

ASPPH Presents Webinar Series

***The MPH Degree:
Transitioning to 21st Century
Models***

Tuesday, June 7, 2016
12:00-1:00 pm Eastern

ASPPH.ORG

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ASPPH Presents
 **WEBINAR**

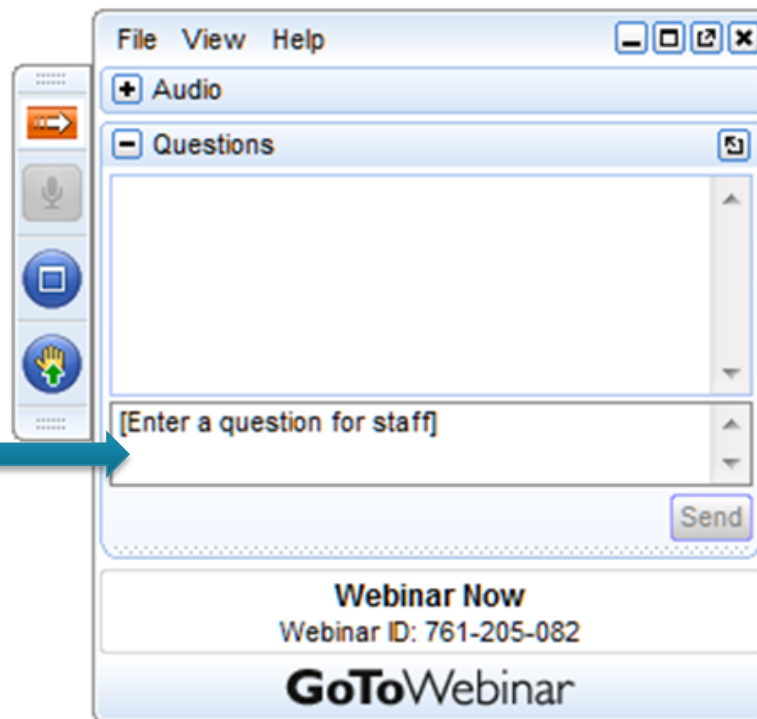
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Method for Submitting Questions

Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.



ASPPH Presents
WEBINAR

Moderator



Ruth Gaare Bernheim, JD, MPH

University of Virginia and Council on Education for Public Health

Context for Changes in the MPH

➤ Framing the Future (FTF)

- [MPH Expert Panel Report](#) released in early 2014

➤ [Evolving CEPH Accreditation Criteria](#)

- Based on FTF
- Process Underway Since March 2015
- New Criteria to Be Announced in October 2016

➤ Innovations in Curricula

Takeaways

- Illustrate two examples of practical frameworks for curricular change
- Reflect upon how the content and processes in the highlighted examples relate to innovating one's MPH degree
- Describe successful methods for engaging faculty and building a shared vision for transitions in one's MPH degree programs

Today's Presenters



Lorraine M. Conroy, ScD, CIH
University of Illinois at Chicago
School of Public Health



Katie Cardarelli, PhD
University of Kentucky College of
Public Health

Presenter



Lorraine M. Conroy, ScD, CIH

University of Illinois at Chicago School of Public Health

Development and Implementation of an Integrated MPH Core Curriculum

Development

Faculty Observations

- Lack of integrated thinking during capstone project
- Students view core courses outside their discipline as courses to check off their list

Process

- In 2008, Dean appointed Academic Strategic Planning Committee to critically examine the School's academic programs.
- Focus on MPH- largest degree program, has not changed substantially since School's early years
- Particular attention to curricular coordination and integration of the MPH program across all four divisions.

Process

- Explored integrated core curriculum reflective of real-world experiences
 - examining current approaches to the MPH at other SPHs;
 - designing “fantasy” alternative MPH programs;
 - obtaining faculty feedback in a SPH faculty meeting and in division-specific faculty meetings;
 - collecting input from individual faculty; and,
 - conducting focus groups with students and alumni

Student/Alumni Input

Students and alumni identified a number of deficiencies with the traditional MPH curriculum:

- demonstrating multidisciplinary approaches to solving public health problems.
- reading and synthesizing the scientific literature.
- framing a research question
- conducting basic data analysis
- preparing for subsequent SPH classes

Faculty Input

If you were creating an MPH curriculum in compliance with the Council on Education for Public Health requirements but without consideration of constraints, how would you do it?

Begin by reflecting on the following six dimensions. On the handout, mark the point on each continuum that represents your perspective with respect to an ideal MPH program.

School-wide <—————> Division specific

Multi-option core <—————> Prescribed core

Discipline-based <—————> Cross-disciplinary

Delivered
throughout program <—————> Sequenced
(not sequenced)

Problem-based <—————> Didactic

Breadth <—————> Depth

Faculty Input

No strong consensus:

- whether the MPH degree should be division specific or a school-wide degree offering,
- whether there should be a prescribed core or a multi-option core curriculum
- whether we should provide generalist or specialist training

Faculty Input

Strong consensus:

- core curriculum should be integrated
- taken early in the program
- should use case-based/problem-based methods.

Integrated Core Curriculum

- 3 core courses (14 sh)
 - Determinants of Population Health (4 sh)
 - Analytic and Research Methods (6 sh)
 - Public Health Systems, Management, and Policy (4 sh)
- Field practicum (3-5 sh)
- Completion of a capstone project (1 sh)
- Interdisciplinary teams of faculty
- “Active learning” approaches
- Cohort stays together through 3 core courses

Traditional MPH Core Curriculum

- 6 core courses (19 sh)
 - Biostatistics 1 (4 sh)
 - Public Health Concepts and Practice (3 sh)
 - Behavioral Sciences in Public Health (3 sh)
 - Principals of Environmental Health Sciences (3 sh)
 - Introduction to Epidemiology: Principles and Methods (3 sh)
 - Principles of Management in Public Health (3 sh)
- Field practicum (3-5 sh)
- Completion of a capstone project (1 sh)

Implementation

Pilot Test beginning Fall 2013

- Consultants from the College of Education for the evaluation
- Limited to full-time on-campus students
- Students were asked to opt in to pilot test
 - By opting in students agreeing to be randomly assigned to traditional curriculum or integrated curriculum
- Cohort 1: 2013-2015 (new and traditional)
- Cohort 2: 2014-2016 (new and traditional)

Evaluation Plan

- Course Evaluation Questionnaires- additional questions were added
- Exit/Graduate Surveys- additional questions were added
- Annual Survey
- Annual Focus Groups:
 - Students in integrated core
 - Students in traditional core
 - Faculty teaching in integrated core
 - Faculty teaching in traditional core

Quantitative Results

Integrated core students reported higher levels of self-reported ability for the following:

- Preparation for subsequent courses
- Preparation to work across areas of public health
- Read, synthesize and interpret scientific studies and professional literature pertaining to public health problems
- Frame and pursue researchable questions
- Perform data analysis relative to public health problems studied
- Identify and apply theories and models to solve public health problems

Quantitative Results

Integrated core students also reported that the following contributed positively to academic growth:

- Peer group support
- Group work experiences
- Other class opportunities
- Co-teaching

Qualitative Results

- Integrated core students more exposed to instructors' sharing of personal and professional experience– resonated with students
- Integrated students greatly benefitted from and enjoyed progressing through the curriculum with the same cohort
- Some traditional students felt that the pilot students had an unfair advantage and had additional learning opportunities that traditional core students did not have

Logistics

- AY13-14: one section of each course, about 35 students in cohort
- AY14-15: increased cohort size to close to 50 students
- AY15-16: additional onsite section (additional cohort) of approximately 50 students
- AY16-17: introduction of online sections of each course to accommodate part-time and online students
- Full implementation in AY17-18

Resources Needed

- Faculty salary (reduced teaching load or additional salary) for two instructors to develop the initial version of each of the 3 core courses
- Funds to provide faculty development in active teaching and case-based teaching methods
- Salary support for teaching the integrated core courses and the traditional core courses throughout the evaluation period and transition period.
- Salary support for faculty to convert core courses to online format (3 pairs of instructors)
- Working closely with instructional designers from UIC Instructional Technology Laboratory

Challenges and Lessons Learned

- Faculty buy-in/lack thereof - implementing change management
- Logistics of scheduling
- Co-teaching
- Attaining fidelity across course sections

Observed and Expected Benefits

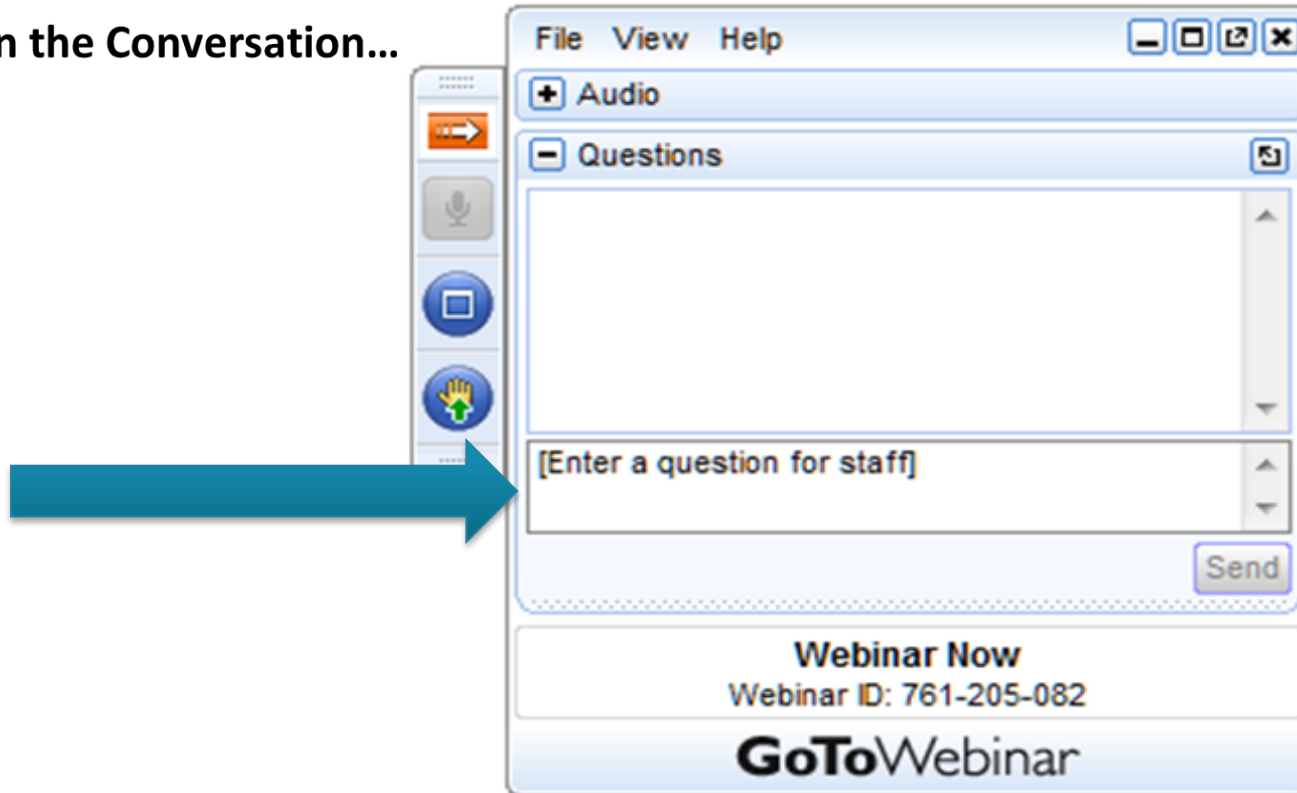
- Improved student educational experience
- Interdisciplinary interaction among faculty
- Streamlined number of course offerings
- More predictable enrollment in sections
- Core courses are taken early in curriculum
- Increase in number of students taking electives outside their home department increasing their interdisciplinary experiences
- Close cohorts, sense of community

Acknowledgements

- Academic Strategic Planning Committee members
- Integrated core course developers and instructors
- SPH Dean
- Evaluation consultants and data analysts

Questions or Comments?

Join the Conversation...



Presenter



Katie Cardarelli, PhD

University of Kentucky College of Public Health

Redesign of a health behavior MPH curriculum

Katie Cardarelli, Ph.D.



Framing the Future: MPH for the 21st Century

- “Concentration curricula should be designed to provide the rigorous, in-depth, skills-based education that....employers are demanding.”
- “...culminating experience elements provide opportunities for applied learning, interdisciplinary content, and integration of concepts and skills.”



Background

- Health Behavior faculty assessed its curriculum in AY 2014
- To assure contemporary content and relevance for public health workforce needs, a redesign was warranted, including the culminating experience
- Focus: applied, evidence-based public health programming and evaluation



Faculty-Led Redesign



Robin Vanderpool, Dr.P.H.



Corrine Williams, Sc.D.



Christina Studts, Ph.D.



Kate Eddens, Ph.D., M.P.H.



Mark Swanson, Ph.D.

Collaborative faculty is a *must* for this level of integration



Shifting Emphasis

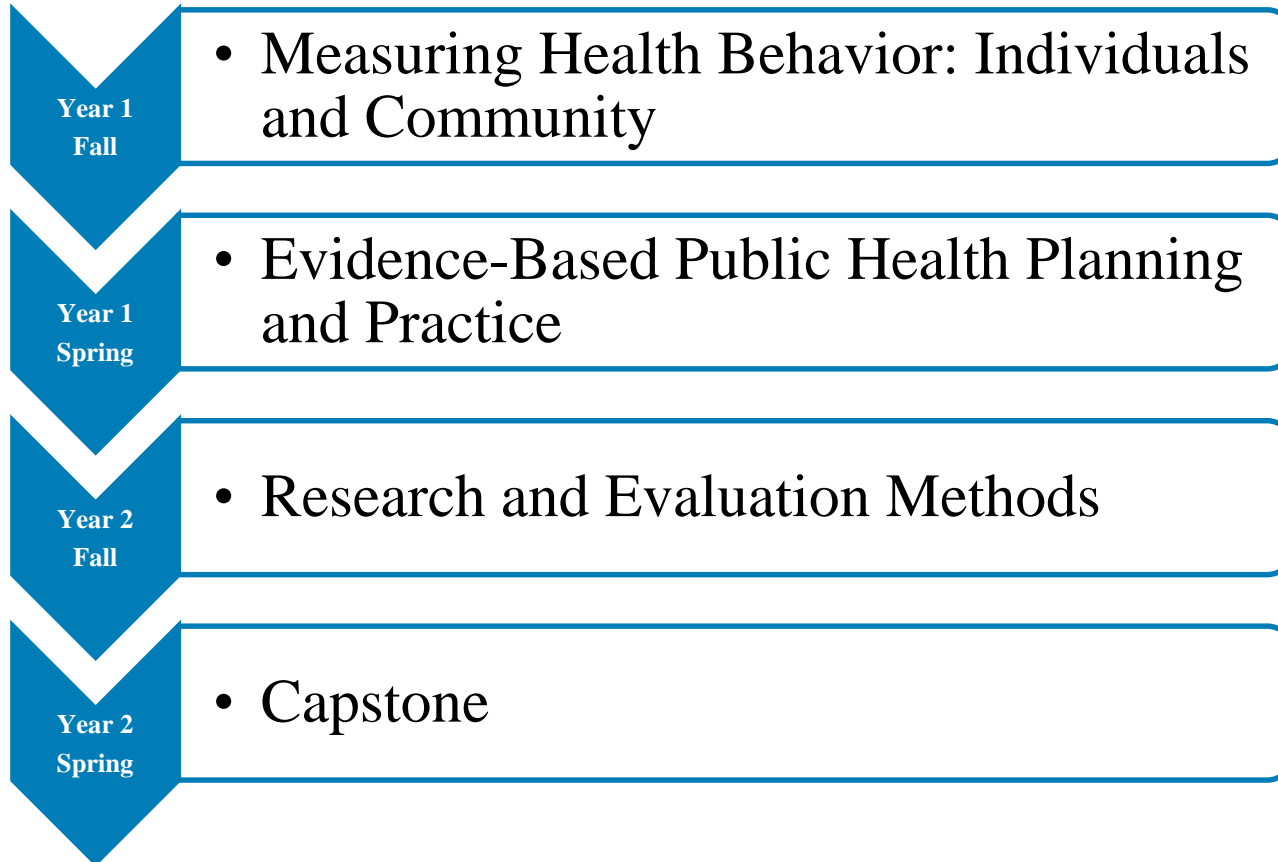
- Moved away from topical courses to sequential methods-focused courses
- Capstone became a grant application from the perspective of a community organization



Required HB Concentration Courses

1. Foundations of Health Behavior- all MPH
2. Ethics for Public Health
3. Eliminating Racial and Ethnic Health Disparities

Methods-focused courses (NEW)





Redesigned Capstone: Grant Application

- Identify an evidence-based intervention
- Define the target population and need
- Develop a logic model
- Design a rigorous program evaluation
- Prepare budget and justification
- Describe proposed collaboration with key stakeholders
- Describe project management plan



Spring 2016

- 18 students completed the new curriculum and presented their capstone in a 20-minute presentation
- Also required to submit a 30-page grant application with accompanying materials (e.g., logic model, budget and justification, work plans)



Student Reaction

- Initially: anxiety and resentment
- After presenting capstones: confidence and connectivity
 - “For the first year of having the course with a mock proposal, I thought it was a very thorough and comprehensive class...and I was confident walking into my defense.”
 - “It was so real. I know that I will use the skills from capstone throughout my career.”



Faculty Reaction

- Enhanced achievement of health behavior student learning outcomes

“I am incredibly impressed... What I saw today were... presentations that achieved exactly what we were aiming for: evidence that our students can identify and describe a target population with a specific health issue, that they can locate and describe an evidence-based public health intervention, that they understand the adaptation vs. fidelity tension, that they can conceptualize a logic model to communicate what they will do and what endpoints they expect to influence, that they can differentiate and describe process and outcome evaluations, that they can thoughtfully identify community representatives and stakeholders for CAGs, that they can develop project management and implementation plans, that they understand how important organizational capacity is, and that they have learned how challenging budget development is... It is no overstatement that my heart is full!”



Conclusion

- Feedback session with graduating students and faculty retreat identified opportunities to further streamline the capstone and better integrate the required course content
- Ongoing evaluation will continue to monitor workforce preparedness satisfaction among alumni
- Requires a great deal of faculty coordination across courses

Questions



Graduates at the 2016 College of Public Health Reception.

Thank You to Today's Presenters



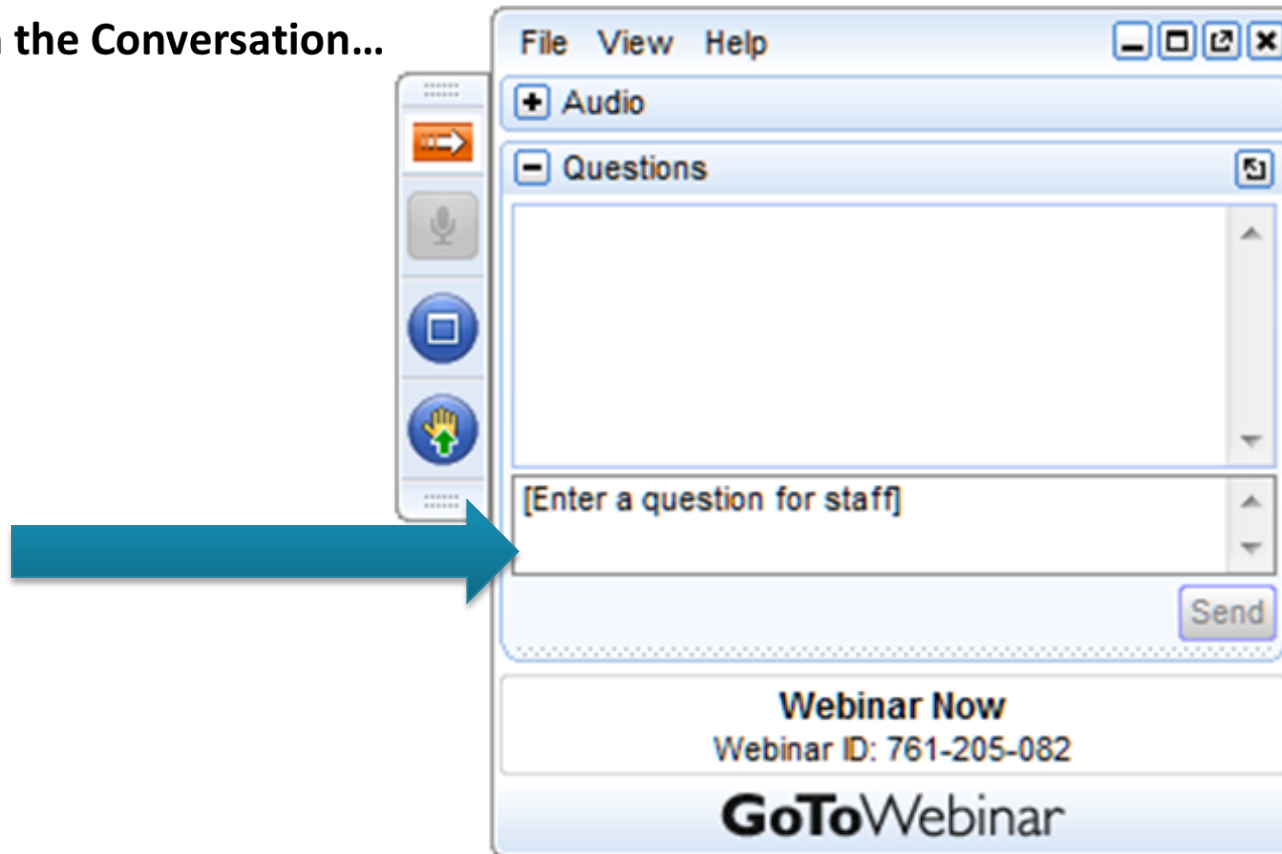
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Questions or Comments?

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Today's Presenters

Now taking questions.



Lorraine M. Conroy, ScD, CIH
University of Illinois at Chicago
School of Public Health



Katie Cardarelli, PhD
University of Kentucky College of
Public Health

Thank You!

See the webinar event page on the ASPPH website for a link to the **archived webinar:**

<http://www.aspph.org/event/aspph-presents-webinar-the-mph-degree-transitioning-to-21st-century-models/>

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WEBINAR

ASPPH Presents Webinar: Public Health and Architecture Interdisciplinary Collaboration

Tuesday, June 14, 11:00 a.m. – 12:00 p.m. Eastern

ASPPH Presents Webinar: The Future Public Health Workforce: Pipelines and Profiles of SOPHAS Applicants

Monday, June 20, 1:00 – 2:00 p.m. Eastern

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Thank you!