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Public Health is...
what we as society do collectively to assure
the conditions in which people can be healthy.

—Institute of Medicine (1988)
1. Public Health Program Description

The Public Health Program at The University of Texas Medical Branch (UTMB) is administered by the Department of Preventive Medicine and Community Health (PMCH). The program was pre-accredited in 1999 and has been fully accredited since 2002 by the national accrediting body, the Council for Education on Public Health (CEPH).

The Public Health Program at UTMB offers a professional MPH degree with an Epidemiology track and an Aerospace Medicine track. All students who enroll in the program have completed, or are working toward, an MD or PhD degree. The Epidemiology track is open to UTMB doctoral students, medical students, residents, fellows and faculty. The Aerospace Medicine track is open only to Preventive Medicine residents. The Public Health Program provides this select group of students with the knowledge, skills, and values they will need to work in fields that combine preventive medicine and public health.

As of Summer 2015, 126 graduates have earned the MPH degree. Degrees from the PMCH graduate programs, including the MPH, are awarded by the UTMB Graduate School of Biomedical Sciences (GSBS). The instructional and related educational activities of the Public Health Program are supervised by the Graduate Program Director for the Public Health Program (Christine Arcari, Ph.D., M.P.H.). The coordination of the Public Health Program with other PMCH graduate programs and curricular tracks is directed by the Vice Chair for Education (Kristen Peek, Ph.D.). The leadership of PMCH and oversight of education, research and service activities is guided by the PMCH-SOM Department Chair (Laura Rudkin, Ph.D.).
The PMCH-GSBS Program administers four graduate degree programs: **Public Health** (Epidemiology and Aerospace Medicine Tracks), **Population Health Sciences**, **Clinical Science**, and **Rehabilitation Sciences**.
1.1 Mission and Values

The MISSION of the Public Health Program at The University of Texas Medical Branch at Galveston is to contribute to the protection and promotion of health in human populations by:

- Preparing students to practice skillful and evidence-based preventive medicine and public health;
- Conducting and communicating research that informs the diverse fields within public health; and
- Providing interdisciplinary expertise in the service of academic, professional, and community-based public health organizations.

We work toward this mission through the development, integration, and continual improvement of activities from our rigorous instructional program, collaborative and productive research agendas, and wide-ranging service commitments.

The Public Health Program core VALUES are informed by UTMB values (http://intranet.utmb.edu/mission/). These are:

- **Education.** We are committed to life-long learning for our students, staff, faculty and community.
- **Innovation.** We always think of new ways to do things better.
- **Diversity.** We are committed to employ and educate a health care work force whose diversity mirrors the populations they serve.
- **Service.** We have a burning commitment to serve the health care needs of all Texans, regardless of their ability to pay.
- **Community.** We are committed to making our community a better place to live and work.
The institution’s core values were reaffirmed and expanded upon by PMCH faculty members during a strategic planning process in 2005. The faculty and staff charged with developing a departmental strategic plan began the process by identifying shared values. The **PMCH consensus value statement** included:

- **Integrity.** We fulfill our duties and responsibilities in an open, honest, and ethical manner.
- **Collegiality.** We value cooperation and collaboration. We are respectful of our colleagues, co-workers, and community members.
- **Effectiveness.** We are committed to being effective, efficient and productive in our teaching, research, and service activities.
- **Responsiveness.** We are flexible and adaptable. Within our areas of expertise, we are prepared to respond to institutional and community needs as they arise.

“The Department of Preventive Medicine has been established in this university for the specific purpose of helping in the solution of medico-social problems in Texas. The doctor must be an active force in helping improve social and economic conditions in the community. For in the last analysis, the problems of preventive medicine are social problems and their final solution must be social remedies.”

*James Person Simonds, MD, (1913)*

Dr. Simonds was the first chair of UTMB’s Department of Preventive Medicine.
1.2 Program Goals and Objectives

Our established goals and objectives guide us in our efforts to accomplish our stated mission. We have developed broad goals and measurable objectives for the Public Health Program and for each of its major functions: instruction, research, and service, as well as administration.

**Instructional Goals and Objectives**

1. Provide a rigorous, comprehensive, integrated public health curricular plan with high quality instruction.
   a. Offer courses with well defined competency-based objectives and corresponding content and assignments.
   b. Integrate core public health knowledge and skills across learning experiences.

2. Prepare students to perform the three core functions of public health—assessment, policy development, and assurance—in their chosen career settings.
   a. Require all public health students to demonstrate mastery of the program competencies.
   b. Require all public health students to practice the three functions through planned, evaluated, and coordinated capstone projects and practice experiences.

3. Provide students with practical experience in applied public health settings.
   a. Expand the number of local organizations and agencies available for practice experience placements or capstone collaborations.
   b. Formally evaluate practice experience sites, preceptors, and projects to inform improvements.

4. Train students who will engage in lifelong learning in their chosen career settings.
   a. Impart the value of lifelong learning to students.
   b. Provide public health students the skills needed to stay current on the science and practice of their specific fields.

**Research Goals and Objectives**

1. Conduct research with applied implications for public health practice and policy making.
   a. Increase the number and productivity of research projects with relevance to public health.

2. Conduct community-based participatory research (CBPR).
   a. Increase the number and productivity of CBPR projects.
   b. Expand the number and role of community groups collaborating on CBPR projects.

3. Provide students with opportunities to be involved in faculty research projects.
   a. Expand the number of public health students in research collaborations with faculty members.
Service Goals and Objectives

1. Provide students with multiple and varied opportunities to perform community service of public health relevance.
   a. Increase faculty-public health student joint participation in community service.
   b. Strengthen public health student involvement in the UTMB Graduate Student Organization (GSO) service projects.

2. Encourage faculty members to employ their expertise in the service of public health professional and community organizations.
   a. Increase faculty involvement in public health service activities.

3. Identify the public health related workforce development needs of area health care and public health workers.
   a. Conduct an area needs assessment regarding public health continuing education.

4. Participate in planning and delivering continuing education programs on public health topics.
   a. Facilitate faculty participation in public health related continuing education activities.

Administration Goals and Objectives

1. Expand the student base for the Public Health Program.
   a. Increase the number of MD-MPH students enrolled.
   b. Increase the number of medical residents outside of Preventive Medicine enrolled.

2. Enhance funding for Public Health Program activities.
   a. Obtain funding to assist MD-MPH students with cost of tuition and fees.
   b. Obtain funding to cover students’ practice experience expenses.

3. Expand the faculty base for the Public Health Program.
   a. Involve more PMCH and UTMB faculty from various disciplines in the Public Health Program.
   b. Establish more roles for public health practitioners in the various activities of the Public Health Program.
   c. Coordinate with other programs and departments to fund new faculty positions in public health fields.

4. Enhance demographic diversity of the Public Health Program.
   a. Encourage minority and female student and faculty participation in the Public Health Program.
2. **Student Competencies**

The Public Health Program faculty members have generated and approved competencies in three domains: 1) core knowledge, 2) practice skills, and 3) professional skills. There are core public health competences for all public health students and track specific competencies for students in the Epidemiology and Aerospace Medicine Track. These guide curriculum improvement and program review by the faculty and provide students with additional focus in skills development.

The Public Health Program uses additional **competency sets** to guide program planning and evaluation and to assess student and alumni performance. (See Appendix A.) Those competency sets are the:

- Public Health Core Competencies—both discipline specific and crosscutting—proposed by the Association of Schools of Public Health ([www.asph.org](http://www.asph.org));
- Core Competencies for Public Health Professionals adopted by the Council on Linkages Between Academia and Public Health Practice ([www.trainingfinder.org](http://www.trainingfinder.org)); and

The **model for the Association of Schools Public Health (ASPH) Public Health Core Competencies** is illustrated below. The five competency areas in the outer ring include the five core content areas of public health—Biostatistics, Epidemiology, Environmental Health Sciences, Health Policy and Management, and Social and Behavioral Sciences. The competency areas listed in the center box include knowledge and skills that cut across the core areas.
2.1 Core MPH Competencies

To prepare for careers in which they will contribute to the protection and promotion of population health, UTMB MPH graduates are expected to master the following competencies:

Core Knowledge

1. Describe basic concepts in biostatistics and epidemiology.
2. Calculate and interpret basic measures in biostatistics and epidemiology.
3. Describe the direct and indirect human, ecologic and safety effects of major environmental and occupational agents.
4. Identify the main components and issues in the US health care and public health systems.
5. Describe the role of program planning, budgeting, management, and evaluation in the development and operation of organizational initiatives.
6. Identify basic concepts and models from social and behavioral sciences that are used in public health research and practice.
7. Describe how social, behavioral, environmental, psychological, and biological factors contribute to specific individual and community health outcomes.

Practice Skills

8. Locate existing data sources on health status and health related resources for a specific population.
9. Apply quantitative (biostatistics and epidemiology) methods to provide a health and demographic profile of a specific population.
10. Locate and synthesize the relevant research literature on risk and protective factors for a specific public health issue.
11. Review the evidence base on program and policy approaches to a specific public health issue.
12. Identify potential stakeholders, target populations, and modifiable causal factors for a specific public health issue.
13. Recommend appropriate actions based on knowledge of the evidence base, target population, stakeholder preference, and available resources.

Professional Skills

14. Employ high ethical and professional standards in public health practice and research activities.
15. Communicate public health topics effectively to both lay and professional audiences.
16. Recognize the role of cultural and social factors in the planning and delivery of public health services and interventions.
17. Appreciate the importance of working collaboratively with diverse communities and constituencies (e.g., researchers, practitioners, agencies, and organizations).
18. Value commitment to lifelong learning and professional service.
2.2 Epidemiology Track MPH Competencies

To prepare for careers in which they will apply their epidemiologic knowledge and skills to the protection and promotion of population health, UTMB MPH graduates in the Epidemiology track are expected to master the following competencies:

Core Knowledge

1. Discuss sentinel events in the history and development of the public health profession and their relevance for practice in the field.
2. Explain the role of biology in the ecological model of population-based health.
3. Identify the role of laboratory resources in epidemiologic practice.
4. Use identified informatics tools in support of epidemiologic practice.
5. Recognize the basic principles of risk communication.

Practice Skills

6. Create an epidemiological profile for a specified population.
7. Organize and manage data from surveillance systems, surveys, and investigations.
8. Analyze data from an epidemiologic investigation or study.
9. Summarize results of epidemiologic analysis and draw conclusions.
10. Recommend evidence-based interventions and control measures in response to epidemiologic findings.
11. Plan for the collection and analysis of data to be used in evaluation of programs and interventions.
12. Provide epidemiological input into epidemiologic studies, public health programs, and community public health planning.

Professional Skills

13. Embrace a definition of public health that captures the unique characteristics of the field (e.g., population-focused, community-oriented, prevention-motivated and rooted in social justice) and how these contribute to professional practice.
14. Apply principles of good ethical/legal practice as they relate to study design and data collection, dissemination, and use.
15. Conduct investigations using languages and approaches tailored to the population.
2.3 Aerospace Track MPH Competencies

To prepare for careers in which they will contribute to health protection and promotion within specific populations exposed to hazardous environments, UTMB MPH graduates in the Aerospace Medicine concentration are expected to master the following competencies:

**Core Knowledge**

1. Describe federal and state regulatory programs, guidelines, and authorities that control occupational health issues.
2. Describe the genetic, physiologic, and psychosocial factors that affect susceptibility to adverse health outcomes following exposure to environmental hazards.
3. Explain the general mechanisms of toxicity in eliciting a toxic response to various environmental exposures.
4. Describe patterns of disease relevant to the practice of travel medicine.
5. Identify the physiologic effects of flight and spaceflight on humans.

**Practice Skills**

7. Draw appropriate inferences from epidemiologic studies of astronauts, flight personnel, and passengers.
8. Develop a testable model of environmental insult.
9. Analyze inter-relationships among systems that influence the health of humans in the flight and spaceflight environments.
10. Specify approaches for assessing, preventing, and controlling environmental hazards that pose risks to human health and safety.
11. Apply appropriate methods to prevent disease or limit risk for patient populations in travel medicine.
12. Develop and apply medical care standards and programs for persons operating in hazardous environments.
13. Advise in the design of air and flight space equipment, biomedical equipment, and vehicles to promote flight safety.
14. Conduct medical aspects of mishap investigation and propose preventive measures.

**Professional Skills**

15. Effectively communicate concepts of risk and risk reduction in occupational settings.
16. Serve as passenger and personnel advocates to promote flight safety.
3. Curricular Plan

The curricular plan includes courses in the core disciplines of public health and topics relevant to blending the practice of preventive medicine and public health. A minimum of 42 credit hours is required to earn the MPH. Course descriptions are at: http://pmch.utmb.edu/education/gradprogram/gradcourselisting.aspx.

In addition to coursework, the curricular plan also incorporates integrative applied learning experiences in the form of the capstone project and the practice experience. The capstone project and practice experience provide students with two distinct opportunities to apply the knowledge and skills obtained in coursework to public health practice. The capstone and practice experience are separate requirements within the Public Health Program, but may be combined into a single larger project. Public Health faculty members guide students in identifying projects that suit the students’ professional goals and personal interests.
## MPH Epidemiology Track

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<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
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<tr>
<td><strong>Public Health Core Courses (Required)</strong></td>
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</tr>
<tr>
<td>PHS 6347</td>
<td>Applied Statistical Methods</td>
<td>3</td>
</tr>
<tr>
<td>PHS 6330</td>
<td>Introduction to Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>PHS 6015</td>
<td>Foundations in Public Health</td>
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<td><strong>SUBTOTAL</strong></td>
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<tr>
<td>PHS 6333</td>
<td>Epidemiological Methods</td>
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<td>PHS 6233</td>
<td>Infectious Disease Epidemiology</td>
<td>2</td>
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<tr>
<td>PHS 6234</td>
<td>Chronic Disease Epidemiology</td>
<td>2</td>
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<tr>
<td>PHS TBD</td>
<td>Injury Epidemiology</td>
<td>2</td>
</tr>
<tr>
<td>PHS TBD</td>
<td>Social Determinants of Health</td>
<td>2</td>
</tr>
<tr>
<td>PHS 6210</td>
<td>Introduction to Data Management</td>
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<td>PHS 6121</td>
<td>Public Health Colloquium</td>
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<tr>
<td><strong>Additional Courses (Required)</strong></td>
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<tr>
<td>MEHU 6101</td>
<td>Ethics of Scientific Research</td>
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<tr>
<td>PHS 6426</td>
<td>Public Health Practice</td>
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<tr>
<td>PHS 6098</td>
<td>Thesis</td>
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<td></td>
<td><strong>TOTAL DEGREE HOURS</strong></td>
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## MPH Aerospace Medicine Track

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<th>Credit Hours</th>
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<tbody>
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<td></td>
<td></td>
</tr>
<tr>
<td>PHS 6347</td>
<td>Applied Statistical Methods</td>
<td>3</td>
</tr>
<tr>
<td>PHS 6330</td>
<td>Introduction to Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>PHS 6015</td>
<td>Foundations in Public Health</td>
<td>6</td>
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<tr>
<td></td>
<td><strong>SUBTOTAL</strong></td>
<td><strong>12</strong></td>
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<tr>
<td><strong>Aerospace Medicine Required Courses</strong></td>
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<tr>
<td>PHS 6214</td>
<td>Aircraft Mishap Investigation and Prevention</td>
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<tr>
<td>PHS 6410</td>
<td>Intensive Course in Tropical and Travel Medicine</td>
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<tr>
<td>PHS 6482</td>
<td>Principles of Aerospace Medicine</td>
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<tr>
<td>PHS 6227</td>
<td>Occupational Injury and Illness</td>
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<td>PHS 6296</td>
<td>Special Topics: Stress &amp; Health</td>
<td>2</td>
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<tr>
<td>PHS TBD</td>
<td>Public Health and Preventive Medicine</td>
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</tr>
<tr>
<td></td>
<td><strong>SUBTOTAL</strong></td>
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</tr>
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</table>
Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

*World Health Organization Constitution. (1946)*

*Geneva (WHO)*
4. **Capstone Project**

The capstone project should **address a topic of public health significance** and should contribute to the knowledge base of preventive medicine and public health. Through the project the student will demonstrate that he/she is able to integrate skills and competencies from across the curriculum to conduct evidence-based public health research. Approval of the final capstone report constitutes an assessment that the student is prepared to enter public health practice.

**Requirements** for completion of the capstone project include: (1) a formal written proposal, (2) a public presentation of the completed project, and (3) a final written report that meets Graduate School guidelines. The public presentation takes place as part of National Public Health Week near the end of the spring term. Students complete the written capstone report as part of the required Thesis hours in the final term of enrollment. In the UTMB Public Health Program, a wide variety of topics have been addressed in capstone projects (See Appendix B).

The capstone project provides students the opportunity to apply public health skills to a topic of practical significance. The project allows the Public Health Program to evaluate the student’s performance on core public health competencies. The capstone project process also **meets requirements placed on the Public Health Program** by the UTMB Graduate School of Biomedical Sciences and the national accrediting body in public health, the Council on Education for Public Health.

The culminating experience of the Public Health Program is the completion of the capstone project including the written paper and public presentation. To maintain full accreditation from the Council on Education for Public Health, the Public Health Program must require a culminating experience.

The main **types of capstone projects** include: systematic literature reviews, research reports, program planning, and program evaluation. These formats will be described in more detail in section 4.2. Other formats are acceptable with the approval of the student’s advisory committee and the program director. Examples of alternative formats include the development of population health case studies to be used in medical curriculum or creation of on-line public health teaching modules.
4.1 Capstone Committee, Proposal & Candidacy

Committee

Students are guided through the capstone project by a three-person committee including the student’s MPH advisor (Committee Chair) from the Public Health Program, a second faculty member from the Public Health Program, and a third faculty member from a program or discipline different from that of the graduate advisor. The Public Health Program Director (Dr. Christine Arcari, Ph.D., M.P.H.) will assign each student a graduate advisor and the program director and graduate advisor will aid in the selection of the remaining capstone committee members.

Proposal

A formal written proposal is required for the capstone. According to the GSBS, the proposal should address the following questions:

1. What do you intend to do?
2. Why is the work important?
3. What has been done already?
4. How are you going to do the work?

The format of the proposal is:

1. Title Sheet – Title of the research project followed by your name and a 200 word summary of the proposed thesis/dissertation research. One page.

2. Research Plan

   A. Specific Aims or Problem Statement: State concisely and realistically what the research described in the proposal is intended to accomplish. What hypothesis is to be tested or what question is to be addressed? Do not exceed one page.

   B. Significance: Briefly sketch the background (or literature review) to your thesis/dissertation proposal, critically evaluate existing knowledge, and specifically identify the gaps which the proposal is intending to fill. State concisely the importance of the research described in the proposal by relating the specific aims to longer term objectives. Do not exceed three pages.

   C. Research Accomplishments to Date: If you have conducted any research pertinent to your thesis/dissertation proposal, briefly describe your results. Also, list relevant courses or other experiences which enhance your competence to perform the proposed research. Do not exceed four pages of written text. (Additional pages may be used for figures, graphs, tables, etc.)
D. Methods: Briefly discuss the research design and procedures to be used to accomplish the specific aims of the proposal. If any new methodology is being used, describe its advantage over existing methodology. Include the kinds of data to be gathered (when applicable) and the means by which the data will be analyzed and interpreted. The discussion should provide sufficient evidence that the specific aims are attainable. It is not necessary to include detailed methodological/technical protocols. Do not exceed ten pages.

E. Literature Cited: Cite the pertinent literature in the text and provide the complete reference list in the Literature Cited section. Each citation must include the names of all authors, the name of the book or journal, volume number, page numbers, and year of publication. Although no page limitation is specified for this part of the proposal, make every attempt to be judicious in compiling the biography. It should be relevant and current. It need not be exhaustive.

F. Supervision and Facilities: Name the person(s) proposed to be immediately responsible for supervising your thesis/dissertation research and laboratory (or other facilities) where most of your proposed research will take place. If the proposed project involves collaboration with another institution, give evidence that the collaborator(s) agrees to participate.

G. Human Subjects: Include all human research-related instruments to be used in this study, sample of subject consent form(s), and instructions to subjects as appropriate.

H. Public Health Competencies: Include a list of the public health competencies you plan to concentrate on doing your capstone. You may identify specific competencies from the guides included (See Appendix A) or write your own.

A draft of the written proposal, no more than 10 pages (excluding tables and appendices), is required. An extensive literature review is not necessary for the proposal. The format of the proposal should follow GSBS guidelines. Refer to GSBS format requirements at http://www.gsbs.utmb.edu/ETD/guidelines.htm.

Candidacy

To be admitted to candidacy you must submit your capstone proposal for approval to your Committee Chair and circulate the proposal to the remaining capstone committee members for comment. When your capstone committee has approved the proposal, complete the GSBS paperwork for advancement to candidacy including a Gantt timeline (See Appendix D) and submit the paperwork to Shannon Carroll along with a copy of your final written proposal.

The Public Health Program Director (Dr. Christine Arcari) and the Vice Chair for Education (Dr. Kristen Peek) must read and approve the proposal before forms are submitted to GSBS.
4.2 Final Report

The template for the format of the capstone report is found at: http://gsbs.utmb.edu/etd/ETD_Template.asp. The content of the capstone report and the specific chapters included varies according to the type of project.

Systematic Literature Review

A systematic literature review provides an in-depth analysis of an important public health problem, including describing the problem, evaluating causes and determinants, and proposing evidence-based solutions regarding appropriate interventions or policy or regulatory changes for prevention and control.

The structure of the systematic literature review is:

Abstract
Chapter 1 – Introduction
  • Research question
  • Objectives
  • Rationale for the review
Chapter 2 – Background
  • Epidemiologic description of the health problem (distribution and determinants)
Chapter 3 – Methods
  • Search strategy
  • Inclusion and exclusion criteria
  • Data extraction
  • Quality assessment
Chapter 4 – Results
  • Search results
  • Selection process
  • Description of studies
  • Summary of findings
  • Quality assessment
Chapter 5 – Discussion
  • Summary
  • Public health implications
  • Strengths and limitations
  • Gaps in evidence
  • Conclusions
Bibliography
Appendices
Biography & CV
Research Report

A research report addresses a public health related research question and involves the collection, analysis, and interpretation of data. Secondary data analyses may be conducted. Primary data collection is permissible, but is not encouraged given the time demands of the Public Health Program.

The structure of the research report is:

Abstract

Chapter 1 – Introduction
- Research question
- Specific aims
- Significance

Chapter 2 – Background and Literature Review
- Epidemiologic description of the health problem (distribution and determinants)
- Scientific background
- Limitations and gaps in existing literature
- Rationale

Chapter 3 – Data and Methods
- Study design
- Setting and study population
- Variables (outcomes, exposures, confounders) and operational definitions
- Data sources and measurement
- Analytic plan

Chapter 4 – Results
- Study population
- Descriptive data
- Outcome data
- Main results
- Other analyses

Chapter 5 – Discussion
- Summary
- Key results
- Strengths and limitations
- Interpretation
- Generalizability

Cited Literature

Bibliography

Biography & CV
Program Planning

A program plan develops a program or policy to address a specific public health problem for a specific organization or agency and involves a needs assessment, implementation and evaluation plans, and discussion of management, fiscal, and ethical factors.

The structure of the program plan is:

Abstract

Chapter 1 – Introduction
- Specific aims
- Significance

Chapter 2 – Background and Literature Review
- Epidemiologic description of the health problem (distribution and determinants)
- Scientific background and rationale
- Organization/agency description

Chapter 3 – Methods
- Needs assessment
- Program description
- Logic model

Chapter 4 – Results
- Implementation plan
- Evaluation plan

Chapter 5 – Discussion
- Expected outcomes
- Strengths and limitations
- Sustainability plan
- Recommendations

Bibliography
Appendices
Biography & CV
**Program Evaluation**

A *program evaluation* involves the evaluation and/or monitoring of an existing public health program to improve public health services.

The *structure* of the program evaluation is:

*Abstract*

*Chapter 1 – Introduction*
  - Specific aims
  - Significance

*Chapter 2 – Background and Literature Review*
  - Epidemiologic description of the health problem (distribution and determinants)
  - Program description
  - Evaluation framework

*Chapter 3 – Methods*
  - Evaluation methods
  - Standards and criteria
  - Data sources and measurement

*Chapter 4 – Results*
  - Evaluation findings

*Chapter 5 – Discussion*
  - Summary
  - Strengths and limitations
  - Recommendations
  - Resource implications
  - Dissemination plan

*Bibliography*

*Appendices*

*Biography & CV*
A journal article accepted for publication/published in a peer-reviewed journal, based on the capstone project, will be accepted in lieu of a final report.

Upon final approval by the capstone report by the capstone committee and the Associate Dean for Student Affairs (Dorian H. Coppenhaver, PhD), the capstone must be uploaded to the Electronic Thesis Dissertation (ETD) website. Instructions to upload the capstone to ETD are found at: [http://gsbs.utmb.edu/etd/ETDSubmissionGuidelines.asp](http://gsbs.utmb.edu/etd/ETDSubmissionGuidelines.asp).

University policy on academic dishonesty is clear: academic dishonesty in any form is strictly prohibited. Anyone found to be cheating or helping someone else cheat will be referred directly to the Dean of Students for disciplinary action. Penalties are severe and may include dismissal from the University. The risks associated with cheating far outweigh the perceived benefits. Academic dishonesty includes citing someone else's work as your own - if you are unsure whether your planned action constitutes academic dishonesty, seek clarification from your instructor. All capstone reports will be checked for originality using the iThenticate software. A brief guide to avoiding plagiarism is included in the Appendix (See Appendix C).

### 4.3 Public Presentation

A public presentation of the capstone report is required for the completion of the capstone. The forum for this presentation varies and can be a poster presentation as part of the UTMB National Public Health Week Symposium (first week in April) or an oral presentation as part of the Preventive Medicine and Community Health Seminar Series. Other venues such as local, regional, state and national conferences are also acceptable. The Public Health Program Director (Dr. Christine Arcari, Ph.D. M.P.H.) and your MPH advisor will work with you to schedule the final presentation.

Public health practice embraces all those actions that are directed to the assessment of health and disease problems in the population; the formulation of policies dealing with such problems; and the assurance of environmental, behavioral, and medical services designed to accelerate favorable health trends and reduce the unfavorable.

- *Abdelmonem Affi Lester Breslow, (1994)*
  
The maturing paradigm of public health
5. Practice Experience

The practice experience is a mentored, applied experience in a community or government agency or organization involved in public health practice. Practice experience sites, preceptors, and projects are selected to benefit the student, the host agency, and the Public Health Program. Students will receive professional mentoring, but will also complete projects that contribute to the mission of the hosting site. The practice experience is completed as part of PHS 6326 Public Health Practice Experience. It requires 120 contact hours in a public health setting. Students write summary reports and obtain written performance evaluations from their practice preceptors.

The practice experience allows the student to be mentored by a public health professional outside of the classroom environment. The requirement provides students with real world experience and provides the program with an assessment of student performance by public health practitioners. The practice experience has been an invaluable mechanism for the Public Health Program and its faculty members and students to contribute to the broader community. As part of the CEPH accreditation requirements, public health students must complete a practice experience that utilizes practical skills.

The practice experience is a required and important part of the academic experience. The purpose of the Practice Experience is to provide students the opportunity to apply knowledge and skills developed in the classroom setting to the practice of public health in applied settings. In coordination with the Course Directors (Drs. Cooksley and Arcari), the student will select a practice site. Under the supervision of the on-site Preceptor, the student will conduct a project relating to public health practice.

5.1 Site Selection and Requirements

Site Selection

Practice experience sites are identified by the Public Health Program. The Galveston County Health District, The Jesse Tree (a nonprofit community service agency in Galveston), Frontera de Salud (a UTMB-affiliated community health clinic in Brownsville, Texas), St. Vincent’s Clinic (a clinic providing indigent care), and UTMB Employee Health have been common sites available for previous practice experience. (See www.gchd.org, www.jessetree.net, www.utmb.edu/frontera, and http://www.stvhope.org/). A list of previous practice experience sites, preceptors, and projects are included in the Appendix (See Appendix E).

Students will be provided a list of practice experience sites and projects and will work with the Public Health Program Director (Dr. Christine Arcari) and Course Director (Dr. Cooksley) to select a site.
Requirements

As part of the practice experience you must submit a proposal describing the agency or organization and its mission, the proposed project activities and objectives, and the preceptor’s position at the hosting agency or organization. A copy of the preceptor’s CV or resume must be attached to the proposal for review by the course committee. The proposal also must include a list of target competencies and a timeline for completion of the contact hours. The student is required to complete a written agreement regarding the project requirements which is signed by both the student and the preceptor.

Student performance during the practice experience is evaluated based on: a written final report describing the project and the skills and competencies developed, journal-type reports of “critical incidents” that occurred during the experience, a performance evaluation by the on-site preceptor, and a final oral presentation of the experience. Practice sites are evaluated based on student and preceptor reports assessing the experience. Practice sites and projects are also reviewed in summary form during formal meetings of the Public Health Program faculty.
6. Graduation Requirements

- A total of 42 credit hours are required for graduation.

- Students must complete the MPH core and track curriculum detailed in Section 3.

- Students must successfully complete and MPH capstone project final report and presentation detailed in Section 4.

- Students must successfully complete the Public Health Practice Experience as detailed in Section 5.

- Students must complete all necessary paperwork for candidacy and graduation. An MPH degree checklist and important calendar dates are in Appendix F.

- Most importantly, read your emails from Shannon Carroll and check with her to make sure you have not missed anything!
“The task of the department of preventive medicine, in sum, is then:

(1) To teach the medical student what he needs to know about available techniques for the prevention of communicable disease;

(2) To give him an understanding of epidemiology and quantitative methods in medical science;

(3) To sensitize him to opportunities for arresting the development of non-communicable disease;

(4) To make him aware of the patient as a person and thus to initiate him more fully into the art of medicine; and ultimately

(5) To show him how medicine can help to maintain or increase productive energy in both normal and handicapped individuals.”

G. Smith and L.J. Evans, MD (1944)

“Preventive Medicine: An Attempt at a Definition.”
Science 100 (2586):39-42.