**Statement of Problem/Research Question Assignment** **Annotated Bibliography** **Literature Review** **Thesis Proposal**
	GPH-GU 2687 Thesis II	**Thesis**: interpret and discuss results of the research study in the context of existing scientific knowledge, including assessing limitations of the study and public health implications.

Table D4-1d Assessment of Competencies for MPH in Epidemiology Concentration *Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020.		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
5. Effectively communicate epidemiologic findings both orally and in writing Note: This competency goes beyond Foundational Competency 19 involving communicating audience-appropriate public health content as it involves communication of advanced epidemiological and statistical scientific findings.	GPH-GU 2361 Research Methods in Public Health	**Survey Draft** **Survey Presentations** **Focus Group Exercise** **Focus Group Moderator Guide** **Coding Focus Groups** **Midterm** **Final project**
	GPH-GU 2450 Intermediate Epidemiology	**HW 1:** Measures of disease frequency **HW 2:** Design issues in observational studies **HW 3:** Field evaluation of vaccine effectiveness **HW 4:** Bivariable analysis in STATA **HW 5:** Confounding **HW 6:** Agreement and misclassification **Midterm Exam** **Final Exam**
	GPH-GU 2930 Epidemiology Design & Methods	**Project 1:** Cross-sectional analysis with scale **Project 2:** Unmatched and matched case-control analysis **Project 3:** Survival analysis
	GPH-GU 2687 Thesis II	**Thesis**: present study findings in both oral and written formats for diverse audiences (in-class oral presentation). **Poster**
6. Understand and apply principles of ethical conduct to epidemiological studies	GPH-GU 2930 Epidemiology Design and Methods	**Ethics debate:** using Ebola as an example, students will debate ethical considerations of conducting research in the midst of an outbreak in a low-resource setting.
	GPH-GU 2686 Thesis I	**CITI Certification**
	GPH-GU 2687 Thesis II	**Thesis**: write a professional-quality, ethically sound thesis that develops a clear argument based on a research question.

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Describe the major players in global health governance and institutions that conduct health/public health policy research and analysis	GPH-GU 2120 Foundations of Global Health	**Policy Briefs:** Students will synthesize readings and lectures to develop briefs. Topics include analyzing the effects of globalization, producing solutions and improving the effectiveness of international investment strategies, and identifying a specific health issue with the goal to promote problem solving among health officials.
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 1**. Conceptual framework and overview of health-related targets for the Sustainable Development Goals (SDGs) **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for priority health related SDGs **Lesson 2.** Overview of health system platforms, bottlenecks, and health system strengthening for the SDGs **HW:** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks and health system strengthening strategies for each health system platform
2. Perform strategic assessment and evaluation to analyze factors shaping individual and institutional behaviors and measure their impact	GPH-GU 2120 Foundations of Global Health	**Regional Team Assignment:** (Semester-long assignment). Students will work in groups of five to six to complete a two-part, in-depth analysis of the health conditions of countries in a WHO region of their choice, identify priorities for action and the effects of globalization and global policies and programs on health at the country and/or regional level.
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 1.** Conceptual framework and overview of health-related targets for the Sustainable Development Goals (SDGs) **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for priority health-related SDGs **Lesson 2.** Overview of health system platforms, bottlenecks, and health system strengthening for the SDGs **HW:** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks and health system strengthening strategies for each health system platform

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
3. Identify relevant sources for quantitative and qualitative data to analyze the global burden of disease	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 12.** Analytical tools and information sources for assessing changes in coverage and impact of child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on evaluating tools and information sources for assessing changes in coverage and impact of child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 13.** Monitoring changes in bottlenecks and effective coverage child of survival interventions. **HW (Live Section):** Responses to class dialogue, review questions and assignment on changes in bottlenecks and effective coverage of selected child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 4.** SDG targets and indicators for reducing the global burden of disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing causes of the Global Burden of Disease **Lesson 5.** SDG targets and indicators for reducing risk factors for the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing risk factors for the Global Burden of Disease **Lesson 13.** Monitoring progress towards the health-related SDGs **HW:** Responses to class dialogue, review questions and assignment on identification of indicators and analysis of progress towards health-related SDGs
4. Analyze causes, risk factors, interventions, and bottlenecks for the global burden of disease in different contexts	GPH-GU 2120 Foundations of Global Health	**Regional Team Assignment and Presentation:** (Semester-long assignment) Students will work in groups of five to six to complete a two-part, in-depth analysis of the health conditions of countries in a WHO region of their choice, identify priorities for action and the effects of globalization and global policies and programs on health at the country and/or regional level.

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 2.** Levels and trends of under age 5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignment on analyzing levels and trends of under-5 and neonatal mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 3.** epidemiologic causes and trends in causes of under age 5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignments on prioritizing epidemiologic causes of child mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 6.** Baseline coverage and current coverage frontiers for child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on analyzing baseline coverage and current coverage frontiers for child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 7.** Bottlenecks for child survival intervention packages **HW (Live Section):** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks for the selected child survival intervention packages **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 3.** Modeling current and expanded coverage frontiers for health system platforms **HW:** Responses to class dialogue, review questions and assignment on modeling current and expanded coverage frontiers for each health system platform and intervention package **Lesson 4.** SDG targets and indicators for reducing the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing causes of the Global Burden of Disease **Lesson 5.** SDG targets and indicators for reducing risk factors for the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing risk factors for the Global Burden of Disease

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
5. Identify cost-effective interventions, strategies, and platforms to accelerate context specific progress towards the health-related SDGs	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 4.** Evidence-based, high-impact child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on priority child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 5.** Platforms, a continuum of care, and packaging of child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on selecting platforms and packages to deliver the priority interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 8.** Strategies and effect sizes to reduce bottlenecks in child survival intervention coverage **HW (Live Section):** Responses to class dialogue, review questions and assignment on strategies to reduce bottlenecks in child survival intervention coverage **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 9.** Modeling expansion of coverage frontiers for child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on anticipated expansion of coverage frontiers for child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 10.** Impact of changes in intervention coverage on under age 5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignment on anticipated impact of changes in intervention coverage on child mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 6.** Prioritizing and increasing coverage of maternal, neonatal, and nutritional interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for maternal, neonatal and nutritional interventions **Lesson 7.** Prioritizing and increasing coverage of infectious diseases interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for infectious diseases interventions **Lesson 8.** Prioritizing and increasing coverage of cardiovascular and respiratory interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for cardiovascular and respiratory interventions **Lesson 9.** Prioritizing and increasing coverage of cancer interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for cancer interventions **Lesson 10.** Prioritizing and increasing coverage of mental, neurological and substance abuse interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for mental, neurological, and substance abuse interventions **Lesson 11.** Prioritizing and increasing coverage of injury interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on priorities and coverage frontiers for injury interventions
6. Advocate for cost-effective policies and strategies to accelerate progress towards the health related SDGs	GPH-GU 2120 Foundations of Global Health	**Policy Briefs:** Students will synthesize readings and lectures to develop briefs. Topics include analyzing the effects of globalization, producing solutions and improving the effectiveness of international investment strategies, and identifying a specific health issue with the goal to promote problem solving among health officials. **Regional Team Assignment:** (Semester-long assignment). Students will work in groups of five to six to complete a two-part, in-depth analysis of the health conditions of countries in a WHO region of their choice, identify priorities for action and the effects of globalization and global policies and programs on health at the country and/or regional level.

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 15.** Group presentation of investment case for accelerated child survival and individual one-page paper and presentation of competencies acquired and their career relevance **Group presentation (Live Section):** investment case for accelerated child survival; individual papers and dialogue on competencies acquired and their career relevance **Group presentation (Online Section):** Team presentation of investment case for accelerated child survival
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 1.** Conceptual framework and overview of health-related targets for the Sustainable Development Goals (SDGs) **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for priority health-related SDGs **Lesson 2.** Overview of health system platforms, bottlenecks, and health system strengthening for the SDGs **HW:** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks and health system strengthening strategies for each health system platform **Lesson 15.** Group presentation of investment case for priority health-related SDGs and individual one-page paper and presentation of competencies acquired and their career relevance **HW:** Group presentation of investment case for priority health-related SDG targets; individual papers and dialogue on competencies acquired and their career relevance

Table D4-1e Assessment of Competences for MPH in Global Health Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
7. Develop investment cases for maximum health returns on investment of intervention policies, implementation and financing strategies	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 1.** Overview of concepts and investment planning for accelerated child survival **HW (Live Section):** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for accelerated child survival **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 11.** Additional costs of expanding coverage frontiers for child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on modeling additional costs of expanding coverage frontiers for child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 14.** Modeling health returns on investment and investment planning for accelerated child survival **HW (Live Section):** Responses to class dialogue, review questions and assignment on modeling health returns on investment and developing of an investment plan for accelerated child survival **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 12.** Estimating additional costs of achieving expanded coverage frontiers for priority interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on modeling additional costs of achieving expanded coverage frontiers for priority interventions **Lesson 14.** Estimating health impacts and health returns on investment of achieving expanded coverage frontiers for priority interventions for the SDGs **HW:** Responses to class dialogue, review questions and assignment on modeling health returns on investment of achieving expanded coverage frontiers for priority interventions

Table D4-1f Assessment of Competencies for MPH in Public Health Management Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
1. Analyze the main components and challenges in the organization, financing and delivery of health care and public health services	+GPH-GU 2018 Microeconomics for Public Management, Planning, and Policy Analysis (CORE GP 1018)	**HW 1:** Introduction to microeconomics and why it matters for public service **HW 2:** Demand and supply basics: price determination **HW 3:** Elasticity, consumer and producer surplus, and price interventions **HW 4:** Policy interventions: taxes and subsidies **HW 5/6:** Production: framing decisions, costs, profits, competitive markets and supply **HW 8:** Consumer choice and decision-making **HW 9:** Labor markets **HW 10:** Imperfect competition **HW 12:** Asymmetric information and incentives **HW 13:** Externalities **Midterm Exam** **Final Exam**
	+GPH-GU 2019 Financial Management for Public, Nonprofit, and Health Organizations (CORE GP 1021)	**HW 1–12:** Analytical problems and short-answer questions based on readings and lectures (budgeting, breakeven analysis, cost allocation, balance sheets, activity statements, accounting, cash flow statements, financial statement analysis) **Midterm Exam** **Final Exam**
2. Describe the legal basis for public health and health services	GPH-GU 2292 Public Health Law	**Midterm** **Position Paper**

Table D4-1f Assessment of Competencies for MPH in Public Health Management Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
3. Apply principles of leadership and management to work with and across organizations, sectors and agencies Note: This competency goes beyond Foundational Competency 16 by applying leadership and management principles in complex multi-organizational and cross-sectoral contexts	*GPH-GU 2294 Designing and Managing Organizations in Public Health	**Case study analyses:** **#2** Leading effective teams **#3** Organizational structure **#4** Informal structure and social networks **#5** Incentives and motivation **#6** Organizational culture **#7** Power and strategic influence **#8** Leading change **#10** Managing bias and diversity **#12** Managing across organizational boundaries **#13** Managing across national boundaries **Team project and presentations:** Students will select an organization in any sector and one of three topics to study (Organizational Culture, Organizational Architecture/Structure, Incentives/Motivation). **Team news article presentation:** Students will select a current news article that raises a management/leadership issue or problem and that relates, as much as possible, to the concepts covered that day. **Developmental questionnaire and memo** **Midterm paper:** Case analysis memo that requires students to assess an organizational situation and provide support for a particular course of recommended action. **Implicit Association Test and reflective memo**
	+GPH-GU 2310 Strategic Management of Public Service Organizations (PADM GP 2110)	**Assignment 2:** Group Case Analysis (Paper and Presentation)

Table D4-1f Assessment of Competencies for MPH in Public Health Management Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
4. Apply the principles and tools of budgeting and resource management to improve the performance of public health and health care delivery organizations	+GPH-GU 2019 Financial Management for Public, Nonprofit, and Health Organizations (CORE GP 1021)	**HW 1–12:** Analytical problems and short-answer questions based on readings and lectures (budgeting, breakeven analysis, cost allocation, balance sheets, activity statements, accounting, cash flow statements, financial statement analysis) **Midterm Exam** **Final Exam**
5. Apply principles of strategic management to public health	+GPH-GU 2310 Strategic Management of Public Service Organizations (PADM GP 2110)	**Assignment 1:** Case Analysis Memos (3) **Assignment 2:** Group Case Analysis (Paper and Presentation)

Table D4-1g Assessment of Competencies for MPH in Public Health Nutrition Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Identify and assess diet and nutritional status related health problems, of both undernutrition and over-nutrition, among diverse population groups in the United States and globally	GPH-GU 2115 Introduction to Principles of Nutrition in Public Health	**Dietary Guidelines Presentation** **Midterm Exam**
	GPH-GU 2213 Public Health Nutrition	**HW 2:** Health Landscape in NYC **HW 3:** Environmental Impact on Health **HW 4:** Latinx Health Paper
	GPH-GU 2275 Nutritional Epidemiology for Public Health	**Assignments:** **1:** Rank the Assessment Instruments (In-class 1) **2:** Validation of the four common dietary assessment methods (HW 1) **3:** Data analysis exercise (In-class 2) **4:** Critique (HW 2) **Midterm Exam** **Final Exam**
	GPH-GU 2195 Nutrition and Metabolism	**Class paper/Presentation:** Students select a nutritionally related exposure and health outcome, explain the underlying biological mechanism, and review the state of the evidence supporting an association.
2. Describe the social, cultural, economic, environmental, and institutional factors that contribute to the risk of undernutrition and over-nutrition among populations	GPH-GU 2115 Introduction to Principles of Nutrition in Public Health	**Assignment:** Healthy People 2020 Nutrition Objectives **Dietary Guidelines Presentation** **Final Exam**
	GPH-GU 2213 Public Health Nutrition	**HW 2:** Health Landscape in NYC **HW 3:** Environmental Impact on Health **HW 4:** Latinx Health Paper **HW 5:** Nutrition Program Outreach, Recruitment, and Promotion

Table D4-1g Assessment of Competencies for MPH in Public Health Nutrition Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
3. Compare and contrast educational, community, institutional, and other population-based intervention strategies to improve nutritional health status, decrease food scarcity and reduce obesity	GPH-GU 2115 Introduction to Principles of Nutrition in Public Health	**Assignment:** Healthy People 2020 Nutrition Objectives **Dietary Guidelines Presentation** **Final Exam**
	GPH-GU 2213 Public Health Nutrition	**HW 2:** Health Landscape in NYC **HW 3:** Environmental Impact on Health **HW 4:** Latinx Health Paper
4. Analyze and assess policies aimed at increasing access and reducing barriers to food insecurity and improved national health status in diverse population groups	GPH-GU 2115 Introduction to Principles of Nutrition in Public Health	**Dietary Guidelines Presentation** **Final Exam**
	GPH-GU 2213 Public Health Nutrition	**HW 1:** Public Health Nutrition Program Highlights
5. Apply evidence-based research findings to the development and implementation of nutrition policies, programs, and interventions in the United States and globally	GPH-GU 2115 Introduction to Principles of Nutrition in Public Health	**Assignment:** Healthy People 2020 Nutrition Objectives **Dietary Guidelines Presentation**
	GPH-GU 2213 Public Health Nutrition	**HW 1:** Public Health Nutrition Program Highlights **HW 5:** Nutrition Program Outreach, Recruitment, and Promotion **HW 5 pt. 2:** Final Paper
	GPH-GU 2275 Nutritional Epidemiology for Public Health	**Final Exam**
	GPH-GU 2195 Nutrition and Metabolism	**Class paper/presentation**: Select a nutritionally related exposure and health outcome, evaluate the literature, and determine how evidence may be used for program, intervention, or policy development.

Table D4-1h Assessment of Competencies for MPH in Public Health Policy Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
1. Analyze the main components and challenges in the organization, financing and delivery of health care and public health services	GPH-GU 2155 Introduction to Public Health Policy	**HW 2:** Recommendations to improve compliance
	+GPH-GU 2018 Microeconomics for Public Management, Planning, and Policy Analysis (CORE-GP 1018)	**HW 1:** Introduction to microeconomics and why it matters for public service **HW 2:** Demand and supply basics: price determination **HW 3**: Elasticity, consumer and producer surplus, and price interventions **HW 4:** Policy interventions: taxes and subsidies **HW 5/6:** Production: framing decisions, costs, profits, competitive markets and supply **HW 8:** Consumer choice and decision-making **HW 9:** Labor markets **HW 10:** Imperfect competition **HW 12:** Asymmetric information and incentives **HW 13:** Externalities **Midterm Exam** **Final Exam**
	+GPH-GU 2430 Health Economics (HPAM-GP 4830)	**Briefing memos 1 and 2:** Briefing memos directed at a president, governor, or mayor on two of six topics covered in class (demand for medical care, production of health, health insurance, physician supply, hospital care supply, and public goods and cost-benefit analysis). **Take-Home Exam**
2. Describe the legal basis for public health and health services	GPH-GU 2292 Public Health Law	**Midterm** **Position Paper**

Table D4-1h Assessment of Competencies for MPH in Public Health Policy Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
3. Apply principles of leadership and management to work with and across organizations, sectors and agencies	*GPH-GU 2294 Designing and Managing Organizations in Public Health	**Case study analyses:** **#2** Leading effective teams **#3** Organizational structure **#4** Informal structure and social networks **#5** Incentives and motivation **#6** Organizational culture **#7** Power and strategic influence **#8** Leading change **#10** Managing bias and diversity **#12** Managing across organizational boundaries **#13** Managing across national boundaries **Team project and presentations:** Students will select an organization in any sector and one of three topics to study (Organizational Culture, Organizational Architecture/Structure, Incentives/Motivation). **Team news article presentation:** Students will select a current news article that raises a management/leadership issue or problem and that relates, as much as possible, to the concepts covered that day. **Developmental questionnaire and memo** **Midterm paper:** Case analysis memo that requires students to assess an organizational situation and provide support for a particular course of recommended action. **Implicit Association Test and reflective memo**
4. Discuss processes for developing and implementing policies and programs to improve the health status of populations, especially vulnerable groups	GPH-GU 2155 Introduction to Public Health Policy	**HW 1:** Scope of health problem **HW 3:** Assessing resource allocation **Memos 1-4** 1. Briefing memo regarding stakeholder interests 2. Standard decision memo regarding alcohol policies 3. Multiple decision memo 1 topic of your choice (summary) 4. Multiple decision memo 2 topic of your choice (full)
	GPH-GU 2349 Program Planning and Evaluation	**HW 1:** SMART objectives **Group Project 1:** Describe the global health program of your choice. **Exam 1**

Table D4-1h Assessment of Competencies for MPH in Public Health Policy Concentration
*Denotes new course to be offered for the first time in Spring 2019, Fall 2019, or Spring 2020
+Denotes course cross-listed with NYU Wagner School of Public Service. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Course number(s) or other educational requirements	Specific assignment(s) that allow assessment
5. Evaluate public policies and programs that promote health and health equity	GPH-GU 2349 Program Planning and Evaluation	**HW 3:** Evaluation Questions **HW 4:** Indicator Development **Group Project 3:** Develop a logic model and formulate evaluation questions for your program. **Group Project 4:** Propose a list of indicators and develop an evaluation design for your program. Justify the design chosen and develop timeline for evaluation plan. **Group Project Final Presentation** **Exam 1 and Exam 2**
	GPH-GU 2321 Cost-Effectiveness Analysis in Public Health	**Assignments:** **1** Developing a research question **2** Building a decision analytical model **3** Interpreting and reporting cost-effectiveness results **4** Critical appraisal of a published cost-effectiveness study **Quiz 1** **Quiz 2**

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Analyze context specific causal pathways for the global burden of disease, health interventions, and health system platforms, to set and monitor priorities for action	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 2.** Levels and trends of under and 5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignment on analyzing levels and trends of under age 5 and neonatal mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 3.** Epidemiologic causes and trends in causes of under-5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignments on prioritizing epidemiologic causes of child mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 6.** Baseline coverage and current coverage frontiers for child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on analyzing baseline coverage and current coverage frontiers for child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 7.** Bottlenecks for child survival intervention packages **HW (Live Section):** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks for the selected child survival intervention packages **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 4.** SDG targets and indicators for reducing the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing causes of the Global Burden of Disease **Lesson 5.** SDG targets and indicators for reducing risk factors for the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing risk factors for the Global Burden of Disease **Lesson 13.** Monitoring progress towards the health-related SDGs **HW:** Responses to class dialogue, review questions and assignment on identification of indicators and analysis of progress towards health-related SDGs
	GPH-GU 5420 Monitoring and Management of Public Health Programs for Equity	**Lesson 1.** Overview of concepts and investment planning for equity in health **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for equity in health **Lesson 2.** Stratifying variables and summary statistics for equity analysis in health **HW:** Responses to class dialogue, review questions and assignment on prioritizing stratifying variables and summary statistics for equity analysis in health

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
2. Select relevant data sources to assess the global burden of disease, health interventions, and health system platforms	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 12.** Analytical tools and information sources for assessing changes in coverage and impact of child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on evaluating tools and information sources for assessing changes in coverage and impact of child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 13.** Monitoring changes in bottlenecks and effective coverage child of survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on changes in bottlenecks and effective coverage of selected child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 3.** Modeling current and expanded coverage frontiers for health system platforms **HW:** Responses to class dialogue, review questions and assignment on modeling current and expanded coverage frontiers for each health system platform and intervention package **Lesson 4.** SDG targets and indicators for reducing the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing causes of the Global Burden of Disease **Lesson 5.** SDG targets and indicators for reducing risk factors for the Global Burden of Disease **HW:** Responses to class dialogue, review questions and assignment on prioritizing risk factors for the Global Burden of Disease
	GPH-GU 5410 Results Focused Strengthening of Health Systems in LMICs	**Lesson 2.** Overview of health system platforms, tracers, bottlenecks, and strategies to reduce bottlenecks **HW:** Responses to class dialogue, review questions and assignment on analyzing current performance and priority bottlenecks for each health system platform
	GPH-GU 5420 Monitoring and Management of Public Health Programs for Equity	**Lesson 3.** Monitoring as a management tool for equity **HW:** Responses to class dialogue, review questions and assignment on evaluating the relevance and user-friendliness of global databases on equity in health **Lesson 4.** Monitoring equity of coverage with child survival intervention packages **HW:** Responses to class dialogue, review questions and assignment on analyzing equity gaps in coverage with child survival intervention packages **Lesson 5.** Monitoring equity of under age 5 mortality **HW:** Responses to class dialogue, review questions and assignment on analyzing equity gaps in under-5 mortality **Lesson 7.** Monitoring coverage bottlenecks underlying inequities in intervention coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the size and evolution of coverage bottlenecks between the poorest and least poor

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
3. Select evidence-based planning and evaluation methods, and apply these to context specific theories of change for interventions, health systems, or equity in health	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 4.** Evidence-based, high-impact child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on priority child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 5.** Platforms, a continuum of care, and packaging of child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on selecting platforms and packages to deliver the priority interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay **Lesson 8.** Strategies and effect sizes to reduce bottlenecks in child survival intervention coverage **HW (Live Section):** Responses to class dialogue, review questions and assignment on strategies to reduce bottlenecks in child survival intervention coverage **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 9.** Modeling expansion of coverage frontiers for child survival interventions **HW (Live Section):** Responses to class dialogue, review questions and assignment on anticipated expansion of coverage frontiers for child survival interventions **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 10.** impact of changes in intervention coverage on under-5 and neonatal mortality **HW (Live Section):** Responses to class dialogue, review questions and assignment on anticipated impact of changes in intervention coverage on child mortality **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation **Lesson 14.** Modeling health returns on investment and investment planning for accelerated child survival **HW (Live Section):** Responses to class dialogue, review questions and assignment on modeling health returns on investment and developing of an investment plan for accelerated child survival **HW (Online Section):** Multiple choice questions; moderated forum discussion; two- to three-page individual essay; final team PowerPoint presentation

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 5240 Budgeting for Sustainable Health Returns on Investments	**Lesson 2.** Overview of bottlenecks and strengthening health system platforms **HW:** Responses to class dialogue, review questions and assignment on analyzing current coverage frontiers for each health system platform **Lesson 3.** Modeling coverage frontiers for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modeling the expansion the coverage frontiers, review questions and assignment on modeling the levels of universal health coverage achievable **Lesson 4.** Modeling health impacts of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modeling the health impacts of the levels of universal health coverage achievable by expanding the coverage frontiers
	GPH-GU 5410 Results Focused Strengthening of Health Systems in LMICs	**Lesson 3.** Modeling effects of strategies on actual coverage of health system platforms **HW:** Responses to class dialogue, review questions and assignment on customizing the coverage modeling tool for each health system platform **Lesson 4.** Strengthening health system platforms by improving the availability of health commodities **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving the availability of health commodities and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 5.** Strengthening health system platforms by improving the availability of health staff **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving the availability of health staff and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 6.** Strengthening health system platforms by improving geographic access **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving geographic access and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 7.** Strengthening health system platforms by improving financial affordability **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving financial affordability and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 8.** Strengthening health system platforms by improving sociocultural acceptability **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving sociocultural acceptability and modeling their effects on expanding coverage frontiers of health system platforms

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
		Lesson 9. Strengthening health system platforms by improving user compliance **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for Improving user compliance and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 10.** Strengthening health system platforms by improving provider compliance **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies for improving provider compliance and modeling their effects on expanding coverage frontiers of health system platforms **Lesson 11.** Anticipated impact of strengthening health system platforms **HW:** Responses to class dialogue, review questions and assignment on modeling the impact of taking the selected priority health system strengthening strategies to scale **Lesson 12.** Additional costs of strengthening health system platforms **HW:** Responses to class dialogue, review questions and assignment on modeling the additional costs of taking the selected priority health system strengthening strategies to scale **Lesson 13.** Financing the strengthening of health system platforms **HW:** Responses to class dialogue, review questions and assignment on identifying financing options for taking the selected priority health system strengthening strategies to scale **Lesson 14.** Modeling health returns on investment and investment planning for health system strengthening **HW:** Responses to class dialogue, review questions and assignment on modeling the health returns on investment of taking the selected priority health system strengthening strategies to scale
	GPH-GU 5420 Monitoring and Management of Public Health Programs for Equity	**Lesson 10.** Equity focused strategies and their effect sizes on coverage of the poorest **HW:** Responses to class dialogue, review questions and assignment on prioritizing strategies based on bottlenecks addressed and effect size in the poorest **Lesson 11.** Modeling effects of strategies on equity of coverage **HW:** Responses to class dialogue, review questions and assignment on modeling effects of selected priority strategies on equity of coverage **Lesson 12.** Modeling impact of strategies on equity of child survival **HW:** Responses to class dialogue, review questions and assignment on modeling impact of selected priority strategies on equity of child mortality

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
4. Categorize health related targets within the Sustainable Development Goals according to global burden of disease, disease control priorities and health system platforms	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 1.** Conceptual framework and overview of health-related targets for the Sustainable Development Goals (SDGs) **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for priority health-related SDGs **Lesson 2.** Overview of health system platforms, bottlenecks, and health system strengthening for the SDGs **HW:** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks and health system strengthening strategies for each health system platform
5. Select and apply, as a member of interdisciplinary (or multisectoral) team, communication strategies to advocate for intervention policies, system strengthening and equitable strategies, or investments	GPH-GU 5380 Data-driven Decision Making in Public Health (Note: this course is offered in both online and live [in person] formats.)	**Lesson 15.** Group presentation of investment case for accelerated child survival and individual one- page paper and presentation of competencies acquired and their career relevance **Group presentation (Live Section):** investment case for accelerated child survival; individual papers and dialogue on competencies acquired and their career relevance **Group presentation (Online Section):** Team presentation of investment case for accelerated child survival
	GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs	**Lesson 15.** Group presentation of investment case for priority health-related SDGs and individual one-page paper and presentation of competencies acquired and their career relevance **HW:** Group presentation of investment case for priority health-related SDG targets; individual papers and dialogue on competencies acquired and their career relevance
	GPH-GU 5240 Budgeting for Sustainable Health Returns on Investments	**Lesson 15.** Group presentation of investment case for universal health coverage and individual one-page paper and presentation of competencies acquired and their career relevance **Group presentation:** Investment case for sustainable universal health coverage and individual one-page paper and presentation of competencies acquired and their career relevance
	GPH-GU 5410 Results Focused Strengthening of Health Systems in LMICs	**Lesson 15.** Group presentation of investment case for strengthening health systems and individual one-page paper and presentation of competencies acquired and their career relevance **HW:** Group presentation of investment case for strengthening health systems and individual one-page paper and presentation of competencies acquired and their career relevance
	GPH-GU 5420 Monitoring and Management of Public Health Programs for Equity	**Lesson 15.** Group presentation of investment case for equity in health and individual one-page paper and presentation of competencies acquired and their career relevance **HW:** Group presentation of investment case for equity in health and individual one-page paper and presentation of competencies acquired and their career relevance

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
6. Critically assess the different components of the global health governance infrastructure, and health systems designs in different global contexts	GPH-GU 5410 Results Focused Strengthening of Health Systems in LMICs	**Lesson 1.** Overview of global health architecture concepts and investment planning for health system strengthening **HW:** Responses to class dialogue, review questions and one-page papers on investment planning concepts, global health architecture, and health system design
	GPH-GU 5240 Budgeting for Sustainable Health Returns on Investments	**Lesson 1.** Overview of cost and financing challenges of universal health coverage **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for sustainable universal health coverage **Lesson 2.** Overview of bottlenecks and strengthening health system platforms **HW:** Responses to class dialogue, review questions and assignment on analyzing bottlenecks for each health system platform, review questions and assignment on analyzing current coverage frontiers for each health system platform **Lesson 7.** The cost-benefits and expanded cost-effectiveness of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on analyzing current coverage frontiers and bottlenecks for each health system platform **Lesson 8.** Sources and mechanisms for financing universal health coverage **HW:** Responses to class dialogue, review questions and assignment on analyzing the prevalence of catastrophic, impoverishing, and immiserizing out-of-pocket spending on health **Lesson 9.** Catastrophic, impoverishing, and immiserizing out-of-pocket spending on health **HW:** Responses to class dialogue, review questions and assignment on identifying alternative financing mechanisms to reduce out-of-pocket spending on health **Lesson 10.** Equitable financing mechanisms for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modeling an indicative price for performance-based financing of a priority health intervention **Lesson 11.** Performance-based financing for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the allocation of funds to health staff and facilities and transport in the national health budget to the additional costs of achieving universal health coverage. **Lesson 12.** Budgeting for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on identifying opportunities and constraints for increasing fiscal space for health

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 5220 Accelerating Progress Towards Health- Related SDGs	**Lesson 1.** Conceptual framework and overview of health-related targets for the Sustainable Development Goals (SDGs) **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for priority health-related SDGs **Lesson 2.** Overview of health system platforms, bottlenecks, and health system strengthening for the SDGs **HW:** Responses to class dialogue, review questions and assignment on prioritizing bottlenecks and health system strengthening strategies for each health system platform
7. Select and apply methods for analyzing costs, health returns on investment, budget and sustainability as appropriate	GPH-GU 5420 Monitoring and Management of Public Health Programs for Equity	**Lesson 6**. Monitoring impoverishing and immiserizing out-of-pocket spending **HW:** Responses to class dialogue, review questions and assignment on analyzing the contribution of out-of-pocket spending to impoverishment in poor and extreme poor groups **Lesson 8.** Monitoring excess costs of changes in equity of coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the costs of changes in intervention coverage between the poorest and least poor **Lesson 9**. Monitoring cost-effectiveness of changes in equity of coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the # of lives saved per $1 million invested between the poorest and least poor **Lesson 13.** Modeling excess costs of equity-focused strategies **HW:** Responses to class dialogue, review questions and assignment on modeling the costs of selected priority strategies in the poorest and least poor **Lesson 14.** Modeling health returns on investment and investment planning for equity in health **HW:** Responses to class dialogue, review questions and assignment on modeling the health returns on investment of selected priority strategies in the poorest and least poor
	GPH-GU 5240 Budgeting for Sustainable Health Returns on Investments	**Lesson 1.** Overview of cost and financing challenges of universal health coverage **HW:** Responses to class dialogue, review questions and one-page papers on concepts and investment planning for sustainable universal health coverage **Lesson 5.** Modeling costs of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modeling the additional costs of the levels of universal health coverage achievable by expanding the coverage frontiers

Table D4-1i Assessment of Competencies for MPH in Sustainable Development Goals (SDG) Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
		Lesson 6. Cost-effectiveness of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on synthesizing the anticipated cost-benefits and expanded cost-effectiveness of achieving universal health coverage **Lesson 7.** The cost-benefits and expanded cost-effectiveness of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on analyzing current coverage frontiers and bottlenecks for each health system platform **Lesson 8.** Sources and mechanisms for financing universal health coverage **HW:** Responses to class dialogue, review questions and assignment on analyzing the prevalence of catastrophic, impoverishing, and immiserizing out-of-pocket spending on health **Lesson 9.** Catastrophic, impoverishing, and immiserizing out-of-pocket spending on health **HW:** Responses to class dialogue, review questions and assignment on identifying alternative financing mechanisms to reduce out-of-pocket spending on health **Lesson 10.** Equitable financing mechanisms for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modeling an indicative price for performance-based financing of a priority health intervention **Lesson 11.** Performance-based financing for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the allocation of funds to health staff and facilities and transport in the national health budget to the additional costs of achieving universal health coverage. **Lesson 11.** Performance-based financing for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the allocation of funds to health staff and facilities and transport in the national health budget to the additional costs of achieving universal health coverage. **Lesson 12.** Budgeting for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on identifying opportunities and constraints for increasing fiscal space for health **Lesson 13.** Modeling fiscal space scenarios for universal health coverage **HW:** Responses to class dialogue, review questions and assignment on comparing the additional costs of achieving universal health coverage to the current and modeled 2030 health expenditure **Lesson 14.** Modeling sustainability of universal health coverage **HW:** Responses to class dialogue, review questions and assignment on modelling the # of lives saved per $1 million invested of the levels of universal health coverage achievable by expanding the coverage frontiers

Table D4-1j Assessment of Competencies for MPH in Social and Behavioral Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Critically assess the literature related to social and behavioral aspects of health	GPH-GU 2960 Theories in Public Health Practice, Policy, and Research	**Annotated bibliography:** Students will complete annotations for the weekly readings, focusing on readings that illustrate how theories and concepts are applied in public health and/or to highlight current debates and controversies of interest. The goal is to stimulate critical thinking and prepare students to take a position and explain their perspective. **Final Paper:** Students will choose two or more distinct theories and critically analyze their merits and drawbacks with respect to a public health problem of interest to them.
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Annotated Bibliography** **Statement of Problem/Research Questions** **Literature Review** **Thesis Proposal**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: Interpret and discuss results of the research study in the context of existing scientific knowledge, including assessing limitations and public health implications
2. Explain major theories, trends, and debates in the social and behavioral sciences literature regarding health	GPH-GU 2960 Theories in Public Health Practice, Policy, and Research	**Annotated bibliography:** Students will complete annotations for the weekly readings, focusing on readings that illustrate how theories and concepts are applied in public health and/or to highlight current debates and controversies of interest. The goal is to stimulate critical thinking and prepare students to take a position and explain their perspective. **Midterm Paper:** Critical review of theories, approaches, and models **Final Paper:** Students will choose two or more distinct theories and critically analyze their merits and drawbacks with respect to a public health problem of interest.
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Annotated Bibliography** **Literature Review** **Thesis Proposal**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: Interpret and discuss results of the research study in the context of existing scientific knowledge, including assessing limitations and public health implications

Table D4-1j Assessment of Competencies for MPH in Social and Behavioral Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
3. Assess the means by which structural bias & social inequities undermine health & create challenges to achieving health equity at the behavioral, community & societal levels	GPH-GU 2960 Theories in Public Health Practice, Policy, and Research	**Annotated bibliography:** Students will complete annotations for the weekly readings, focusing on readings that illustrate how theories and concepts are applied in public health and/or to highlight current debates and controversies of interest. The goal is to stimulate critical thinking and prepare students to take a position and explain their perspective. **Midterm Paper:** critical review of theories, approaches, and models **Final Paper:** Students will choose two or more distinct theories and critically analyze their merits and drawbacks with respect to a public health problem of interest.
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Annotated Bibliography** **Statement of Problem/Research Questions** **Literature Review** **Thesis Proposal**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: Interpret and discuss results of the research study in the context of existing scientific knowledge, including assessing limitations and public health implications
4. Apply the methods and analytic tools of social and behavioral science to design, implement, and analyze evaluation or research studies	GPH-GU 2361 Research Methods in Public Health	**Survey Draft** **Survey Presentations** **Focus Group Exercise** **Focus Group Moderator Guide** **Coding Focus Groups** **Midterm** **Final Project**
	GPH-GU 2160 Qualitative and Field Methods	**HW 1:** Formulate a research question **HW 2:** Describe sampling methodology **HW 3:** Develop a Topic Guide and consent form **HW 4:** Conduct and transcribe an interview **HW 5:** Coding interview transcript **HW 7:** Final Paper
	GPH-GU 2353 Regression I: Linear Regression and Modeling	**Lecture 3 and HW 2:** Simple Linear Regression Models: Transformations **Lecture 4 and HW 3:** Simple Linear Regression Models: Categorical Predictors **Lecture 5 and HW 4:** Multiple Linear Regression Models: Introduction **Quizzes 1 and 2** **Midterm Exam**

Table D4-1j Assessment of Competencies for MPH in Social and Behavioral Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
	GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 4:** Hypothesis testing and interpretation **HW 5:** Inference **HW 6:** Moderation and categorical outcomes **HW 7**: Bias and confounding **HW 8:** Poisson Models **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**Methods of Data Analysis Plan Assignment** **Thesis Proposal**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: write results section of a research paper, including descriptions of study population, independent, dependent and covariates, and main and related study findings
5. Apply ethical principles to public health research and evaluation	GPH-GU 2361 Research Methods in Public Health	**Survey Draft** **Focus Group Exercise** **Midterm** **Final Project**
	GPH-GU 2160 Qualitative and Field Methods	**HW 7:** Final paper
	GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences	**CITI Certification**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: write a professional-quality, ethically sound thesis that develops a clear argument based on a research question

Table D4-1j Assessment of Competencies for MPH in Social and Behavioral Sciences Concentration		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
6. Disseminate research findings to diverse audiences	GPH-GU 2361 Research Methods in Public Health	**Survey Draft** **Survey Presentations** **Focus Group Exercise** **Focus Group Moderator Guide** **Coding Focus Groups** **Midterm** **Final Project**
	GPH-GU 2160 Qualitative and Field Methods	**HW6:** Presentation of abstract **HW7:** Final Paper
	GPH-GU 2353 Regression I: Linear Regression and Modeling	**Lecture 5 and HW 4:** Multiple Linear Regression Models: Introduction **Lecture 9 and HW 8:** Moderated Effects I: Interactions **Lecture 11 and HW 10:** Mediation and Path Analysis **Final Exam**
	GPH-GU 2354 Regression II: Categorical Data Analysis	**HW 6:** Moderation and categorical outcomes **HW 10:** Model selection **Midterm Exam** **Final Exam**
	GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences	**Thesis**: present study findings in both oral and written formats for diverse audiences (in-Class oral presentation) **Poster**

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

Not applicable. GPH does not permit students to develop individually tailored competencies.

3) Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus.

The most recent syllabus for each course listed in Tables D4-1a through D4-1j is included in ERF D4.3. Exams and assignments for these courses are also provided. Please note that exams and some assignments in the ERF are from AY 2017-18 as the academic year has recently started.

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

Strengths:

The self-study provided the opportunity for each department's and program's faculty to collaboratively develop or review the competencies for each of its concentration offerings and map them to specific concentration courses. The process enabled us to ensure that concentration curricula are helping students develop key skills needed for future work as public health professionals in each discipline. As a result, new courses were developed for Biostatistics and Public Health Policy and Management, to be offered for the first time in AY 2018–19. Therefore, we expect to fully implement the new competency requirements by the Spring 2019 semester.

Weaknesses:

Two competencies for the Environmental Public Health Sciences concentration are not currently directly addressed in the course GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs.

Plans:

We are in the process of revising the course GPH-GU 5220 Accelerating Progress Towards Health-Related SDGs, and the revision will include the Environmental Public Health Sciences competencies. The revised syllabus will be available by the end of December 2018, and the revised course will be implemented in the Spring 2019 semester.

In AY 2018–19, we plan to initiate a review of concentration competencies to assess the need for any changes in competencies or courses. The Office of Academic Affairs will coordinate these activities in collaboration with the Academic Affairs Committee and academic departments and programs.

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D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

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

The school assesses each student's competency attainment in practical and applied settings through a portfolio approach, which demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, journal entries, completed tests, projects, videos, multimedia presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the school or by individual students) in any physical or electronic form chosen by the school.

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

All MPH students are required to complete a minimum of 180 hours of an Applied Practice Experience (APE), which take place in a variety of settings, including the local health department, international health agencies, non-profit and non-government organizations, advocacy organizations, foundations, healthcare facilities, health-related businesses, and academic institutions. Students conduct their APE either domestically or abroad over the summer or in the fall of their final year in the program.

Students also enroll in a course focusing on practice and professional development issues and preparation of the APE portfolio. As shown in Table D5-A below, the specific course to be taken depends on the student's concentration.

Academic years (AY) 2017–18 and 2018–19 are transitional years in implementing the final structures for several courses in order to accommodate the new APE criteria. It should be noted that all students were required to meet all the APE criteria regarding addressing at least five competencies and preparing portfolio products as of AY 2017–18. The transitional course structures are described further below and delineated in Table D5-A.

In AY 2017–18 and prior years, we offered an Internship course as a single semester course taken in fall or spring by students in several MPH concentrations. Internship course requirements were changed to a two-semester format for incoming AY 2018–19 students in order to better facilitate addressing the new accreditation criteria. The syllabi provided in the Electronic Resource File are for the new two-semester course sequence that commences in AY 2018–19.

AY 2017–18 and AY 2018–19 are transitional years for students in the Global Health concentration who, as in previous years, enroll in a Capstone course to fulfill the practice and culminating experience requirements through a group project conducted in global or domestic settings. The Capstone course was revised in AY 2017–18 to meet the new criteria for the APE and Integrative Learning Experience (ILE), and will be offered as a one-semester course starting in Spring 2019. In AY 2018–19, Global Health students who entered the program before the new internship requirement was instituted will have the option of doing the group Capstone Project or an individual internship. Starting AY 2019–20, all Global Health students, including dual degree students, will be required to do an internship and take the two-semester internship courses. The Capstone course will become a one-semester elective open to students from any concentration, based on an application process. We note that the current Capstone course, offered in Spring 2018 and available next in Spring 2019, was redesigned to meet

the new APE criteria. All dual degree students complete their APE at GPH as part of the Global Health concentration. Under faculty guidance, dual degree students incorporate learning from both degree programs into their APE project.

The table below summarizes the APE requirements for AY 2017–18 and AY 2018–19, for each concentration.

Table D5-A APE Requirements for Each MPH Concentration

Concentration	Applied Practice Experience Requirements
• Community Health Science and Practice • Public Health Nutrition • Public Health Policy • Public Health Policy and Management • Environmental Public Health Sciences • Sustainable Development Goals (SDG) (starting in AY 2019–20)	AY 2017–18: • 180 hours of internship at external site under supervision of a preceptor (summer or fall) • GPH-GU 2360 Internship Seminar (fall semester) AY 2018–19: • 180 hours of internship at external site under supervision of a preceptor (summer or fall) • GPH-GU 2359 Internship I: Applied Practice Experience Seminar (fall semester)
• Global Health (includes all dual degree students)	AY 2017–18: • 180 hours conducting Capstone project working with external agency (fall and January terms) • GPH-GU 2621 Capstone I (fall semester) • GPH-GU 2622 Capstone II (spring semester) AY 2018–19: • 180 hours conducting Capstone project working with external agency (fall and January terms) • GPH-GU 2621 Capstone (to be offered as a single semester course in spring) ***OR*** • 180 hours of internship at external site under supervision of a preceptor (summer or fall) • GPH-GU 2359 Internship I: Applied Practice Experience Seminar (fall semester) AY 2019–20: • 180 hours of internship at external site under supervision of a preceptor (summer or fall) • GPH-GU 2359 Internship I: Applied Practice Experience Seminar (fall semester)
• Biostatistics • Epidemiology • Social and Behavioral Sciences	(no change) • 180 hours of applied research practice at external site under supervision of a preceptor (summer) • GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences (fall semester)

The process for ensuring that students attain specific foundational and concentration competencies involves several components:

1. Students develop a Learning Contract before starting the APE, in which each student identifies the specific competencies to be developed. The Learning Contract template requires students to identify at least three foundational competencies and two concentration competencies associated with APE activities and products. Learning Contracts are reviewed and approved by designated concentration faculty. The same concentration faculty reviews the student's APE progress reports.
2. The portfolio products that each student produces based on the APE are reviewed by the designated concentration faculty to assess attainment of at least five specific competencies identified by students. Critical reflection essays by students explaining the competency development process are reviewed by course faculty.

We provide in ERF D5.1 the Template D5-1 matrices that identify the competencies and practice-based products for five students from each concentration. We include materials only from AY 2017–18 when the new accreditation requirements were implemented. The SDG concentration was initiated in AY 2017–18, and therefore to date no students have completed the APE requirement.

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

The following materials are included in Resource File D5.2:

1. Guidelines and guides for the APE
2. Facsimiles of practice sections of the GPH website providing information on relevant policies and procedures
   - Applied Practice Experience Webpage (link)
   - Capstone Webpage (due to the transitional status of this course, this page is under construction. The ERF includes information previously included on the website)
   - Internship Webpage (link)
   - Thesis Webpage and (link)
3. Applied Practice Learning Contract template
4. Syllabi for the APE-related courses (note: syllabi include guidelines for APE portfolios):
   - GPH-GU 2359 Internship I: Applied Practice Experience Seminar (new course starting Fall 2018)
   - GPH-GU 2686 Thesis I: Practice and Integrative Learning Experiences
   - GPH-GU 2622 Capstone II (transitional course offered in AY 2017–18)
5. Additional guidelines for APE portfolio
6. Assessment rubrics used in evaluating APE portfolios
7. Student and preceptor APE evaluation templates.

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

Samples of practice-related materials demonstrating competency attainment for five students from each MPH concentration are presented in Resource File D5.1. We include materials only from AY 2017–18, when the new accreditation requirements were implemented. As noted above, students in the SDG concentrations have not yet progressed to the internship.

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

Strengths:

We have successfully developed approaches to meet the new APE requirements, which are tailored to the educational goals of each MPH concentration. We made the changes necessary to address the new APE requirements and to provide an academic structure to support students in conducting their APE. Each MPH concentration is in compliance with APE requirements.

Weaknesses:

As the College has rapidly grown, we have found it challenging to meet the needs of our students in planning their APE. Student feedback indicates a desire for additional faculty and administrative support in this process.

Plans:

Starting with the APE conducted in Summer 2018, we are implementing a new system for pairing faculty with students in order to provide better mentoring and continuity across the practice experience. Designated faculty members are responsible for assisting individual students in developing the Learning Contract, monitoring their progress during fieldwork, and assessing their APE portfolio products.

To address the need for further support for the APE, we recently hired a new Director of Public Health Practice on a clinical faculty line to oversee and coordinate the process across all concentrations and to help provide additional planning support for students. We also recently hired another clinical faculty member with responsibility for providing support to internship students.

As noted in Section B6 above, the Practice Committee developed a number of recommendations to improve the APE (see minutes from the November 30, 2017, meeting of Practice Committee in ERF D5.4); the newly hired GPH Director of Public Health Practice will be responsible for overseeing implementation of these recommendations.

D6. DrPH Applied Practice Experiences

Not applicable.

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D7. MPH Integrative Learning Experiences

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

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

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

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

Table D7-1a MPH Integrative Learning Experience for Community Health Science and Practice, Environmental Public Health Sciences, Global Health (starting AY 2018–19), Public Health Management, Public Health Nutrition, Public Health Policy, and Sustainable Development Goals Concentrations	
Integrative learning experience (list all options)	**How competencies are synthesized**
Poster presentation	Students identify competencies in consultation with course faculty and discuss approach to synthesizing across the various sections of the poster. Faculty use a rubric to assess each student's ability to synthesize competencies in a cogent, methodologically sound short presentation format.
Final report to internship organization	Students identify competencies in consultation with course faculty. Each student writes a mock final report to the internship organization based on the student's applied practice project that discusses public health issues addressed by the project, methods used, major findings, and recommendations. Faculty use a rubric to assess each student's ability to synthesize competencies in a cogent, methodologically sound report.
Critical reflection essay	Written discussion of how final report helped student synthesize and apply specific competencies involving public health theories, concepts, methods, and practices learning in specific courses. Faculty use a rubric to assess each student's ability to synthesize across the learning experience.

Note: all of the above assignments are required for all internship students.

Table D7-1b MPH Integrative Learning Experience for Biostatistics, Epidemiology, and Social and Behavioral Sciences Concentrations	
Integrative learning experience (list all options)	**How competencies are synthesized**
Thesis	Specific concentration competencies are identified for all students in each concentration. Faculty use a rubric to assess the student's ability to synthesize competencies in a final format (i.e., journal-type manuscript, grant proposal, evaluation proposal).
Poster presentation	Specific concentration competencies are identified for all students in each concentration. Course instructor assesses each student's ability to synthesize competencies in a cogent, methodologically sound visual presentation for diverse audiences that presents a specific research question and the related findings and implications.
Oral presentation of thesis	Specific concentration competencies are identified for all students in each concentration. Course instructor uses a rubric to assess each student's ability to synthesize competencies in a short oral presentation format that presents research findings in the context of previous work and public health theories, demonstrates a sound methodological approach, and critically discusses implications.

Note: all of the above assignments are required for all thesis students.

Table D7-1c MPH Integrative Learning Experience for Global Health Concentration (AY 2017–18; optional format in AY 2018-19)

Integrative learning experience (list all options)	How competencies are synthesized
Editorial (individual)	Each student writes an editorial-style paper using their in-country Capstone experience, as well as any relevant readings in the literature, which assesses the problem researched in their assigned country examining both individual and institutional factors. This paper is meant to demonstrate synthesis of the following competencies: (1) perform strategic assessment and evaluation to analyze factors shaping individual and institutional behaviors and measure their impact and (2) select communication strategies for different audiences and sectors.
Program/policy brief (individual)	Each student writes a program proposal that advocates for a cost-effective intervention/program aimed at progressing the public health topic of the student's Capstone project. This paper is meant to demonstrate synthesis of the following competencies: (1) advocate for cost-effective policies and strategies to accelerate progress towards the health-related sustainable development goals (SDGs) and (2) communicate audience appropriate public health content both in writing and through oral presentation.
Capstone project paper (group)	Students synthesize the public health approaches that they have learned and practiced through their team-based project. This includes conducting analysis of data, reporting of findings, applying best practices related to cultural competency and communication strategies, and interpreting results from the Capstone project.
Final presentation and poster of Capstone project (group)	The final poster and presentation are based on the Capstone project and synthesize the following elements of a professional project report: (1) statement of the problem or topic for the Capstone project, (2) rationale for this work/the gaps in knowledge that the project will address, (3) significance of the work, public health, population health, and/or clinical implications of the work, (4) theoretical framing guiding the work, paradigm or theory that informs the project (5) description of agency with whom the team worked; (6) project aims; (7) project methods; (8) main findings in relation to the study aims; (9) conclusions; (10) recommendations.

Note: all of the above are required for all Capstone students.

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

All students are required to produce an Integrative Learning Experience (ILE). The nature of the product varies by concentration, as shown in Tables D7-1a-c. Students also take courses to support development of the ILE, which vary by concentration, with students from multiple concentrations in a given course. Please note that in Academic Year (AY) 2017–18 and earlier, Global Health students, including those in the dual degree program, completed a group Capstone project in fulfillment of the ILE requirement. AY 2018–19 is a transition year whereby students may choose the group Capstone project or an individual internship to fulfill the ILE requirement. In AY 2019–20, all Global Health students will be required to complete the requirement based on an individual internship project.

Students enroll in courses to support them in preparing their ILE products. Courses vary by concentration. Internship students focus on developing their ILE products in their final spring semester and enroll in GPH-GU 2360 Internship II: Culminating Experience Seminar. Thesis students focus on developing their thesis over the fall and spring semesters of their final year and enroll in GPH-GU 2686: Thesis I (fall) and GPH-GU 2687: Thesis II (spring).

As discussed above, the Global Health concentration, including dual degrees, is transitioning to the internship format for the ILE in lieu of the group Capstone project. Students in the Sustainable Development Goals concentration will enroll in a two-semester course sequence similar to the internship courses beginning in AY 2019–20. The current Capstone course was redesigned to meet the new ILE requirements during the transition period. All dual degree students complete their ILE at GPH as part of the Global Health concentration. Under faculty guidance, dual degree students incorporate learning from both degree programs into their ILE product.

The table below identifies the courses taken by students in each concentration.

Table D7-A Courses Associated with the Integrative Learning Experience for Each MPH Concentration

Concentration	Integrative Learning Experience Course
• Community Health Science and Practice • Public Health Nutrition • Public Health Policy • Public Health Management • Environmental Public Health Sciences • Sustainable Development Goals—SDG (starting in AY 2019–20)	AY 2017-18: • GPH-GU 2360 Internship Seminar AY 2018-19: • GPH-GU 2360 Internship II: Culminating Experience Seminar
• Global Health (including dual degrees)	AY 2017–18: • GPH-GU 2622 Capstone II AY 2018–19: • GPH-GU 2621 Capstone (to be offered as a single semester course in Spring 2018) ***OR*** • GPH-GU 2360 Internship II: Culminating Experience Seminar AY 2019–20: • GPH-GU 2360 Internship II: Culminating Experience Seminar
• Biostatistics • Epidemiology, including Cross-Continental option • Social and Behavioral Sciences	(No change) GPH-GU 2686 Thesis I and GPH-GU 2687 Thesis II: Practice and Integrative Learning Experiences

The processes, expectations, and assessment for each ILE depend on the specific course (shown in the above table). While the nature of the ILE varies depending on the course and concentration, all encompass the following:

- Clear criteria for what constitutes the ILE for each concentration: General guidelines and criteria for the ILE are included in the syllabus for each course. All ILEs involve a synthesis of competencies learned in the classroom and practice experiences.
- Specification of competencies associated with the ILE: In some concentrations, common competencies are associated with specific products, while in others the competencies vary depending on the nature of the student's applied practice experience or thesis. In the case of the latter, course faculty advise students on identifying appropriate competencies. Course syllabi describe how competencies are specified.
- Faculty review, assessment, and feedback for each student's ILE products: The process varies by course:
    - Thesis students work with thesis course faculty during the fall to develop the thesis proposal. The course faculty then provides feedback and assessment. In the spring semester, thesis students work more centrally with designated faculty thesis advisors who guide them through the analysis and interpretation of the research inquiry and provide feedback and assessment of the final thesis product. Thesis course faculty review the poster component of the ILE.
    - Internship course faculty serve to guide, provide feedback, and assess the agency mock report component of the ILE and concentration faculty review student posters. During the transitional years for Global Health students, Capstone faculty are responsible for these activities.

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

Policies and procedures are discussed in more detail in the syllabi for each of the ILE courses listed in the table above (see ERF D7.3).

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

ILE guidelines and assessment rubrics for each course are provided in ERF D7.4.

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

Samples from each concentration are provided in ERF D7.5. We include materials only from AY 2017–2018, when the new ILE requirements were implemented.

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

Strengths:

We have successfully developed approaches to meet the new ILE requirements that are tailored to the educational goals of the various MPH concentrations. We have made necessary changes to the ILE-related courses to address the new requirements and provide an academic structure to support students in developing their ILE. Each ILE is assessed by a faculty member. All concentrations are in compliance with the ILE requirement.

Weaknesses:

None noted.

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D8. DrPH Integrative Learning Experiences

Not applicable.

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D9. Public Health Bachelor's Degree General Curriculum

Not applicable.

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D10. Public Health Bachelor's Degree Foundational Domains

Not applicable.

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D11. Public Health Bachelor's Degree Foundational Competencies

Not applicable.

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D12. Public Health Bachelor's Degree Cumulative and Experiential Activities

Not applicable.

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D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

Not applicable.

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D14. MPH Program Length

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

Schools and programs use university definitions for credit hours.

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

Completing an MPH at GPH requires a minimum of 46 credits, regardless of degree option or concentration.

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

The GPH credit hour policy is consistent with NYU's policy (see NYU policy document in ERF D14.1) in accordance with the Middle States Commission on Higher Education's credit hour policy (see MSCHE credit hour policy document in ERF D14.1). NYU's policy was reviewed and approved by the Middle States Commission on Higher Education in 2014. At GPH, one contact hour per week throughout the 15-week semester is equivalent to one credit. The majority of courses at GPH are three credits. The number of contact hours is a minimum of 15 hours per one-credit course, or a minimum of 45 hours per three-credit course. In accordance with the New York State Education Department, GPH defines a credit as at least 15 hours (of 50 minutes each) of instruction and at least 30 hours of supplementary assignments.

Dual degree students are required to take a total of 46 credits to complete the MPH.

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D15. DrPH Program Length

Not applicable.

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D16. Bachelor's Degree Program Length

Not applicable.

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D17. Public Health Academic Master's Degrees

Not applicable.

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D18. Academic Public Health Doctoral Degrees

These students also complete coursework and other experiences, outside of the major paper or project, that substantively address scientific and analytic approaches to discovery and translation of public health knowledge in the context of a population health framework.

These students complete doctoral-level, advanced coursework and other experiences that distinguish the program of study from a master's degree in the same field.

The school defines appropriate policies for advancement to candidacy, within the context of the institution.

Finally, student's complete coursework that provides a broad introduction to public health. This introduction to public health addresses the learning objectives listed in this criterion, at an appropriate level of complexity. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

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

1) **List the curricular requirements for each non-DrPH public health doctoral degree in the unit of accreditation, EXCLUDING requirements associated with the final research project. The list must indicate (using shading) each required curricular element that a) is designed expressly for doctoral, rather than master's, students or b) would not typically be associated with completion of a master's degree in the same area of study.**

   The school may present accompanying narrative to provide context and information that aids reviewers' understanding of the ways in which doctoral study is distinguished from master's-level study. This narrative is especially important for institutions that do not formally distinguish master's-level courses from doctoral-level courses.

   The school will present a separate list for each degree program and concentration as appropriate.

   Background:

   The PhD in Public Health was an accredited degree program at NYU's Steinhardt School of Culture, Education, and Human Development for several years prior to its transfer to GPH, when the College was formed in 2015. Students enrolled in the PhD program at Steinhardt were given an option to complete their degrees at Steinhardt or transfer to GPH with the understanding that their coursework and terms at Steinhardt would be honored. Three students from Steinhardt transferred to GPH, all of whom will graduate by the end of calendar year 2018. Concurrently, the first GPH cohort was admitted into GPH's PhD in Public Health program in 2015. The fifth cohort enrolled in AY 2018-19.

   The PhD degree at GPH is a fully funded degree for students, designed to be completed on a full-time basis in five years, with a maximum allowance of seven years. A part-time PhD degree is not granted at GPH, per NYU's University-wide policy.

   GPH offers the PhD in Public Health degree with an option to choose one of three concentrations:

   - Epidemiology: specialized coursework in agent-based modeling and advanced courses in epidemiology and biostatistics that are reflected in their final dissertation

- Public Health Policy and Management: addresses research methods, legal and organizational challenges, policy issues, and management themes pertinent to public health policy and management
- Social and Behavioral Sciences: focuses on research and coursework related to mixed methods or qualitative methods. Students must produce research and publications that adopt methods and topics that reflect their concentration of study.

The PhD in Public Health is a research-focused degree that trains students to become independent researchers in a variety of settings. The research components of the PhD degree include activities related to data collection, data analysis, scientific report writing, peer-reviewed publication, and dissemination of work to scientific audiences. The coursework emphasizes quantitative and qualitative research design and methodology, statistics, data analysis, and grant writing. The degree culminates in a dissertation focused on one of the three areas of concentration above.

GPH has dedicated resources for doctoral students, including office space, statistical software and data access, teaching workshops, public health librarians, and budgets for professional development opportunities, such as attending conferences. Importantly, GPH has a Director of Doctoral Studies, who ensures and oversees the quality of the doctoral program, systematically tracks progress of the doctoral students, and works closely with the department chairs and faculty mentors to ensure that the procedures and policies are being followed and that the student is gaining adequate experience. The program also offers resources to faculty mentors, including mentorship workshops.

Doctoral students have access to GPH's Office of Research. The Office provides students with personal assistance with proposals (including budget development and sponsor compliance review) and offers state-of-the-art access to funding information online (including deadlines, guidelines, policy updates, and links to federal and non-federal sponsors). The Office also conducts workshops to enhance grant-writing skills. The Office also offers competitive awards for research that doctoral students may apply for. The awards cover the cost of travel and research supplies necessary to complete students' thesis dissertation. GPH students also have access to the NYU Clinical and Translational Science Institute (CTSI), which is a central hub that catalyzes collaborative research and facilities access to essential services, resources, and expertise necessary to engage in the full spectrum of clinical research across our partners and the nationwide CTSI network.

The existing PhD program is small with limited opportunities to offer doctoral-level courses at GPH; therefore, while the College has approximately 12 doctoral-level courses, the College does allow students to enroll in doctoral courses from other NYU schools and colleges for concentration-specific courses. Nine new GPH courses at the doctoral level were approved and will be offered in Spring 2019 and onward; these new courses are primarily concentration-specific courses. All required coursework common to students in Year 1 is offered by GPH and taught by college faculty, ensuring quality control and that competencies are met.

<u>Required Curriculum</u>

a. Prerequisite Courses (18 credits)

All students entering the PhD program must satisfy the requirement of the following prerequisite courses (earning a B or better grade):

1) Epidemiology
2) Biostatistics
3) Health Policy and Management
4) Social and Behavioral Determinants
5) Environmental Health
6) Essentials of Public Health Biology

A student with an MPH from an accredited program is exempt from taking these courses. Students admitted without an MPH must complete some or all of the six prerequisite courses over the summer prior to starting the required PhD coursework. If the student cannot complete these prerequisite courses in the summer, the student may be required to take on a heavier course load in Year 1.

The majority of students admitted to the PhD program enter with either an MPH or a related master's degree. In rare cases, students are admitted with a bachelor's degree. The need to take the prerequisite courses is evaluated on a case-by-case basis after examination of the student's prior coursework by Admissions staff and the Director of Doctoral Studies. All PhD students are required to take 0-credit courses in Global Health Informatics (GPH-GU 5171) and Readings in Public Health (GPH-GU 5175, GPH-GU 5180, and GPH-GU 5185) to ensure that all foundational public health learning objectives required by CEPH are addressed.

PhD coursework (not including prerequisite courses) is a total of 39 credits. All coursework is typically completed over the first two years of enrollment. Of the 39 credits, 24 credits are required for all students, regardless of the concentration they choose, and 15 credits are concentration-specific courses. The first year of study is nearly identical for the three concentrations, as students take required PhD program courses and submit a systematic literature review as their first-year benchmark. Also in Year 1, students are required to take three 0-credit readings courses and one course on informatics to meet the 12 foundational public health learning objectives.

In Year 2, students start taking their specialization and methods courses for each concentration. Students take 9 to 12 credits in the fall semester and 9 to 12 credits in the spring semester. In addition, all students take GPH-GU 3200 Dissertation Proposal Seminar in the spring semester, which is aimed at developing the research proposal.

In Year 3 of their study, students typically defend their dissertation proposal. Subsequently, in the fourth or fifth year, students have their dissertation defense, which marks the end of the degree.

b. PhD required coursework for all concentrations (24 credits)

Courses designed especially for the doctoral program are highlighted in gray below (3000-level courses indicate doctoral-level courses; 2000-level courses are MPH level, and 5000-level indicate online courses. All courses are three credits unless indicated):

- GPH-GU 3000 Perspectives in Public Health: Doctoral Seminar Part 1 (1.5 credit)
- GPH-GU 3010 Perspectives in Public Health: Doctoral Seminar Part 2 (1.5 credit)
- GPH-GU 2930 Epidemiological Methods and Design
- GPH-GU 3050 Methods in Community Health Research
- GPH-GU 3200 Dissertation Proposal Seminar
- GPH-GU 3165 Research Ethics
- GPH-GU 2353 Regression I: Linear Regression and Modeling
- GPH-GU 2354 Regression II: Categorical Data Analysis
- GPH-GU 2960 Theories in Public Health, Practice, Policy, and Research

Online Courses

- GPH-GU 5171 Global Health Informatics Workshop (0 credit)
- GPH-GU 5175 Readings in the History and Philosophy of Public Health I (0 credit)
- GPH-GU 5180 Readings in the History and Philosophy of Public Health II (0 credit)
- GPH-GU 5185 Readings in the History and Philosophy of Public Health III (0 credit)

c. Concentration Specific Coursework

Students take the remaining 15 credits from concentration-specific courses. These courses can be doctoral-level or MPH-level GPH courses, or courses outside GPH at other NYU graduate schools as concentration electives tailored to the student's interest.

The three departments that house the concentrations in the PhD program have added a total of nine new doctoral-level courses in collaboration with the GPH Doctoral Advisory Committee, scheduled to start in Spring or Fall 2019 to provide a wider offering of advanced doctoral-level PhD courses.

Listed below are new GPH doctoral-level courses and the semester in which the course will be launched. Courses shaded in gray are required for the indicated concentration but are also open to other doctoral students.

Epidemiology (Students Choose Two of Four Courses):

- GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (Spring 2019)
- GPH-GU 3220 Experimental Study Designs in Epidemiology (Fall 2019)
- GPH-GU 3152 Advanced Agent-Based Modeling (Spring 2019)
- GPH-GU 3230 Topics in Advanced Modeling (Fall 2019)

Public Health Policy and Management:

- GPH-GU 3185 Health Services and Policy Research (Fall 2019)
- GPH-GU 3110 Advanced Public Health Policy and Management (Spring 2019)

Social and Behavioral Sciences:

- GPH-GU 3260 Complex System, Disasters, and the Social Ecology of Health (Spring 2019)
- GPH-GU 3210 Qualitative Analysis: Interviewing and Mixed Methods Approaches (Spring 2019)
- GPH-GU 3040 Intervention and Prevention Science (Spring 2019)

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

Assessment activities for each of the introductory public health learning objectives are presented in Table D18-1. These are the same courses covered in the MPH program; syllabi and assessment activities for each course listed below are included in ERF D1.2. Please note that requirements are identical for all PhD concentrations. Students who enter the PhD program with an MPH are presumed to have attained the learning objectives associated with the traditional five core public health courses. Students who do not have an MPH degree are expected to take the five core public health courses as prerequisites before entering the program. Once students enter the program, they take the following courses: Essentials of Public Health Biology, Readings in Public Health, and Public Health Informatics.

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
1. Explain public health history, philosophy and values	GPH-GU 5175 Readings in the History and Philosophy of Public Health I	Final quiz
	GPH-GU 5185 Readings in the History and Philosophy of Public Health III	Final quiz
2. Identify the core functions of public health and the 10 Essential Services	GPH-GU 5175 Readings in the History and Philosophy of Public Health I	Final quiz
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	GPH-GU 2106/5106 Epidemiology	Midterm Exam Participation in discussion sections
	GPH-GU 2995/5995 Biostatistics for Public Health	Homework 1*:* The assignment for week one includes identifying and defining key terms in statistics and differentiating between variable types and measurement scales. Midterm Exam Final Exam
	GPH-GU 2153/5153 Global Environmental Health	Assignment 5: "Shredder" video/assess hazards: Watch this video and report all the chemical, biological, physical, and safety hazards you can identify: https://youtu.be/Xn80EAikqjs?t=48s Assignment 8: EPA IRIS Lookup: Visit the U.S. EPA Integrated Risk Information System at https://www.epa.gov/iris and go to "Browse by Organ System." What organ system has the least amount of environmental agents associated with it? Exam 1

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program	GPH-GU 2106/5106 Epidemiology	Homework 1: Calculate key measures of morbidity (incidence and prevalence) and mortality (various mortality rates), and conduct direct and indirect age-adjustment. Explain how these measures provide information on the health status of a given population at a given time. Midterm Exam Participation in discussion sections
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	GPH-GU 2106/5106 Epidemiology	Final Exam
6. Explain the critical importance of evidence in advancing public health knowledge	GPH-GU 2106/5106 Epidemiology	Homework 2*:* Read a peer-reviewed, published paper describing findings from a cohort study; identify key study design characteristics as presented in the paper and key strengths and limitations of the study. Calculate and compare measures of association and impact. Homework 3*:* Read a peer-reviewed, published paper describing findings from a randomized control trial; identify key study design characteristics as presented in the paper and key strengths and limitations of the study. Homework 4*:* Review descriptions of study findings to identify sources of selection and information bias. Calculated unadjusted and adjusted measures of association to understand how confounding may bias observed study results. Read a peer-reviewed, published paper and identify key design characteristics that may have introduced sources of bias.

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
	GPH-GU 5171 Global Health Informatics Workshop	**Pre-Test** Assignment 1: Topic Proposal and Research Question Draft: participate in a discussion forum detailing the topic and research question student plans to use for final assignment. Assignment 2: Respond to two peers' forum posts. Assignment 3: After getting peer feedback, revise and post research question under the Topic Proposal Submission. Discussion Forum: Students report on the progress of their final assignment, share difficulties they have encountered, and discuss an example of the critical appraisal process. **Post-Test** Final Project**:** Students will develop a critical appraisal table of public health articles based on a research topic of their choice. The research topic must be composed of a potentially answerable and appropriately framed public health question.
7. Explain effects of environmental factors on a population's health	GPH-GU 2153/5153 Global Environmental Health	Assignment 4: Lead poisoning case study (Victorian House Renovation): Read assigned article and answer these questions: 1. How many parties (groups) were involved in this incident? 2. How was the dog poisoned? 3. Fill in the likely legal action between these groups. 4. How could this have been prevented? Assignment 9: Cosmetics Ingredients Lookup: Visit a store that advertises "cruelty-free" cosmetics (e.g., Sephora, Body Shop, Kiehl's, Lush). Pick a product that claims cruelty free, animal friendly, or no testing and take a picture of the ingredients label. Then visit the Cosmetic Ingredient Review and research three ingredients listed on the label. Report on any animal testing data you find. Feel free to comment on your impression and revelation. Exam 1
	GPH-GU 2190/5190 Essentials of Public Health Biology	Module 2 quizzes: Introduction to microbiology and infectious diseases; the immune system; NTDs and vector-borne diseases; respiratory tract diseases Module 3 quizzes: Human genetics and genomics; infectious disease genomics; gene-environment interactions and cancer; the future of public health genomics Modules 2 and 3 exams Essays 1 and 3: For each reading, write an essay of 500-words maximum summarizing the reading. It should include the main message, the scope of the public health problem, an aspect of the biological concepts that are involved, and one to two sentences on outlook (i.e., what this research can lead to).

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
8. Explain biological and genetic factors that affect a population's health	GPH-GU 2153/5153 Global Environmental Health	Assignment 6**:** View video on "Epigenetics and Public Health": Please view this fast-paced BBC video that explains Epigenetics. Expect a few questions about it on the exam. http://www.epigenesys.eu/en/in-the- news/videos/104-science-clips- for-the- public/538-epigenetics- explained-from- the-bbc Assignment 10: Hawks Next Exposure video: go to this YouTube page and view the video. Then complete the quiz of the same name under "Tests and Quizzes." Exam 1
	GPH-GU 2190/5190 Essentials of Public Health Biology	Module 1 quizzes: Introduction to public health biology; introduction to chronic diseases and heart health; impact of diabetes and metabolism; chronic diseases and aging Module 2 quizzes: Introduction to microbiology and infectious diseases; the immune system; NTDs and vector-borne diseases; respiratory tract diseases Module 3 quizzes: Human genetics and genomics; infectious disease genomics; gene-environment interactions and cancer; the future of public health Modules 1, 2, 3 exams Essays 1, 2, 3: For each reading, write an essay of 500-words maximum summarizing the reading. It should include the main message, the scope of the public health problem, an aspect of the biological concepts that are involved, and one to two sentences on outlook (i.e., what this research can lead to).
9. Explain behavioral and psychological factors that affect a population's health	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	Assignment 1: GapMinder activity: Choose one health indicator and one social indicator from the Gapminder database. Take a screenshot of your graph or a video of the graph changing over time and post it in the forum with a description of the figure and why you think it's interesting. Comment on the direction of the relationship between the health and social indicator and how that relationship changes (or stays the same) over time. If there are anomalies (e.g., a sudden increase in mortality during particular time), try to uncover possible explanations by searching the internet for scientific or news articles. Assignment 2: Neighborhood justification: Students working as a group will develop a written summary that describes a neighborhood (geographically and socio-demographically), and that presents data in tabular form that contrasts socio-demographic and health data in the neighborhood with that of the borough and citywide. The group will offer a justification as to why this health outcome is of concern in this neighborhood. The group will also present a graphic conceptual framework and accompanying test that suggests the hypothesized relationship between social, cultural, economic, or behavioral factors and the specific health outcome. Final Exam

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	Assignment 3: Literature Review: Based upon the health problem identified in the Neighborhood Project, each student will develop a literature review of three to five pages that provides the theory or evidence as to how and why social determinants are associated with the health outcome. This literature review is intended to be a broad review of the factors associated with the health problem and is not limited to any particular geographic area or neighborhood. A minimum of six peer-reviewed articles should be cited. Assignment 5: Neighborhood Presentation: Each group will present a summary of what they have learned about their neighborhood. The presentation will be styled as a community presentation, as if it was being delivered at a local Town Hall meeting. The presentation should include a description of the geography and socio-demographics of the neighborhood, and the health outcome of interest, contextualizing the data by contrasting the neighborhood with the borough and the city. The group should present their conceptual framework and discuss how their observations and the data related to the conceptual framework.
	GPH-GU 5180 Readings in the History and Philosophy of Public Health II	Reflection Essay Final Quiz
	GPH-GU 5185 Readings in the History and Philosophy of Public Health III	Reflection Essay Final Quiz
11. Explain how globalization affects global burdens of disease	GPH-GU 2140/5140 Global Issues in Social and Behavioral Health	Assignment 1: GapMinder activity: Choose one health indicator and one social indicator from the Gapminder database. Take a screenshot of your graph or a video of the graph changing over time and post it in the forum with a description of the figure and why you think it's interesting. Comment on the direction of the relationship between the health and social indicator and how that relationship changes (or stays the same) over time. If there are anomalies (e.g., a sudden increase in mortality during particular time), try to uncover possible explanations by searching the internet for scientific or news articles.
	GPH-GU 2190/5190 Essentials of Public Health Biology	Module 2 quizzes: Introduction to microbiology and infectious diseases; the immune system; NTDs and vector-borne diseases; respiratory tract diseases Module 2 Exam

Table D18-1 Content Coverage for Academic Doctoral Degree in a Public Health Field		
Content (Foundational Public Health Learning Objectives)	**Course number(s)and name(s)**	**Specific assessment opportunity**
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	GPH-GU 2153/5153 Global Environmental Health	Assignment 18: landfill evaluation: Research this infamous landfill using Google Scholar and YouTube and familiarize yourself. Focus on the community living in the landfill and suggest at least two recommendations for each of following: (1) an immediate intervention and an (2) interim and (3) long-term solution. Assignment 26: "Filthy Cities" program: Watch the TV program “Filthy Cities” and complete the online quiz of the same name. Available on several media portals including YouTube at https://youtu.be/z9AVPt7geJw. Assignment 29: LEED building evaluation: LEED Building score sheet lookup. Select a green building in your city or county and get a copy of the LEED score sheet (see www.usgbc.org). Investigate the building’s special characteristics and report. If possible, schedule an appointment to visit. Present location and types of building and report on each element of the LEED categories; meaning, how did they achieve the points. Include photographs, if possible. Finally, present your critical impression. Exams 2 and 3
	GPH-GU 2190/5190 Essentials of Public Health Biology	Module 2 quizzes: Introduction to microbiology and infectious diseases; the immune system; NTDs and vector-borne diseases; respiratory tract diseases Module 3 quizzes: Human genetics and genomics; infectious disease genomics; gene-environment interactions and cancer; the future of public health genomics Modules 2 and 3 Exams Essays 1 and 3

3) Provide a matrix, in the format of Template D18-2, that lists competencies for each relevant degree and concentration. The matrix indicates at least one assessment activity for each of the listed competencies. Typically, the school will present a separate matrix for each concentration. Note: these competencies are defined by the school and are distinct from the introductory public health learning objectives defined in this criterion.

Presented below are matrices for program-wide competencies and competencies for each of the three PhD concentrations. The most recent syllabus for each listed course is included in ERF D18.9.

Table D18-2a Assessment of Competencies for Program-wide PhD Competencies	
Competency	**Specific assignment(s) that allow assessment**
1. Discuss and critically evaluate the broad public health literature and literature related to the student's discipline	**GPH-GU 3000 Perspectives in Public Health Doctoral Seminar I** **Critiques:** Students will submit critiques on two papers presented throughout the semester. Critiques will provide specific comments on the strengths and weaknesses of the paper, discuss the quality of the paper and its potential contributions to the field, and provide thoughtful and focused comments on how this work might be improved. **GPH-GU 3010 Perspectives in Public Health Doctoral Seminar II** Students will read papers before they are presented and submit two questions for the author.
	GPH-GU 3200 Dissertation Proposal Seminar **Annotated bibliography:** Students will identify no less than five sources that they will utilize to support the writing in each of the following sections: (1) the topic for their dissertation, (2) the rationale for this work, (3) the significance of the work, and (4) theoretical framing that will guide the work. **Dissertation Introduction Drafts:** Students will provide (1) the topic for their dissertation/background on the area of study, (2) the rationale for this work and the gaps in knowledge that the dissertation will address, (3) the significance of the work (the public health, population health, and/or clinical implications of the work), (4) the theoretical framing that will guide the work and the paradigm or theory that will inform the dissertation, and (5) a description of the three manuscripts of the dissertation with the sources of the data for these manuscripts.
	Publishable review article in Year 1: Comprehensive literature review summarizing and evaluating theoretical and empirical research on a specific topic. See pp. 14-16 of Doctoral Handbook. This assignment is covered and linked to GPH-GU 3000.
	Comprehensive Examination: Part I: written exam assessing foundational public health concepts and methods. Part II: NIH R21 grant application format including specific aims and research strategy with background, significance/innovation, and research design. See pages 16-18 of Doctoral Handbook.
2. Apply public health concepts in the framing of research questions and design a proposal to address the gaps identified in the student's discipline	**GPH-GU 2930 Epidemiological Design and Methods** **Global burden of disease exercise:** Students will calculate years of life lost for a specific country and will also explore trends in disability-adjusted life years (DALYs) by ranking health conditions from highest to lowest burden for four time points and comparing and contrasting the top 10 conditions over time. **Project 1:** Cross-sectional analysis with scale **Project 2:** Unmatched and matched case-control analyses **Project 3:** Survival analysis
	GPH-GU 3200 Dissertation Proposal Seminar **Dissertation Introduction Drafts:** Students will provide (1) the topic for their dissertation and background on the area of study, (2) the rationale for this work and the gaps in knowledge that the dissertation will address, (3) the significance of the work (the public health, population health, and/or clinical implications of the work), (4) the theoretical framing that will guide the work and the paradigm or theory that will inform the dissertation, and (5) a description of the three manuscripts of the dissertation with the sources of the data for these manuscripts.

Table D18-2a Assessment of Competencies for Program-wide PhD Competencies	
Competency	**Specific assignment(s) that allow assessment**
	Original research article that involves data analysis: Peer-review quality research manuscript. See page 16 of the Doctoral Handbook.
	Grant development and submission: Training activity. Students are expected to assist with grant development and submission in their mentor's research group.
	Development and defense of dissertation research proposal: Students develop their own research questions within the context of their mentor's expertise or current research environment. Students then submit a written Dissertation Research Proposal and oral defense. See pages 24-25 of the Doctoral Handbook.
	Comprehensive examination: Part I: written exam assessing foundational public health concepts and methods. Part II: NIH R21 grant application format including specific aims and research strategy with background, significance/innovation, and research design. See pages 16-18 of the Doctoral Handbook.
3. Explain the principles of research ethics and apply these principles to specific research projects	**Online Ethics Course and Test:** e.g., Collaborative Institutional Training Initiative (CITI). See page 10 of the Doctoral Handbook.
	GPH-GU 3165 Research Ethics: Required beginning in Spring 2019.
	IRB protocol preparation and approval: Submission and approval of IRB application to University Committee on Activities Involving Human Subjects for dissertation research. See page 25 of the Doctoral Handbook.
	Comprehensive examination: Part I: written exam assessing foundational public health concepts and methods. Part II: NIH R21 grant application format including specific aims and research strategy with background, significance/innovation, and research design. See pages 16-18 of the Doctoral Handbook.
4. Apply qualitative and/or quantitative techniques to analyze and synthesize data related to public health issues	**GPH-GU 2930 Epidemiological Design and Methods Students** **Global burden of disease exercise:** Students will calculate years of life lost for a specific country and will also explore trends in disability-adjusted life years (DALYs) by ranking health conditions from highest to lowest burden for four time points and comparing and contrasting the top 10 conditions over time. **Project 1:** Cross-sectional analysis with scale **Project 2:** Unmatched and matched case-control analyses **Project 3:** Survival analysis
	GPH-GU 3050 Methods in Community Health Research **Course Assignments:** **1.** Develop a key informant interview guide, conduct interviews with one academic or one community partner engaged in a CBPR project, audiotape one interview (with participant's consent), and transcribe up to 10 pages of the interview. Discuss summary findings from interview in one page and be prepared to debrief in class. **2.** Lead discussion of assigned case study/papers on CBPR and Mixed Methods topic. **3**. Develop and present for peer review a concept paper for your final proposal that identifies a health problem based on your knowledge of a community (or from the CBPR project you interviewed) and supporting data that you will use as the basis for a NIH-type proposal (R21, R03, R15). Write a three- to four-page paper (double-spaced) defining the problem (use epidemiologic

Table D18-2a Assessment of Competencies for Program-wide PhD Competencies	
Competency	**Specific assignment(s) that allow assessment**
	data to justify) and identify existing potential RFAs or FOAs with a focus on CBPR that could be a potential funding source. Present in seminar for peer review feedback. **4.** Final proposal: Develop a mixed-methods design proposal based on the problem you identified in assignment three matched to an NIH call for proposals. Regardless of your selection, the proposal must include a mixed-method design (you may "nest" a smaller qualitative or quantitative component in the design), multiple forms of data, and plans for integrating the methods and data for analysis. Presentation of final paper.
	GPH-GU 2960 Theories in Public Health Practice, Policy, and Research **Midterm Exam:** A set of short questions in which you are asked to explain, apply, and interpret the concepts we have studied. Doctoral students are also expected to demonstrate an ability to integrate and critically evaluate the concepts. A written study guide will be distributed one week prior to the exam. **Final Paper:** Choose two or more distinct theories and critically analyze their merits and drawbacks with respect to a public health problem. The purpose of this assignment is to critically review and contrast two of the theories or theoretical frameworks covered in the course. The idea is to analytically contrast and compare but not to offer personal opinion. Be sure to cite the empirical evidence.
	GPH-GU 2353 Regression 1 **Lecture 3 and HW 2:** Simple Linear Regression Models: Transformations **Lecture 4 and HW 3:** Simple Linear Regression Models: Categorical Predictors **Lecture 5 and HW 4:** Multiple Linear Regression Models: Introduction **Quizzes 1 and 2** **Midterm Exam**
	GPH-GU 2354 Regression 2 **HW 4:** Hypothesis testing and interpretation **HW 5:** Inference **HW 6:** Moderation and categorical outcomes **HW 7:** Bias and confounding **HW 8:** Poisson Models **HW 10:** Model selection **Quizzes 1 and 2** **Midterm Exam** **Final Exam**
	Original research article that involves data analysis: Peer-review quality manuscript with data analysis. See page 16 of the Doctoral Handbook.
	Comprehensive examination: Part A: written exam assessing foundational public health concepts and methods. Part II: R21 format including specific aims and research strategy with background, significance/innovation, and research design. See pages 16-18 of the Doctoral Handbook.

Table D18-2a Assessment of Competencies for Program-wide PhD Competencies	
Competency	**Specific assignment(s) that allow assessment**
	Final dissertation: Traditional dissertation or three publishable articles addressing any committee requests for revision. See pages 26-29 of the Doctoral Handbook
	Comprehensive examination: Part A: written exam assessing foundational public health concepts and methods. Part II: R21 format including specific aims and research strategy with background, significance/innovation, and research design. See pages 16-18 of the Doctoral Handbook.
5. Author a publishable manuscript suitable for peer-reviewed publication as an independent researcher and present to colleagues and professionals in the field	**GPH-GU 3200 Dissertation Proposal Seminar** **Dissertation Introduction Drafts:** Students will provide (1) the topic for their dissertation/background on the area of study, (2) the rationale for this work and the gaps in knowledge that the dissertation will address, (3) the significance of the work (the public health, population health, and/or clinical implications of the work), (4) the theoretical framing that will guide the work and the paradigm or theory that will inform the dissertation, and (5) a description of the three manuscripts of the dissertation with the sources of the data for these manuscripts. **Presentation of Dissertation Proposal:** Students will develop a 15-minute presentation that proposes the five elements of the dissertation as detailed in the Introduction.
	Original research article that involves data analysis: Peer-review quality manuscript with data analysis. See page 16 of the Doctoral Handbook.
	Publishable review article in Year 1: Comprehensive literature review summarizing and evaluating theoretical and empirical research on a specific topic. See pages 14-16 of the Doctoral Handbook.
	Oral dissertation defense: Oral defense of dissertation to dissertation committee members. See pages 28-29 of the Doctoral Handbook.
	Dissertation: Traditional dissertation or three publishable articles. See pages 26-29 of the Doctoral Handbook.
6. Convey public health concepts and methodologies to undergraduate and/or graduate students	**NYU's Teaching Workshop:** participation in workshops conducted by NYU Center for the Advancement of Teaching. See page 13 of the Doctoral Handbook.
	Course evaluations submitted by MPH or undergraduate students for courses taught by doctoral students: Serving as course assistant or lead instructor. See pages 12-14 of the Doctoral Handbook.
	Oral presentations: Not internally assessed but is accepted through peer review.
	Conference presentations: Not internally assessed but is accepted through peer review.
	GPH-GU 3000 and GPH-GU 3010 Perspectives in Public Health Doctoral Seminar, Part 1 and Part 2: Present the current research the student is undertaking to graduate students and faculty of GPH.

Table D18-2b Assessment of Competencies in Epidemiology Concentration	
Competency	**Specific assignment(s) that allow assessment**
1. Critically evaluate public health and medical literature with respect to disease (outcome) measures, measures of association, study design options, bias, confounding, and effect measure modification	**GPH-GU 3220 Experimental Study Designs in Epidemiology (3 credits)** (2) Critical appraisal of a quasi-experimental study (3) Critical appraisal of an RCT
	GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (3 credits) (8) Critical appraisal of a cohort study (9) R01 specific aims research strategy for a prospective cohort study
	GPH-GU 2317 Social Epidemiology (3 credits) Reaction papers Final paper
	GPH-GU 2225 Psychometric Measurement and Analysis in Public Health Research and Practice (3 credits) Public Health Measure: Presentation Public Health Measure: Research Paper Midterm Quiz Final Quiz
	GPH-GU 3200 Dissertation Proposal Seminar (3 credits) First draft of dissertation proposal
	Doctoral program requirements Year 1 literature review Comprehensive exam Part B Dissertation
2. Interpret descriptive epidemiologic studies in order to develop hypotheses of possible risk factors for a health outcome	**GPH-GU 2317 Social Epidemiology (3 credits)** Reaction papers Final paper
	Doctoral program requirements Year 1 literature review Comprehensive exam Part A Comprehensive exam Part B Dissertation
	GPH-GU 3200 Dissertation Proposal Seminar (3 credits) First draft of dissertation proposal
3. Apply quantitative methods to analyze and synthesize epidemiologic data	**GPH-GU 3220 Experimental Study Designs in Epidemiology (3 credits)** (3) Critical appraisal of an RCT (4) Analysis of RCT data (5) Design and adaptive trial (6) R01 specific aims and research strategy for an RCT

Table D18-2b Assessment of Competencies in Epidemiology Concentration	
Competency	**Specific assignment(s) that allow assessment**
related to public health issues	**GPH-GU-3152 Advanced Agent-based Modeling (3 credits)** (3) Using behavior space (4) Estimating the R0 of a model (8) Model calibration
	GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (3 credits) (2) Person-time calculation exercise (4) Incidence rates exercise (5) Survival analysis exercise (6) Longitudinal analysis exercise (7) Incidence density sampling exercise
	GPH-GU 2225 Psychometric Measurement and Analysis in Public Health Research and Practice (3 credits) Midterm Quiz Midterm Data Analysis Final Quiz
	GPH-GU 2286 Introduction to Data Management and Statistical Computing (3 credits) HW 1: Codebook development HW 2: Data management protocol HW 3: Debugging Code HW 4: Data cleaning HW 5: Data manipulation HW 6: Automated programming Final exam
	GPH-GU 2480 Longitudinal Analysis of Public Health Data (3 credits) HW 1: Between- and within- person effect HW 2: Fitting a multilevel model HW 3: Interclass correlation HW 4: Covariance Structure HW 5: Random Effects Model HW 6: Random Effects Model (cont.) Midterm Exam HW 7: Time varying and time invariant predictors HW 8: Nonlinear change over time HW 9: Survival Analysis HW 10: Model Selection Final exam

Table D18-2b Assessment of Competencies in Epidemiology Concentration	
Competency	**Specific assignment(s) that allow assessment**
	GPH-GU 2387 Survey Design, Analysis, and Reporting (3 credits) HW 1: CITI training HW 2: Midterm project proposal HW 3: Practice problems Midterm secondary data analysis project HW 4: Final project proposal HW 5: IRB application or non-human subjects justification Final oral presentation
	Doctoral program requirements Year 2 original data paper Comprehensive exam Part A Dissertation
4. Design robust observational and experimental studies to address public health and clinical problems	**GPH-GU 3220 Experimental Study Designs in Epidemiology (3 credits)** (1) Design an adaptive trial (2) R01 specific aims and research strategy for RCT
	GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (3 credits) (2) Person-time calculation exercise (3) Power and sample size calculation exercise (8) Critical appraisal of a cohort study (9) R01 specific aims research strategy for a prospective cohort study
	GPH-GU 2387 Survey Design, Analysis, and Reporting (3 credits) HW 2: Midterm project proposal Midterm secondary data analysis project HW 4: Final project proposal HW 5: IRB application or non-human subjects justification Final oral presentation
	GPH-GU 3200 Dissertation Proposal Seminar (3 credits) First draft of dissertation proposal
	Doctoral program requirements Year 2 original data paper Comprehensive exam Part B Proposal Dissertation

Table D18-2b Assessment of Competencies in Epidemiology Concentration	
Competency	**Specific assignment(s) that allow assessment**
5. Understand central concepts, methods, and applications of contemporary dynamic modeling in epidemiology, including transmission dynamics of infectious, chronic, vector-borne, and sexually transmitted diseases and the manner in which social network structure and human behaviors affect those dynamics and their control	**GPH-GU-3152 Advanced Agent-based Modeling (3 credits)** (1) Exploring a model (2) Developing a simple model (5) Implementing an infectious disease model (6) Generating random networks (7) Modeling transmission on the network
	GPH-GU-3230 Topics in Advanced Modeling (3 credits) (1) Write a Nature Opinion piece on strengths and weaknesses of equation-based vs. agent-based models. (2) Write a Letter to Nature on implicit behavioral assumptions in epidemic modeling. (3) Write a paper on mechanisms of scaling/inequality and their robustness. (4) Write a two-page (maximum) essay on the utility and risks of worst-case epidemic modeling. (5) Write a two-page (maximum) essay contrasting the use of toy and realistic models for policy. (6) Run the Artificial NYC NetLogo model and write a review of the Health Belief Model. (7) Run the Agent_Zero NetLogo model. (8) Submit in writing and orally present a publishable critique of an agreed major journal article.
	GPH-GU 3200 Dissertation Proposal Seminar (3 credits) If student chooses a modeling project: First draft of dissertation proposal
	Doctoral program requirements If student chooses a modeling project: Year 1 literature review Year 2 original data paper Proposal Dissertation
6. Design and present an epidemiologic investigation resulting in a publishable manuscript	**Doctoral program requirements** Year 2 original data paper Comprehensive exam Part B Dissertation

Table D18-2c Assessment of Competencies for PhD in Public Health Policy and Management Concentration
+Denotes course cross-listed with NYU Wagner Graduate School or Stern School of Business. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Specific assignment(s) that allow assessment
1. Apply appropriate research methods to analyze health policy and management issues and questions	**+PHD-GP 5902 Doctoral Research Methods (4 credits) (Most recent syllabus included)** (1) Writing assignments on research design: research question description, test design, measurement of variables, and full research design (2) Writing exercises on theory: theory finding, literature review, critique of previous research (3) Midterm exam (4) Final presentation and paper: builds on written assignments and feedback from instructor and other students; includes the design of a comprehensive research plan (5) Class discussions and participation
	GPH-GU 3110 Advanced Public Health Policy and Management (3 credits) (1) Written assignments in advanced health policy and management (2) Final exam
	GPH-GU 3185 Health Services and Policy Research (3 credits) (1) Writing assignments in health services research (2) Final presentation (3) Research paper for peer-reviewed journal submission
	Doctoral program requirements Candidacy (Comprehensive) Exam Dissertation Proposal Dissertation
2. Synthesize evidence to guide policymaking and assess public policies and programs that promote population health and health equity	**GPH-GU 3110 Advanced Public Health Policy and Management (3 credits)** (1) Written assignments in advanced health policy and management (2) Final exam
	GPH-GU 3185 Health Services and Policy Research (3 credits) (1) Writing assignments in health services research (2) Final presentation (3) Research paper for peer-reviewed journal submission
	Doctoral program requirements Candidacy (Comprehensive) Exam Dissertation Proposal Dissertation

Table D18-2c Assessment of Competencies for PhD in Public Health Policy and Management Concentration
+Denotes course cross-listed with NYU Wagner Graduate School or Stern School of Business. Competency-assessment map provided as a cover sheet to syllabus.

Competency	Specific assignment(s) that allow assessment
3. Assess different theoretical perspectives in management and apply these ideas to the identification, analysis and understanding of critical themes and issues in healthcare and public health	***MGMT-GB 3381 Organizational Behavior (3 credits) (Stern School of Business)** (1) Class participation: Assessment based on engagement in class discussion, acting as a session facilitator, and evaluating papers of colleagues. (2) Research paper: Outline of an approach to developing new knowledge or bringing a new perspective to previous findings in the field.
	***MGMT-GB 3372 Organization Theory (3 credits) (Stern School of Business)** (1) Discussion questions: Prepare a set of questions and moderate class discussion based on these questions. (2) Participation (3) Response points: A half-page weekly response to one of the assigned readings based on an idea, argument, or question to pose during class discussion. (4) Reaction memos: A two-page memo due every third week that is meant to include a thought, criticism, argument, idea, or application in response to the readings, not a summary. (5) Referee report: Read the provided paper, which is under review at a peer-reviewed journal. Pretend you are a referee reviewing the paper. Provide a thorough three-page critique and evaluation of all facets of the paper (framing, theory, methods, interpretation, theoretical contribution), and ideas for improvement. (6) Term paper: A 15- to 20-page paper on a topic in organizational theory, specifying theory and a research study design.
	Doctoral program requirements Candidacy (Comprehensive) Exam Dissertation Proposal Dissertation

Table D18-2d Assessment of Competencies for PhD in Social and Behavioral Sciences Concentration	
Competency	**Specific assignment(s) that allow assessment**
1. Critically assess major theories, trends, and debates in the social and behavioral sciences literature regarding health	**GPH-GU 2960 Theories in Public Health Practice, Policy, and Research (3 credits)** **Midterm Exam:** A set of short questions in which you are asked to explain, apply, and interpret the concepts we have studied. Doctoral students are also expected to demonstrate an ability to integrate and critically evaluate the concepts. A written study guide will be distributed one week prior to the exam. **Final Paper:** Choose two or more distinct theories and critically analyze their merits and drawbacks with respect to a public health problem. The purpose of this assignment is to critically review and contrast two of the theories or theoretical frameworks covered in the course. The idea is to analytically contrast and compare but not to offer personal opinion. Be sure to cite the empirical evidence.
	GPH-GU 3260 Complex Systems, Disasters, and the Social Ecology of Health: Theories, Methods, and Cases (3 credits) (1) Commentary postings: Two paragraph commentary on one or more of the readings for the week's session. Students are encouraged to link several of the readings for the week and should provide critical analysis or insight. Over the semester, six (6) commentaries are to be submitted. (2) Readings leader: The discussion leader will provide a brief summary of the week's readings and then prompt discussion with a series of questions posed to the class.
	Doctoral Program Requirements Year 1 Comprehensive Literature Review Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation
2. Develop skills used to choose appropriate research designs and statistical methods for answering public health questions in the field of social and behavioral sciences	**GPH-GU 3260 Complex Systems, Disasters, and the Social Ecology of Health: Theories, Methods, and Cases (3 credits)** Final paper: Two options: a) critique of a systems approach or b) a research proposal to study some aspect of how systems affect health and well-being modeled upon an NIH R03 pilot project (six pages).
	GPH-GU 3210 Qualitative Analysis: Interviewing and Mixed Methods Approaches (3 credits) Final proposal, paper, or chapter (15 pages, double-spaced) on a specific topic that guided the qualitative approach conducted during the semester.
	GPH-GU 3220 Experimental Study Designs (3 credits) (1) Critical appraisal of an RCT (2) Analysis of RCT data (3) Design and adaptive trial (4) R01 specific aims and research strategy for an RCT

Table D18-2d Assessment of Competencies for PhD in Social and Behavioral Sciences Concentration	
Competency	**Specific assignment(s) that allow assessment**
	GPH-GU-3152 Advanced Agent-based Modeling (3 credits) (1) Using behavior space (2) Estimating the R0 of a model (3) Model calibration
	GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (3 credits) (1) Person-time calculation exercise (2) Incidence rates exercise (3) Survival analysis exercise (4) Longitudinal analysis exercise (5) Incidence density sampling exercise
	GPH-GU 2225 Psychometric Measurement and Analysis in Public Health Research and Practice (3 credits) Midterm Quiz Midterm Data Analysis Final Quiz
	GPH-GU 2480 Longitudinal Analysis of Public Health Data (3 credits) HW 1: Between- and within- person effect HW 2: Fitting a multilevel model HW 3: Interclass correlation HW 4: Covariance Structure HW 5: Random Effects Model HW 6: Random Effects Model (cont.) Midterm Exam HW 7: Time varying and time invariant predictors HW 8: Nonlinear change over time HW 9: Survival Analysis HW 10: Model Selection Final exam
	Doctoral Program Requirements Comprehensive Candidacy Exam: Part I Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation

Table D18-2d Assessment of Competencies for PhD in Social and Behavioral Sciences Concentration	
Competency	**Specific assignment(s) that allow assessment**
3. Design rigorous and ethical research studies that examine theories or conceptual models relevant to the social and behavioral sciences	**GPH-GU 3040 Intervention and Prevention Science (3 credits)** (1) Write a two-page need or problem statement. (2) Develop a list of core constructs relevant to the specific public health problem. (3) Write a proposal draft outline. (4) Write a full proposal draft. (5) Write a final full proposal based on the NIH R21 mechanism (one page for specific aims and six pages for research strategy) that includes significance, innovation, and approach.
	GPH-GU 3210 Qualitative Analysis: Interviewing and Mixed Methods Approaches (3 credits) (1) A five-page research proposal on a topic of interest that includes a specific research question and proposed research design. (2) Develop a semi-structured interview guide to be used in the field.
	GPH-GU 3175 Design, Conduct, and Analysis of Cohort Studies (3 credits) (1) Person-time calculation exercise: Students will be provided with a dataset in which they will calculate person-time. Person-time will then be summarized in a publication-quality table. (2) Power and sample size calculation exercise: Each student will calculate sample size for a survival analysis, using different assumptions of incidence, estimated effect size, and R2 for the independent variable of interest. (3) Critical appraisal of a cohort study: Student will select a published analysis of a cohort study. The paper should present longitudinal or survival analyses. Student will critically consider the methods, the inferences drawn from the results, and the limitations of the study design as if they were reviewing a manuscript for a journal. Write a 1,500-word review and critique. (4) Submit an R01 specific aims (one page) and research strategy (six pages, including significance, innovation, and research approach) for a prospective cohort study
	GPH-GU 3220 Experimental Study Designs (3 credits) (1) Design a trial for an adaptive intervention using MOST, SMART, or JITAI trial designs. The paper must include the trial design, participant selection, a description of the interventions, and a description of the outcomes and their assessment. A figure detailing the adaptive design is required. (2) Submit an R01 specific aims (one page) and research strategy (six pages, including significance, innovation, and research approach) for a RCT (intervention or treatment).
	GPH-GU 2387 Survey Design, Analysis, and Reporting (3 credits) (1) Midterm project proposal (2) Midterm secondary data analysis project (3) Final project proposal (4) IRB application or non-human subjects justification

Table D18-2d Assessment of Competencies for PhD in Social and Behavioral Sciences Concentration	
Competency	**Specific assignment(s) that allow assessment**
	Doctoral Program Requirements GPH-GU 3200 Dissertation Proposal Seminar Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation
4. Assess the means by which the social determinants of health create challenges to achieving health equity at the behavioral, community & societal levels	**GPH-GU 3040 Intervention and Prevention Science (3 credits)** (1) Write a two-page need or problem statement. (2) Develop a list of core constructs relevant to the specific public health problem. (3) Write a proposal draft outline. (4) Write a full proposal draft. (5) Write a final full proposal based on the NIH R21 mechanism (one page for specific aims and six pages for research strategy) that includes significance, innovation, and approach.
	GPH-GU 3260 Complex Systems, Disasters, and the Social Ecology of Health: Theories, Methods, and Cases (3 credits) (1) Commentary postings: Two paragraph commentary on one or more of the readings for the week's session. Students are encouraged to link several of the readings for the week and should provide critical analysis or insight. Over the semester, six (6) commentaries are to be submitted. (2) Final paper: Two options: a) critique of a systems approaches or b) a research proposal to study some aspect of how systems affect health and well-being modeled upon an NIH R03 pilot project (six pages).
	Doctoral Program Requirements Year 1 Comprehensive Literature Review GPH-GU 3200 Dissertation Proposal Seminar Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation
5. Apply knowledge from a social science specialization (sociology, political science, psychology, anthropology) to a public health problem	**Doctoral Program Requirements** Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation
6. Communicate social and behavioral health theories, concepts, and scholarship in oral and written form to diverse audiences	**Doctoral Program Requirements** Comprehensive Candidacy Exam: Part II Dissertation Proposal Dissertation

4) Identify required coursework and other experiences that address the variety of public health research methods employed in the context of a population health framework to foster discovery and translation of public health knowledge and a brief narrative that explains how the instruction and assessment is equivalent to that typically associated with a three-semester-credit course.

The resulting products or deliverables of the various research activities conducted by doctoral students—for example, sections of a publication or a manuscript, abstract, sections of grants, data analysis, guest lectures, or courses—are outcomes from their training activities. Some of these are formally assessed through graded assignments within a course, and others are training activities that are reviewed by peers within the program or peer-reviewed through journal or grant submission. The contact hours of these research activities cumulatively exceed the contact hours of a three-credit semester course. A semi-annual evaluation of the research activities is submitted by the primary mentor as a means of ensuring that each student is making sufficient progress.

Ethics training is conducted in the form of a required in-person Research Ethics course (mandatory for cohorts 2018–19 and beyond) plus an online training. Subsequent certification is required for all doctoral students and must be completed before embarking on research for the mentor in an individual project. Students must pass an online assessment related to research ethics material in order to be certified.

<u>Required activities in students' training plan:</u>

Students and their mentors develop a training plan together where they focus on planning research activities such as data collection, analyses, recruitment, presentations, publications, guided readings, and publications as applicable to the student. The overall goal of the training plan is to ensure that the student meets the annual benchmarks of the program and advances through the degree. The ultimate objective is for the student to produce original research towards their dissertation, while acquiring essential skills and competencies. The training plan is reviewed semi-annually by the Director of Doctoral studies and is discussed with the student and mentor.

Students are expected to participate in research-related activities for approximately 20 hours per week. These activities include, but are not limited to:

- Literature searches
- Manuscript writing
- Abstract writing and presentation
- Scientific reports
- Grant development
- Data analysis
- Data collection
- Incorporating research into teaching

5) Briefly summarize policies and procedures relating to production and assessment of the final research project or paper.

After two years of coursework, students identify a specific research topic to pursue their final research project. To this end, each student identifies a Committee Chair who has the necessary expertise in the research area to guide the student. The student and Chair then form a dissertation committee of three to four people.

There are two required assessment opportunities: 1) an oral defense of the student's proposed research project, which occurs early in his or her third year; and 2) a dissertation (final research project) defense. Both have an oral presentation and evaluation of written reports. See the Doctoral Handbook for more information.

6) **Provide links to handbooks or webpages that contain the full list of policies and procedures governing production and assessment of the final research project or paper for each degree program.**

A copy of the Doctoral Handbook can be found on the GPH website and in ERF D18.6. Policies and procedures related to the dissertation are found on pages 20-31 of the handbook.

7) **Include completed, graded samples of deliverables associated with the advanced research project. The school must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.**

Deliverables include two benchmark literature reviews conducted in Year One. The literature review includes a thorough search of the literature on a topic that the student chooses, related to his or her research interest and concentration of study. The student works over the first year to complete the assignment, which is graded by two faculty members. The review may be a qualitative or narrative review, or a systematic review, and it is intended for publication in a peer-reviewed journal. Two sample literature reviews are provided in ERF D18.7a.

Three dissertation research proposals from AY 2017-18 are available in ERF D18.7b.

Two dissertations were completed in AY 2017–18 and are available in ERF D18.7c.

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

As discussed above in section D18.1, the majority of students enrolled in the PhD program have a prior MPH. Students who do not have a prior MPH are required to take all the prerequisite courses comprising the MPH core curriculum, and all students, including those with an MPH, are required to take additional courses that cover several of the introductory public health knowledge learning objectives.

9) **Include the most recent syllabus for any course listed in the documentation requests above, or written guidelines for any required elements that do not have a syllabus.**

All of the above syllabi are located in ERF D18.9. The Doctoral Handbook is also in ERF D8.6.

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

Strengths:

The doctoral program consists of full-time students who are fully funded for five years with full tuition remission and benefits, and additional opportunities for summer training and internships within or outside of GPH. The program is highly selective and admits on average five to six students each year, representing 3–5% of the applicant pool. The program consists of small cohort sizes each year with individualized attention to students by faculty mentors.

The research portfolio of doctoral students spans multiple disciplines, including statistical and mathematical modeling, epidemiology, health policy, and social aspects of health. Students are able to engage in local, national, or global research on NYU's New York City campus or in collaboration with faculty on other NYU campuses around the world. Doctoral students get several teaching opportunities at GPH and on NYU's global campuses.

Recent program improvements include involvement of new faculty, a strong and active Doctoral Advisory Committee with subcommittee units that focus on specific tasks, and revision of the handbook,

a comprehensive resource that details and clarifies policies. The Director of Doctoral Studies has also developed strong relationships with the Provost's Office and aligned with their priorities so that the doctoral students can better utilize University-level research resources. These structural and curricular changes have significantly improved the program.

Weaknesses:

Due to the program's relative newness, it is still in development with leadership changes, evolving rules and guidelines, and a curriculum in transition. However, the Doctoral Advisory Committee is systematically reviewing and revising the curriculum, which has resulted in a significantly improved curriculum. Furthermore, there has been a reliance on MPH-level courses.

Plans:

We have developed new doctoral-level courses to be implemented starting Spring or Fall 2019, bringing the number of doctoral-level courses offered by GPH to 12. The Doctoral Curriculum Committee is working with individual instructors to ensure separate standards and assignments for doctoral students enrolled in MPH courses.

Over the next one to three years, our plans include:

- Expanding the PhD program through extramural funding, such as NIH and foundation grants.
- Implementing the new doctoral-level courses for cohorts entering Academic Year (AY) 2018–19. Current students in all cohorts will be able to take these courses, especially students who entered in AY 2017–18 who are in the second year of the program and preparing to take concentration-specific courses in their second year.
- Ensuring that MPH-level courses include standards and assignments for doctoral students.
- Strengthening mentorship resources and guidelines through additional mentorship seminars.
- Developing funding opportunities within GPH to stimulate grant writing and research, e.g., Challenge Grants for students and Summer Grant Writing Awards.
- Offering research opportunities to students on NYU's global campuses by leveraging the resources available at our global network campuses.

D19. All Remaining Degrees

Students enrolled in any of the SPH's degree programs that are not addressed in Criteria D2, D3, D9, D13 or D14 complete coursework that provides instruction in the foundational public health knowledge at a level of complexity appropriate to the level of the student's degree program.

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

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

1) Provide a matrix in the format of Template D19-1 that indicates the required assessment opportunities for each of the defined Foundational public health learning objectives (1-12). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical.

Introductory public health learning objectives will be addressed in all remaining degree programs (currently, the Master of Arts in Bioethics) through a required online course, scheduled to be offered starting in Spring 2019.

Table D19-1 Required Assessment Opportunities for Each of the Defined Public Health Learning Objectives for the MA in Bioethics

Content	Course number(s) or other educational requirements	Specific component (reading, lecture, discussion)
1. Explain public health history, philosophy, and values	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 1 Module assessment (quiz)
2. Identify the core functions of public health and the 10 Essential Services	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 2 Module assessment (quiz)
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 5 Module assessment (quiz)
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 3 Module assessment (quiz)
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 4 Module assessment (quiz) Short written assignment 1
6. Explain the critical importance of evidence in advancing public health knowledge	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 6 Module assessment (quiz) Short written assignment 2
7. Explain effects of environmental factors on a population's health	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 7 Module assessment (quiz)
8. Explain biological and genetic factors that affect a population's health	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 9 Module assessment (quiz)
9. Explain behavioral and psychological factors that affect a population's health	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 10 Module assessment (quiz) Short written assignment 3

Table D19-1 Required Assessment Opportunities for Each of the Defined Public Health Learning Objectives for the MA in Bioethics		
Content	**Course number(s) or other educational requirements**	**Specific component (reading, lecture, discussion)**
10. Explain the social, political, and economic determinants of health and how they contribute to population health and health inequities	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 11 Module assessment (quiz) Short written assignment 4
11. Explain how globalization affects global burdens of disease	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 8 Module assessment (quiz)
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)	GPH-GU 5170 Introduction to Public Health	Readings Online module lesson 12 Module assessment (quiz)

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

The introductory public health knowledge will be covered in a 0-credit online course that will be generally equivalent to 3-credit online courses in terms of the number of modules, presentation of didactic lessons for each module, assigned readings for each module, and required assignments. There are 12 modules, each of which includes assigned readings and at least one assessment. Assessments include a multiple-choice quiz for each module, as well as four short written assignments. Students must complete each module assessment quiz before moving on to the next module. Questions reflect content presented in the module and draw on reading material. Students must pass every module quiz to pass the course. The course also requires four short written assignments (150 words each), which ask students to apply concepts in the course and readings. Students will receive feedback from the course instructor on each written assignment.

3) Include the most recent syllabus for any course listed in the documentation requests above, or written guidelines for any required elements that do not have a syllabus.

The syllabus for the Introduction to Public Health course and planned assessment quizzes for each module are provided in ERF D19.3.

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

Strengths:

We are developing a new online course to address the introductory public health learning objectives. The course will be a requirement for all master's students in the Bioethics program and any future remaining degree programs.

Weaknesses:

The new online course is currently under development and has not yet been implemented.

Plans:

We plan to implement the new online course in Spring 2019.

D20. Distance Education

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

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

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

As referenced in Table Intro-1-Instructional Matrix, the College offers a fully online MPH degree in Sustainable Development Goals (SDG).

2) Describe the public health distance education programs, including

a) An explanation of the model or methods used

In 2015, the College received funding from the Provost's Office to develop distance education courses for an online MPH degree. These courses built on online courses developed earlier for an Advanced Certificate in Public Health (see Sections F3 and F4 below). To date, the College offers the following, utilizing these distance education courses:

- MPH in Sustainable Development Goals: The SDG Online Master of Public Health is a unique program that emphasizes a multidisciplinary, systems approach to solving complex challenges in disease control and prevention. The curriculum includes individual and class projects that lead to innovative, equitable, cost-effective, and attainable solutions to diverse public health challenges. Delivered entirely in an online format, students have access to world-class NYU faculty instruction, academic resources, networking, and support as they complete weekly lessons at times most convenient to them. The SDG MPH provides students with the foundational knowledge and experiential learning to develop analytic and strategic decision-making skills in public health, which can be applied immediately in the field.
- Coursework to support the in-person MPH: Students in the traditional MPH can choose to take distance education courses online as part of their curriculum requirements.
- Coursework to support the Cross-Continental MPH option: As these students complete their degree in one year while traveling to three continents, they are offered a few distance education courses or electives online. These may include courses that are offered to all MPH students as electives, in which case the Cross-Continental students join other MPH students as a single online cohort. The other offerings may be hybrid courses. Courses often include guest lecturers who are specialists from the public health sector. By offering these online courses, Cross-Continental students have greater choice of electives with more varied topics.

b) The school's rational for offering these programs

Increasingly, students prefer to continue working while obtaining their MPH degree and to reduce the opportunity cost of a residential MPH program that requires classroom attendance. The online programs developed by GPH address this demand, thereby increasing the pool of applicants to include individuals who will benefit from distance learning. This larger pool includes individuals who live and work outside of New York (and even outside the U.S.), as well as individuals who have a difficult time leaving their place of employment regularly to take classes.

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

Students enrolled in the SDG MPH are able to conduct all their studies online, including registration, advisement, and interacting with faculty; there is no requirement for travel to any of the NYU campuses. All courses are built within NYU Classes, which is NYU's Learning Management System. NYU Classes is used to administer, document, track, report, and deliver courses.

The courses, designed on the NYU Classes platform, contain all course content in an organized, learning-centered format, allowing students to access the information and complete assignments. While these activities have assigned due dates, the majority are asynchronous while being closely directed by faculty. The courses meet for the same traditional, 15-week session with assignments due weekly. Some courses have synchronous sessions, such as a welcome session, review sessions, journal club, or debates. Learner-centered, interactive, threaded discussions and instructor feedback are essential components. Students have the opportunity to discuss the application of the lecture and reading content with their peers through organized, threaded discussions. Instructor interaction provides the opportunity for the instruction to lead the discussion, clarify information, and respond to students' questions. Most courses also have group assignments, which enable students to benefit from working with their peers and feel part of an online community. Both student self-assessment and instructor assessment of student performance is ongoing.

The Technology Enhanced Education Team consists of a Faculty Director, Associate Director, and two Instructional Technologists. This team supports all faculty, students and online courses. Instructional Technologists work intensively with faculty for approximately six to nine months to develop a course in an enhanced distance education format. All faculty new to distance learning receive training from the Technology Enhanced Education Team, as well as weekly support during the course.

Students receive support from both the Office of Student and Alumni Affairs and their concentration department or program for advisement, mentorship, and, when possible, live-streamed programming and trainings.

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

For new course development, all online courses go through the same Academic Affairs Committee review process as in-person courses. If courses are offered both in-person and as distance courses, the same basic syllabus is used, i.e. learning objectives, competencies, and topics covered.

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

The same student course evaluations that are used for in-person courses are also used for our distance education courses. In addition, many of our courses have unique evaluations that are put into place for the first iteration of a course to get feedback and improve any areas that students feel are problematic or unclear. An end-of-semester meeting with the faculty after the first iteration of a distance education course is used to evaluate how students did overall and what areas the faculty felt needed to be improved/changed for following iterations. Starting in Fall 2018, we have added mid-semester and end-of-semester evaluations to all our distance education courses that address specific online issues in addition to the student course evaluations that the entire College uses for in-person and online courses.

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

The College has the following "Safe-Guard Against Cheating" plan in place to verify student identity and to combat cheating:

1. Learning Management System (LMS) login and password (provided by NYU's Information Security)
2. Use of anti-plagiarism program (TurnItIn is the anti-plagiarism tool available to online students and faculty)
3. Randomized exam questions and answers
4. Password-protected exams within LMS
5. Multiple versions of exams

Students also sign an academic integrity form at the beginning of each course.

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

Strengths:

We provide a large number of core and elective distance education courses, which benefits both our online students and in-person students as they provide more flexibility for their busy schedules.

Weaknesses:

Many of our faculty do not have experience teaching online courses.

Plans:

We will offer additional training for faculty regarding distance learning pedagogy. This training will include strategies for the planning and management of online instruction, the actual teaching process, and student assessment and evaluation.

Our goal is to introduce more online elective courses over the next few semesters to offer a greater selection for our students.

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E1. Faculty Alignment with Degrees Offered

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

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

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

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
Abraido-Lanza, Ana	Professor	Tenured	PhD MA	The Graduate School, CUNY The Graduate School, CUNY	Psychology Psychology	Social and Behavioral Sciences
Abrams, David	Professor	Tenured	PhD MS	Rutgers University Rutgers University	Clinical Psychology Clinical Psychology	Social and Behavioral Sciences, Community Health Science and Practice
Abramson, David	Clinical Associate Professor	Contract, Non-tenure	PhD MPH	Columbia University Columbia University	Sociomedical Sciences Sociomedical Sciences	Social and Behavioral Sciences, Environmental Public Health Sciences
Arasteh, Kamyar	Clinical Associate Professor	Contract, Non-tenure	PhD MA	Texas A&M University Marshall University	Psychology Psychology	Epidemiology
Avina, Julie	Clinical Associate Professor	Contract, Non-tenure	EdD	Columbia University	Health Education	Global Health
Barnes, David	Clinical Associate Professor	Contract, Non-tenure	PhD MPA	Columbia University Columbia University	Epidemiology Public Administration	Epidemiology
Betensky, Rebecca	Professor	Tenured	PhD	Stanford University	Statistics	Biostatistics
Boden-Albala, Bernadette	Professor	Joint-Tenured	DrPH MPH	Columbia University Columbia University	Sociomedical Sciences Tropical Medicine	Epidemiology, Global Health
Boufford, Jo Ivey	Clinical Professor	Contract, Non-tenure	MD	University of Michigan	Medicine	Global Health
Bragg, Marie	Assistant Professor	Joint-tenure track	PhD MPhil MS	Yale University Yale University Yale University	Clinical Psychology Clinical Psychology Clinical Psychology	Public Health Nutrition
Caravanos, Jack	Clinical Professor	Contract, Non-tenure	DrPH MS	Columbia University Polytechnic University	Environmental Science Environmental Science	Environmental Public Health Sciences, Global Health

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
Cartwright, Julia	Clinical Associate Professor	Contract, Non-tenure	MA	Georgetown University	Corporate Communications	Social and Behavioral Sciences
Chang, Ji	Assistant Professor	Tenure-track	PhD	New York University	Public Administration	Public Health Management
			MS	Carnegie Mellon University	Public Policy & Management	
Chang, Virginia	Associate Professor	Tenured	MD	University of Michigan	Medicine	Social and Behavioral Sciences
			PhD	University of Chicago	Sociology	
			MA	University of Chicago	Sociology	
Chunara, Rumi	Assistant Professor	Joint-Tenure track	PhD	Massachusetts Institute of Technology	Medical and Electrical Engineering	Biostatistics
			ScM	Massachusetts Institute of Technology	Electrical Engineering and Computer Science	
Cook, Stephanie	Assistant Professor	Tenure-track	DrPH	Columbia University	Sociomedical Sciences	Biostatistics, Social and Behavioral Sciences
			MPH	Columbia University	Sociomedical Sciences	
Deierlein, Andrea	Assistant Professor	Tenure-track	PhD	University of North Carolina, Chapel Hill	Nutrition Epidemiology	Public Health Nutrition, Epidemiology
			MPH	Columbia University	Epidemiology	
			MS	Columbia University	Human Nutrition	
Des Jarlais, Don	Professor	Tenured	PhD	University of Michigan	Social Psychology	Epidemiology
Dickey, Christopher	Clinical Associate Professor	Contract, Non-tenure	DrPH	Columbia University	Epidemiology	Global Health, SDG
			MBA	University of Pennsylvania	Finance/Entrepreneurial Management	
			MPH	Columbia University	Health/Medical Physics	
			MA	New York University	Science Journalism	

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
DiClemente, Ralph	Professor	Tenure-track	PhD	University of California, San Francisco	Health Psychology	Social and Behavioral Sciences
			ScM	Harvard University	Behavioral Sciences	
Dill, LeConté	Clinical Associate Professor	Contract, non-tenure	DrPH	University of California, Berkeley	Community Health Sciences	Community Health Science and Practice
			MPH	University of California, Los Angeles	Community Health Sciences	
Epstein, Joshua	Professor	Tenured	PhD	Massachusetts Institute of Technology	Political Science (Specialization: Security Studies, Communist Studies, Economics)	Epidemiology
Faber, Karyn	Clinical Assistant Professor	Contract, Non-tenure	EdD	Columbia University	Health Education	Community Health Science and Practice
			MPH	Columbia University	Sociomedical Sciences	
Gershon, Robyn	Professor	Contract, Non-tenure	DrPH	Johns Hopkins University	Environmental and Occupational Health	Epidemiology, Environmental Public Health Sciences
			MHS	Quinnipiac University	Medical Microbiology	
Ghedin, Elodie	Professor	Joint-Tenured	PhD	McGill University	Molecular Parasitology	Epidemiology
			MS	University of Quebec	Environmental Sciences	
Goldmann, Emily	Clinical Assistant Professor	Contract, Non-tenure	PhD	University of Michigan	Epidemiologic Sciences	Epidemiology, Social and Behavioral Sciences
			MPH	University of Michigan	Epidemiology	
Goodman, Andrew	Clinical Professor	Contract, Non-tenure	MD	University of Washington	Medicine	Public Health Policy
			MPH	Columbia University	General Public Health	
Goodman, Melody	Associate Professor	Tenured	PhD	Harvard University	Biostatistics	Biostatistics, Epidemiology
			MS	Harvard University	Biostatistics	
Hatna, Erez	Clinical Associate Professor	Contract, Non-tenure	PhD	Tel Aviv University	Geography	Epidemiology
			MA	Tel Aviv University	Geography	

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
Healton, Cheryl	Professor	Tenured	DrPH	Columbia University	Sociomedical Sciences	Public Health Management, Public Health Policy
			MPA	New York University	Health Policy and Planning	
Kapadia, Farzana	Associate Professor	Tenured	PhD	Columbia University	Epidemiology	Epidemiology, Social and Behavioral Sciences
			MPH	New York University	Community Public Health	
Kirchner, Thomas	Assistant Professor	Tenure-track	PhD	University of Pittsburgh	Clinical and Biological/Health Psychology	Social and Behavioral Sciences, Biostatistics
			MS	University of Pittsburgh	Clinical and Biological/Health Psychology	
Knippenberg, Rudolf	Clinical Professor	Contract, Non-tenure	DrPH	Johns Hopkins University	International Health	Global Health, SDG
			MD	State University Utrecht	Medicine	
			MPH	Johns Hopkins University	International Health	
McKnight, Courtney	Clinical Assistant Professor	Contract, Non-tenure	DrPH	The Graduate Center, CUNY	Community, Society & Health	Epidemiology
			MPH	Hunter College, CUNY	Community Health Education	
Merdjanoff, Alexis	Clinical Assistant Professor	Contract, Non-tenure	PhD	Rutgers University	Sociology	Social and Behavioral Sciences, Community Health Science and Practice
			MA	Rutgers University	Sociology	
Merzel, Cheryl	Clinical Associate Professor	Contract, Non-tenure	DrPH	Columbia University	Sociomedical Sciences	Community Health Science and Practice
			MPH	Columbia University	Sociomedical Sciences	
Moon Howard, Joyce	Clinical Associate Professor	Contract, Non-tenure	DrPH	Columbia University	Sociomedical Sciences	Community Health Science and Practice, Social and Behavioral Sciences
			MPH	Columbia University	Sociomedical Sciences	
Navario, Peter	Clinical Associate Professor	Contract, Non-tenure	PhD	University of Cape Town	Health Economics	PHP, Global Health
			MPH	Yale University	Global Health	
Niaura, Raymond	Professor	Tenured	PhD	Rutgers University	Psychology	Social and Behavioral Sciences
			MS	Rutgers University	Psychology	

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
O'Connor, Joyce	Clinical Associate Professor	Contract, Non-tenure	DrPH	Columbia University	Health Policy	Public Health Nutrition, Epidemiology
			MA	Columbia University	Nutrition and Health Education	
Ompad, Danielle	Associate Professor	Tenure-track	PhD	Johns Hopkins University	Epidemiology	Epidemiology, Social and Behavioral Sciences
			MHS	Johns Hopkins University	Epidemiology	
Pagán, José	Professor	Tenure pending	PhD	University of New Mexico	Economics	Public Health Management, Public Health Policy
			MA	Ohio State University	Economics	
Parekh, Niyati	Associate Professor	Tenured	PhD	University of Wisconsin	Nutritional Sciences	Public Health Nutrition, Epidemiology
			MS	Mumbai University	Foods, Nutrition, and Clinical Dietetics	
Parikh, Nina	Clinical Associate Professor	Contract, Non-tenure	PhD	Columbia University	Sociomedical Sciences	Social and Behavioral Sciences, Biostatistics
			MPH	Emory University	Health Policy and Management	
Peprah, Emmanuel	Assistant Professor	Tenure-track	PhD	Meharry Medical College	Molecular Biology & Biomedical Science	Global Health, SDG
Pomeranz, Jennifer	Assistant Professor	Tenure-track	JD	Cornell University	Law	Public Health Policy, Public Health Nutrition
			MPH	Harvard University	Nutrition, Obesity, Law and Policy	
Silver, Diana	Associate Professor	Tenured	PhD	New York University	Public Administration	Public Health Policy, Social and Behavioral Sciences
			MPH	Hunter College	Health Education	
Silverman, Andrea	Assistant Professor	Joint-Tenure track	PhD	University of California, Berkeley	Environmental Engineering	Environmental Public Health Sciences
			MS	University of California, Berkeley	Environmental Engineering	
Tozan, Yesim	Assistant Professor	Tenure-track	PhD	Princeton University	Public Affairs	Global Health, SDG, Community Health Science and Practice
			MA	Princeton University	Public Affairs	
			MS	Boğaziçi University	Environmental Technology	

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Name	Title/Academic Rank	Tenure Status or Classification	Graduate Degrees Earned	Institutions from which degrees were earned	Discipline in which degrees were earned	Concentration(s) affiliated with in Table C2-1
Watkins, Beverly	Clinical Associate Professor	Contract, Non-tenure	PhD	Columbia University	History	Epidemiology
			MA	Columbia University	Sociomedical Sciences	
Xu, Shu (Violet)	Clinical Assistant Professor	Contract, Non-tenure	PhD	University of California, Davis	Quantitative Psychology	Biostatistics, Epidemiology
			MA	University of California, Davis	Quantitative Psychology	
Yang, Lawrence	Associate Professor	Tenured	PhD	Boston University	Clinical Psychology	Social and Behavioral Sciences, Biostatistics
			MA	Boston University	Clinical Psychology	

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

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Adanu, Richard M.K.	Professor	Dean and Professor, School of Public Health, University of Ghana	0.4	MB. ChB MPH	University of Ghana Medical School Johns Hopkins University	Medicine Maternal and Child Health	Epidemiology
Addo-Lartey, Adolphina	Lecturer	Lecturer, University of Ghana	0.4	PhD MS	University of Massachusetts, Amherst Iowa State University	Nutritional Epidemiology Human Nutrition	Epidemiology
Adongo, Philip Baba	Associate Professor	Head of Department of Social and Behavioral Science, Associate Professor at School of Public Health of University of Ghana. Research Professor, College of Global Public Health, New York University	0.2	PhD MS	University of Keele University of London	Epidemiology and Population Health Social Medical Anthropology	Epidemiology
Alcorn, Ted	Assistant Professor	Director of Innovation, Every Town for Gun Safety	0.2	MPH MA	Johns Hopkins University Johns Hopkins University	International Health International Affairs	Social and Behavioral Sciences
Asampong, Emmanuel	Senior Lecturer	Senior Lecturer, School of Public Health, University of Ghana	0.2	PhD MPhil	University of Ghana University of Ghana	Psychology Clinical Psychology	Epidemiology
Bae, Jean	Adjunct Assistant Professor	Senior Policy Analyst, NYCDOHMH	0.1	JD MPH	Harvard University NYU	Law Policy and Management	Global Health
Bertelsen, Nathan	Associate Professor	Associate Professor, NYU School of Medicine	0.4	MD	University of Minnesota	Medicine	Global Health

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Boehme, Amelia	Adjunct Assistant Professor	Assistant Professor of Epidemiology in Neurology at Columbia University Medical Center	0.6	PhD MS	University of Alabama, Birmingham University of Alabama, Birmingham	Epidemiology Epidemiology	Epidemiology
Burgie, Andrew	Adjunct Assistant Professor	Co-Director Hunter College Center for Occupational and Environmental Health	0.2	MS	Johns Hopkins University	Environmental and Occupational Health Science	Environmental Public Health Sciences
Capasso, Ariadna	Doctoral Student	Graduate Adjunct	0.1	MFA	University of Colorado, Boulder	Media and Communications	Global Health
Carlton, Jane	Professor	Professor of Biology, NYU	0.2	PhD	University of Edinburgh	Parasite Genetics	Global Health
Chan, Anthea	Adjunct Assistant Professor	Research Assistant, Columbia University; Research Intern/General Extern, NYU	0.2	MA	Columbia University	Clinical Psychology	Biostatistics
Cohen, Alexis	Assistant Professor	Clinical Assistant Professor of Pediatric Dentistry at NYU School of Dentistry	0.2	DDS MPH	New York University	Dentistry Global Public Health	Global Health
Coyle, Christina	Adjunct Associate Professor	Adjunct Associate Professor, NYU	0.2	ScD MHS	Tulane University Johns Hopkins University	Health Systems Epidemiology	Global Health
D'Aunno, Thomas	Professor	Joint-tenured Professor, NYU Wagner School of Public Service, NYU College of Global Public Health	0.5	PhD MA	University of Michigan, Ann Arbor University of Maryland, Baltimore	Organizational Psychology Community-Clinical Psychology	Public Health Management

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Gonzalez, Sonia	Adjunct Assistant Professor	Adjunct Professor, New York University	0.2	DPH MPH	City University of New York Columbia University	Community, Society, and Health Population and Family Health	Community Health Science and Practice
Gulino, Kristen	Doctoral Student	Graduate Adjunct	0.4	BS	Pace University	Biology	Epidemiology
Guttentag, Alexandra	Doctoral Student	Graduate Adjunct	0.2	BA	Johns Hopkins University	Public Health	Social and Behavioral Sciences
Guttmacher, Sally	Adjunct Associate Professor	Senior Technical Advisor at HealthRight International	0.2	PhD MPhil	Columbia University University of London	Sociomedical Sciences Oriental and African Studies	Community Health Science and Practice
Herman, Neal	Professor	Clinical Professor and Director, Visiting Scholars Program in the Department of Pediatric Dentistry, New York University College of Dentistry	0.2	DDS	New York University	Dentistry	Global Health
Jaiswal, Jessica	Assistant Professor	Faculty Fellow, NYU College of Global Public Health	0.4	PhD MPH	Columbia University Emory University	Sociomedical Sciences Behavioral Sciences and Health Education	Social and Behavioral Sciences
Jones, Donovan	Adjunct Assistant Professor	Director of Jurisdictional HIV Testing Initiatives, NYCDOHMH Department of Health and Mental Hygiene	0.4	MPH	New York University	Public Health Policy and Management	Epidemiology
Juul, Filippa	Doctoral Student	Graduate Adjunct	0.4	Master's	Karolinska Institutet	Public Health Nutrition	Public Health Nutrition
Kiess, Lynnda	Lecturer	Senior Programme Advisor, World Food Programme	0.1	MPH	Johns Hopkins University	Public Health	Public Health Nutrition
Liao, S. Matthew	Professor	Director of Center for Bioethics, Arthur Zitrin Professor of Bioethics	N/A	D.Phil.	Oxford University	Philosophy	Bioethics (non-public Health)

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Lieff, Sarah	Doctoral Student	Graduate Adjunct	0.4	MPH	University of North Carolina, Chapel Hill	Health Behavior	Social and Behavioral Sciences
Litvak, Jacqueline	Doctoral Student	Graduate Adjunct	0.2	MPH MS	Yale University Columbia University	Chronic Disease Epidemiology Human Nutrition	Epidemiology
Mehra, Divya	Lecturer	Policy Program Officer, Nutrition Advisory, World Food Programme	0.1	DrPH MPH	Columbia University Columbia University	Environmental Public Health Sciences Health Policy and Management	Public Health Nutrition
Meltzer, Gabrielle	Doctoral Student	Graduate Adjunct, Teaching Assistant	0.2	BA	University of Pennsylvania	Health and Sciences; International Development	Epidemiology
Murray, Laura	Adjunct Assistant Professor	Anthropology and Food Studies Doctoral Student at NYU Graduate School of Arts and Science	0.2	MA	Columbia University	Anthropology, Culture, and Media	Social and Behavioral Sciences
Nestle, Marion	Professor	Professor Emerita, NYU Steinhardt School, Department of Nutrition and Food Studies	0.2	PhD MPH	University of California, Berkeley University of California, Berkeley	Molecular Biology Public Health Nutrition	Public Health Nutrition
Ogedegbe, Olugbenga	Professor	Joint-tenured Professor of Population Health and Medicine, NYU School of Medicine, Associate Vice Chancellor of Global Network Academic Planning	0.5	MD MPH MS	Medicine Public Health Health Services Research and Clinical Epidemiology	Donetsk State Medical University Columbia University Weill Cornell Graduate School of Medical Sciences	Public Health Management

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Ojo, Temitope	Doctoral Student	Graduate Adjunct	0.4	MPH	Yale University	Chronic Disease Epidemiology	Epidemiology
Oyegbite, Kayode	Adjunct Assistant Professor	UNICEF consultant to the Federal Ministry of Health	0.5	DrPH MPH	Columbia University John Hopkins University	Health Care Administration and Management Health Care Administration and Management	SDG
Pernell, Chris	Adjunct Associate Professor	Senior Manager, Labor Management Project	0.6	MD MPH	Duke University Columbia University	Medicine Public Health Nutrition	Public Health Policy
Pesso, Lauren	Lecturer	Program Director, HealthRight International	0.1	MSW MPA	Columbia University Columbia University	Advanced Clinical Practice Public Policy and Administration	Global Health
Piltch-Loeb, Rachael	Doctoral Student	Graduate Adjunct	0.4	MS	Johns Hopkins University	Public Health	Social and Behavioral Sciences
Pozen, Joanna	Assistant Professor	Senior Technical Advisor at HealthRight International; Director, Health and Human Rights Initiative	0.1	JD MPH	New York University Harvard University	Law Law and Public Health	Global Health
Quansah, Reginald	Assistant Professor	Lecturer, School of Public Health, University of Ghana	0.2	PhD M.Sc.	University of Birmingham, UK Lulea University of Technology	Environmental and Occupational Science Environmental and Occupational Science	Epidemiology

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Raveis, Victoria	Research Professor	Research Professor of Cardiology and Comprehensive Care at the NYU College of Dentistry	0.1	PhD MPhil MA	Columbia University Columbia University Boston College	Sociology Sociology Sociology	Social and Behavioral Sciences
Roberts, Eric	Lecturer	Associate Research Scientist, NYU College of Global Public Health	0.2	MPH	University of Michigan	Epidemiology	Epidemiology
Rom, William	Professor	Professor of Medicine and Environmental Medicine, NYU School of Medicine	0.2	MD MPH	University of Minnesota Harvard University	Medicine Environmental Health	Environmental Public Health Sciences
Ruff, Ryan	Assistant Professor	Director of MS Program in Clinical Research, Director of Biostatistics Fore, Department of Epidemiology and Health Promotion at NYU School of Dentistry	0.4	PhD MPH MPhil	University of Virginia Harvard University University of Cambridge	Statistics and Evaluation Epidemiology Education Policy	Biostatistics
Ryan, Nessa	Doctoral Student	Graduate Adjunct, Director of Research at Restore Health, Inc.	0.2	M.Sc.	New York University	Comparative Effectiveness Research	Community Health Science and Practice
Sandh, Simon	Doctoral Student	Graduate Adjunct	0.2	MPH	Hunter College	Community Health Education	Social and Behavioral Sciences
Sarfo, Bismark	Assistant Professor	Assistant Professor, University of Ghana School of Public Health	0.1	PhD MPH	University of Ghana University of Georgia	Biochemistry and Immunology Epidemiology	Epidemiology
Schieffler, Danny	Associate Professor	Adjunct Instructor, NYU	0.4	PhD MSW	Tulane University Tulane University	Global Health Systems Management Social Work and Clinical Mental Health Counseling	Public Health Management, Public Health Policy

Table E1-2 Non-Primary Instructional Faculty Regularly Involved in Instruction

Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Table C2-1
Shirazian, Taraneh	Assistant Professor	Assistant Professor of Obstetrics and Gynecology, NYU Langone Health	0.2	MD	Brown University	Obstetrics and Gynecology	Global Health
Spoer, Benjamin	Doctoral Student	Graduate Adjunct	0.4	MPH	Columbia University	Population and Family Health	Social and Behavioral Sciences
Van Devanter, Nancy	Professor	Associate Professor, New York University College of Nursing and Dentistry; NYU College of Nursing Center for Drug Use and HIV Research	0.1	DrPH MPH EdM	Columbia University Harvard University Boston University	Sociomedical Sciences Health Policy Management Educational Administration	Social and Behavioral Sciences
Vieira, Dorice	Associate Curator	Clinical Librarian at NYU Health Sciences Libraries; Associate Curator at NYU Langone Health Medical Library; Clinical Outreach and Grad Medical Educational Librarian at NYU Langone Health	0.2	MPH MA MLS	New York University Brooklyn College University of Pittsburgh	Global Public Health English Library and Information Sciences	Social and Behavioral Sciences
Weitzman, Michael	Professor	Professor of Pediatrics and Environmental Medicine at NYU Langone Health	0.2	MD	SUNY Health Science Center at Syracuse	Pediatrics	Environmental Public Health Sciences
Yeates, Karen	Associate Professor	Visiting Associate Professor, NYU College of Global Public Health	0.2	MD MPH	Queen's University Harvard University	Medicine Public Health	Global Health
Zelikoff, Judith	Professor	Professor, NYU School of Medicine	0.2	PhD MS	UMDNJ-New Jersey Medical School Fairleigh Dickinson University	Experimental Pathology Microbiology	Environmental Public Health Sciences

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

CVs for all of the above primary and non-primary faculty can be found in ERF E1.3.

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

Faculty listed in Table E1-1 represent those whose primary appointment lies with GPH and who teach for the MPH program on a regular basis.

Instructors listed in Table E1-2 fall under any of the following categories:

1) Non-primary faculty who have a joint appointment with GPH and another NYU school
2) NYU faculty whose appointments are elsewhere in the University and teach courses in GPH
3) Adjuncts: instructors who do not have a faculty appointment at NYU and who have taught one or two courses in academic year 2017–18
4) Doctoral students who teach MPH courses

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

Strengths:

GPH primary faculty members represent multiple disciplines and are well suited to their areas of instructional responsibility. Due to the inherent interdisciplinary nature of global public health, a number of adjuncts and other non-primary faculty participate regularly in our educational activities. This use of various professionals, including outside of the field of public health, serves to enhance the learning experience of students in our programs.

Weaknesses:

None noted.

E2. Integration of Faculty with Practice Experience

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

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

1) **Describe the manner in which the public health faculty complement integrated perspectives from the field of practice, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.**

   The public health faculty is a blend of academic researchers and experienced public health practitioners, and many faculty members have a combined academic and applied focus. A number of faculty members have spent the majority of their careers working in the field (e.g., NYC Department of Health and UNICEF). This blend of experiences provides a rich environment for students to benefit from faculty expertise in applied aspects of public health. Faculty incorporate their practice experience and expertise in their courses through content covered, examples provided, and guest speakers from the domain of public health practice. Examples of faculty involvement in public health practice include:

   - A Global Health/Environmental Public Health Sciences faculty member consults on a number of applied environmental health projects in the field, both global and domestic. He directly linked a lesson on lead poisoning with one of his projects in Africa so students could relate the lesson content to actual practice.

   - A Public Health Policy and Management professor spent more than 20 years at the New York City Department of Health and Mental Hygiene before joining GPH and continues to consult with city agencies and labor unions.

   - The faculty member who developed our online Sustainable Development Goals (SDG) MPH concentration was an advisor for UNICEF for 29 years and continues to collaborate with the organization on practice experiences for students.

   Adjunct faculty or faculty affiliated with other schools at NYU, including the School of Medicine, College of Dentistry, and Wagner Graduate School of Public Service, also teach several courses at GPH. These faculty have deep field and practice experience, and they expose students to a wide set of skills and professional backgrounds. We also have adjunct faculty from government agencies, private industry, the UN, and public health sector agencies. One such example is an adjunct faculty in Epidemiology who is a Director of Epidemiology at a major pharmaceutical company.

   The draft guidelines developed by the Faculty Appointments and Promotion-Clinical (FAP-C) Committee recognize the importance of public health practice as a significant criterion to be considered in the clinical faculty hiring and promotion process. The draft guidelines were reviewed by GPH leadership and sent to the University Provost's Office for final review and comments (see draft of FAP-C guidelines in ERF E2.1). The Provost's comments will be incorporated into the document and presented to the faculty in Academic Year (AY) 2018–19.

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

Strengths:

NYU GPH actively recruits faculty from the world of public health practice representing a breadth of public health experiences and professional backgrounds. Practice is recognized as an important element in the faculty appointment and promotion process. In addition, GPH recently hired a new faculty member to serve as Director of Public Health Practice, which will enable us to expand our efforts to recruit public health practitioners to serve as adjuncts, guest speakers, and applied practice preceptors.

Weaknesses:

None noted.

E3. Faculty Instructional Effectiveness

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

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

The school supports professional development and advancement in instructional effectiveness.

1) Describe the means through which the school ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant.

Facilitating faculty currency is promoted through department seminars and lectures, which provide the opportunity to discuss discipline-specific case studies, practice experiences, and research initiatives. A number of departments host journal clubs to share new methods and innovations in the field. Our faculty present their research findings at faculty meetings. Further, to encourage continued professional education, we provide all our faculty with annual Individual Development Account funds that can be used to attend public health and discipline-specific meetings.

In terms of instructional responsibility, Department Chairs and Program Directors review all faculty CVs and assign courses based on faculty areas of expertise. Each spring, faculty are required to update their CVs and complete an annual professional activity report. Both documents, as well as course evaluations, are reviewed by the faculty's Department Chair or Program Director to ensure the faculty member has engaged in scholarship, practice, and community service within their discipline in public health.

Faculty who propose a new course must receive prior approval from a Department Chair or Program Director to teach that course before it is submitted to the Academic Affairs Committee. We draw on the faculty's areas of expertise when developing electives. For example:

- Joshua Epstein, PhD, recently joined the Epidemiology department as a primary instructional faculty member. Dr. Epstein is a renowned scholar in agent-based modeling, and he developed several master's and doctoral courses on this topic for GPH.
- Taraneh Shirazian, MD, a non-primary instructional faculty member from the NYU School of Medicine who is also a board-certified gynecologist and a recognized expert in global maternal mortality, teaches an MPH elective on global women's health.
- Renowned professor emerita Marion Nestle, PhD, MPH, from the NYU Steinhardt School of Culture, Education, and Human Development, teaches an elective on food policies and politics.

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

Course evaluations by students are the essential mechanism for assessing course content and presentation. These evaluations provide data that may be used in support of a faculty member's development, as well as considerations for promotion and tenure. The evaluations also provide the student body with a voice in ensuring an effective instructional faculty and curriculum.

Student course evaluations of faculty teaching are administered every semester for each course, with the exception of such courses as Independent Study, Doctoral Advisement, and Maintenance of

Matriculation. GPH uses an NYU-wide, standard final course evaluation questionnaire, which is administered through Albert, NYU's registration system. The evaluation may be completed via mobile phones, computers, or laptops. All course evaluations are anonymous and confidential.

Course evaluations ask students to rate both the course and the instructor across a number of dimensions through Likert scale ratings, as well as optional open-ended questions asking students what they liked about a course and the instructor, what the instructor did well, and what could be improved.

Upon submission of final grades, faculty have access to their course evaluation results through Albert. At the end of each semester, the Senior Associate Dean for Academic and Faculty Affairs reviews all course evaluations and shares them with Department Chairs and Program Directors. If needed, remediation efforts are discussed with the instructors, which may include mandatory attendance of teaching and learning workshops.

3) Describe available university and programmatic support for continuous improvement in faculty's instructional roles. Provide three to five examples of school involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

The University offers a number of ongoing professional development programs, which are available to primary and non-primary instructional faculty and include the following:

- NYU's Center for the Advancement of Teaching is a key resource for faculty to enhance general instructional techniques, learn new pedagogical methods, and obtain instructional feedback through teaching-intensive workshops, teaching lunch programs, and confidential teaching consultations and observations.
- Faculty and staff are required to participate in a series of workshops sponsored by the University's Diversity, Equity and Inclusion Taskforce that align with GPH's commitment to enhancing diversity. Topics including diversity training, micro-aggression in the work environment, recruitment and training procedures, and building a culture of equity, diversity, culture, and belonging.
- NYU IT's Global Learning and Innovation (GLI) team consults with faculty to help determine the best ways to integrate innovative pedagogy and state-of-the-art media into courses, engaging collaboratively in the design, development, and implementation of course design with faculty. GPH faculty and the Instructional Technology Team work with GLI towards the efforts of GPH, as well as to assist with initiatives for the University and other colleges and schools. Each semester, this group also offers a Technology Educational Expo in which GPH faculty regularly participate.
- As part of the University's investment in enhancing the global learning environment, GPH faculty are encouraged to teach throughout the well-developed NYU Global Network at one or more of its 11 campuses around the world. GPH faculty who teach at these campuses participate in a series of workshops around innovative pedagogy and state-of-the-art learning across the globe and in the classroom.

Another key opportunity for enhanced teaching arose from a large NYU grant to GPH focused on developing high-quality online teaching. The Director of the Advanced Certificate in Public Health program served as principal investigator. GPH hired educational technologists who worked with faculty to develop online courses and enhance the online learning experience with state-of-the-art technology, tools, methods, and case studies. All departments and programs offer multiple online courses. The level of instruction in both online and in-person formats has been enhanced from this initiative, and the improvement process continues today.

Since 2016, GPH has developed and expanded faculty development efforts to include such topics as teaching and learning how to evaluate group projects, syllabus development, and student-focused

learning. In order to ensure maximum impact, these workshops are part of the regular GPH faculty meetings for both primary and non-primary faculty.

The GPH Director of Educational Advancement and Assessment represents GPH at the University Assessment Council convened by the Provost's Office to promote assessment of educational programs. The Director received two mini-grants from the Office of Academic Assessment through which we developed several tools to assist our instructional faculty, including a guide to developing assessment rubrics and a guide to course design (see Assessment Rubrics Guide and the Guide to Course Design in ERF E3.3). She also has developed a number of teaching resources for our faculty, including guides to addressing the new CEPH competency requirements. The materials are available on the Faculty Teaching Resources page of our website.

In addition, all faculty receive annual funds for their Individual Development Account (IDA), which can be used for instructional development activities.

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

As described in the draft guidelines for promotions for tenured and clinical faculty, teaching contributions and the quality of teaching are important considerations for advancement. The draft guidelines for Clinical faculty specify that clinical faculty can advance based on a primary focus on teaching incorporated with practice or research activities (drafts of the FAP-T and FAP-C guidelines can be found in ERF E3.4).

Each tenure-track faculty meets quarterly with a mentoring committee that provides guidance related to the faculty's teaching, research, and publications. Additionally, tenured and tenure-track faculty are evaluated in terms of teaching, scholarship, and research productivity at annual performance meetings with their Department Chair or Program Director. All tenured and tenure-track faculty are expected and supported to assemble mentoring committees at all career levels. In addition, the Office of Research sponsors a series of workshops focused on grant writing, training grants, and career development.

Clinical faculty contract renewals are determined by the Senior Associate Dean for Academic and Faculty Affairs based in part on review of teaching contributions, course evaluations, and evaluations by Department Chair or Program Director.

5) Select at least three indicators, with one from each of the listed categories that are meaningful to the school and relate to instructional quality. Describe the school's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists in the criteria, the school may add indicators that are significant to its own mission and context.

The Accreditation Committee selected five indicators across each of the three categories identified in the criteria and incorporated them into the GPH Goals and Objectives. See ERF E3.5 for Accreditation Committee meeting minutes regarding goals, objectives, and indicators: December 16, 2015; February 10, 2016; February 24, 2016; and March 9, 2016. We report here our approach and progress for each of the selected indicators. Please note that AY 2017–18 was the first year of data collection. Going forward, we will collect data annually.

1. Faculty Currency: Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc.:

   In Fall 2017, the Academic Affairs Committee developed procedures for conducting a strategic assessment of the MPH curriculum every four years and for implementing a continuous quality improvement system for the curriculum. These procedures involve faculty review of the MPH curriculum and will be implemented starting in AY 2018–19. (Minutes of the November 29, 2017, and December 13, 2017, Accreditation Committee meetings are in ERF E3.5.) Procedures developed by the Academic Affairs Committee include the following:

- Conduct annual meetings with core course instructional faculty to assess and review implementation of foundational competencies in the core curriculum, with a comprehensive review every four years. This will include a process for core course instructional faculty to collaboratively develop learning objectives.
- Conduct annual departmental meetings to evaluate and examine how the core courses fit into their curriculum and how the concentration curricula can build on what is being taught in their respective core courses.
- Departments and programs will evaluate the MPH concentration curricula every four years and report findings to the Academic Affairs Committee.
- Core and concentration course syllabi will be reviewed every two years by the Academic Affairs Committee and departments and programs to ensure that they maintain currency and reflect accreditation curriculum requirements.
- Implement procedures to maintain fidelity to the approved curriculum and accreditation standards while also allowing faculty flexibility to make improvements in their courses. For example:
    - Changes to course descriptions, learning objectives, and competencies cannot be changed without prior approval of the Academic Affairs Committee for core courses and prior approval of the Department Chair or Program Director for concentration courses.
    - Departments and programs will designate a course director for each core and concentration course who will oversee coordination across sections of a course and orient new course instructors and adjuncts.
- Conduct assessments of other schools and public health employers to continuously keep up with the trends in public health education.

2. Faculty Instructional Technique: Participation in professional development related to instruction:

The Academic Affairs Committee developed the following procedures to promote excellence in pedagogy among faculty and doctoral students (see minutes of December 13, 2017, meeting in ERF E3.5):

- Doctoral students should attend at least two workshops and/or an individual teaching consultation offered by the NYU Center for the Advancement of Teaching.
- Upcoming workshops and events offered by the University's Center for the Advancement of Teaching should be mentioned in the weekly Dean's Update sent to all faculty, students and staff.

We also conduct at least two professional development workshops related to instruction each year at one of the regular monthly faculty meetings. In AY 2017–18, we conducted a workshop on assessing individual student performance in group projects and a workshop on syllabus development (see minutes of October 11, 2017, and November 15, 2017, faculty meetings in ERF E3.5). Handouts from these workshops can be found on the GPH website on the Teaching Resources page.

3. Faculty Instructional Technique: Student satisfaction with instructional quality:

Student satisfaction with instructional quality is monitored through course evaluations completed each semester for all courses. These evaluations are provided to course instructors, Department Chairs, and Program Directors. The Senior Associate Dean for Academic and Faculty Affairs encourages Chairs and Directors to meet with course instructors with relatively low ratings to discuss ways to improve their instruction.

Data from AY 2015-16 and AY 2016-17 indicate that more than 80% of courses were rated as good or excellent. This finding was reviewed by the Academic Affairs Committee at its December 13, 2017, meeting (see minutes from this meeting in ERF E3.5). At a subsequent meeting on February 14, 2018 (see minutes from this meeting in ERF E3.5), the Academic Affairs Committee discussed approaches for improving response rates for the course evaluations so the College can obtain a more valid assessment of student satisfaction with the quality of our instruction.

4. School-level Outcomes: Courses that integrate technology in innovative ways to enhance learning:

   Responding to student demand for flexibility in course offerings, GPH has increased the number of online courses offered to GPH students. As of Spring 2018, 30 courses were taught using an online platform (a full listing of our online course offerings is in ERF E3.5). In addition, a total of 36 courses incorporate a variety of technological approaches, including computational modeling, online discussion forums, interactive case studies, and creating videos and infographics (a listing of the courses is included in the Measures of Faculty Instructional Effectiveness Report, which can be found in ERF E3.5).

5. School-level Outcomes: Courses that integrate community-based projects:

   In AY 2017-18, 20 courses integrated community-based projects (a listing of the courses is included in the Measures of Faculty Instructional Effectiveness Report in ERF E3.5).

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

Strengths:

NYU and GPH have numerous resources to promote faculty instructional effectiveness, including workshops, one-on-one consultations, and curriculum development materials. We have integrated enhanced learning technology into the curriculum with a large number of hybrid and fully online courses. The Academic Affairs Committee developed a strong plan for ensuring the quality of our curriculum.

Weaknesses:

We recognize the need to develop additional approaches to assess the quality of instruction in our courses.

Plans:

In AY 2018–19, the Academic Affairs Committee will develop recommendations for additional methods for assessing instructional effectiveness.

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E4. Faculty Scholarship

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

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

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

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

The College's definition of faculty research and scholarly activity includes engagement in and a scholarly pursuit around questions related to reducing challenges to public health, both internationally and domestically. All faculty, whether tenured, tenure-track, or clinical, are expected to engage in the pursuit of scholarship to some extent, including traditional tenured and tenure-track definitions of scholarship and more practice-related activities as well. A full description of these expectations at different faculty ranks is provided in the Faculty Appointments and Promotion—Tenure (FAP-T) and the Faculty Appointments and Promotion—Clinical (FAP-C) documents (see drafts of the FAP-T and FAP-C guidelines in ERF E4.1).

Within their fields of inquiry, our researchers engage in activities that include a wide range of research topics and methodologies, including, for example, large-scale intervention and implementation programs, new techniques in methodological design and data analysis, community engagement activities, program evaluation projects, and many others. The indicators of scholarship are provided in the FAP-T and FAP-C documents.

The College's criteria for faculty research and scholarly activity is extremely comprehensive and includes, but is not limited to:

- active submission to or award from NIH, foundational, and other funding sources
- peer-reviewed publications and/or practice-relevant journals
- public health practice documents
- evaluation summary documents
- legislative reports
- technical reports/presentations
- subsequent requests for technical assistance
- official/practice appointments
- honors, awards, and recognition of faculty at the local, national, and international level

2) Describe available university and school support for research and scholarly activities. (self-study document).

<u>Research Development Support:</u>

Throughout the year, NYU supports faculty research through a series of funding announcements that provide pilot support for different types of research activities. Examples of key areas for pilot funding relevant to public health include:

- Mega Grant funding (pilot awards that offer seed funding of up to $50K associated with preliminary research in anticipation of awards in excess of $10,000,000)
- Global Network University awards (pilot funding designed to enhance research collaborations with researchers around NYU global network sites)
- University Research Challenge grants (funding at $15K to allow researchers to collect preliminary data for future external submissions)

GPH faculty have been extremely successful in obtaining pilot funding. Further, these pilot awards have provided funding for students to participate in productive research experiences.

The NYU–Health + Hospitals (H+H) Clinical and Translational Science Institute (CTSI) supports clinical and translational research that transforms healthcare and improves community health. GPH partners with the CTSI, and our doctoral students, in particular, have taken advantage of training opportunities and funding for their research. Other components of the CTSI that serve as research resources include the Recruitment and Retention Unit and the Clinical Research Services Unit.

University-wide Research Logistics Support:

There are two Institutional Review Board (IRB) groups at NYU: one that provides services to the schools and colleges at NYU's Washington Square campus, and another covering the NYU School of Medicine (SOM). A further distinction lies in the ability of the SOM IRB to cover clinical research and research involving personal medical information. At GPH, our Research Unit provides guidance on choosing the appropriate IRB group, with many of our faculty submitting protocols to either of these NYU IRBs depending on the appropriateness for any given submission.

The University Committee on Activities Involving Human Subjects (UCAIHS) serves as NYU's Institutional Review Board for the Washington Square units of the University and is authorized to review and approve research involving human subjects through an agreement with the U.S. Department of Health and Human Services. The UCAIHS is composed primarily of faculty members from disciplines in which research involving human subjects is integral (e.g., psychology, sociology, anthropology, education, nursing, social work, and dentistry). The UCAIHS also includes a community member with no affiliation to New York University.

The NYU Office of Sponsored Programs (OSP) is dedicated to supporting and enhancing the education, service, and research programs of NYU (except for the School of Medicine). It ensures compliance with University, sponsor, and government policies and procedures. OSP's services include:

- reviewing and providing institutional endorsement for sponsored project proposals
- ensuring that the University is fully compliant with sponsor terms and conditions, as well as college and sponsor regulations and requirements
- reviewing, approving, and facilitating NYU's post-award actions that require sponsor approval, such as a change in the principal investigator, revisions to budgeting, submissions of progress reports, no-cost extensions, and other notifications
- reviewing, interpreting, and disseminating policies from federal sponsoring agencies and other external sponsors
- negotiating and accepting sponsored awards in the form of grants, contracts, and cooperative agreements, and issuing sub-awards on behalf of NYU

In response to the growing complexities and challenges inherent in leading and collaborating on research and other sponsored activities internationally, a working group of the Advisors on Foreign Activities and Research (AFAR) has been established to increase the level of support provided to NYU faculty and students involved in research and other sponsored programs abroad.

NYU School of Medicine Research Resources:

The Office of Research Compliance (ORC) at the NYU School of Medicine provides support and education for faculty, students, and staff conducting scientific research in accordance with regulatory requirements and ethical standards. The ORC has three main responsibilities: Oversight of research compliance, education, and serve as an information clearinghouse. The ORC supports all research-related institutional oversight functions, including:

- human subjects protections
- animal subjects protections
- conflict of interest
- scientific misconduct and responsible conduct of research
- financial administration of research
- environmental health and safety
- radiation safety

GPH Resources to Support Research Development:

The Research Office at GPH is a strong and proactive group that has become a key office in the College. It is responsible for the development, submission, and programmatic and financial management of new proposals and awards. To date, the College has submitted 304 grant applications for a total of $222.8 million of potential funding, and has managed 149 awards totaling $26.2 million in funding.

At GPH, we foster a commitment to early career research development. In addition to the Senior Associate Dean for Research and Program Development, we hired an experienced public health researcher to develop and direct the Junior Faculty Mentoring Program to enhance the success of junior faculty obtaining career development awards. Additionally, we started an early career research summer institute for faculty to receive summer salary, participate in grant development curriculum, and receive targeted feedback with the goal of successful grant submission the following academic year.

The Junior Faculty Mentoring Program was launched in Fall 2017. Members meet in twice-monthly group sessions, plus individual one-on-one sessions. To date, the group has discussed numerous topics to benefit the research agenda of the junior faculty, including time management, grantsmanship, and publications. As of July 1, 2018, there were nine active junior faculty members participating in the program and four small grants have been submitted, with one accepted. One competitive workshop (NIA) application was submitted and accepted, and one NIH career development proposal was submitted, with the outcome still unknown.

In June 2018, the group transitioned into a paper-writing group since many faculty cited the need for a structured writing environment. There are seven active members in the summer writing group. In the first month, three papers were completed and submitted. Each week, the group discusses progress made since the previous week and such pertinent issues as management of co-authors, time management, and journal choice.

GPH also sponsors faculty trainings related to research. A faculty workshop on training program funding mechanisms was hosted by the Office of Research in Spring 2018, and approximately seven faculty attended. A special two-hour training program on mentoring of students was held for all faculty in Spring 2018, which was attended by more than 25 faculty. A joint faculty-doctoral student mentoring luncheon was also held in Spring 2018. More than 20 people attended, including approximately 10 faculty members.

Other examples of successful research strategies include research workshops, quarterly research mentorship team meetings targeted to faculty rank, activities promoting multi-department/multi-school collaborations (e.g., research speed dating), recycling unfunded proposals, biweekly dissemination of funding opportunities, and tailored faculty plans for specific grant challenges, such as grant re-

submissions. As we move forward, we continue to add additional strategies to enhance the research portfolio of the College.

3) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students.

One of our goals at GPH is a focus on integrating practice, training, and research. To that end, our faculty actively design courses that allow students to engage in research experiences in real time. Examples include:

- Social and Behavioral Sciences faculty Dr. David Abramson is a researcher who specializes in disaster resilience and has conducted a series of seminars about disaster preparedness. He taught courses in disaster preparedness in Israel and Cuba, and students were integrated into research/practice experiences in both locations. Additionally, students in a Capstone course traveled to New Orleans and assisted in Dr. Abramson's research on disaster resilience.
- For the last two years, social epidemiologist Dr. Danielle Ompad has conducted research on drug use in Ukraine. Each January, she takes an MPH Capstone team to Ukraine to engage in qualitative and quantitative data collection. Students also have the opportunity to use the data for their MPH thesis.
- As part of the GPH two-semester thesis course, students work closely with a faculty mentor to develop and conduct a research project drawing on the faculty mentor's current research activities. Under faculty guidance, students have the opportunity to learn various aspects of conducting research, e.g., development of protocols, primary data collection, data management, data analysis, and preparation of manuscripts and presentations.

4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities. (self-study document)

Among GPH's unique and innovative features are the over 25 public health "labs" developed by faculty to foster research and scholarship and promote hands-on learning experiences for students**.** (We use the term "lab" here to encompass all similar entities variously named lab, initiative, or center.) Each lab is facilitated by several faculty who share a common methodological approach or content interest area. Labs provide an opportunity for student involvement in active faculty research and scholarship. A list of the labs can be found on the GPH website under Centers, Labs & Initiatives.

Below are three examples of GPH public health lab experiences:

- The Social Epidemiology and Research in Community Health (SEARCH) lab provides students the opportunity to actively engage in projects related to neurological and cardiovascular disease prevention and behavioral interventions with an eye toward addressing health disparities in diverse populations. SEARCH research assistants gain valuable quantitative and qualitative research experience, earn letters of recommendation, recruit and assist in clinical trials, analyze data, co-author manuscripts and conference presentations, develop research protocols, and advance independent projects. Drs. Bernadette Boden-Albala, Nina Parikh, and Emily Goldmann serve as facilitators of the SEARCH lab.
- The community-engaged Supplemental Nutrition Assistance Program (SNAP) lab was formed by faculty facilitators with expertise in nutrition (Dr. Joyce O'Connor) and law (Dr. Jennifer Pomeranz) to address community access to nutritional information. GPH undergraduates, alongside graduate-level nutrition, health policy, and community health students, performed a comprehensive literature review, conducted stakeholder roundtable discussions, created an IRB-approved study protocol, worked on a survey design, and conducted the survey in local supermarkets and food pantries.
- The GPH Claims lab leverages a unique research opportunity to utilize health insurance data (Medicare and Medicaid enrollment and claims databases) to answer real-world population health questions. One of the lab's objectives is to teach students how to deploy claims data to answer a

variety of population health questions. Students undergo in-depth training covering common sources of claims data, data access, and case studies in leveraging analyses to impact public health and the healthcare industry. The facilitators of this lab include GPH faculty Drs. Jose Pagan and Melody Goodman.

In addition, the College has an active portfolio of over 40 sponsored projects and well over 100 areas of scholarly pursuit. All our doctoral students are engaged in these research projects either as fellows or as doctoral research assistants, and currently eight projects include PhD students who serve as Research Assistants. This support covers salary for 20 hours of research work per week. Research assistants also have opportunities to present abstracts at national and international conferences. NIH-sponsored projects at GPH that support our PhD Research Assistants include:

- R01DA040930 (Dr. Thomas Kirchner), Marijuana Access at Point-of-Sale: Legalization, Attitudes, and Behavior (MapLab)
- P01HD082032 (Drs. David Abramson, Vanlandingham, and Waters), Demographic and Health Disparities in Recovery from Hurricane Katrina: Katrina @10
- R01MH108385 (Dr. Lawrence Yang), Characterizing Cognition Across the Lifespan in Untreated Psychosis in China
- R01AI132020 (Drs. Danielle Ompad, Farzana Kapadia, and Perry Halkitis), Application of a Syndemic Framework to HPV and HSV Infection in Emergent Adult Men
- U01NS086531 (Dr. Bernadette Boden-Albala) New York City Collaborative Regional Coordinating Stroke Center

Lastly, GPH has ongoing organized international scientific and scholarly activities, including cross-country research seminars and conferences where we engage faculty, students, and health and non-health sector professionals to come together to work on solutions to global health challenges. For example:

- GPH partners with the not-for-profit organization HealthRight International to create a platform for an annual Health and Human Rights (HHR) conference held at our NYU Florence site. Our MPH and doctoral students participated in the conference and in ongoing research collaborations focused on migration health, with emphasis on both the African and Middle Eastern migrant experience.
- GPH and the University of Ghana have been strong collaborators since 2014, developing several research and service opportunities. For example, in November 2017, a Cross-Continental MPH student, along with a local NGO called Concern Health United, organized a hypertension screening event in Accra, Ghana. The Mayor was in attendance and was presented with five blood pressure machines donated by the SEARCH lab. Approximately 300 community members were screened, and 120 people participated in a survey on cardiovascular disease awareness. The program was well received by the community and is under review as part of a larger NIH Fogarty application.

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

Research and scholarship are critical components of faculty advancement at GPH on both the tenure and clinical faculty tracks. For details, see drafts of the FAP-T and FAP-C guidelines for appointments and promotion in ERF E4.1

Faculty are expected to seek some salary support through research funding, as well as conduct and publish original empirical research in top-tier journals, or to publish university-press manuscripts that make significant contributions to the field. While there is no single metric for judging research productivity, statements regarding research progress, citations of a candidate's work, journal impact factor, and external reviewer assessments of current publications are a required and essential part of every tenured and tenure-track candidate's portfolio for promotion. Our faculty are inter-disciplinary, and team-based science is recognized as an important component of many active scholars' work. Through their research, tenured and tenure-track faculty are expected to establish a national reputation in their field.

Similarly, GPH fosters an expectation of research, teaching, and practice-based scholarship for our clinical faculty. Practice-based research often focuses on the adaptation of scientific discovery to real-world settings and may include implementation, dissemination, and advocacy. Clinical faculty are expected to engage in scholarly research either as an individual researcher or as a member of a research team. Evidence of scholarly contributions to their discipline may include submission of funding applications, including government, foundations, and private sources; publication of peer-reviewed papers, books, book chapters, and professional and technical reports; and invited lectures and contributions to professional meetings as well as an increasing national and international reputation in their respective fields.

6) Select at least three of the measures that are meaningful to the school and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. In addition to at least three from the list in the criteria, the school may add measures that are significant to its own mission and context.

The Accreditation Committee chose the following measures from the above list to indicate meaningful success for research and scholarly activities.

Table E4-1 Outcome Measures for Faculty Research and Scholarly Activity

Outcome Measure	Target	FY 15	FY 16	FY 17
Percent of Primary faculty participating in research activities	10% annual increase	10/25 40%	13/32 41%	21/41 51%
Number of grant submissions	10% annual increase	70	67	89
Number of community-based research projects	10% annual increase	1	5	10

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

Strengths:

We have developed a robust research program to meet the needs of a new and expanding College. The approach has been to perform an overall diagnostic of institutional research strengths and challenges. We engaged in faculty discussions about priority strategies to build our research portfolio, which led to the formation of a faculty-led Research Committee. We have grown a solid and diverse research portfolio, with anticipation of a doubling of funded awards next year due to strategies that increased funding success and led to the strategic hiring of internationally recognized researchers.

Weaknesses:

As a new College with many new faculty, we have not attained all our objectives in this area.

Plans:

We have a number of strategies to enhance research infrastructure and promote scholarly activities. In AY 2018–19, the Research Committee will expand its assessment to include measurement of progress in meeting outcome indicators identified in Table E4-1 above and all related Goals and Objectives identified in the Evaluation Plan (see Table B5-1c). We will continue to develop a research culture by hosting venues for discussion on scholarship, providing a safe space for soliciting critique and comments, and building platforms that encourage public health researchers and practitioners to work together to create a community of investigation.

E5. Faculty Extramural Service

The school defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the school's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

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

The GPH definition and expectations regarding extramural service activities are delineated in the faculty guidelines for appointment and promotion. Service is similarly defined and expected for both tenured and tenure-track faculty and contract faculty. We cite here the statement regarding service expectations excerpted from the Tenure Faculty Guidelines: "*Faculty members are expected to provide service to their profession and community as well as contribute to the College in a service capacity through activities including but not limited to the following: participation in committee work, and internal governance at the College and the University; engagement with community service; leadership roles and active participation in professional organizations; leadership roles and active participation on boards of directors of organizations; and service on scientific or other review panels and workshop committees of scientific societies."* (See draft of the Faculty Appointments and Promotion-Tenure (FAP-T) guidelines in ERF E5.1.)

The clinical faculty guidelines also include the expectation of the application of public health through engagement in practice as shown in the following excerpt from the Faculty Appointments and Promotion—Clinical (FAP-C) Guidelines: "*Public health practice is the application of an individual's scholarship, knowledge and skills. Contract faculty are expected to engage in public health practice with outside organizations, as appropriate. These include government entities, community and advocacy organizations, non-governmental organizations, and international organizations, etc. Other examples of activities that fall under Public Health Practice include: community service; testifying/legislative work; committee work for PH agencies/groups; extramural teaching activities at regional, national, and international levels, etc."* (See draft of the FAP-C guidelines in ERF E5.1.)

Historically, NYU has a rich tradition of public service and is known as "a private university in the public service." This tenet is demonstrated through the University's establishment and support of a wide offering of professional development courses and training opportunities, including a large number of professional schools at NYU, such as the Leonard N. Stern School of Business; the School of Law; the School of Medicine; the College of Dentistry; the School of Professional Studies; the NYU Rory Meyers College of Nursing; and the Robert F. Wagner Graduate School of Public Service.

The College's statement on faculty service expectation does not vary significantly from the University's language in the NYU Faculty Handbook (see NYU Faculty Handbook in ERF E5.1). This is due in part to the requirement that NYU colleges and schools align their guidelines with the University's and supplement them as appropriate. The University has heretofore been amenable to most of the supplemental language in GPH's FAP-T Guidelines.

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

All full-time faculty are provided with an annual allocation in an Individual Development Account (IDA) for travel and other expenses related to extramural service activities, such as speaking engagements, training workshops, testimonies, and other community service. In addition, faculty are encouraged to apply for funding opportunities offered through initiatives from the Provost's Office that support community-based research and partnerships. The University provides various streams of funding for global service opportunities at its various global sites and provides funding for incubating ideas and intersectional collaboration. The GPH Research Office reaches out to faculty to determine interest and provides support for exploring these areas.

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.

Examples of faculty integration of service experiences into instruction include the following.

- Program Planning and Evaluation Course:

  Drs. Joyce Moon Howard and Yesim Tozan used proposals and logic models from such programs as ARC XIV, a senior service program in Washington Heights, NYC; The Balm In Gilead, Inc., an NGO in Richmond, VA; and the Downstate New York Healthy Start Program in New York City and Long Island, NY, to develop case studies for the classroom. Directors and staff of these programs often serve as guest speakers or panelists in class.

- Assessing Community Health Needs and Resources Course:

  Students work closely with community-based organizations to conduct an assessment of a geographic area. Each year, organizations are selected to serve as anchor organizations for the students' work. The instructor provides entree to CBOs based on her capacity development and technical assistance services to numerous CBOs in New York. For example, student teams worked closely with Everybody Dance Now, a program that provides psychosocial support and regular physical activities for adolescents, to develop tools and conduct community health assessments.

- Capstone Course:

  In the Capstone course, students work in teams to complete a field-based project collaborating with a public health organization, many of which are located abroad. Teams are mentored by a faculty member who usually has worked with or established ties to the agency/organization. For example, in 2018, a team of GPH students traveled to Ukraine to conduct a Capstone project titled "Assessing Facilitators and Barriers to Prep Programming for MSM in Ukraine Using Implementation Science." The study was conducted under the guidance of Dr. Danielle Ompad, an Associate Professor in GPH and the Deputy Director Center for Drug Use and HIV Research.

- Environmental Health Sciences Core Course:

  Dr. Jack Caravanos, a faculty member for Environmental Public Health Sciences, is also a member of the Medical Reserve Corp (MRC) in New York City. The MRC is a group of volunteers who donate their time and public health expertise in the event of a citywide emergency, such as hurricanes, blackouts, and large-scale terrorist events that may require significant human capital to manage. Dr. Caravanos includes discussion about the role of the MRC in the MPH core course in environmental health, which he teaches. He uses his volunteer experiences as case study material for the class and shares the volunteer application packet with students.

- Global Health Disaster Preparedness and Response Course:

  Ten MPH students from the Global Health Disaster Preparedness and Response course joined the instructor, Dr. Robyn Gershon, on a visit and special training at the New York City Office of Emergency Management in Fall 2017. Students viewed the Command Center and learned about the office's functions. Several students in the course assisted FEMA at a Spring 2018 workshop aimed at preparing senior citizens for disasters. In Fall 2017, students participated in training for Team Rubicon in collaboration with the NYU Department of Public Safety to enhance the University's preparedness in a disaster. Team Rubicon is a nonprofit that brings together military veterans and civilians to rapidly deploy emergency response teams in disaster areas throughout the U.S. Future training events are planned for the beginning of each semester and in the summer.

4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.

Many faculty have involvement with CBOs, NGOs, and public health agencies domestically and abroad. Initially, faculty often rely on their relationships with these organizations to foster opportunities for students to gain practical experience in public health through field-based assignments.

A primary mechanism for faculty-led opportunities for student involvement in service can be found in our faculty-student labs. Under the guidance of faculty facilitators, the labs provide students with experience in research and service by working closely on the faculty's projects or interests. Faculty often involve their extramural partners in the lab to expose students to working public health professionals. A list of the labs can be found on the GPH website under Centers, Labs & Initiatives. Examples include:

- Dr. Christopher Dickey established the Applied Global Health and Development lab to engage students in practical experience in applied global health, drawing on his diverse domestic and global activities. He provides opportunities for student teams to brainstorm and contribute to international development innovation and encourages student public health entrepreneurial enterprises. The popular lab provides students with opportunities to work on such topics as universal health coverage policies, a new data-driven decision support tool, supply chain and logistics analysis, social network and knowledge management analyses, and the development of a business model for online public health programs. Dr. Dickey utilizes his domestic and international partnerships to connect students with NGOs and to promote collaborations that have resulted in challenging innovative entrepreneurial projects.
- Dr. Diana Silver worked with three MPH students on a project for the NYC Department of Health and Mental Hygiene to document the prevalence of flavored tobacco products in New York City bodegas. The students also assisted Dr. Silver in investigating the quantity and pricing of tobacco products in bodegas, and the findings were used by the city to craft minimum pricing regulations for those products.
- Students have worked with HealthRight International, an NGO with headquarters in New York City whose mission is to create sustainable programs that promote and protect health and health rights of people in the U.S. and globally. Dr. Peter Navario, a GPH faculty member, is the Executive Director. Students gain experience in program planning, implementation, and service research.

5) Select at least three of the indicators that are meaningful to the school and relate to service. Describe the school's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list in the criteria that, the school may add indicators that are significant to its own mission and context.

The following table identifies the three indicators selected to monitor our progress in providing service to the community. We report only on AY 2017–18 as this is the first year that we have collected data on these indicators. The 2017–2018 Faculty Service Report, which provides further detail on the data

provided below, can be found in ERF E5.5. Findings are based on 36 primary faculty members reporting, out of a total of 41 primary instructional faculty.

Table E5-A Faculty Service to the Community	
Selected Indicator	Academic Year 2017–18
Percent of primary instructional faculty participating in extramural service activities	100% (n=36)
Number of faculty-student service collaborations	31 (86% of those reporting)
Number of community-based service projects	71 (based on activities by 29 faculty members, 81% of those reporting)

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

Our annual faculty review specifically integrates faculty service. Service to the College, the University, and national or international organizations is evaluated in promotion decisions for both tenure and clinical tracks (see drafts of the FAP-T and FAP-C Guidelines in ERF E5.1).

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

Strengths:

Faculty service is highly valued at GPH. As an institution, we draw upon a diverse group of partners and engage in a wide range of extramural service, which provides numerous public health practice opportunities for our students. Our labs present an innovative approach for faculty engagement of students in service.

Weaknesses:

The Practice Committee, which provides guidance in GPH activities in the area of public health practice, assessed performance on this criterion over the course of several meetings and identified a number of areas where faculty service activities can be enhanced.

Plans:

The Practice Committee made the following recommendations, to be implemented in AY 2018–19, to strengthen faculty extramural service (see meeting minutes in ERF E5.7):

- develop an inventory of faculty service projects
- create an annual Faculty Service Award to be awarded at Commencement
- add a “Service Highlights” section to the weekly Dean’s Update newsletter sent to GPH faculty, students, and staff
- invite faculty to present their service activities during monthly GPH faculty meetings
- include a “Practice Corner” on the GPH website to highlight service activities and opportunities
- sponsor a GPH Day of Service event each year for faculty and students

F1. Community Involvement in School Evaluation and Assessment

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

Specifically, the school ensures that constituents provide regular feedback on its student outcomes, curriculum and overall planning processes, including the self-study process.

1) Describe any formal structures for constituent input (eg, community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

Advisory Board:

In 2017, GPH formed an internationally respected and diverse Advisory Board of global public health experts to assist the College in assessing its curriculum and overall planning. The following table lists the advisory board members, including their credentials and professional affiliations.

Table F1-A College of Global Public Health Advisory Board Members

Member	Affiliation
Richard M.K. Adanu, FWACS, MPH	Dean and Professor, University of Ghana School of Public Health
Mary T. Bassett, MD, MPH	Commissioner, The New York City Department of Health and Mental Hygiene
Mickey Chopra, MD, MSc, PhD	Lead Health Specialist, The World Bank
Steve Davis, JD, MA	President and CEO, Program for Appropriate Technology in Health (PATH)
Brian Levine, MD	Founding Partner and Practice Director, Colorado Center for Reproductive Medicine
Bernard Lo, MD	President and CEO, The Greenwall Foundation
Kelsey Louie, MSW, MBA	CEO, GMHC
Robyn Norton	Principal Director and Co-Founder, The George Institute for Global Health
Ellen Rautenberg, MHS	Chair, New York State Health Foundation Board. Former President and CEO, Public Health Solutions

Table F1-A College of Global Public Health Advisory Board Members	
Member	**Affiliation**
Steve Schroeder, MD	Distinguished Professor of Health and Health Care, Department of Medicine, University of California, San Francisco
The Honorable William Sorrell, JD	Former Attorney General of Vermont
Marcia Thomas, EdD, MPH, MS	Associate Dean for Finance and Administration, Yale School of Nursing
Alberto Trejos, PhD, MA	Dean, INCAE (Instututo Centro Americano De Administracion de Empresas) School of Business
Howard Zucker, MD, JD, LLM	Commissioner, New York State Department of Health

Alumni Association:

Because the College is new, we do not currently have an alumni group to provide constituent input; however, the Office of Student and Alumni Affairs is in the process of developing a GPH Alumni Association. In AY 2018-19, cohorts of recently graduated alumni will be invited to self-nominate for membership on an Alumni Network. This group will help in the development of activities for alumni and the broader GPH community.

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

The Advisory Board contributes to the development of the College through regular meetings and discussions. The Advisory Board is scheduled to meet twice annually: once via telephone and once in person. The first meeting of the Advisory Board was a two-day event held during October 19-20, 2017, on NYU's main campus**.** During the meeting, Advisory Board members discussed emerging public health challenges and the future of the field of public health, including potential areas of research. The group also discussed the future of the public health workforce and education, and how the College can best succeed with training students. The Advisory Board meeting minutes from Fall 2017 are included in ERF F1.2. Going forward, the Advisory Board will continue to provide regular feedback to the College. The Advisory Board decided to meet every other year at one of NYU's global sites to be certain that members have firsthand knowledge and experience of the programs the College is establishing abroad**.** The next face-to-face meeting of the Advisory Board is scheduled to take place in mid-November 2018 at the NYU site in Ghana.

We also conduct regular surveys of Applied Practice Experience (APE) preceptors and employers of our graduates to obtain their feedback on the ability of our students to perform public health competencies. The preceptor survey includes open-ended questions inquiring about areas of students' professional strengths and areas needing improvement. The employer survey also includes an open-ended question regarding new skills necessary to meet emerging public health needs that should be incorporated in our curriculum. This information is used by the Practice Committee and the Academic Affairs Committee to inform our curriculum planning. Reports summarizing the most recent Employer Survey and Preceptor Survey can be found in ERF F1.2.

3) Describe how the program's external partners contribute to the ongoing operations of the school. At a minimum, this discussion should include community engagement in the following:

a) Development of the vision, mission, values, goals and objectives

The Advisory Board reviewed the College's vision and mission statement at the Fall 2017 meeting. A few members of the Advisory Board suggested the College review the vision statement again and possibly rewrite it. The vision statement was then discussed at the College's Fall 2017 Faculty Retreat, where a revised version was proposed. These revisions to the vision statement were then discussed and unanimously approved at the December 6, 2017, faculty meeting (the minutes from this meeting are included in ERF F1.3).

b) Development of the self-study document

A draft of the self-study was distributed to all Advisory Board members for their comments and feedback. We received comments from several members. Substantive comments included recommendations to formalize and institutionalize relationships with outside organizations in order to support both student practice experiences and the integration of practice into courses. The Practice Committee will address these recommendations in Academic Year (AY) 2018–19.

c) Assessment of changing practice and research needs

The Fall 2017 GPH Advisory Board meeting included a robust discussion of current and future trends in public health to consider in our educational programs and research agenda. Important areas for consideration suggested by Advisory Board members include:

- responding to changes in the global political and economic landscape
- translating research into policy implementation
- exploring the potential of precision medicine to increase disparities in access to health care
- providing students with more opportunities for developing practical skills and hands-on training with practitioners in the field
- helping students understand the political contexts that affect public health decision making
- providing students with leadership, management, and data and communication skills

d) Assessment of program graduates to perform competencies in an employment setting

As noted above, feedback on student and alumni performance in employment settings is obtained from surveys of APE preceptors and employers of our graduates (see reports summarizing the most recent Employer Survey and Preceptor Survey in ERF F1.2). The most recent surveys include items rating our students' ability to perform each of the new 22 MPH foundational competencies. While it should be noted that the surveys were completed before implementation of the new MPH core curriculum, findings indicate that preceptors and employers are generally satisfied with student performance on many competencies. Reports based on quantitative and qualitative survey responses were shared with the Accreditation and Practice Committees in Spring 2018 (see meeting minutes in ERF F1.3). Based on this feedback, the committees made a number of recommendations for ways to improve our curriculum:

- The Practice Committee will review preceptor and employer survey findings on an annual basis and share results and recommendations with departments and programs, the Academic Affairs Committee, and students. A presentation will be made at a general faculty meeting.
- In response to the finding of the need for greater attention to communication, project management, analytical, and critical thinking skills, we will explore ways to enhance coverage

of these in our curriculum. For example, now that the internship course is expanded to cover two semesters, the second semester can devote more attention to professional skills.

- We will explore ways of triangulating courses, APEs, labs, and student clubs to facilitate development of professional skills. For example, we can develop a checklist of professional skills for the faculty-student labs to address. Another idea is to offer short "boot camps" for first-year students to focus on such areas as project management and data visualization skills.

4) Provide documentation (eg, minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3.

- development of vision and mission: Fall 2017 Advisory Board meeting minutes (ERF F1.4a)
- assessment of changing practice and research needs: Fall 2017 Advisory Board meeting minutes (ERF F1.4b)
- assessment of program graduates: Applied Practice Preceptor Survey Report; Employer Survey Report; minutes of February 26, 2018, Accreditation Committee meeting; minutes of March 26, 2018, Accreditation Committee meeting; minutes of March 14, 2018, Practice Committee meeting (ERF F1.4c)

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

Strengths:

GPH has sought input from a variety of external stakeholders to help shape our direction as a College and inform our research and training programs. We have mechanisms for soliciting this feedback on an ongoing basis through regular Advisory Board meetings and annual surveys of our students' applied practice preceptors and employers.

Weaknesses:

We have identified a number of areas for follow-up in response to stakeholder feedback regarding critical competencies and skills needed by public health graduates.

Plans:

In AY 2018-19, the Academic Affairs Committee will explore ways to address recommendations regarding enhancements to the curriculum.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

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

Students are introduced to service opportunities in a number of ways:

Faculty members facilitate professional service opportunities through GPH labs which allow students to contextualize and apply what is learned in the classroom using real-world data and projects. A full list of GPH Centers, Labs & Initiatives can be found on the GPH website. Students are also informed of these opportunities and encouraged to participate through a fair held each fall.

The Office of Student and Alumni Affairs, the Student Governing Council, and GPH student clubs and organizations introduce students to community service by hosting service oriented events designed to improve the lives and experiences of those in need. Students are encouraged to participate through peer-to-peer interaction, email solicitation, and participation in sponsoring student organizations.

Every Friday of the school year students receive the Public Health Post—an email that presents students with new fellowships, job and internship opportunities, and networking events. The information provided is curated throughout the week by the Office of Student and Alumni Affairs and then shared with students, often with positive results (see samples of the Public Health Post in ERF F2.1).

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

The Office of Student and Alumni Affairs connects students to numerous professional and community service opportunities. Over the past three years, students have participated in the following events:

- a winter clothing drive for Syrian refugees, co-sponsored with Helping Hands USA and a GPH research lab
- the 2017 March for Science in Washington, D.C.
- hurricane disaster relief clothing and material drives for areas including the southern United States and Puerto Rico
- the 2018 March for Our Lives in Washington, D.C.
- the 2018 March for Science in New York City
- letter-writing campaigns to elected officials
- events for Public Health Week in April 2018, including Naloxone training by the New York City Department of Health to become a Certified Opioid Overdose Responder

Student-led clubs, approved by the Student Governing Council and advised by faculty members, also provide opportunities for students to develop professional and leadership skills. The interdisciplinary Nutrition Without Borders (NwB) includes students from a variety of concentrations and offers a platform for integrating their studies with advocacy, research, volunteering, and outreach activities. Examples of the club's activities in Spring 2018 include: building a vertical grow system for a hydroponic farm at community food pantry in Williamsburg, Brooklyn; visiting Square Roots, an entrepreneurial organization pioneering farming in climate-controlled containers in the Bedford-Stuyvesant neighborhood of Brooklyn; and participating in the New York City Nutrition Education Network. The club has pages on Facebook and Instagram.

The student-led Health and Human Rights Association is now in its second year. The group was recently awarded the President's Service Award by NYU's President Andrew Hamilton. This group, very active within GPH and across campus, co-sponsors many events, including the March for Our Lives and the March for Science. The Health and Human Rights Association also includes the Justice Initiative, made up of students dedicated to advancing human rights by addressing mass incarceration and extreme punishment through a public health lens.

Additional clubs and organizations include the Peer Health Exchange; the Black and Latino Student Health Caucus; the NYU Healthcare Consulting Organization; Youthmappers NYU; and Public Health Leaders. Two new clubs applied for club status to start in Academic Year (AY) 2018–19 (see samples of student-led club event flyers in ERF F2.2).

The College's faculty-student labs provide numerous opportunities for students to engage in public health community and professional service. Examples of student service contributions facilitated through the labs include:

- Students in Dr. Marie Bragg's SEED (SocioEconomic Evaluation of Dietary Decisions) initiative helped craft testimony for a city hearing on fast food restaurant regulation. Other SEED lab students worked with a local YMCA to assist with planning skills-building workshops for high school seniors and helped connect community-based organizations with STEM internship programs.
- The Population Health Innovation Lab, facilitated by Drs. Andrew Goodman, Cheryl Merzel, and Joyce Moon Howard, linked a student with the Staten Island Partnership for Child Wellness to assist in assessing public school wellness programs and policies. Another student in the lab assisted the Mt. Sinai Beth Israel Worksite Wellness Program in developing an initiative to promote interior walking. Two lab students served as external reviewers of hospitals' Community Service Plans for the New York State Department of Health's Office of Public Health Practice.
- The m-Health lab, facilitated by Dr. Thomas Kirchner, is a founding chapter of Youthmappers, a global network of university students sponsored by USAID to apply geospatial mapping skills to help build resilient communities around the world. The NYU chapter, which includes students from public health and other colleges and schools, recently received a Women's Participation Award from USAID and Youthmappers.
- The Last Mile Population lab works closely with HealthRight International led by Dr. Peter Navario, Executive Director of HealthRight and a GPH faculty member. Students assist in writing reports for the organization's donors, developing grant proposals, and designing NGO assessment surveys. Students in the lab organized a panel at the 62nd Session of the Commission on the Status of Women.

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

Strengths:

GPH is committed to providing students with opportunities to engage in community and professional service. We successfully fulfill this goal through numerous events, clubs, labs, and course-based projects. Our labs are a particularly innovative and successful model for enabling students to engage in extracurricular practice and service as soon as they begin the program. Another area of emphasis among faculty, administration, and the students themselves is student involvement in social justice efforts.

Weaknesses:

The Practice and Accreditation Committees reviewed GPH performance in student service opportunities and noted some areas for improvement.

Plans:

The Practice and Accreditation Committee made a number of recommendations to improve student service opportunities, which we plan to implement in AY 2018–19 (see meeting minutes in ERF F2.3). Recommendations include:

- better coordination in promoting and communicating student service opportunities
- develop a portfolio-type mechanism to enable students to record their extracurricular professional and community and service activities
- create a practice and service page on the GPH website to publicize labs, clubs, events, and news to better coordinate communication regarding student service opportunities and to raise awareness of service contributions by students at GPH
- incorporate training for students on how to communicate service activities and achievements as part of their LinkedIn profiles
- sponsor a workshop at a faculty meeting to share best practices for involving students in professional and service projects
- foster student involvement in service to the charge of the Practice and Accreditation Committee
- add a section to the Dean's Weekly Update newsletter, sent to faculty and students, publicizing service opportunities
- encourage faculty to submit service opportunities to the weekly Public Health Post managed by the Office of Student and Alumni Affairs to inform students of service, internship, and employment opportunities
- develop a system to track students' professional and service activities, e.g., add a section to the Office of Student and Alumni Affairs bi-annual survey of students
- Include a panel discussion at orientation on the importance of service and how to engage in service opportunities

The Office of Student and Alumni Affairs is planning more volunteer and community service opportunities in collaboration with the Student Governing Council and various student clubs and organizations. Plans include sponsoring a week of activities in concurrence with National Public Health Week and establishing a formal mechanism by which students can volunteer with the New York Department of Health and Mental Hygiene through its Epi Surge Program, which trains MPH students to step in and assist when public health workers are pulled out of the office during emergencies.

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F3. Assessment of the Community's Professional Development Needs

The school periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.

1) Define the school's professional community or communities of interest and the rationale for this choice.

GPH serves multiple communities of interest, both domestically and internationally.

Domestic:

GPH's professional development goals encompass public health practitioners working in local, state, and federal departments of public health, as well as health professionals working in community and non-governmental agencies, hospitals, and other healthcare facilities. This choice is in response to needs identified by the Association of Schools and Programs in Public Health (ASPPH) and Healthy People 2020 for increases in the number of trained public health professionals and the call for development of certificate programs and distance learning options. In addition, the decision by the National Board of Public Health Examiners (NBPHE) to extend credentialing eligibility to members of the public health workforce with at least five years of experience provides further impetus to include the U.S. public health workforce as a community of interest. The Director of the Advanced Certificate in Public Health and the former Senior Associate Dean for Academic and Faculty Affairs held multiple open brown bag sessions at the New York City Department of Health to present the content and format of the online certificate.

International:

International communities of interest include UN agencies, ministries and departments of health, international NGOs, and international development donors (e.g., USAID, Department for International Development [Germany], and Japan International Cooperation Agency). The rationale for these choices is the understanding among these agencies that public health professionals working in the field will derive significant benefits from competencies provided by GPH, including: to analyze global health problems; Identify cost effective interventions and policies to address them; and develop investment cases for return on investment of interventions and policies.

By achieving these competencies, personnel from the communities of interest will be better able to efficiently allocate scarce resources to address public health challenges in a way that maximizes the health outcomes for their particular community.

2) Describe how the school periodically assesses the professional development needs of its priority community or communities, and provide summary results of these assessments. Describe how often assessment occurs.

Periodically, the Director and Associate Director of Technology Enhanced Education review the Bureau of Labor Statistics website and the Public Health Workforce Interests and Needs Survey (PH WINS) to capture workforce needs in the area of public health. The Healthy People website also provides workforce needs information. They review data under the Healthy People 2020 Public Health infrastructure objective, which includes a capable and qualified workforce as one of the three key components needed to achieve this objective.

For agencies like UNICEF and the World Food Programme, faculty regularly interact with senior management, both at the headquarters level and in the regional and country offices, to determine competency gaps among the professionals that work for the agencies. Faculty also regularly check in with former students to determine whether the skills gained in their MPH coursework are still being

used effectively. With nearly 200 professional and government staff and an equivalent number of MPH students spread across more than 70 countries, a significant number of individuals has taken the College's courses. A survey from the most recent iteration of the UNICEF/GPH course, Behavioral and Communication Strategies for Global Public Health, can be found in ERF F3.2. Highlights include:

- 93% of the UNICEF respondents indicated that the course met their needs
- 96% felt that the course was a worthwhile investment for their organization
- 89% reported that the course was relevant to their work

The goal is to conduct similar surveys for the next iteration of the course in January 2019.

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

Strengths:

Our communities of interest reflect our commitment to addressing public health needs locally and globally. Because NYU's New York City location puts us in close proximity to the headquarters of several UN agencies and the Secretariat, the University has a distinct competitive advantage in understanding and addressing challenges experienced by those agencies. The unique position held by GPH, both geographically and across its departments and programs, means that it can rapidly assess professional development needs and respond with courses and course materials.

Weaknesses:

GPH currently has limited revenue models for training working professionals. We do not have a structure in place to respond to increasing requests for non-credit workshops, which are often more complicated and require contracts with organizations.

Plans:

As we build relationships, both domestically and internationally, GPH is concurrently building infrastructure to transition these often faculty-driven networks into formal College-level resources.

F4. Delivery of Professional Development Opportunities for the Workforce

The school advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Describe the school's process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3.

As part of the College's mission to advance health equity by cultivating and inspiring public health scholars, practitioners, and leaders, we foster professional development opportunities for the growing and changing global public health workforce. This includes working with local, national, and global public health agencies—and offering scholarship and tuition incentives—to conduct courses, workshops, and webinars (both credit and non-credit) for public health professional development.

Advanced Certificate in Public Health:

In response to the needs identified above for more training opportunities for the U.S.-based public health workforce, GPH developed an online Advanced Certificate in Public Health program. The program provides public health workers with an opportunity to enhance their knowledge of and training in core public health concepts and skills. The program also prepares students to take the examination for Certification in Public Health (CPH).

Through Provost Award funding in 2014, the 15-credit Advanced Certificate was developed and administered in an online format using NYU's Learning Management System, NYU Classes. Students began enrolling in the Advanced Certificate starting in Fall 2015. The Advanced Certificate serves public health practitioners working in local, state, and federal departments of public health, as well as health-related professionals working in community and non-governmental agencies, hospitals, and other healthcare facilities. The certificate program is conducted entirely online and therefore serves members of the workforce unable to attend an in-person program. Courses address the five core areas of public health: biostatistics, epidemiology, environmental health, health policy and management, and socio-behavioral determinants of health. The program also serves as a pipeline for students interested in future enrollment in an MPH program. Employees of the New York City Department of Health and Mental Hygiene receive scholarships to the program.

The Advanced Certificate courses contain both synchronous and asynchronous student discussions, interactive case studies, simulation, and computerized exams. Student-centered learning and application of knowledge are achieved through various modalities of learning, including case studies, group projects, and synchronized live presentations.

Courses Addressing Competencies for the Global Public Health Workforce:

Many GPH faculty have extensive experience and contacts in the field, which help provide a real-time view of the competency gaps in public health practitioners. For example, ongoing discussions between the Program Director of Global Health with the World Bank have shown that public health professionals in low- and middle-income countries are often unable to create a convincing investment case for allocating resources to address public health challenges. This is a barrier to funding, but it also implies that the resources allocated may be distributed inefficiently, resulting in poorer than necessary outcomes. GPH courses in the Advanced Certificate program are designed to address competency gaps like this and are consequently important for working professionals to master.

GPH faculty worked with senior leadership at UNICEF and the World Food Programme (WFP) to address competency gaps among their workforce in behavior change communication and program

design for nutrition, respectively. This led to the development of several courses, which are available to the UNICEF and WFP workforce as non-degree offerings. The courses are also available to MPH students for degree credit. See F4.2 below for more detail on these courses.

2) Provide two to three examples of education/training activities offered by the school in the last three years in response to community-identified needs. For each activity, include the number of external participants served (ie, individuals who are not faculty or students at the institution that houses the school).

Behavioral Communications Strategies for Global Epidemics Course:

In January 2015, GPH offered a course designed together with UNICEF called Behavioral Communications Strategies for Global Epidemics. The course was developed in response to the Ebola virus disease outbreak in West Africa, as well as the reluctance in some communities in Pakistan and Afghanistan to vaccinate children against polio. The course brought together more than 20 GPH graduate students and the same number of professional UNICEF staff working in countries that were either experiencing or were at risk of an outbreak of Ebola or polio. Its primary focus was to develop implementable communication strategies—in the context of other ongoing and available interventions—to reduce population risk and improve health outcomes.

Since 2015, we have run the class four times: twice in New York City (2015 and 2016), once in Ghana (2017), and once in Nepal (2018), and we have trained more than 100 UNICEF and government staff who have been working in more than 50 countries. Those individuals took the classes alongside an equivalent number of GPH and University of Ghana MPH students. Additionally, the course is a magnet for prospective students considering the GPH Global Health concentration, and it has resulted in a number of internship opportunities with UNICEF that are otherwise very difficult to obtain.

A Systems Approach to Food Access Course:

Senior leadership at the WFP became aware of the success of the Behavioral Communications Strategies for Global Epidemics course and asked GPH to design a course for training its professional staff. Needs identified included a more holistic approach to recognizing and addressing the long-term health implications of under- and overnutrition in low- and middle-income countries. The resulting course, A Systems Approach to Food Access, has become equally—if not more—successful in providing applied skills and theory in a community of interest. More than 90 professional staff from WFP have been trained alongside an equivalent number of GPH students over eight iterations of the course from 2015–17. Projects developed through the course are already influencing public health policy in Senegal, Madagascar, Haiti, Ethiopia, and numerous other countries.

Certificate Programs:

- The Advanced Certificate in Public Health serves as an important training resource for the domestic public health workforce. Enrollment has increased from 22 students when the program was launched to 107 students in AY 2017–18. See F4.1 above.

- The Advanced Certificate in Health and Human Rights is a 15-credit five-course program that provides students with in-depth training in the conceptual frameworks and practical skills necessary to promote and protect human rights in public health settings, as well as to design and evaluate rights-based health programs and policies. Courses focus on topic areas such as health and human rights of migrant populations, women's reproductive health, LGBT health disparities, and issues surrounding global mental health. The Advanced Certificate targets both current MPH students and professionals in the field of public health, medicine, and law. It officially launched to non-GPH students in Fall 2018.
- The Advanced Certificate in Applied Global Public Health is designed to offer the operational skills that a public health professional needs to design, manage, and monitor complex public health programs in both low- and middle-income countries (LMICs) as well as in the U.S. This 12-credit,

four-course program is designed for UN professional staff, district- and national-level managers, international NGO staff, and MPH candidates at NYU. Emphasis is on an equity-focused systems approach in courses on data utilization, data-driven decision-making, results-focused strengthening of health systems, and program costing, monitoring, and management for equity. The Advanced Certificate enrolled its first four GPH students in Fall 2017. It was opened to non-GPH students in Fall 2018.

- The Advanced Certificate in Public Health Nutrition is a 15-credit five-course program for individuals to acquire foundational knowledge and applied skills-based training in population-based nutrition. Courses focus on such areas as principles of public health nutrition, nutrition epidemiology and global issues in public health nutrition. The Advanced Certificate enrolled its first GPH MPH student in Summer 2018 and opened to non-GPH students in Fall 2018.

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

Strengths:

GPH is proud to offer professional development opportunities to our various constituent communities through partnerships with international organizations such as World Bank, UNICEF, and the World Food Programme, as well as with the New York City Department of Health and Mental Hygiene. These collaborations include the development of new courses for GPH students related to timely global public health issues and the formation of advanced certificate programs to enhance the knowledge and skills of working public health professionals. The University's Provost's Office has demonstrated its support for workforce development distance education opportunities by awarding GPH several grants to develop online courses, which are the foundation of our certificate programs.

Weaknesses:

None noted.

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G1. Diversity and Cultural Competence

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the school's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the school's scholarship and/or community engagement.

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

The GPH Diversity, Equity, and Inclusion (DEI) Committee was charged with identifying underrepresented populations of faculty and students as a priority focus for the College's first five years (2016–21). Three groups were identified:

- First-generation college students (students)
- Ethnicity: Latino or Hispanic (faculty and students)
- Race: Black or African American (faculty and students)

These categories were selected based on the committee's examination of MPH and PhD admissions data and availability of SOPHAS self-reported data. The committee decided to focus on groups historically underrepresented in the United States; therefore, international students are excluded. It must be noted that GPH broadly defines diversity, equity, and inclusion as any and all types of individual characteristic-based discrimination, including, but not limited to, gender identity, country of origin, religion, physical limitations, and mental health. Unfortunately, there is currently no systematic way to capture, verify, and monitor data in these categories as this information is not included in the SOPHAS application or collected by our Human Resources Department.

2) List the school's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

A priority of the College is to develop a culture and system that promote diversity and inclusion as reflected in our mission, vision, value statement, and goals. Specific goals and objectives related to diversity were developed by the Accreditation Committee for the purposes of the self-study evaluation (discussed in Sections B1 and B5 above). Presented here are goals, objectives, and measures as well as DEI Committee-recommended actions and strategies for how to achieve them. Please note that DEI Committee activities began in Fall 2017.

Table G1-A Goals, Objectives, Measures & Strategies Related to Diversity, Equity & Inclusion		
GOAL: Develop a culture and system that promote diversity and inclusion in instruction, research, and service		
Objectives	**Measures**	**Actions/Strategies**
Develop policies that support a climate of equity and inclusion	By AY 2019–20 develop and implement a plan for promoting diversity and inclusiveness in recruitment, retention, and leadership of students, faculty, and staff from the three priority groups	Began in 2017 and ongoing: Conduct annual review of recruitment admissions process and data; mandatory training on recruitment, retention, cultural sensitivity, and a culture of inclusivity
Recruit a diverse student body	Between 2017 and 2020, increase to 50% the yield from each of the three priority groups accepting offers of admission to the MPH and PhD programs. Between 2017 and 2020, increase by 30% the number of enrolled MPH and PhD students who are from each of the three priority groups.	AY 2018–19: Regular reports from admissions to the DEI on data related to applications, approvals, acceptance, and enrollment. Track the data against goals. Began in 2017 and ongoing: Review of recruitment venues and sources
Recruit and retain a diverse faculty	Between 2017 and 2020, increase by 30%, the number of tenure-track and of clinical faculty at each rank from the two faculty priority groups (race and ethnicity)	AY 2018-19 and ongoing: Create robust protocols for recruiting, hiring, and retaining diverse candidates, including advertising in media venues identified as optimal for recruiting diverse faculty Develop initiatives to recruit and retain diverse candidates

The DEI Committee gave careful consideration to measurement of objectives. During Academic Year (AY) 2017–18, the committee discussed the issue of the SOPHAS category “two or more races.” After in-depth deliberation, the committee decided to unpack this category and use each identified racial category in monitoring progress. As part of its AY 2018–19 agenda, the committee will develop several new metrics. Currently there is no accurate way to measure student retention or identify first-generation faculty members. These data are not collected in any existing instrument at the College or University level. The committee will explore measures used to track retention and develop a set of best practices for measuring student retention as well as identifying and tracking first-generation faculty members.

In addition to the above goals, the committee developed a comprehensive five-year plan for promoting diversity, equity, and inclusion at GPH. Based upon a fact-finding phase to answer a number of questions, in February 2017 the committee established the following broad goals, which form the basis of a long-term plan:

1) increase cultural competence and sensitivity among students, faculty, and staff
2) promote inclusive teaching and learning
3) increase recruitment and retention of diverse, faculty, staff, and administrators

4) increase recruitment and retention of diverse students
5) develop ways to address major challenges to diversity, equity, and inclusion
6) hold all GPH community members accountable for violating guiding principles

3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of school-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

Table G1-A above lists a number of actions and strategies to advance our goals of diversity, equity, and inclusion. Additional strategies and action steps related to the six DEI Committee goals are included in ERF G1.3. The following describes the process used to develop the actions and strategies.

In 2016, the committee engaged in an extensive fact-finding process, involving the collection and analysis of qualitative and quantitative data, including analysis of data from focus groups conducted in 2016, student admissions data, and the review of faculty hires.

Based on these findings, the committee developed a set of recommendations, which were presented to the Dean in 2017. The committee's focus was on leveraging University resources to pilot a series of initiatives designed to engage faculty, staff, and students in an internal change process to create a climate that embraces diversity, equity, and inclusion. Each recommendation in the report includes a list of suggested strategies and actions for implementing the recommendation, with the goal of creating an inclusive climate where underrepresented groups feel welcomed (see Diversity, Equity and Inclusion Interim Report in ERF G1.3.) The specific recommendations include:

1) create opportunities for building social cohesion that capitalize on the diversity of the GPH community and foster bidirectional communication flow
2) clarify roles and responsibilities to ensure equitable treatment of faculty and staff to enhance understanding and alignment across departments, functions, and governance and advisory committees
3) incorporate the DEI Committee's guiding principles into the mission of GPH and hold people accountable for behaviors that do not align with the guiding principles
4) identify and increase opportunities for the Dean to articulate and model GPH's commitment to diversity, equity, and inclusion
5) introduce cultural competency and sensitivity training for faculty, staff, and students
6) implement a program to support the leadership team in integrating cutting-edge diversity, equity, and inclusion practices into the culture at GPH
7) provide equitable access to career development opportunities for staff and faculty in order to support growth and advancement within GPH and beyond
8) create targeted communication forums where students, faculty, and staff learn about and discuss diversity, inclusion, and equity climate initiatives
9) create a suggestion box/online forum where students, faculty, and staff can safely and anonymously submit concerns about differential treatment, exclusion, and inequity and share ideas and suggestions
10) create robust protocols for recruiting, hiring, and retaining diverse candidates
11) create robust protocols for recruiting, admitting, and supporting diverse students
12) develop mechanisms for broadly integrating diversity, equity, and inclusion into the classroom
13) create an immediate response team to address emerging socio-political conflicts related to diversity, equity, and inclusion in real time

14) appoint a faculty member to serve as a Diversity Advocate to monitor all faculty and student search processes and outcomes

15) hire an ombudsperson to serve as an internal resource for diversity, equity, and inclusion

The DEI Committee worked closely with the Interim Senior Associate Dean for Academic and Faculty Affairs, in concert with the Dean, to develop an implementation plan for the committees' recommendations. The table below summarizes recommendations and actions to date.

Table G1-B GPH Diversity, Equity, and Inclusion Implementation Table

Recommendation	Responsible Parties	Implementation Timeline
1) Create opportunities for building social cohesion that capitalize on the diversity of the CGPH community and foster bi-directional communication flow	Dean's Policy Committee	AY 2018–19 and beyond
For Faculty: Meet Your Colleagues Events	Communications Office	AY 2018–19 and beyond
For Students: Student-Faculty, Student-Student and Student-Staff Interaction Events; Meet the Dean Events	Dean's Policy Committee	Began in AY 2017–ongoing
For Staff: Staff-Faculty and Staff-Staff Interaction Events; Meet the Dean Events	Dean's Policy Committee and GPH Office of Human Resources	Began in AY 2017–ongoing
2) Clarify roles and responsibilities to ensure equitable treatment of faculty and staff to enhance understanding and alignment across departments, functions, and governance and advisory committees	GPH Office of Human Resources and Dean's Office	AY 2018–19 and beyond
Clearly define scope of responsibility for student workers, administrative staff, and faculty	GPH Office of Human Resources and Office of Academic Affairs	Began in AY 2017–ongoing

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

The DEI Committee was formed in 2016 as an ad hoc committee with a broad mandate to develop a set of recommendations to ensure that the emerging GPH culture aligns with the tenets of an exemplary institution regarding diversity, equity, and inclusion. In May 2018, GPH faculty voted to amend the College bylaws to grant the committee status as a standing faculty committee. The roles and responsibilities of this committee continues to be to review, assess, and make recommendations regarding the College's diversity efforts. Minutes from the committee's meetings are in ERF G1.4.

The committee's work started with the drafting of a set of guiding principles to promote a climate of inclusiveness and respect. These guiding principles were presented in Section B1. As noted in Section G1.3 above, the 2017 DEI Committee Interim Report included concrete recommendations for developing a climate and culture of inclusiveness. The Dean fully endorsed the committee's recommendations and has started implementing recommended initiatives. Dean Healton was the first and only dean at NYU to mandate that faculty attend DEI trainings. This has led the University's Provost's Office for Diversity to use GPH as a model for other colleges and schools at NYU.

One important strategy recommended by the committee is the inclusion of a Diversity Advocate on all faculty search and student admissions committees to ensure that diversity issues are considered. Diversity Advocates are formally elected at the start of each search committee. To serve as a Diversity Advocate, the faculty member must have completed a minimum of three university trainings: Recruitment, Retention, and Hiring Process; Office of Equal Opportunity (OEO) compliance; and Title IX Policies. Each of the above-mentioned committees also implemented recruitment strategies, e.g., placement of ads in specific venues, promoting diversity, equity, and inclusion.

In AY 2017–18, Diversity Advocates served on the following faculty search committees: Senior Associate Dean for Academic and Faculty Affairs; Department Chairs; and Director of Public Health Practice. Both the MPH and doctoral admissions committees include a Diversity Advocate as a member.

Listed below are other major diversity, equity, and inclusion initiatives at GPH in AY 2016-17 and AY 2017-18:

- DEI Committee conducted fact-finding to assess climate and issued preliminary recommendations.
- GPH became a founding member of the Collaborative to Advance Equity Through Research in November 2015 and expanded its efforts in 2016–2017.
- GPH included a workshop discussing micro-aggressions for incoming graduate students led by faculty from the GPH Bioethics program.
- GPH participated in the 2016 White House Initiative for Women and Girls of Color.
- GPH's search, admissions, and hiring committees adopted Columbia University's Best Practices Model for Recruiting Diverse Candidates.
- GPH expanded its reach to diversify its faculty candidates and students through targeted ad placement and job postings.
- GPH began monitoring admissions, recruitment, and hiring processes and outcomes.
- GPH applied for three diversity post-docs (one was received, but the offer was declined).
- A Doctoral Advisory/Diversity Equity and Inclusion Subcommittee was formed and conducted a review of 2017 doctoral candidates using metrics developed by the faculty on both the Doctoral Advisory Committee and the DEI Committee.
- GPH held two Town Halls with the Dean and students in each academic year.
- GPH student and staff subcommittees were formed to help develop targeted initiatives.
- GPH's Undergraduate Global Public Health Black and Latino Health Caucus spearheaded a diversity dialogue book giveaway for *Death of a King: The Real Story of MLK's Final Year* in February 2017.
- A cooking challenge with a global theme was held on developing culturally appropriate healthy meals.
- Mandatory diversity trainings were held on March 6 and 10, 2017, for all faculty serving on admissions and hiring committees.
- Micro-aggression workshops—one for faculty and staff and one for students—were held at GPH in April 2017.
- Mandatory Office of Equal Opportunity trainings were held April 4 and May 4, 2017.
- GPH held a Building a Culture of Diversity Equity Inclusion and Belonging workshop for students, faculty, and staff in collaboration with the Provost's Office on November 2, 2017.
- GPH disseminated the following online educational materials:

- Harvard Business School's "Dialogue vs. Debate": https://hbswk.hbs.edu/archive/moving-beyond-debate-start-a-dialogue
- Harvard Business Review's "We Just Can't Handle Diversity": https://hbr.org/2016/07/we-just-cant-handle-diversity
- Civil Conversations Project: http://www.civilconversationsproject.org/
- The Psychological Safety of Groups: https://www.youtube.com/watch?v=LhoLuui9gX8
- How to Overcome Communication Breakdown: https://www.linkedin.com/pulse/how-overcome-communication-breakdowns-daniel-goleman/
- Ted Talk "Take 'the Other' to Lunch" https://www.ted.com/talks/elizabeth_lesser_take_the_other_to_lunch

2018–19 Academic Year:

The DEI Committee will implement the following activities for the 2018–19 academic year:

Members of the DEI committee will work with the Academic Affairs Committee to develop a template for reviewing all course syllabi, as well as guidelines for creating courses and curricula that address diversity, equity, and inclusion issues.

The Senior Associate Dean for Academic and Faculty Affairs will work closely with the DEI Committee to develop guidelines for instructional faculty to receive a minimum level of training on diversity, equity, and inclusion in the classroom. The committee has identified trainings offered by the NYU Center for the Advancement of Teaching that can address classroom climate in terms of cultural sensitivity, cultural competency, and faculty skillset. Past trainings include supporting the success of first-generation students, strategies for engaging difference in the classroom, and diversifying the curriculum. We will promote faculty attendance at these workshops and trainings. The GPH leadership team will track voluntary participation rates in the committee workshops and trainings and consider requiring faculty to complete at least two committee-approved courses per year.

5) Provide quantitative and qualitative data that document the school's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

The following tables (G1-C and G1-D) document our progress in recruiting and enrolling MPH and PhD students from underrepresented groups. Percentages are based on totals across all demographic categories. While the percentages fluctuate somewhat across years, overall we have seen improvement in the percentage of Hispanic/Latino MPH students enrolled and relatively steady enrollment of close to one-fifth of our MPH students from a first-generation college background. We will monitor closely the trajectories of Black/African American MPH applicants for AY 2018–19. As shown in Table G1-D, we have successfully increased the number of PhD students from historically underrepresented groups who were offered acceptance into the program.

Table G1-C MPH Admissions Activity Among Priority Groups (AY 2015-2018)									
	AY 2015-16			AY 2016-17			AY 2017-18		
Historically Under-represented Group	**Percentage Applied**	**Percentage Offered Admission**	**Percentage Accepted Admission**	**Percentage Applied**	**Percentage Offered Admission**	**Percentage Accepted Admission**	**Percentage Applied**	**Percentage Offered Admission**	**Percentage Accepted Admission**
Hispanic Latino	11.4% (76/668)	11.0% (53/480)	9.6% (10/104)	10.7% (82/769)	10.8% (65/604)	14.5% (26/179)	12.9% (102/789)	12.8% (81/635)	17.4% (27/155)
Black African American	18.3% (122/668)	12.9% (62/480)	18.3% (19/104)	16.5% (127/769)	14.6% (88/604)	23.5% (42/179)	17.9% (141/789)	13.7% (87/635)	16.1% (25/155)
1st Generation College	18.9% (126/668)	16.5% (79/480)	18.3% (19/104)	19.4% (149/769)	17.9% (108/604)	22.9% (41/179)	19.8% (156/789)	16.7% (106/635)	21.9% (34/155)

NOTE: The above calculations are based only on domestic applicant pool (U.S. citizens and permanent residents); all denominators exclude international applicants. In cases in which a student self-reported multiple racial or ethnic categories, the student was included in each applicable priority group reported (if any).

Table G1-D PhD Applicants Among Priority Groups (AY 2015-2017)									
	AY 2015-16			AY 2016-17			AY 2017-18		
Historically Under-represented Group	**Percentage Applied**	**Percentage Offered**	**Percentage Accepted**	**Percentage Applied**	**Percentage Offered**	**Percentage Accepted**	**Percentage Applied**	**Percentage Offered**	**Percentage Accepted**
Hispanic Latino	10.0% (9/90)	0% (0/4)	0% (0/4)	11.5% (10/87)	15.4% (2/13)	0% (0/4)	16.0% (16/100)	33.3% (4/12)	25.0% (2/8)
Black African American	17.8% (16/90)	0% (0/4)	0% (0/4)	12.6% (11/87)	7.7% (1/13)	25.0% (1/4)	18.0% (18/100)	8.3% (1/12)	12.5% (1/8)
1st Generation College	23.3% (21/90)	0% (0/4)	0% (0/4)	29.9% (26/87)	15.4% (2/13)	0% (0/4)	26.0% (26/100)	8.3% (1/12)	12.5% (1/8)

NOTE: The above calculations are based only on domestic applicant pool (U.S. citizens and permanent residents); all denominators exclude international applicants. In cases in which a student self-reported multiple racial or ethnic categories, the student was included in each applicable priority group reported (if any). In AY 2017–18, the DEI Committee implemented an initiative to increase recruitment of diverse candidates.

Figures G1-A and G1-B below describe trends in faculty diversity for continuing contract and tenure-track faculty, respectively, in each academic year from AY 2015–16 through AY 2017–18. Although the numbers are small, the tables indicate an overall increase over time in the total number of GPH faculty who are members of priority underrepresented groups (Black or African American and Hispanic).

Figure G1-A Full Time Continuing Contract Faculty by Ethnicity (AY 2015-18)

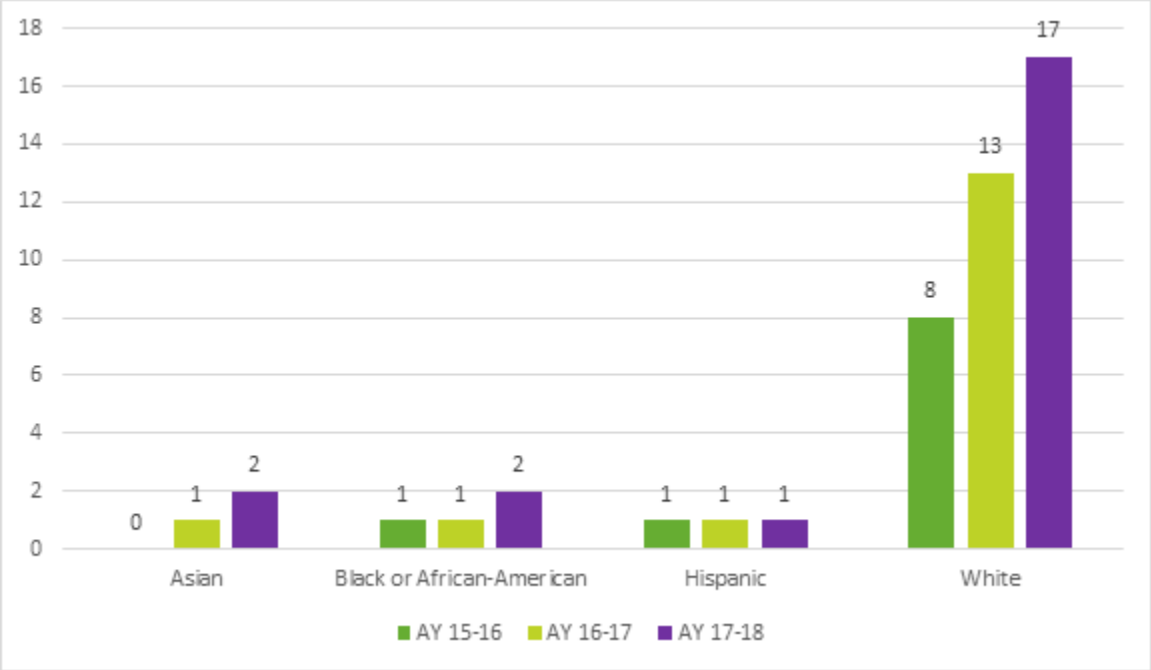
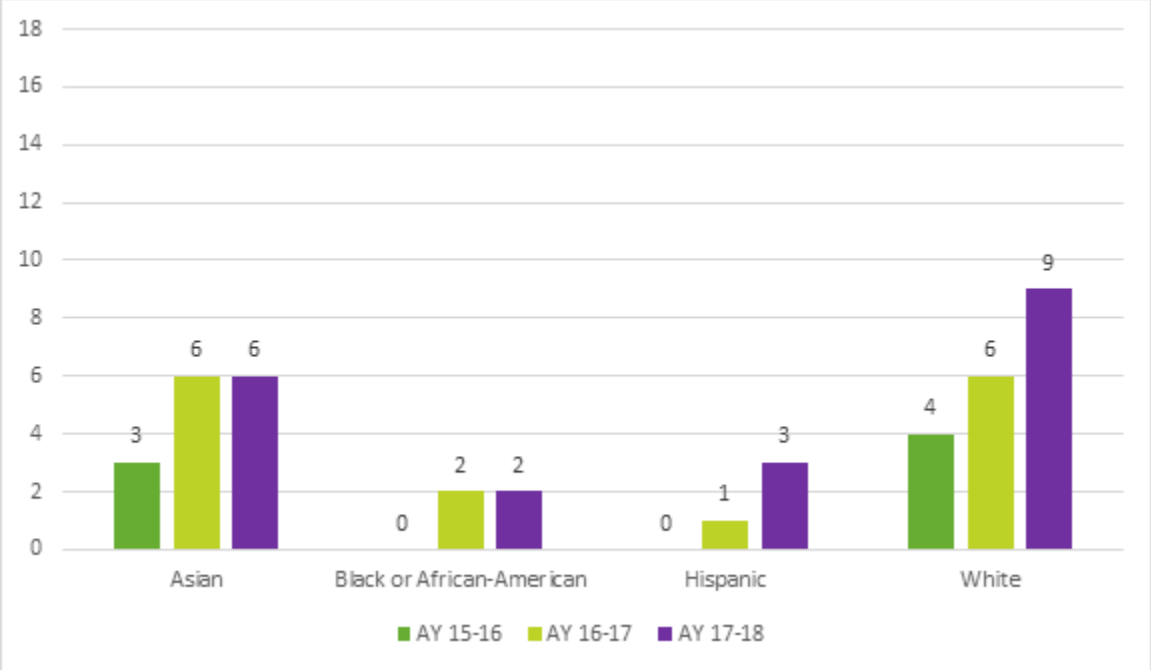


Figure G1-B Tenure-Track Faculty by Ethnicity (AY 2015-18)



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

GPH follows the path set by the University regarding a focus on diversity, equity, and inclusion. In Fall 2015, a University-wide Town Hall meeting was held with the University's President. As a result of student voices, a task force was formed to examine issues of diversity, equity, and inclusion on campus among all members of the NYU community, including students, staff, administrators, and faculty. All Deans were part of this collaborative process, and GPH was additionally represented by the Chair of its DEI Committee, as well as one other faculty member who served on the University's DEI subcommittee. A series of focus groups was held, which suggested that many in the University community felt uncomfortable and/or excluded and had experienced some type of micro-aggression. A multi-campus survey was undertaken to evaluate the living, learning, and working environments for NYU students and employees. GPH faculty, staff, and students were well represented in this survey of more than 21,000 participants, which was implemented in AY 2017–18. The survey results will help the University administration to promote existing efforts that have been successful and inform future interventions that may be necessary to address any shortcomings. A full report is expected in Fall 2018, after which the DEI Committee will examine it in detail and make further recommendations to the GPH Dean in AY 2018–19.

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

Strengths:

With campuses in New York, Abu Dhabi, and Shanghai and 11 global academic centers and research programs worldwide, the University as a whole demonstrates the values of equity and diversity as a core goal. Over the past few years in particular, the University has made this goal a priority. These University-wide efforts will support and enhance the individual work also made by the College on these issues.

The establishment of the GPH Diversity, Equity, and Inclusion Committee and approval of its recommendations by the Dean and faculty is evidence of the College's desire to foster a culture and system that promote the recruitment and inclusion of underrepresented groups.

Weaknesses:

We have engaged in an extensive assessment process and have not yet implemented many of the recommendations made to enhance diversity, equity, and inclusion at GPH. In particular, we note the need to better address diversity and cultural competence issues in our curriculum.

Plans:

In AY 2018–19, the DEI Committee will focus on developing mechanisms for broadly integrating diversity, equity, and inclusion into the classroom and evaluating current efforts. As noted above, we will promote training for faculty to address diversity issues in our curriculum and the DEI and Academic Affairs Committees will collaborate to develop a set of guidelines for ensuring that the GPH curriculum and course syllabi reflect cultural awareness and competencies.

The DEI Committee will examine the following hiring, admissions, and retention processes:

- 2018 PhD application review process, which included a decentralized, department-level review as opposed to the centralized DAC/Diversity subcommittee review process used in AY 2017–18
- Department Chair searches, faculty opportunity hires, and tenure and clinical faculty hires from 2017–-2019

H1. Academic Advising

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

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

Student Affairs Advising:

MPH students are assigned a Program Advisor from the Office of Student and Alumni Affairs during the "onboarding" process, which begins as soon as a student submits a tuition deposit. Incoming students have the opportunity to meet with their Program Advisor before arriving on campus for orientation in the fall. This meeting is held in a variety of formats, including phone, Skype, Google Hangouts, and in-person, depending on each student's needs. This meeting is when the Student Affairs-student relationship begins, as the student has an opportunity to ask questions and the two begin to discover ways to enrich the student's experience at GPH. Topics discussed include visas for international students, required University trainings on such topics as plagiarism and sexual assault, campus resources, housing, and financial aid.

Students across all GPH programs are eligible to meet one-on-one with their Program Advisor to discuss academic progress, College and University resources, and other issues. If a student experiences academic difficulty, the Program Advisor coordinates with the student's department and other University resources as needed and meets with the student to develop an education plan that identifies barriers to success and outlines best practices the student may consider to overcome barriers. Depending upon the individual student's challenges, meetings with the Program Advisor may take place weekly or once a semester.

Faculty Advising and Mentoring MPH Students:

An important component of a new MPH student's entrance to GPH is an initial group meeting with the Department Chair or Program Director and other faculty, which occurs during new student orientation. This allows students to hear directly from their Chair or Program Director about the program overall, to ask questions, and to begin to identify their cohort of peers.

As GPH departments have continued to grow and the infrastructure continues to develop, approaches to advising and student mentoring have also evolved. Since 2014, MPH students have been assigned a faculty mentor from their department or program who provides general advice regarding academic and career planning. Prior to Spring 2018, registration advisement was provided by Student Affairs Program Advisors and the Assistant Director of Registration and Academic Services. We are now transitioning to a faculty-based model where Faculty Advisors will be charged with providing registration advisement and approval for MPH students; a number of concentrations began implementing this approach in Spring 2018. This new process provides an opportunity for students to receive more comprehensive advisement and counseling from faculty, including ensuring proper sequencing of courses, selection of electives, review of academic progress, discussion of future goals, and identifying resources available on campus and elsewhere. Each MPH concentration is assigned a Student Affairs Program Advisor who meets with the director, chair, or department regularly and responds to any registration and advisement issues that arise.

Many departments and programs, in addition to providing one-on-one advising sessions, also invite students to group meetings for the concentration. This is an optimal way for students to identify as a

cohort and for faculty to share relevant information to students as a group (including new courses, career paths, internship updates, changes in curriculum, etc.).

Faculty Advising and Mentoring PhD Students:

A doctoral mentoring program was developed based on feedback from students. This includes a training program for mentors and mentees, contracts between mentors and mentees, and policy statements regarding mentorship relationships, ground rules, expectations, and transparency. In Spring 2018, these initiatives were incorporated into the newly updated Doctoral Student Handbook. The doctoral program also sponsors a series on mentoring, which is well attended by both students and faculty.

During the first year, each doctoral student is assigned a Faculty Academic Advisor (and, in some instances, Co-Advisors) who is paired with the student based on the perceived research fit and the student's area of interest. In the first year, the Faculty Academic Advisor helps the student with selection of relevant coursework and achieving the first-year benchmark of the literature review. The student and the advisor develop a first-year training plan that includes the student working on research project(s) for 20 hours per week; the research is designed to contribute to the student's training. The Faculty Academic Advisor is expected to have regularly scheduled meetings with the student, during which the advisor makes recommendations regarding coursework, qualifying exam preparation, and other academic issues during the student's first year of studies. At the end of the first year, the student can remain with this Faculty Academic Advisor, who will now take on the role of Primary Mentor, or the student can choose another faculty member whose research interests are more in line with his or her own interests. Once a student has chosen a Primary Mentor, it is expected that the student will remain in this mentoring relationship until studies have been completed.

2) Explain how advisors are selected and oriented to their roles and responsibilities.

Program Advisors are members of the Office of Student and Alumni Affairs team. Advisors are hired based on their background in student affairs, academic advising, and/or familiarity with public health. A master's degree is required of all staff providing academic advising to MPH students. Student Affairs advisors are trained in curriculum, course sequencing, study abroad, campus resources, College policies, and the use of the student information systems at NYU (Albert). They are consistently updated on changes that may impact students within the NYU and College communities. Additionally, the Senior Associate Dean for Student and Alumni Affairs is further oriented to advising by serving as a member of the University-wide Dean's Advising group, which is charged with addressing common issues related to student success and academic advising within the University. To remain current and active in the broader NYU student affairs community, the Student Affairs team is also invited to attend University-wide trainings and mixers with advising colleagues from all other NYU colleges and schools.

Faculty Advisors are assigned by Department Chairs or Program Directors. New faculty attend an orientation where they are introduced to concentration curriculum requirements.

As noted above, the doctoral program has a training program for mentors and mentees, and roles and responsibilities are documented in the Doctoral Student Handbook.

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

Concentration requirements and course sequencing requirements and suggestions are available to students on the website pages for each MPH concentration. The concentration webpages also include course-planning worksheets, which are used during advisement meetings. Students typically track their own progress using these documents as well.

The Doctoral Student Handbook (see ERF D18.6) provides detailed information on all aspects of the program, including academic requirements, mentoring, timelines, and policies.

4) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable. Schools should present data only on public health degree offerings.

Student feedback on satisfaction with advisement is obtained in exit surveys sent each year toward the end of the spring semester to graduating students. The table below presents data from the student exit survey for the past three years. The overall survey response rates are: Spring 2016 (68/94=72%), Spring 2017 (98/128=77%), and Spring 2018 (165/196=84%).

Table H1-B Student Satisfaction with Academic Advising
(Based on students responding to the question)

To what extent were you satisfied with your academic advising?	Spring 2016 (N=32)	Spring 2017 (N=87)	Spring 2018 (N=107)
Very Satisfied	28%	18%	34%
Satisfied	34%	34%	38%
Neither Satisfied nor Dissatisfied	13%	27%	18%
Dissatisfied	19%	16%	7%
Very Dissatisfied	6%	5%	3%

In Spring 2018, the vast majority of students (72%) rated themselves as either "Very Satisfied" or "Satisfied" with the academic advising services at GPH. This represents an increase of 20% in student satisfaction from the 2017 exit survey and an increase of 10% from the 2016 exit survey. More importantly, the number of students rating themselves as either "Dissatisfied" or "Very Dissatisfied" decreased from 25% in 2016 to 21% in 2017 to 10% in 2018.

Note: The wording of the question was changed between 2016 and 2017 to meet CEPH's new criteria. The 2016 survey asked students: "To what extent were you satisfied with your academic advising or mentoring services?" The 2017 and 2018 survey asked students "To what extent were you satisfied with your academic advising?"

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

Master's Students:

The onboarding process for incoming master's students begins in late spring, with a series of emails to incoming students providing direction in the many steps required before commencing studies at GPH. Included in these emails is a video about NYU and, more specifically, GPH, as well as an introduction to the vast resources available to students.

The master's student orientation is a mandatory, two-day event. The first day emphasizes GPH and NYU resources, including presentations from alumni and the NYU Wasserman Center for Career Development. Students get to know each other by working on a group case challenge. There is a meet and greet sponsored by the Student Governing Council and meetings with Student Orientation leaders. The second day focuses on presenting academic opportunities and includes meetings for students in each MPH concentration led by concentration faculty, a writing boot camp, presentations from Library Services, a micro-aggressions workshop, and a session on how to produce a dynamic presentation.

Cross-Continental MPH students also receive an extensive orientation designed to prepare them to study in non-U.S. settings, addressing how they identify themselves, how to be culturally sensitive and understanding to religions different from their own, and how to handle challenging environments that include non-potable drinking water, environmental hazards, political turmoil, and human rights issues. Students are also oriented on personal safety and wellness measures to consider while traveling. They are provided with NYU and other emergency numbers to carry on their person, as well as tips on food and water safety. Multiple articles and literature are provided to students, and a blog is maintained with this information, as well as updated about any emergency events taking place in or near where they are studying. During orientation, students are instructed to download the SAFENYU app to their phones that connects students to NYU Public Safety at the NYU campus in New York City or at any of the other NYU sites.

PhD Students:

Doctoral students attend a one-day orientation that is tailored to their specific programmatic needs. The Director of Doctoral Studies arranges for faculty to present their various research portfolios to the new students. Students are also introduced to other key administrative offices at GPH, such as the Office of Student and Alumni Affairs and the Office of Research, and provided with information on diversity initiatives.

All Students:

Both PhD and MPH students have an opportunity to meet faculty during an orientation lunch and at an evening Dean's reception. The orientation agenda is provided in ERF H1.5. Students express a high degree of satisfaction with orientation: in response to a survey conducted in September 2017 (see 2017 Orientation Survey Data in ERF H1.5), 99% of the 81 students responding rated that year's orientation as "good" or "excellent."

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

Strengths:

Orientation is a yearlong planning effort that successfully introduces students to their new learning environment and is rated highly by students. Each year orientation offerings are reimagined to meet the needs of our students, based on both their feedback and staff observations, as well as a timely presentation of our current College offerings. For example, in response to student feedback, the Fall 2017 orientation included a new session addressing diversity and cultural sensitivity in the field. Additionally, a writing session was conducted aimed at enhancing students' professional writing skills based on faculty feedback.

Weaknesses:

The system to move registration advising duties from Student Affairs to faculty is not yet fully in place. The more developed departments and programs and those with greater numbers of faculty are opting to provide academic advising by faculty. Smaller departments and programs continue to rely upon Student Affairs program advisors to offer registration advisement.

Plans:

We recognize that student satisfaction with advisement services needs improvement. As noted above, we are implementing new advising approaches in response. We will closely monitor the new advisement system in terms of implementation and student satisfaction. We will explore offering advisement in evening hours and via Skype.

H2. Career Advising

The school provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

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

1) **Describe the school's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs. Schools should present data only on public health degree offerings.**

GPH collaborates with the NYU Wasserman Center for Career Development to offer our students a robust array of professional development workshops and events, career fairs, individual career coaching services, and assistance in the job search process. The academic year begins with Career Week, a week of activities designed around professional development, networking, and a range of panels and workshops, culminating in our Lab and Center Fairs. Wasserman offers approximately four on-site individual appointments per week in the GPH Student Affairs space, as well as unlimited appointments at the Wasserman Center.

Below are some of the events co-hosted by the Wasserman Center and GPH for our students:

- Two Career Fairs per year: These events are specific to public health. There are also public health employers at the larger, University-wide job fairs each year.
- Panel presentations: At least once a semester, four to five industry professionals are invited to share their experience and insights with students in a moderated panel on career paths in public health. Specific topics are selected based on feedback from academic departments and student surveys.
- Annual Non-Profit Boot Camp: This all-day conference introduces students to the industry and includes industry professionals sharing information on trends, networking best practices, and a networking session.
- Mock interviews: Industry professionals provide constructive feedback to public health students on interviewing best practices. Students schedule mock interviews with Wasserman as needed.
- Job search planning: This includes in-class presentations, which cover the job search timeline, how to identify where you want to apply to jobs, the process for preparing job search documents, how to network and conduct informational interviews, interviewing and negotiation techniques, and answering specific questions about industry trends.
- Résumé/cover letter writing and interview skills seminars: These are held yearly during Career Week, and students may also schedule with Wasserman counselors as needed.

In addition to Wasserman Center offerings, all students receive the College's Public Health Post, a weekly email highlighting current jobs, internships, and fellowships within New York City and around the country and the world (examples of the Public Health Post can be found in ERF F2.1). Within this email, there is a link to the NYU CareerNet, the online job and internship database hosted by the

Wasserman Center. CareerNet is also a resource that students have found useful in attaining part-time employment, summer placements, and internships.

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

All new hires at the Wasserman Center for Career Development, including career coaches, undergo a three- to four-week onboarding process. A large focus of this process for career coaches is honing their coaching skills and knowledge. Coaches begin with an introduction to best practices in career coaching and review any questions with their onboarding manager. They then observe 10-15 appointments between various Wasserman Center career coaches and students, with scheduled time to debrief after each appointment. This allows new hires to observe various coaching styles, as well as familiarize themselves with the student populations that the Wasserman Center works with and the variety of useful and available resources here at NYU. During the last phase of onboarding, experienced coaches will observe the new hire conducting his or her own appointments with students to provide feedback and suggestions. At the conclusion of this phase, if the feedback has been mainly positive and the onboarding manager feels the new hire is ready, the new hire will then begin meeting with students on his or her own.

The Wasserman Center also provides continued training for career coaches, often during bi-weekly staff development sessions. These sessions have focused on a variety of coaching and counseling topics to ensure all staff is up to date on trends in the industry and are constantly learning and growing in their roles as career coaches.

Wasserman Center career coaches meet with GPH Office of Student and Alumni Affairs staff to plan programming, discuss the needs of GPH students, and learn trends and needs in the public health field. The Senior Associate Dean for Student and Alumni Affairs meets with the Executive Director of the Wasserman Center and the Director of the Graduate Students Career Center to discuss the specific needs of public health students. GPH sponsors the Director of the Graduate Students Career Center to attend ASPPH conferences, and she has presented on career panels associated with the APHA. This effort will expand in the coming year to include providing training via conferences and meetings with human resource managers in the field of public health so that career coaches directly providing services to GPH students will have a deeper understanding of the many aspects of the field.

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

Examples of career advising services include the following.

<u>Individual Guidance:</u>

- One-on-one career-coaching appointments
  Public health students meet with Wasserman Center career coaches assigned specifically to GPH to review career goals, discuss effective search practices, how to best utilize CareerNet, review résumés, and conduct mock interviews.

  Number Advised: 223 students (AY 2017-18)

<u>Presentations and Seminars:</u>

- Résumé and Cover Letter Writing Seminar
  This workshop covers the basic principles and values of writing résumés and cover letters.

  Attendance: 39 students (Fall 2017)

- International Student Career Preparation
  As part of International Student Week at GPH, international students in public health learn about their career options in the U.S. and how to effectively conduct a worldwide job search.

  Attendance: 22 students (Fall 2017)

- Work in Academia: Faculty and PhD Students Panel
  A panel of GPH faculty and PhD students share their own successes and challenges, and discuss key strategies for the early, middle, and latter stages of PhD and postdoc careers to help public health students prepare for landing a position in academia.

  Attendance: 22 students (Fall 2017)

- Career Paths in Public Health
  This bi-annual event provides public health students with the opportunity to meet industry professionals and GPH alumni who work across a variety of sectors and to gain firsthand information and practical advice on various careers paths.

  Attendance: 46 students (Fall 2017); 41 students (Spring 2018)

Fairs:

- Lab Informational Fair
  This annual event provides public health students with a unique opportunity to network with faculty and coordinators from labs associated with GPH and explore different avenues of research and practice.

  Attendance: 59 students (Fall 2015); 103 students (Fall 2016): 141 students (Fall 2017)

Examples of recent alumni services include:

- Unlimited access to NYU CareerNet: Alumni can search for full-time, part-time, and internship positions; access additional web-based job search and career exploration tools; and RSVP to career-focused alumni events and seminars.
- Career-coaching: NYU alumni have access to career-coaching appointments at the Wasserman Center to discuss strategies for determining career and job search goals and to support career development.
- Alumni career events/seminars: The Wasserman Center partners with career experts to deliver the latest job search and career development strategies to NYU alumni. Approximately 20 alumni seminars/events are offered each year.
- Alumni weekly career e-newsletter: Alumni can opt-in through their NYU CareerNet account to receive the Wasserman Center's weekly e-newsletter to learn about career management and professional development strategies, receive free job postings, get information on special "alumni-only" events, and stay connected to NYU.

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

The table below represents data for the last three years from the student exit survey administered to graduating MPH and PhD students. The overall survey response rates are: Spring 2016 (68/94=72%), Spring 2017 (98/128=77%), and Spring 2018 (165/196=84%).

Table H2-A Student Satisfaction with Career Advising (Based on students responding to the question)			
To what extent were you satisfied with your career advising?	**Spring 2016 (N=26)**	**Spring 2017 (N=85)**	**Spring 2018 (N=78)**
Very Satisfied	4%	16%	26%
Satisfied	35%	21%	36%
Neither Satisfied nor Dissatisfied	23%	41%	22%
Dissatisfied	35%	13%	15%
Very Dissatisfied	4%	8%	1%

In Spring 2018, the majority of students (62%) rated themselves as either "Very Satisfied" or "Satisfied" with the career advising services at GPH. This represents an increase of 25% in student satisfaction from the 2017 exit survey and an increase of 23% from the 2016 exit survey. More importantly, the number of students rating themselves as "Dissatisfied" or "Very Dissatisfied" decreased from 39% in 2016 to 21% in 2017 to 16% in 2018.

Note: The wording of the question was changed between 2016 and 2017 to meet CEPH's new criteria. The 2016 survey asked students: "To what extent do you agree that the career advising services you received were satisfactory?" The 2017 and 2018 exit surveys asked: "To what extent were you satisfied with your career advising?"

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

Strengths:

GPH offers a wide variety of career advisement events and workshops for our students. We are fortunate to collaborate with the NYU Wasserman Center, which enables GPH students to have access to professional career counseling and a large number of vetted companies and organizations through events and career fairs. The weekly Public Health Post from the College is a valuable resource highlighting current jobs, internships, and fellowships locally, nationally, and internationally.

Weaknesses:

We note the need to improve utilization by our students and alumni of the many career services available. In addition, while the career coaches at the Wasserman Center are well-trained career-counseling professionals, they lack specific exposure to public health. We also need to improve career advisement services provided to our doctoral students.

Plans:

New this year, the Wasserman Center is securing the assistance of a public health consultant who will work with Wasserman career coaches to ensure a comprehensive understanding of the public health field and a robust source of professional organizations in the public health sphere from which to call for assistance with workshops, trainings, networking opportunities and placements. In tandem with the Wasserman Center, the Office of Student and Alumni Affairs and the Director of the PhD program plan to develop more relevant offerings for our PhD students. Wasserman Center staff directly assigned to

GPH will continue to attend conferences as well as hold informational meetings with organizations in the public health field in order to gain a more robust understanding of the field and hiring practices.

Additionally, in the newly created alumni newsletter we will provide updates and highlight career-related opportunities. We will also ask our network of alumni to offer any openings or opportunities available at the companies and organizations at which they work to our students and alumni.

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H3. Student Complaint Procedures

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

1) Describe the procedures by which students may communicate any formal complaints and/or grievances to school officials, and about how these procedures are publicized.

If a student wishes to communicate a complaint to the College, the initial points of contact and consultation are managed through the Office of Academic and Faculty Affairs and the Office of Student and Alumni Affairs. Depending on the nature of the grievance, the two offices may collaborate. Students are informed of GPH policies, including the complaint and grievance process, during the onboarding process, in GPH onboarding materials, and during student orientation. In addition, the GPH grievance procedure is communicated with students through one-on-one consultation, and is available in the student resource section on the College website, under "Resources, Forms & Policies."

In addition to the GPH process, students have access to the University-wide NYU Bias Response Line, which provides a mechanism through which members of the NYU community can share or report experiences and concerns of bias, discrimination, or harassing behavior that occur at NYU.

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

The College allows complaints to be informally resolved and also has a formal complaint procedure in the event that an informal resolution cannot be reached. When students have an informal complaint, they are welcome to meet with a member of the Student Affairs team or GPH senior leadership, including the Senior Associate Dean for Student Affairs and Alumni Affairs, the Senior Associate Dean for Academic and Faculty Affairs, or the Dean of the College.

Informal Resolutions:

Students wishing to grieve an alleged violation of program or University policy must first contact, within 20 working days of the occurrence, the person responsible for the matter being grieved (the respondent) and attempt to resolve the grievance informally. At the request of the student (grievant) or respondent, the Senior Associate Dean for Student and Alumni Affairs or other appropriate member of the faculty or administration shall arrange for a meeting of the parties, attend such meeting(s), and attempt to aid in the resolution of the grievance.

Formal Complaints:

If the grievance is not resolved informally, a student may obtain review by submitting a written complaint to the respondent and the Senior Associate Dean for Student and Alumni Affairs, or in the case that the Senior Associate Dean for Student and Alumni Affairs is the respondent, to the person appointed by the Senior Associate Dean for Student and Alumni Affairs. Unresolved grievances may be addressed by a grievance committee.

Detailed grievance and disciplinary procedures are specified on the GPH website in the student resource section under "Resources, Forms & Policies."

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

No formal complaints or grievances have been submitted.

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

Strengths:

The GPH Offices of Student and Alumni Affairs and Academic and Faculty Affairs sit on campus-wide committees examining policies related to student conduct and student grievances. Representing our College on these committees ensures that GPH's voice is represented as any changes are considered for campus-wide policies so that they may apply appropriately to our students.

Weaknesses:

Discussions with students indicated that many are unaware of student grievance policies and procedures.

Plans:

We will add a section to all course syllabi providing information on grievance policies and procedures. We will also highlight more clearly on the website where students can find information regarding the grievance process.

H4. Student Recruitment and Admissions

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

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

GPH implements an annual recruitment campaign for each of its graduate degree programs, which includes:

- online marketing services to develop leads from the broader pool of prospective graduate students
- an annual recruitment travel calendar to ensure admission staff make face-to-face contact with prospective students from around the country
- a series of strategic communications campaigns that deliver targeted messages to specific populations
- yield strategies to increase enrollment from the pool of admitted students

GPH contracts with an external marketing firm to manage online marketing strategies designed to target and engage prospective graduate students in public health. Each year, the GPH admissions team implements a comprehensive suite of online marketing activities, including search engine marketing, Google retargeting, Gmail-sponsored promotions, Facebook ads, Facebook retargeting, and LinkedIn advertisements. Conversions and costs for each tactic are measured and analyzed on an ongoing basis to continually refine our strategy and ensure we are expending resources efficiently. Leads are also developed from external sources, such as the purchase of GRE registrant lists and registrant lists for SOPHAS Virtual Fairs and This is Public Health Graduate fairs.

Our annual recruitment travel schedule takes us around the country to meet with prospective students at a variety of graduate and professional fairs. In the 2017–18 recruitment season, admissions staff exhibited at 25 different fairs around the country, including the NYC Public Service Career Fair, the NIH Graduate and Professional School Fair, This is Public Health Recruitment fairs, Idealist Graduate fairs, various institutional graduate and professional fairs, and the California Forum for Diversity in Graduate Education.

Leads collected via the above tactics are entered into and managed in Slate, a customer relationship management platform that is designed and developed exclusively for higher education admissions. In Slate, we are able to design custom communication plans for different programs and cohorts to ensure that prospective students receive timely communications of interest to them. Slate also allows us to keep track of any interactions we have with prospective students and analyze which tactics work best to convert inquiries into applications.

Once a student has expressed interest in a GPH program, we have many platforms that encourage contact between prospective students and admission staff. We hold on-campus information sessions, as well as online sessions for those prospective students who are unable to attend an on-campus event. We publish contact information for a team of student ambassadors who are available to communicate directly with prospective students and answer their questions about the GPH student experience. We have an online visit request form that allows prospective students to schedule a meeting with the admissions staff, as well as visit a class while they are on campus.

We also engage in recruitment activities that allow students not in the local vicinity to easily make contact and interact with us. This year, we implemented Drift, a chat widget attached to our program website that allows site visitors to chat live with the admissions staff during business hours. We also host Facebook Live chats on various topics related to our program offerings and the admissions process. As mentioned previously, our on-line information sessions allow us to make presentations to prospective students from all over the world.

Once an applicant is admitted to a program, we begin a strategic yield campaign designed to increase the likelihood they will decide to enroll at GPH. This includes personalized contact from both faculty and students, which the admissions team helps enable by providing each department and program with contact rosters; a guide to contacting admitted students; and drafts of emails they can use to reach out, along with scripts for use when making calls. Our goal is that 100% of our admitted students receive some kind of personalized contact from students and/or faculty. We additionally host an Admitted Students Day event at which we welcome admitted students to campus.

We have implemented a robust, merit-based financial aid program to help us attract an appropriately qualified and diverse class. All admitted PhD students are offered full funding for up to five years. MPH scholarships range from $10,000 to $20,000 annually for full-time study; in the 2016–17 academic year, more than 76% of our master's students received a scholarship from the College, averaging $10,221 per award. We additionally offer scholarships to part-time students to better allow nontraditional and working adult learners to join the program. Scholarship determinations are based on faculty evaluations of an applicant's merit at the time of application. All awards are granted at the time of admission, and applicants are notified in their admission letters as to any scholarship they have been awarded.

PhD degree admissions: Admissions to our PhD in Public Health program is very competitive with five to eight students accepted each year from more than 200 applications. We have at least five fully funded full-time PhD slots for a five-year program through GPH's Doctoral Fellowship Program and additional slots through external funding mechanisms. Regardless of the funding source, applications are reviewed by the departmental faculty of the three concentrations that support the PhD program (see section D18), using admission criteria and rubrics that consider several aspects including academic preparedness, research experience, and research fit. The finalists are discussed by the Doctoral Advisory Committee. Approximately 20-25 students are invited for in-person interviews and group discussions at GPH. Finalists are selected from this pool of interviewed candidates.

2) Provide a statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

The College-wide admissions policy is set by the GPH Admissions Committee, which includes faculty representation from each department and program as well as participation by GPH admissions administrative staff. The Admissions Committee meets multiple times during the academic year to address problems, issues, or outstanding questions that arise from the admissions process. The Admissions Committee sets parameters for the admission process and issues guidelines to departments and programs, but departments and programs have significant discretion in determining their own criteria for admissibility as well as what review procedure works best for their faculty.

In order to apply to one of our graduate programs, students are required to submit a completed SOPHAS application (or SOPHAS Express for certificate programs); a résumé or CV; a personal statement; official transcripts from each post-secondary institution attended; three letters of recommendation; official GRE scores taken within the past five years; and the TOEFL exam for applicants whose native language is not English and who did not receive the equivalent of a U.S. bachelor's degree at an institution where English is the primary language of instruction. Additionally, PhD applicants are required to submit a writing sample of 15-20 pages as part of their application.

Once an application is submitted, the admissions team establishes contact with the applicant to notify the applicant of his or her applicant status and if any materials are missing. Applications are closely monitored for completeness, and applicants with incomplete applications are periodically reminded to submit any outstanding materials. Once an application is complete, the applicant is notified and the application is distributed to the appropriate department for review. Upcoming deadline reminders are sent out to incomplete applicants as well as in-progress applications.

When an application is ready for departmental review, it is added to secure online "rosters" of applications that are accessible by departmental faculty members. Departments have discretion as to how reviews are conducted. Some departments meet periodically to consider all of their outstanding

applications as a group; others make assignments to individual faculty members. Most departments engage in an initial "norming" process at the beginning of the cycle to orient reviewing faculty around a common set of departmental standards.

All departments are asked to provide a final score for an application on a scale from 1–5. The review process is comprehensive and holistic, taking into account all factors and experiences in a prospective student's application. Broadly, review categories include academics, leadership, personal statement, recommendations, and work experience. Departments are also encouraged to take into account relevant factors in a student's background that may contribute to the diversity of the student body. No GRE, GPA, or work experience minimums are enforced; no applications are "screened out" and each complete application receives a full reading.

Once a department records a score for an application, it is retrieved by the admissions team. If the score indicates waitlist or deny, the decision is sent to the student via email immediately. If the decision is accepted, the record is loaded into the NYU's student information system to create a student record. Once a student record is created (usually within 24 hours of the score being recorded), an admissions offer is sent to the applicant via email, along with his or her student ID number and scholarship information if applicable. Admitted students are able to able to accept or decline the offer of admission online and can pay the required tuition deposit via credit card.

3) Select at least one of the measures that is meaningful to the school and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list, the school may add measures that are significant to its own mission and context.

Table H4-1 Outcome Measures for Recruitment and Admissions
(Based on students offered admission in each group)

Outcome Measure - Percent of Priority Underrepresented Students	Target	AY 15-16	AY 16-17	AY 17-18
Percentage of Black/African American students accepting offers of admission	50%	30.6% (19/62)	48.3% (43/89)	29.5% (26/88)
Percentage of Latino/Hispanic students accepting offers of admission	50%	18.9% (10/53)	38.8% (26/67)	34.1% (29/85)
Percentage of first-generation college students accepting offers of admission	50%	24.1% (19/79)	37.2% (41/110)	32.7% (35/107)

NOTE: The above calculations are based only on domestic applicant pool (U.S. citizens and permanent residents); all denominators exclude international applicants. Only public health degree programs are included. In cases in which a student self-reported multiple racial or ethnic categories, the student was included in each applicable priority group reported (if any).

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

Strengths:

The diversity of our student body, faculty, and staff and the visibility of that diversity is a key strength. The yield for traditionally underrepresented students is often higher than overall yield for the entire

application pool. GPH is one of the most diverse colleges at NYU, and we try to ensure that admitted students have access to a diverse range of community members as they consider their options. We have a diverse team of student ambassadors and admission volunteers that reach out to admitted students to welcome them and provide them with information. We also facilitate contact between admitted students and faculty, such as in cases where an underrepresented admit might request contact with a faculty member or student with a similar background.

Our holistic admission review process is another key strength. Admission reviewers are encouraged to take into account the totality of an applicant's background in the context of the experiences and opportunities that applicant has had. This ensures that no one factor is ever the sole determinative variable in an admissions decision and that the unique challenges some of our applicants face can be taken into account as part of the review process.

We offer a generous financial aid program. This financial assistance could be especially important to applicants from disadvantaged backgrounds or for admits who have faced unique challenges in their educational careers. We additionally offer scholarships to part-time students who need to work full time to support themselves while enrolled.

We attend a number of events each year designed to help us reach out to traditionally underrepresented populations, including the California Forum for Diversity in Graduate Education, the Hispanic PreHealth Student Recruitment Fair, and the Lehman College Minority Association for Pre-Health Students (MAPS) Fair.

Finally, our admissions policies and procedures are strengthened by the presence and activity of the Diversity, Equity and Inclusion (DEI) Committee. The chair of the committee sits on the Admissions Committee and ensures that discussions around admissions policies appropriately reflect our mandate to enroll a qualified and diverse student body. The committee also conducts a number of trainings that orient faculty to cultural sensitivity and is planning to introduce recruitment and admissions review training for faculty reviewers.

Weaknesses:

While our student body is quite diverse, we fall short of our targeted goals.

Plans:

Plans to increase student diversity include: 1) offering scholarships targeted to underrepresented students; 2) implementing a program wherein admitted students from such backgrounds are contacted by a student or faculty member from a similar background; 3) developing standardized means for faculty reviewers to weigh such backgrounds as part of the admissions review process; and 4) offering a suite of annual diversity-themed events for both prospective and admitted students.

H5. Publication of Educational Offerings

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

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

- All MPH concentrations - each of the pages below describes key skills, professional development, degree requirements, and a description of the concentration
  - Biostatistics
  - Community Health Science and Practice
  - Environmental Public Health Sciences
  - Epidemiology
  - Global Health
  - Public Health Management
  - Public Health Nutrition
  - Public Health Policy
  - Social and Behavioral Sciences
  - Sustainable Development Goals (SDG)

- Dual Degree MPH programs
  - MD/MPH
  - DDS/MPH
  - MPA/MPH
  - MS/MPH
  - MSW/MPH

- All PhD Concentrations
  - Epidemiology
  - Public Health Policy and Management
  - Social and Behavioral Sciences

- MA in Bioethics
- Academic Calendar (this is an NYU page)
- Admissions Policies for the MPH
- Admissions Policies for the Cross-Continental MPH
- Admissions Policies for the SDG MPH
- GPH Resources, Forms & Policies (includes our academic integrity standards)
- Grading Policies