



Stony Brook Medicine
Program in Public Health

PROGRAM IN PUBLIC HEALTH BULLETIN

ACADEMIC YEAR 2015-2016



CONTACT INFORMATION

<http://publichealth.stonybrookmedicine.edu/>

Lisa Benz Scott, PhD, Director
Stony Brook University
Health Sciences Center, Level 3, Room 071
Stony Brook, NY 11794-8338
(631) 444-8811

JoanMarie Maniaci, Senior Academic Coordinator
(631) 444-2074

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PUBLIC HEALTH FACULTY & STAFF

Core Public Health Faculty by Concentration

Community Health

Amy Hammock, Community Health Concentration Head; Assistant Professor, Family, Population, and Preventive Medicine; Ph.D., University of Michigan. Community-based participatory research; qualitative research methods; family violence.

Lisa Benz Scott, Professor, Schools of Health Technology & Management, Medicine (Family, Population, and Preventive Medicine, Cardiovascular), and Dental Medicine; Ph.D., Johns Hopkins University, M.S., Health Promotion, Purdue University. Community engaged and participatory research; cardiac health services research and health disparities.

Evonne Kaplan-Liss, Clinical Associate Professor, Family, Population, and Preventive Medicine, Pediatrics, Journalism; M.D., Mount Sinai School of Medicine; M.P.H., Columbia University. Pediatrics; health communications; pediatric environmental health.

Rachel Kidman, Assistant Professor, Family, Population, and Preventive Medicine; Ph.D., McGill University. Community health and program evaluation; children orphaned by HIV/AIDS in Africa.

Catherine Messina, Research Associate Professor, Family, Population, and Preventive Medicine; Ph.D., State University of New York at Stony Brook. Cancer epidemiology; cancer screening; patient decision-making; cancer survivorship; physician-patient relationships.

Health Analytics

Jaymie Meliker, Health Analytics Concentration Head; Associate Professor, Family, Population, and Preventive Medicine; Ph.D., University of Michigan. Environmental health; exposure assessment; environmental epidemiology; GIS; spatial analysis.

Lauren E. Hale, Associate Professor, Family, Population, and Preventive Medicine; Ph.D., Princeton University. Social determinants of sleep; demography.

Tia Palermo, Assistant Professor, Family, Population, and Preventive Medicine; Ph.D., University of North Carolina at Chapel Hill. Health Disparities; reproductive health; biodemography; social policy; gender equity; research methods; program evaluation. (On Leave Fall 2014-Spring 2016.)

Dylan M. Smith, Associate Professor, Family, Population, and Preventive Medicine; Ph.D., Arizona State University. Emotional adaptation to illness and disability; quality of life

PROGRAM IN PUBLIC HEALTH

Thank you for your interest in the *Program in Public Health* (PPH) at Stony Brook Medicine. We are committed to ensuring that the educational experience of our students is intellectually challenging and provides the skills needed to become a leader in public health. We are very proud that the Program is accredited by the Council on Education for Public Health (CEPH), the only accrediting body for public health programs and schools in the United States. CEPH is recognized by the U.S. Department of Education, to accredit and assure that the school or program has met accepted standards established by and with the public health profession. PPH is one of 164 CEPH accredited schools (56) and programs (108) to date. In addition, the PPH is a founding member of the Association of Schools and Programs of Public Health (ASPPH). The ASPPH is the voice of accredited public health education.

The *Program in Public Health* is located in the Stony Brook University Health Sciences Center, the only academic health center on Long Island. The Health Sciences Center includes the Schools of Medicine, Nursing, Dental Medicine, Social Welfare, and Health Technology and Management, in addition to the Stony Brook University Hospital. Together, they generate collaborative research and practice-based innovations that have contributed to an improved quality of life for many individuals and communities. Stony Brook Medicine is also a partner in scientific research with the Brookhaven National Laboratory.

A unique feature of Stony Brook Medicine is its emphasis on multidisciplinary education and research combined with community service. The *Program in Public Health* shares this emphasis. The Program's educational, service, and research initiatives emphasize an ecological understanding of health promotion and disease prevention. In keeping with this orientation, our Program draws its faculty from many disciplines representing the clinical, social, and behavioral sciences, as well as the humanities. We believe our graduates have the skills to design, implement, and evaluate programs for public health improvements that are evidence-based and to translate research into beneficial programs and policies.

The *Program in Public Health* offers a stimulating learning environment for full- and part-time students who are inquisitive and passionate about making a difference in public health. We seek applicants to the MPH program who are academically competitive and likely to be successful in a rigorous and professional graduate program.

Lisa Benz Scott, PhD, Director

measurement; psychological factors in perceptions of illness and disability.

Carrie Shandra, Assistant Professor, Sociology, School of Health Technology & Management; Ph.D., Brown University. Disabilities, demography, quantitative methods.

Health Policy and Management

Norman H. Edelman, Health Policy and Management Concentration Head, Professor, Preventive and Internal Medicine; M.D., New York University. Pulmonary medicine; health policy.

Sean Clouston, Assistant Professor, Family, Population, and Preventive Medicine, Ph.D., McGill University. Health and social policy; life course analysis; epidemiology.

Andrew Flesher, Associate Professor, Family, Population, and Preventive Medicine, English; Ph.D., Brown University. Organ donation; health care policy; biomedical ethics; medical humanities; comparative literature.

David Graham, Clinical Associate Professor, Family, Population, and Preventive Medicine; M.D., University Central; M.P.H., Columbia University. Occupational and environmental health, travel medicine, global health.

Catherine Messina (see description under Community Health faculty)

John A. Rizzo, Professor, Family, Population, and Preventive Medicine, Economics; Ph.D., Brown University. Health economics; clinical outcomes research.

Affiliated Public Health Faculty

Professor Emeritus

Raymond L. Goldsteen, Dr.P.H., Professor Emeritus in Preventive Medicine.

Steven Jonas, Professor, Preventive Medicine, M.D., Harvard University; M.P.H., Yale University. Health policy; exercise, health and wellness promotion.

Professors

Evelyn Bromet, Psychiatry and Behavioral Science; Ph.D., Yale University. Psychiatric epidemiology; psychiatric sequelae of disasters in adults and children; longitudinal studies of mental disorders.

Christopher W. Cutler, Periodontics and Implantology; D.D.S. and Ph.D., Emory University. Inflammation/immunology; host-parasite interactions.

David L. Ferguson, Technology and Society; Ph.D., University of California, Berkeley. Quantitative reasoning; problem solving; educational technologies; decision-making.

Arthur Grollman, Pharmacology; M.D., Johns Hopkins University. Molecular carcinogenesis: mechanisms of DNA repair and mutagenesis in mammalian cells.

David Krause, Anatomical Sciences; Ph.D., University of Michigan. Evolutionary history and paleobiology of Mesozoic and Early Cenozoic vertebrates.

Marci Lobel, Psychology; Ph.D, University of California, Los Angeles. Stress, coping, and their effects on health, with an emphasis on pregnancy.

Anne E. McElroy, Marine and Atmospheric Sciences; Ph.D. Massachusetts Institute of Technology. Environmental toxicology; Use of aquatic models for assessing the effects of organic contaminants.

Barbara Nemesure, Family, Population, and Preventive Medicine; Ph.D., State University of New York at Stony Brook. Cancer Prevention and control; epidemiological and genetic risk factors for cancer.

Paul L. Ogburn, Jr., Obstetrics and Gynecology; M.D., University of North Carolina, Chapel Hill. Maternal-fetal medicine.

David Paquette, Dental Medicine; D.M.D., Harvard School of Dental Medicine; M.P.H. Harvard School of Public Health. Periodontics.

Charles L. Robbins, Social Welfare; D.S.W., Yeshiva University. Health, violence, and ethics; social justice; gender issues.

Peter D. Salins, Political Science; Ph.D., Syracuse University. Housing and economic development; immigration; urban and regional planning.

Warren Sanderson, Economics; Ph.D., Stanford University. Economic demography; economics of HIV.

Howard Schneider, Dean, School of Journalism, Center for Communicating Science, M.S. Columbia University. News literacy, science and health communication.

Mark J. Sedler, Psychiatry and Behavioral Science; M.D. Baylor College of Medicine; MPH Columbia University. Associate Dean, Global Medical Education; Director, Alzheimer's Disease Assistance Center of Long Island.

Christopher Sellers, History; Ph.D., Yale University; M.D., University of North Carolina, Chapel Hill. U.S. environmental and cultural history; transnational industrial and urban history.

Nancy J. Tomes, History; Ph.D., University of Pennsylvania. History of medicine and public health.

Associate Professors

Joan Broderick, Psychiatry and Behavioral Science; Ph.D., State University of New York at Stony Brook. Behavioral medicine; pain.

Debra Cinotti, General Dentistry; D.D.S., State University of New York at Stony Brook. Oral health of persons with developmental disabilities.

Aldustus Jordan, School of Medicine; Ed.D., University of Massachusetts-Amherst. Community development; cultural competence; health disparities.

Anne Moyer, Psychology; Ph.D. Yale University; Psychosocial issues surrounding cancer and cancer risk, gender and health, research methodology and meta-analysis.

Henry Thode, Emergency Medicine; Ph.D., State University of New York at Stony Brook. Emergency medicine; trauma; quality assurance.

Carlos Vidal, School of Health Technology and Management; Ph.D., Fordham University. Social policy and research within child welfare; health and mental healthcare issues among Hispanic children; research methods in public and community health; violence in schools, sports, and communities; cultural competency education and training; anger and conflict management; community-based participatory research.

Clinical or Research Associate Professors

Sharon A. Martino, School of Health Technology and Management, Physical Therapy, Ph.D. Nova Southeastern University. Pediatric and Adult Obesity; Preventive medicine; Inter-disciplinary collaboration of medicine, community, schools and families.

Fred S. Sganga, Public and Community Health; M.P.H., Columbia University. Healthcare leadership; long term care; dementia care; palliative care.

Elinor R. Schoenfeld, Family, Population, and Preventive Medicine; M.S., Ph.D., University at Buffalo Roswell Park Division. Epidemiology, community intervention trials, CBPR, data management and clinical research informatics, clinical trials.

Assistant Professors

Rebekah Burroway, Sociology; Ph.D., Duke University. Global health, gender, development, poverty and inequality.

Dolores Cannella, General Dentistry; Ph.D., State University of New York at Stony Brook. Women's health; health psychology.

Feroza Daroowalla, Medicine; M.D., State University of New York at Syracuse; M.P.H., University of Washington. Work-related lung diseases and asthma.

Dana A. Telem, Medicine (Surgery); M.D., Jefferson Medical College. Bariatric and Metabolic Weight Loss Center. Xuefeng Wang, Assistant Professor, Family, Population, and Preventive Medicine, Ph.D., Case Western Reserve University. Biostatistics; high-dimensional data.

Jie Yang, Family, Population, and Preventive Medicine (Epidemiology); PhD, University of Florida; Biostatistics.

Clinical Assistant Professors

Jeannette O. Coane, Nursing; R.N., M.A., Teacher's College, Columbia University. Clinical practice in end-of-life care; hospice and palliative care nursing.

Jordana Rothschild, Family, Population, and Preventive Medicine; M.D., Sackler School of Medicine, Tel Aviv, Israel; M.P.H., Columbia University. Preventive Medicine, health disparities, community health.

Instructors

Elizabeth Bass, Journalism and Center for Communicating Science, M.P.H., State University of New York at Stony Brook. Science and health communication, print reporting, writing and editing.

Jamie Romeiser, Surgery, M.P.H., Stony Brook University. Outcomes research; quality improvement, risk assessment, risk adjustment; cancer epidemiology.

Adjunct Professors

Donald A. Brand, Ph.D., Director, Office of Health Outcomes Research, Winthrop University Hospital.

Lawrence E. Eisenstein, M.D., F.A.C.P., Commissioner, Nassau County Department of Health

Kathleen Flynn-Bisson, M.A., MCHES, Creator/CEO KFB Prevention Through the Arts, Inc.; Adjunct Professor, Adelphi University; Public Health Educator, Suffolk County Department of Health; Instructor, Clubhouse of Suffolk County and Seaford Drug Treatment Center.

Carolyn M. Gallagher, Ph.D., Project Manager, Office of Managed Care, IPRO.

Alan M. Jacobson, MD, Chief Research Officer, Winthrop University Hospital

Gregson H. Pigott, M.D., M.P.H., Director, Office of Minority Health, Suffolk County Department of Health Services.

James L. Tomarken, M.D., M.P.H. M.S.W., M.B.A., Commissioner, Suffolk County Department of Health Services.

Jason Winslow, M.D., M.P.H., Associate Professor of Clinical Medicine, New York College of Osteopathic Medicine.

Staff

Lisa Benz Scott, Ph.D., Director
Catherine Messina, Ph.D., Associate Director of Academic Affairs

JoanMarie Maniaci, M.A., Senior Academic Coordinator.

Mary Vogelle-Buscemi, M.A., Office Administrator.

Eileen Zappia, Program Secretary.

ABOUT THE PROGRAM

The *Program in Public Health* was established at Stony Brook to train people who wish to integrate the knowledge, skills, vision, and values of public health into their careers and provide leadership in the field. The Program leads to the Master of Public Health (MPH) degree, and there also are a number of combined and concurrent programs available, as well as Advanced Graduate Certificates.

The Program advocates a population health approach to public health. The hallmarks of population health include ecological understanding of the determinants of health and a systems approach to solving health problems; emphasis on proactively stabilizing and improving health among all populations; and insistence on accountability, evidence-based practice, and continuous performance improvement. The population health approach requires multi-disciplinary collaboration among scholars in the social, behavioral, clinical, and basic sciences and humanities. Furthermore, it incorporates the development of comprehensive health information systems, and the use of advanced analytical tools to examine health problems and evaluate responses.

The population health orientation is consistent with the traditions of public health and with Institute of Medicine (IOM) recommendations for public health education, although it expands upon them. The IOM (2002) recommends these areas of action for those who work in public health:

*"Adopting a population health approach that considers the multiple determinants of health; Strengthening the governmental public health infrastructure; Building a new generation of intersectoral partnerships; Developing systems of accountability; Making evidence the foundation of decision making and the measure of success; Enhancing and facilitating communication within the public health system."*¹

The population health orientation of the Program is also compatible with the educational philosophy of Stony Brook Medicine which includes the five schools of the Health Sciences (Medicine, Nursing, Dental Medicine, Social Welfare, and Health Technology and Management) and the Program in Public Health. The Health Sciences Center,

opened in 1971, emphasizes the need for interdisciplinary education and collaboration, and recognizes the critical importance of training health professionals to work together. The *Program in Public Health* values a collegial atmosphere at an early stage in an MPH student's education and fosters an environment of mutual respect among students who represent diverse backgrounds and competencies.

The emphasis of the *Program in Public Health* reflects the changing environment in which public health practice occurs, and recent thinking about how to respond to these changes. Public health retains its distinct role as the specialty emphasizing prevention, with the object of its work being populations, in contrast to the historical role of medicine, dentistry, and other clinical disciplines that focus on healing, with the object of their work being individuals.

Since the 1980s, the three main functions of public health have been identified as assessment, policy development, and assurance. However, the knowledge and skills needed to perform these functions optimally has changed radically in light of advances in information technology and increased knowledge about the determinants of health and disease. These changes are occurring at all levels of inquiry - from the micro (genetics and microbiology) through the macro (the social sciences). Changing political, economic, demographic, and social conditions make the application of new knowledge and technologies all the more important.

As one Institute of Medicine (2002)¹ report states,

"The beginning of the twenty first century provided an early preview of the health challenges the United States will confront in the coming decades. The systems and entities that protect and promote the public's health, already challenged by problems like obesity, toxic environments, a large uninsured population and health disparities, must also confront emerging threats, such as antimicrobial resistance and bio-terrorism. The social, cultural, and global contexts of the nation's health are also undergoing rapid and dramatic change. Scientific and technical advances, such as genomics and informatics, extend the limits of knowledge and human potential more rapidly than their implications can be absorbed and acted upon. At the same time, people, products, and germs migrate and the nation's demographics are shifting in ways that challenge public and private resources."

Recent, influential reports regarding public health education suggest ways to address the evolving training needs of public health professionals. These publications include one report issued by the Centers for Disease Control and Prevention - Public Health's Infrastructure - and three reports from the Institute of Medicine - Who Will Keep the Public Healthy?; The Future of Public Health in the 21st Century; and Crossing the Quality Chasm. The recommendations in these reports challenge new public health programs to train public health leaders to be boundary spanners - able to use the new tools and knowledge available in order to formulate solutions to the complex public health problems facing us.

¹ Institute of Medicine. *The Future of the Public's Health in the 21st Century*. Washington, D.C.: The National Academies Press, 2002.

These recent recommendations regarding public health can be synthesized as follows. In addition to the traditional knowledge, including epidemiology and biostatistics, public health leaders need:

1. An ecological understanding of the causes of poor health including, social, behavioral, environmental, occupational, demographic, policy, economic, and genetic factors as well as the interrelationship of these factors;
2. A thorough understanding and appreciation of the cultural heterogeneity of populations, its impact on public health initiatives, and tools to deal with issues arising from cultural heterogeneity;
3. A thorough understanding of the current system of addressing poor health - medical, dental, and public health - including organization, financing, regulation, accessibility, quality, effectiveness, and efficiency;
4. An orientation toward policy, as well as programmatic, solutions to public health problems and the skills to assess, develop, implement, and evaluate policies;
5. An orientation favoring evidence-based decision-making and the skills to develop evidence for public health decision-making including study design and analysis of data;
6. An orientation favoring accountability and continuous quality improvement in public health and the skills needed to measure accountability and assess performance;
7. Informatics skills including application of information technology to obtain, organize, and maintain useful data for public health decision-making;
8. Leadership skills including the conceptual and analytical tools to prioritize problems and make sound decisions.

Instilling a population health orientation and fostering the skills necessary to act upon it provide the Program's graduates with the ability to meet the basic needs of public health today – defined as provision of the Essential Public Health Services and the three core public health functions (assessment and monitoring; formulating public policies; and assuring access to appropriate and cost-effective care) - as well as to expand the work of public health to achieve its broad mission "to fulfill society's interest in assuring conditions in which people can be healthy."²

Vision, Mission, Goals & Values

The vision of the *Program in Public Health* is to improve the health of populations on Long Island and in the region, State, and nation through education, research, and community service that utilizes all of the scholarly resources of Stony

Brook University in a collaborative and boundary-spanning manner.

The mission of the Program is to promote improvements in the health of the public through excellence in education, research, and community service locally, nationally, and globally.

The specific goals and measurable objectives developed by the faculty (with feedback from our public health community and constituents) of the *Program in Public Health* are contained in Table 1 of this bulletin (pg 24). The Program's website also contains this table with the targets for each measurable objective, at: <http://publichealth.stonybrookmedicine.edu/about/visionmissionandgoals>

To achieve its general educational, research, and community benefit goals, the Program trains public health professionals who:

1. Understand the multiple determinants of health and illness including the social, behavioral, environmental, demographic, occupational, policy, economic, genetic, and health care determinants; and
2. Appreciate the need for interdisciplinary collaboration in order to understand population health problems and develop optimal strategies to address them; and,
3. Have the strongest analytical, conceptual, and communication skills in order to facilitate development and implementation of optimal strategies for addressing population health problems.

Program Values

The *Program in Public Health* embraces as a core value adherence to all ethical standards of conduct and academic integrity. The Program's culture inherently values: beneficence, diversity and inclusiveness, reduction of health disparities, protection of vulnerable populations, the balance of public health with human rights, and community engagement. In support of the mission statement, the Program values the training of students as public health problem solvers with a population health orientation by a multi-faceted team of faculty, staff, and public health practitioners. The Program operationalizes its values through the following pillars upon which the Program stands: education, research, and service.

Education

The *Program in Public Health* values high-quality education that moves beyond the simple transmission of information to produce creative and critical thinkers. This value is operationalized through the provision of Core and Concentration curricula that lead to the MPH degree. The program emphasizes the development of analytical and critical thinking skills and an ecological approach to health improvement and disease prevention.

² Institute of Medicine. *The Future of Public Health*. Washington, DC: National Academy Press, 1988.

Research

The *Program in Public Health* values research that contributes to the health improvement of all populations and the elimination of health disparities. This value is operationalized by leading and facilitating interdisciplinary and collaborative research by the faculty and students, including work that emphasizes health improvement through community engagement and community-based participatory research (CBPR).

Service

The *Program in Public Health* values three types of service: Community; Professional; and University.

1. Community: The Program values direct service to communities. This value is operationalized as advocating for improving population health and eliminating health disparities; and providing needs assessments and guidance for solutions to community health problems, and assisting the public health workforce.
2. Professional: The Program values faculty members' contributions to organizations that advance their professional fields. This value is operationalized by the faculty promotion and tenure criteria and by expectations for annual performance evaluations.
3. University: The Program values service to the University, which is operationalized as mentoring other faculty and serving as members or leaders on committees that advance the mission and goals of the University and the *Program in Public Health*.

ACCREDITATION

The *Program in Public Health* received its initial accreditation by the Council on Education for Public Health (CEPH) in 2008. Between 2012 and 2013 the PPH conducted a thorough self-study process whereby we engaged students, staff, faculty, and community stakeholders in an assessment of our program. In July 2014 we were notified of our successful completion of the reaccreditation process, culminating in a 7-year term of accreditation, extending to July 1, 2021.

Because the *Program in Public Health* is accredited, our alumni are eligible to be certified in public health by the National Board of Public Health Examiners (NBPHE). This organization was established in September 2005 for the purpose of ensuring that students and graduates from schools and programs of public health accredited by CEPH have mastered the knowledge and skills relevant to contemporary public health. The certification exam serves this purpose. More information about NBPHE and the certification exam can be found at: <http://www.nbphe.org/aboutthecph.cfm>

ADMISSION TO THE MPH DEGREE PROGRAM

Although admission requirements are rigorous, the *Program in Public Health* aims to develop camaraderie, cooperation, and cohesiveness among students in each cohort. For this

reason, admission to the Program is during the Fall semester only.

We are seeking intellectually inquisitive people from different socioeconomic, educational, racial, and ethnic backgrounds who can provide special contributions to the field of public health and the Program. The Program considers the potential contribution of each applicant to the student body and the public health field. Applicants are evaluated on academic achievement, leadership potential, professional accomplishment, and personal attributes. Excellent written and oral communication skills are expected. Fluency in more than one language is not required for admission, but it is becoming increasingly desirable for the practice of public health. The Program reserves the right to limit class size in order to maintain a faculty/student ratio that ensures a high quality academic program. Therefore, Program admission is highly selective, and all qualified applicants may not be accepted.

The MPH program is open to students from all academic disciplines. Students can select from one of three concentrations: Community Health, Health Analytics, and Health Policy and Management.

The MPH admission requirements for the Program are:

1. Bachelor's degree from an accredited college or university with a 3.0 GPA or better. Admitted students usually have GPAs that are higher than 3.0. The major must have an equivalent at the State University of New York (SUNY).
2. Official transcripts from all post-secondary schools. Transcripts for all degrees earned in schools outside the U.S. or Canada must be evaluated by an agency accredited by the National Association of Credential Evaluation Services. See section on International Students for more information about this process. The requirement for evaluation of transcripts is waived for graduates of foreign medical schools with a current license to practice in the U.S.
3. Official GRE (verbal, quantitative, and analytical) scores are required (within last 5 years). This requirement is waived for applicants who have been awarded a doctoral degree from an accredited U.S. or Canadian university. Applicants to the MD/MPH program may substitute MCAT scores for the GRE. Applicants to the MBA/MPH program may substitute GMAT scores. Applicants to the DDS/MPH may substitute DAT scores. A request to substitute any other standardized test scores for the GRE needs to be submitted in writing to the MPH Senior Academic Coordinator. *PLEASE NOTE: Admitted applicants may be required to take preparatory courses prior to enrolling in classes if they score below a 500 (or its equivalent in the new GRE) in the Qualitative and/or Verbal sections of the exam, as well as below a 4.0 in the Analytical section.*
4. Three references from persons who can address the applicant's capacity to provide leadership in public health and complete a course of graduate study. If

the applicant is a student or has graduated within the last two years, at least one letter must be from a college or university faculty member with whom the applicant has studied. If the applicant is a member of the public health workforce, at least one letter must be from a senior administrator in the organization who is familiar with his/her work.

5. One essay, no more than 500 words:
 - *Essay topic:* How do your background, training, and experience prepare you for a leadership role in Public Health?
6. Completion of the on-line application, SOPHAS, by the deadline of each admission cycle.
7. A personal interview, if requested by the MPH Admissions Committee.
8. Any other requirements of the Graduate School not stated here.

For international students:

1. International students who trained in non-English speaking schools and do not reside in an English speaking country are required to take the TOEFL exam. The expected minimum score is 213 for the Computer-Based Test, 90 for the Internet-Based Test, and 550 for the Paper-Based Test. In addition to the minimum score of 90 on the internet-based exam, each subsection score must be at least a 22.
2. International students are required to have a course-by-course educational credential evaluation completed by an agency accredited by the National Association of Credential Evaluation Services (<http://www.naces.org>). We require using World Education Services (<http://www.wes.org>). This evaluation provides a U.S. course equivalent including semester hours earned, course content, and corresponding letter grade for all courses listed on the international applicant's transcript. This evaluation must be completed before the application can be considered.

For more information about the requirements for international students, see: <http://www.grad.sunysb.edu/International/>

The MPH Admissions Committee considers all factors including grades, standardized test scores, recommendation letters, essay, prior training, and professional experience. It is a goal of the Committee to select applicants who have the academic capability, aptitude, character, personal qualities, and commitment to provide future value to society through leadership and creative contributions to the field of public health.

The MPH Admissions Committee encourages applications from persons in the public health workforce and weighs their professional experience heavily in its decisions.

ADMITTED STUDENTS

Once admitted, the Program has the following requirements that must be completed by orientation:

1. All entering students must complete the online Health Insurance Portability Accountability Act (HIPAA) training before the MPH Orientation. More information can be found on page 20 of this bulletin.
2. All entering students must complete the online Protection of Human Subjects training before the MPH Orientation. The course is offered by the Collaborative Institutional Training Initiative (CITI). More information can be found on page 20 of this bulletin.
3. All entering students must take an on-line Math Assessment no later than the time of Orientation (if later, it must be with permission of the Director) and prior to enrolling in the Biostatistics courses.

Also, it is expected that incoming students will be computer literate and email capable, and have library skills sufficient for graduate work. For students with deficiencies in these areas, resources are available through the Health Sciences Center Library to acquire or update them.

MPH DEGREE CURRICULUM

The curriculum for the MPH degree is competency-based in order to comply with current national efforts to improve the quality and accountability of public health training programs. The *Program in Public Health* faculty developed the required MPH Core Competencies, using the Association of Schools and Programs of Public Health (ASPPH), Master's of Public Health Core Competency Development Project as the starting point.

To ensure that all students have a broad understanding of the basic areas of public health, every student is required to successfully complete all MPH Core courses. Students receive training in the five basic, discipline-specific, competency areas of public health: biostatistics, environmental health, epidemiology, health policy and management, and the social and behavioral sciences. Students also receive core competency education in informatics and communication, professionalism, systems thinking, research methods, and problem solving. The Health Analytics, Health Policy and Management, and Community Health concentrations have concentration-specific competencies. The Program's success in transmitting the competencies to students is measured before and after completion of the Program (Orientation and Graduation Competency Assessments), as well as before and after each Core and Concentration course (Pre/Post Course Competency Assessments). A table with the complete list of MPH Core and Concentration Competencies is on the *Program in Public Health* website.

The *Program in Public Health* reserves the right to approve alternate courses that meet core and concentration competency requirements. Approval for such courses is at the discretion of the PPH Director in consultation with the PPH Curriculum Committee and/or concentration heads.

Curriculum Overview

Total Credit Hours for MPH Program (54 Credits)

MPH Core (39 Credits)

- HPH 500 Contemporary Issues in Public Health (3 credits)
- HPH 501 Introduction to the Research Process (3 credits)
- HPH 506 Biostatistics I (3 credits)
- HPH 507 Biostatistics II (3 credits)
- HPH 508 Health Systems Performance (3 credits)
- HPH 514 Epidemiology for Public Health (3 credits)
- HPH 516 Environmental & Occupational Health (3 credits)
- HPH 523 Social & Behavioral Determinants of Health (3 credits)
- HPH 525 Evaluating Public Health Initiatives (3 credits)
- HPH 550 Theories of Social and Behavior Change (3 credits)
- HPH 555 Demography and Global Health (3 credits)
- HPH 562 Data Management & Informatics (3 credits)
- HPH 564 Qualitative Methods (3 credits)

MPH Culminating Experience (6 Credits)

- HPH 580 Practicum (3 credits)
- HPH 581 Capstone Seminar: Population Health Issues (3 credits)

MPH Concentration (9 Credits)

Listed below by concentration.

Health Analytics Concentration

The mission of this concentration is to prepare public health professionals with the analytical, research, and statistical skills necessary to benchmark and evaluate health improvement initiatives in community and health care settings.

Increasingly, the health field is challenged to adopt an evidence-based approach to preventing and treating disease and disability. The concentration in Health Analytics will play a critical role in meeting this challenge. There is a special emphasis on integrating cost effectiveness and cost benefit concepts into the curriculum so that resource allocation issues are considered.

The faculty has training in research design, implementation of research projects, and analysis of data as well as expertise in evaluating the performance of specific areas of the health system. Faculty members study a variety of health issues including health care quality improvement, patient decision-making, and determinants of health and disease. Some faculty members work with physicians to improve clinical outcomes for patients with heart disease, cancer, asthma, and other conditions. Others work with health care administrators to increase efficiency in the use of health care resources in hospitals and other medical care settings. Others work with organizations to improve health in communities.

Required Courses

- HPH 560 Applied Biostatistics (3 credits)
- HPH 559 Advanced Research Methods (3 credits)
- HPH 534 Spatial Analysis: Health Application (3 credits)

Community Health Concentration

The mission of this concentration is to prepare students for community-based work in public health. Students will acquire skills and knowledge related to planning, implementing, and evaluating community health improvement projects and interventions, as well as learn the principles of community engagement and community-based participatory research.

Required Courses

- HPH 551 Practice of Health Communications (3 credits)
- HPH 552 Planning & Implementing Community Health Initiatives (3 credits)
- HPH 553 Advanced Evaluation of Community Health Initiatives (3 credits)

Health Policy and Management Concentration

The mission of this concentration is to provide students with the policy background, knowledge and skills that will be particularly useful in advancing careers involving management functions in health and healthcare related organizations. Courses address economics, policy and principles of management. Some courses in this concentration are offered in collaboration with Stony Brook's College of Business.

Required Courses

- HPH 527 Health Economics and Policy
- HPH 529 Fundamentals of Healthcare Management

Choose one course from the following list.

- MBA 501 Managerial Economics (3 credits)
- MBA 505 Marketing (3 credits)
- MBA 589 Operations Management (3 credits)

Or, with approval of faculty advisor (and consent of the instructor or Program Director, if needed), other courses in the University related to the student's goals may be substituted.

COMBINED AND CONCURRENT DEGREE PROGRAMS

Five-Year Combined Undergraduate Programs

The *Program in Public Health* offers several five-year combined undergraduate degree programs including a Bachelor of Science (BS) in Applied Mathematics and Statistics/MPH; a Bachelor of Science (BS) in Pharmacology/MPH; a Bachelor of Arts (BA) in Women's Studies/MPH; and a Bachelor of Arts (BA) in Earth and Space Sciences/ MPH.

Students in these combined degree programs can complete both degrees in 10 semesters. For the first two or three years, students complete undergraduate coursework including General Education and undergraduate major requirements. During either their third or fourth year (once a majority of their undergraduate degree requirements are completed), students begin taking graduate courses as outlined by the plan

of study. In their fifth and final year, students complete the remaining graduate requirements for the MPH degree.

Admission Requirements

Under Stony Brook policy, students must complete 60 credits of undergraduate course work (Junior Status) with a minimum GPA of 3.0 in all college work before being admitted into any combined Bachelor/Masters degree program. Additional entry requirements for the MPH combined degree consist of:

1. GPA of at least 3.3 for courses required in undergraduate major
2. Two letters of recommendation from faculty members in the undergraduate major
3. Completion of the MPH online application for review by the MPH Admissions Committee

Combined and Concurrent Graduate Programs

The *Program in Public Health* collaborates with the following programs to offer combined or concurrent programs the Master of Public Health degree:

1. Master of Business Administration (MBA)
2. Master of Arts in Public Policy (MAPP)
3. Master of Science in Nutrition (MS) (on-line)
4. Doctor of Medicine (MD)
5. Doctor of Dental Medicine (DDS)

MBA/MPH

In collaboration with the College of Business, we offer a combined MBA/MPH degree which prepares students for a management career in the health field. The MBA/MPH program includes about 20 credits of overlap, which reduces the total number of credits in the combined program to 81. Students select a MPH concentration in any of the three concentrations: Community Health, Health Analytics, or Health Policy and Management. Students receive both degrees upon completion of the entire program.

Special Note: Students in the combined MBA/MPH program pay the graduate MBA tuition rate. For more information visit: <http://www.stonybrook.edu/bursar/tuition/mba.shtml>.

MPH/MAPP

In collaboration with the Political Science Department, we offer a combined MPH/MAPP degree that prepares students for a career in public health administration and policy-making. The MPH/MAPP program includes about 24 credits of overlap, which reduces the total number of credits in the combined program to 63-66. Students select a MPH concentration in any of the three concentrations: Community Health, Health Analytics, or Health Policy and Management. Students receive both degrees upon completion of the entire program.

MPH/MS in Nutrition

In collaboration with the Department of Family Medicine, Program in Nutrition, we offer a combined MPH/MS in Nutrition degree for individuals who are interested in leadership roles in which knowledge of nutrition is both marketable and practical. The MPH/MS Nutrition program includes 12-15 credits of overlap, which reduces the total number of credits in the combined program to 75-78 (depending on the MPH concentration). Students select an MPH concentration in Health Analytics, Health Policy and Management, or Community Health. Students receive both degrees upon completion of the entire program. All MPH courses are offered on-site. All Nutrition courses are offered on-line.

Admission Requirements for Combined Degree Programs

Students who wish to be considered for admission into the combined MBA/MPH, MPH/MAPP, or MPH/MS in Nutrition degree program must comply with all admission requirements for the MPH degree alone. The MPH Admissions Committee reviews completed applications initially and recommends eligible applicants to the College of Business Admissions Committee, Political Science Department, or Nutrition Program, respectively, for final approval.

- *MBA/MPH applicants may submit GMAT scores in lieu of GRE scores.*

- *MPH/MS in Nutrition additional requirements:*

- Physiology (laboratory not required)
- A nutrition course if the undergraduate degree is not in nutrition/dietetics.

Prospective students can take the *Survey of Nutrition* course offered by the Program as a non-matriculated student or use a previously taken nutrition course with approval of the course syllabus by Program coordinator.

Alternatively, prospective students can be admitted to the Program with the condition that they successfully complete the *Survey of Nutrition* course. If the student successfully completes the *Survey of Nutrition* course they can proceed with registration for the subsequent semester.

For more information about these programs, contact the MPH Senior Academic Coordinator at (631) 444-2074.

MD/MPH (COMBINED) & DDS/MPH (CONCURRENT) Degree Programs

The combined MD/MPH and concurrent DDS/MPH are two programs in which Stony Brook University medical and dental students complete their MPH degree during medical or dental school (4 year program – not recommended) or during medical or dental school and an additional year (5 year program - recommended). All requirements of the MPH and MD or DDS degrees are met. Up to four medical students and two dental students each year are awarded full MPH tuition scholarships for their MD or DDS programs.

Admission Requirements

Applicants applying for admission to both the *Program in Public Health* (PPH) and the School of Medicine (SOM) or School of Dental Medicine (SDM) need the following information:

1. The application process for the PPH is separate from the application to the SOM or SDM. Admission to one program is determined independently from admission to the other; and admission to one program does not guarantee admission to the other.
2. To avoid the need to send support documents to both programs, SOM or SDM applicants who also apply to the PPH can request in writing that the SOM or SDM provide to the MPH Admissions Committee a copy of their support documents including MCAT or DAT scores, official transcripts from all post-secondary schools, and letters of recommendation for their application for admission to the PPH.
3. SOM and SDM applicants who apply to the PPH must provide one additional reference that addresses the applicant's public health leadership potential.

ADVANCED GRADUATE CERTIFICATES

Health Communication

The Advanced Graduate Certificate in Health Communication is offered as collaboration between the *Program in Public Health* and the School of Journalism. This 18-credit program is designed for members of the public health workforce, healthcare professionals, master's and doctoral candidates, and media professionals in journalism, marketing, public relations, and communications. The certificate prepares students to be effective communicators, bridging the gap between medicine and public health and the world-at-large and providing the skills necessary to communicate health-related issues to the public, directly or through the press. Graduates will likely find employment in academic settings, research facilities, public health organizations, and healthcare institutions. Graduates may also serve as health communications experts in media, consulting, and public relations settings. Working professionals will gain communication skills that help them advance within their respective public health, healthcare, or media professions.

Health Education and Promotion

The Advanced Graduate Certificate in Health Education and Promotion is a 15-credit program that will enhance students' knowledge, experiences, and skills in health education and promotion and positively impact their chosen career pathway in public health. It is anticipated that graduates will find or enhance employment in academic settings, research facilities, public health organizations, or health care institutions. In addition, courses in this certificate address the health education competencies that are the basis for the nationally recognized Certified Health Education Specialist (CHES) certification offered by the National Commission for Health Education Credentialing, Inc. Students completing this

certificate will obtain some of the credits necessary for eligibility to take the exam.

Notes for MPH Applicants and Students also pursuing a certificate program:

- Students pursuing either Advanced Graduate Certificate concurrently with the MPH at Stony Brook may use approved courses to count towards both the certificate and degree.
- Students who have earned the Advanced Graduate Certificate prior to matriculation in the MPH will be held to the 12 credit rule outlined in the Non-Matriculated Students section of this bulletin (page 20).

Students who have completed the MPH prior to acceptance into the Advanced Graduate Certificate will not be able to count MPH credits towards the certificate. In this circumstance, students may take different courses than those counted towards the MPH degree.

For more information, visit our website:

<http://publichealth.stonybrookmedicine.edu>

COURSE DESCRIPTIONS

HPH 500 Contemporary Issues in Public Health

This course provides an introduction to the field of public health that aims to develop an appreciation of the unique and important mission of public health; an understanding of the history, values, ethics, mission, and goals of public health; and knowledge about how public health functions today including the organization, financing, policies, and practices of public health. Students will be expected to think critically about whether public health has achieved its mission in today's world and how the profession might develop in the future.

3 credits, Fall term, Professor A. Flescher

HPH 501 Introduction to the Research Process

This course provides an overview of the research process including formulation of a research problem, conceptualization of the research design, construction of the instrument for data collection, selection of the sample, collection of data, processing of data, and writing the research report. Topics include how to identify a research question and, correspondingly, how to formulate a clear, concise hypothesis or set of hypotheses; reasons and procedures for reviewing the literature; overview of observational and interventional research designs; review of measurement theory, types of scales, and commonly used measures in public health-related research; data collection methods including survey and qualitative methods; and the ethical conduct of research. Through the introduction of these topics, the course provides a general background for individuals who are interested in learning the fundamentals of how to prepare a research proposal.

3 credits, Fall term, Professor C. Shandra

HPH 506 Biostatistics I

This is part 1 of a 2-term course and is intended to provide students and researchers in public health with an introduction to the principles of statistical methods and their application in

biomedical and public health research. Students are expected to enroll in parts 1 and 2 sequentially within the same academic year. This course includes introductions to the use of computers for statistical analysis, summarizing and exploring data, probability theory, discrete and continuous probability distributions, populations and samples, sampling distributions and statistical inference, hypothesis testing, sample size and power, two-sample comparisons, analysis of variance, association and correlation, simple linear regression and simple logistic regression. *Prerequisite: Math placement exam score of 3 or higher.*

3 credits, Fall term, Professor A. Donaldson

HPH 507 Biostatistics II

This is part 2 of a 2-term course and is intended to provide students and researchers in public health with an introduction to the principles of statistical methods and their application in biomedical and public health research. Students are expected to enroll in parts 1 and 2 sequentially within the same academic year. This course includes introductions to the use of computers for statistical analysis, summarizing and exploring data, probability theory, discrete and continuous probability distributions, populations and samples, sampling distributions and statistical inference, hypothesis testing, sample size and power, two-sample comparisons, analysis of variance, association and correlation, simple linear regression and simple logistic regression. *Prerequisite: HPH 506.*

3 credits, Spring term, Professor A. Donaldson

HPH 508 Health Systems Performance

This course introduces students to the system that we have developed to deliver health care in the United States, with international comparisons. The topics include the organization and financing of health care systems, access to health care including health insurance, regulation and policy issues, and the health care workforce.

3 credits, Fall term, Professor N. Edelman

HPH 514 Epidemiology for Public Health

This course presents basic epidemiologic concepts used to study health and disease in populations. It provides an overview of the major causes of morbidity and mortality, including methods of measurement (e.g., incidence, prevalence). Observational and experimental epidemiologic studies will be described and their advantages and disadvantages compared. The course aims for students to begin developing the skills needed to evaluate data, interpret reports, design and conduct studies. Students will be introduced to the various areas of epidemiologic study including cancer, molecular/genetic, environmental, occupational, social and behavioral, and infectious disease/surveillance. The course comprises both lectures and small group seminars for in-depth discussions of previously assigned topics. *Prerequisite: HPH 501 and HPH 506.*

3 credits, Spring term, Professor S. Clouston

HPH 516 Environmental & Occupational Health

This course is designed to provide the fundamentals of environmental and occupational health and to educate students

on issues related to major environmental and occupational concerns. It will provide a forum for the discussion of local and national environmental and occupational public health issues. The content of the course will focus on major pollutants, their detection, impact on health, and principles of remediation. Using various teaching techniques, students will be exposed to current environmental and occupational topics and approaches to prevention and treatment. The course will emphasize the most recent research in the field.

3 credits, Summer term, Professor J. Meliker

HPH 519 Independent Study

Intensive reading, under supervision of one or more instructors, of material not covered in the formal curriculum, or execution of a research project under the supervision of one or more faculty members. *Instructor consent required.*

1-6 credits, term varies, Public Health Faculty

HPH 523 Social & Behavioral Determinants of Health

This course introduces students to population health as one of the organizing concepts in public health and the orientation that differentiates public health from medicine. Consistent with public health tradition, health is discussed from an ecological perspective, and the course presents current knowledge about the multiple determinants of population health including socioeconomic status, the physical environment, medical care, individual behavior, and genetics and the interaction of these factors. Also covered is the measurement of population health, sources of data, and methods for assessing population health improvements.

3 credits, Spring term, Professor C. Shandra

HPH 525 Evaluation of Public Health Initiatives

This course introduces students to health policy analysis and public health program evaluation, two distinct fields that share similar tools, albeit with different goals in mind and approaches to meet these goals. Specifically, this course (1) draws on economics, epidemiology, political science, and biostatistics to prepare students to conduct holistic analyses of health policy issues; (2) prepares students to plan a program evaluation; and (3) prepares students to evaluate public policy options.

3 credits, Fall term, Professors S. Clouston and R. Kidman

HPH 527 Health Economics and Policy

This course will provide students with a comprehensive view of the reasons behind the rapid rise in medical expenditures in the United States over nearly four decades, and the measures that have been proposed to address this problem. This course will cover the following topics: the demand and supply of medical care; the dynamics of competition in the health care industry; the role of government in medical care; general understanding of health care institutions, including Medicare, Medicaid, managed care, hospital and physician behavior, and pharmaceutical markets; and health care reform.

3 credits, Fall term, Professor J. Rizzo

HPH 529 Fundamentals of Healthcare Management

This course is designed to provide the student a broad overview of the various issues, required skills and challenges of management in the healthcare setting. It is designed for the Health Policy and Management concentration but is open to all MPH students. Each session will consist of both a presentation by the instructor and by a student. The student presentations will be in the nature of problem solving exercises largely using illustrative cases in the assigned text. The number of presentations each student will be asked to do will vary with the class size so that there is a student presentation each week. The readings in the assigned text are required and will be used, in part, to construct the examinations.

Prerequisite: HPH 508

3 credits, Spring term, Professor T. Jospe

HPH 530 History of Public Health & Medicine

This course explores major themes and interpretations in the history of public health and medicine since the 18th century. Particular emphasis is placed on the influence of social and cultural developments on medicine and public health, and vice versa. American developments will be placed in a broad comparative perspective including both Western and non-Western nations.

3 credits, term and faculty varies

HPH 534 Spatial Analysis: Health Applications

This course is an intermediate level graduate course in the application of spatial methods for analyzing environmental exposure and disease data. Students with backgrounds in epidemiology, public health, environmental health, biostatistics, community health, biology, sociology, psychology, marine and atmospheric sciences, geosciences, demography, and geography are particularly encouraged to participate. Although the course will focus on examples related to human health, graduate students in other disciplines will find the course useful for specific and appropriately defined research purposes. Techniques for spatially analyzing point patterns and aggregated data in polygons will be introduced, including autocorrelation, clustering analysis, geostatistical smoothing, and approaches for spatial regression. Consideration of space-time variability will also be covered. This course includes theoretical elements so that the student will learn to appreciate strengths and weaknesses of different spatial approaches.

NOTE: Students need a foundational knowledge of Geographic Information Systems (GIS) software. This requirement can be met by completing GSS 313: GIS Design and Application I and GSS 314: GIS Laboratory (if available), by completing other Introduction to GIS courses at Stony Brook or elsewhere, or by self-teaching using the following book: *Getting to Know ArcGIS Desktop* by Tim Ormsby, Eileen Napoleon, and Robert Burke. *Prerequisite: Course in GIS or equivalent, as determined by consent from the instructor.*

3 credits, Spring term, Professor J. Meliker

HPH 542 Introduction to Global Health I

This course will provide health personnel with a basic

awareness of the problems of the worlds' population with special focus on the poorest. To promote these objectives, this course has been designed to introduce medical and public health students to key population health topics from a global perspective, with special emphasis placed on the health and welfare of women and young children in low-income countries. The health impact of emergent and re-emergent infectious diseases will be reviewed, including HIV, tuberculosis, malaria and sexually transmitted infections. Malnutrition will be discussed. Students will be introduced to demography and the impact of population increases on the global environment. There will be discussions of the health problems of immigrants to the U.S. from tropical countries.

3 credits, term varies, Professors D. Graham and R. Kidman

HPH 550 Theories of Health Behavior and Communication

In this survey course, students learn about the major social and behavioral theories used in health promotion. Rather than simply cataloguing each theory in turn, this course takes a 'constant comparative' approach to the learning of theories, in which theories are dissected to their core elements and compared to each other in order to understand the points of convergence and divergence among them. The goal in taking this comparative approach is application: by knowing the core elements of various theories, students will more easily be able to choose appropriate theories to explain community health problems of interest. In addition to covering traditional individual-level behavior change theories, this course will focus on community and social change theories, challenging students to think about the role of social context on health behavior and community health promotion. After learning about commonly-used social and behavioral theories, students will learn about and critique theories that are less-commonly used but have important implications for health promotion.

3 Credits, Summer Term, Professor TBD

HPH 551 Practice of Health Communications

This course provides an overview of health communications. It is designed to be a skills-building rather than theory-based course. Therefore, assignments are hands-on, often requiring students to reach beyond their comfort zone. As this is a survey course, topics provide an introduction to health communications as it relates to providers and patients, healthcare organizations, community groups, and public health and other government agencies. The course introduces health communications topics including health literacy, social marketing, and new communications technologies. Through the introduction of these topics, the course provides a general background in health communications in the context of a current public health communications issue such as pandemic influenza. Students will be expected to be abreast of health care news in all forms of media and be prepared to participate in weekly discussions about how stories have been covered. Students will also be interviewed by a journalism student in the Stony Brook School of Medicine's Clinical Skills Center, write a news profile, write a press release, write an op-ed

article, and develop a social marketing tool for a current public health. As this is a communications course, class participation is essential.

3 Credits, Fall Term, Professor E. Kaplan-Liss

HPH 552 Planning & Implementing Community Health Initiatives

In this course, students learn how to develop theoretically-informed and evidence-based community health initiatives. Over the course of the semester, students work on developing their own culturally-competent community health initiatives, each of which is targeted at a particular population with a specific health need. Each student learns how to assess community needs and assets using a variety of methods, elaborate an initiative's theory of change through use of logic model, design theoretically-informed intervention activities appropriate to the needs/assets identified, create a budget and organizational structure, and engage key stakeholders at every facet of development and implementation of the community health initiative. Students work together in the same small group over the course of the semester to get/give feedback and hone their individual projects. Through this intense group work, students both (1) learn how to apply course concepts to several particular community health problems and (2) gain skills for working in teams on community health initiative planning and implementation. *Prerequisite: HPH 550.*

3 Credits, Fall Term, Professor A. Hammock

HPH 553 Advanced Evaluation of Community Health Initiatives

This course prepares students to plan, implement, and utilize an evaluation of a community health initiative. Basic principles and practices of evaluation are addressed, including identifying the goals of a community health initiative; designing an evaluation plan that can determine if the initiative's goals are achieved; implementing an evaluation plan; interacting with stakeholders; and using evaluation results to improve performance.

3 Credits, Spring Term, Professor C. Messina

HPH 554 Principles of Health Education & Promotion

This course aims to provide students with the historical, theoretical, and philosophical foundations of health education and promotion. Students will be given the tools to work with community and patient populations. Students will be equipped with the knowledge, skills, and attitudes to raise people's health awareness, as well as the tools needed to teach people to reduce their risk of disease and promote health. All students will be required to design a health education and promotion program using the knowledge and skills learned in the course.

3 Credits, Summer Term, Professor K. Flynn-Bisson

HPH 555 Demography and Global Health

This course introduces students to the basic theory and methods employed in the study of demography. The students will understand life table methodology, population projection,

sources of demographic data, patterns in global fertility and mortality, the demographic transition, current patterns in fertility, marriage and work, abortion and contraception, and fertility/mortality interrelationships.

3 credits, Summer term, Professor L. Hale

HPH 559 Advanced Research Methods

This course will provide students with an in-depth review of principles of public health research methods. Emphasis will be placed on conceptualization of research questions, evaluation of research design, sample size, and issues related to potential threats to validity within a public/applied setting. Additionally, students will become familiar with how to evaluate methods used in published literature and to design their own research projects. Course topics will include how to obtain secondary data, sample size calculation, risk adjustment, bias, confounding, and interaction. The instructor will work with students as they develop their own analytic project proposals. Students will be expected to implement their proposed research in HPH 560 Advanced Biostatistics in the following semester.

Prerequisite: HPH 501

3 Credits, Summer Term, Professor D. Smith

HPH 560 Applied Biostatistics

Students learn to formulate a scientific question in terms of a statistical model, leading to objective and quantitative answers. Topics may include analysis of variance, regression, including details of data-analytic techniques and implications for study design, measures of association, 2x2 tables, stratification, matched pairs, logistic regression, model building, analysis of rates, and survival data analysis using proportional hazards models. The course stresses applications in epidemiology, and other areas of public health research.

Prerequisite: HPH 507 and HPH 559.

3 credits, Fall term, Professor D. Smith

HPH 562 Data Management & Informatics

This course provides students with an introduction to the principles of public health informatics and data management using the SAS systems. Lectures and labs will be aimed at developing hands-on skills about how to create, maintain, and manage databases using the SAS Systems for Windows, a major software package used frequently in public health and clinical research. In addition, the student will learn how to retrieve and summarize information about population health from major public health information systems in the U.S.

3 credits, Spring term, Instructor: J. Romeiser

HPH 563 Cost Benefit & Cost Effectiveness Analysis

The course will introduce the uses and conduct of cost benefit and cost effectiveness analyses as decision-making aids in the health care research. It will provide students with an understanding of the roles and limitations of cost benefit and cost effectiveness analyses and criteria for evaluating those studies. Critical issues regarding measuring cost and effectiveness, evaluating outcomes, discounting, and dealing with uncertainty will be discussed.

Prerequisite: HPH 507 and HPH 562

3 credits, term and faculty varies

HPH 564 Qualitative Methods

In this course, students learn about the logic, theory, and methods of qualitative research within population health and related fields (e.g., social welfare, nursing, medicine, sociology, and psychology). The course begins with an introduction to the epistemological and ontological underpinnings of qualitative inquiry, with special attention to how these factors affect the types of research questions often asked (and answered) by qualitative researchers. Students then learn the nuts-and-bolts of qualitative research design and data collection through review of existing qualitative studies and hands-on application. Homework and in-class exercises over the course of the semester give students practice in (a) designing a feasible qualitative research study, and (b) collecting three kinds of qualitative data: participant observation, in-depth interviews, and focus groups. The course concludes with an overview of steps for data analysis, including coding, memo-writing, and triangulation. Emphasized throughout the course are methodological issues germane to qualitative (and quantitative) research: reflexivity of the researcher, appropriate treatment of human subjects, and obtaining quality data.

3 Credits, Fall Term, Professor A. Hammock

HPH 575 Public Health Internship

This course is an applied internship in a public, not-for-profit, or private sector organization that provides a public health service. Students will gain practical public health skills through a semester long internship. The student will work in the organization and prepares a weekly journal of activities, as well as a paper at the conclusion of the course, applying program knowledge to the internship activities.

0-12 credits; Fall, Winter, Spring, & Summer terms, Public Health Faculty, Senior Academic Coordinator, and Internship Preceptor

HPH 580 Practicum

The Practicum is a practical public health experience conducted with a Faculty Advisor and a Preceptor from a public health-related organization. Students will be expected to demonstrate their “capacity to organize, analyze, interpret and communicate knowledge in an applied manner.” Health departments, as well as a variety of other local organizations, offer a wide array of potential sites for the Practicum experience. *Instructor consent required.*

3 credits, Fall, Winter, Spring, & Summer terms, Public Health Faculty, Practicum Coordinator, and Public Health Preceptor

HPH 581 Capstone Seminar: Population Health Issues

This course will assist students in synthesizing the basic public health knowledge through completion of a Capstone Project. Most core and concentration course work must be complete before the student can participate in the Capstone Seminar. *Instructor consent required.*

3 credits, Spring term, Professor L. Hale

HPH 585 Introduction to Biostatistics & Epidemiology

This course is an introduction to the principles of statistical methods and epidemiology and their application in the health sciences. The student will develop a basic understanding of statistics, epidemiology, and interpretation of research studies in order to communicate risk and scientific evidence to colleagues and the public, directly or through the press. *NOTE: This class cannot be counted towards the MPH degree.*

4 Credits, Various Terms, Instructor: C. Gallagher

RELATED ELECTIVES

In addition to courses offered for the Master of Public Health program, students are encouraged to take courses outside of the curriculum to supplement their education.

HPH 542 Introduction to Global Health I

HPH 660 Engineering Economics

HAX 669 Disability and Health in Local and Global Contexts

STATEMENT OF STUDENT RESPONSIBILITY

Students themselves are responsible for reviewing, understanding, and abiding by the University's regulations, procedures, requirements, and deadlines as described in all official publications. These include the Graduate Bulletin, the Health Sciences Center Bulletin, as well as the *Program in Public Health* Bulletin, website, and handouts. Students should keep all bulletins, as well as any correspondence with Program and University personnel for reference.

ORGANIZATION OF PUBLIC HEALTH STUDENTS & ALUMNI (OPHSA)

The *Program in Public Health* graduated its first class in May 2006. Since that time, the alumni of the Program have organized with students to create an association that serves both groups: Organization of Public Health Students & Alumni (OPHSA). The purpose of OPHSA is to achieve the following goals:

1. To promote the general welfare and professional image of Stony Brook University and the PPH.
2. To foster a strong relationship between the school, faculty and members of the organization.
3. To foster and sustain collegial relationships between members of the student body and alumni of the PPH.
4. To promote participation between alumni and students in educational, scientific and public health research activities.
5. To identify and develop resources to assist students, alumni and faculty in their careers.
6. To maintain student and alumni representatives who will advocate for the needs of the student population on standing committees of the PPH.
7. To promote educational activities necessary for the maintenance and promotion of certification in the public health professions.

8. To promote public participation and advocacy for public health issues.

The *Program in Public Health* strongly supports OPHSA and encourages alumni and student participation. OPHSA is very important step in furthering the vision, mission, and goals of the Program.

PROGRAM AND UNIVERSITY POLICIES

GRADING

The following grading system is used in the *Program in Public Health*:

A (4.0), A- (3.67), B+ (3.33), B (3.00), B- (2.67), C+ (2.33), C (2.00), C- (1.67), and F (0.00). Unless specified differently in the course syllabus, course grades on a 100 point scale are: A (93-100); A- (90-92); B+ (87-89); B (83-86); B- (80-82); C+ (77-79); C (73-76); C- (70-72); F (69 or lower).

In order to encourage students to develop excellent writing skills, course grades will reflect the quality of writing in course assignments. The specific policy on grading the quality of writing will be the prerogative of the course instructor, and it must be explained in the course syllabus.

ACADEMIC PROGRESS & ACADEMIC STANDING

Students must maintain a B average (3.0) in the MPH Core and a B average (3.0) in the MPH Concentration. All electives must be listed as selectives or approved by the student's faculty advisor or Academic Coordinator in order to count toward completion of the MPH degree. In evaluating a student's standing, the Program will not include electives in the GPA that are not listed as selectives or approved by the faculty advisor or Academic Coordinator.

When a student's cumulative graduate GPA falls below B (3.0) for grades earned in courses numbered 500 and above taken at Stony Brook, the student shall be placed on probation. If the student's overall GPA has been raised to B (3.0) by the end of the next semester of enrollment after being first notified of probation, the student will be returned to regular status.

Students may be on probation for a maximum of two semesters. A student on academic probation who fails to achieve a 3.0 cumulative GPA by the end of the second semester on probation will usually not be permitted to re-enroll.

A student enrolled part time who has accumulated six semester credits with a cumulative average below 3.0 will have two semesters, or six additional credits (whichever comes first) to bring their cumulative GPA to 3.0.

Temporary grades (I and NR), missing grades and those grades for which no numerical equivalents are defined (P, S, U, and R) are not calculated in determining the eligibility for

academic probation. The MPH degree requirements are rigorous, and students must be able to devote sufficient time to meet the performance standards required. Part-time students typically complete the program in 3 years. If a part-time student carries 7-8 credits per semester, including two Summers, the MPH degree can be earned in two years. The Program also accommodates full-time study leading to completion of the degree in as short a time as 18 months.

Academic Standing Procedure

- A. The Program Director will send a *Notification of Academic Standing* to all students facing academic probation or dismissal. The letter will also contain the procedure for requesting an *Academic Standing Hearing*. The letter must be sent via U.S. mail with return receipt requested, or Federal Express with signature required, or hand delivered. If mailed, the letter will be sent to the student's mailing address indicated in SOLAR.
- B. The *Notification of Academic Standing* will be sent to full-time students at the end of the fall and spring semesters, following the policy outlined above.
- C. The *Notification of Academic Standing* will be sent to part-time students after the completion of 6 credits and then the subsequent 6 credits, following the policy outlined above.

Any appeal of academic standing must follow the procedure outlined here:

- The student will have three days to submit an appeal in writing to the director. The letter must include reasons for the appeal.
- The Committee on Academic Standing (composed of the Program in Public Health Director and one other faculty member appointed yearly) will determine whether to uphold or reverse the academic standing decision.
- A meeting will be scheduled between the student and the committee to inform them of their decision. The faculty member who initially submitted the charge may choose whether to be present.

ENROLLMENT NOTIFICATION POLICY

- Students must enroll in at least one course per semester (Fall and Spring) unless they complete a Change of Enrollment Form and submit this form to the MPH Academic Coordinator.
- A Leave of Absence (LOA) of more than one year requires a written justification that must be approved by the Director of the Program in Public Health.
- When a student wishes to return to active status after a LOA, a Term Activation Form must be completed and submitted to the MPH Academic Coordinator in order to enroll in courses.

TIME AND LOCATION OF COURSES

Most courses are taught on the Health Sciences Center campus and are offered in the late afternoon or early evening.

COMPETENCY ASSESSMENT

Each Core and Concentration Course in the *Program in Public Health* aims to develop specific Competencies among MPH students through a set of Learning Objectives.

In order to assess how well we are conveying these Competencies, we require every MPH student to complete a Competency Assessment survey at the beginning and end of each Core and Concentration Course. All information from the Competency Assessment surveys is kept strictly confidential and is not, in any way, used to evaluate a student's academic progress in pursuit of the MPH degree. This information is analyzed only for the purpose of improving the Program and maintaining accreditation by the Council of Education for Public Health (CEPH). The *Program in Public Health* reserves the right to withhold grades or prevent subsequent course registration for students who do not complete both the pre- and post-course survey.

CREDIT TRANSFERS

All core courses must be taken at Stony Brook University, unless an equivalent was taken in an accredited public health program with a grade of B or better within the last five years. All concentration courses are to be taken at Stony Brook University, unless an equivalent course, with a grade of B or better, was taken at an approved graduate program in the past five years and transfer of credits is approved by the MPH Senior Academic Coordinator. The student must request a credit transfer and complete the necessary forms. In all respects, the *Program in Public Health* follows Stony Brook's Transfer of Credit policy as stated in the HSC Bulletin:

“Graduate candidates may petition the school to accept credits from another institution toward his or her degree. The school has the responsibility of deciding on the applicability of credits to the specific program. Normally, transfer credits will be limited to no more than 6 credits.”

CHALLENGE EXAM POLICY & PROCEDURE

Stony Brook University has established a challenge program that permits matriculated undergraduates and graduates to earn advanced placement credit and course credit by taking examinations instead of traditional course work. No more than five courses (including credit from advanced placement examinations) can be credited to any student from challenge examinations, and no prerequisite for a course already passed may be included. Credit by examination does not count toward the University's residence requirement and cannot be used to satisfy total credits necessary to qualify for degrees with distinction (From HSC Bulletin, page 31).

Students who have previously completed coursework that duplicates a course in the MPH curriculum may request a Challenge Exam for that course, if the previous coursework cannot be transferred into the MPH program. This should be a rare occurrence, but it provides flexibility when necessary. Examples of these situations are:

Students who have taken courses that have already counted toward another degree.

Students who have taken non-credit bearing courses, which cannot be transferred into and counted toward the MPH degree.

A Challenge Exam can only be taken once. Students who do not pass a Challenge Exam must take the regular course.

Challenge Exam Procedure

1. The student completes the student section of the Challenge Exam Application and provides the application to the MPH Academic Coordinator.
2. The MPH Academic Coordinator validates eligibility to challenge. This may require the student to provide a transcript and/or course syllabus for review.
3. If approved, the student brings the completed Challenge Exam Application with a check for payment to the Bursar's Office.
4. Checks are made payable to “SUNY Stony Brook.” The cost is \$65 per graduate credit.
5. The student returns the completed Challenge Exam Application with a copy of the Bursar's Office receipt attached to the MPH Academic Coordinator.
6. The student schedules an appointment with the Course Instructor responsible for the Challenge Exam to discuss the exam requirements.
7. When the Challenge Exam is complete and graded, the faculty member administering the exam submits a letter to the MPH Coordinator indicating the grade received.
8. The MPH Academic Coordinator forwards a copy of the faculty letter, Challenge Exam Application, and Bursar's Office receipt to the HSC Office of Student Services, which posts the grade to the transcript.

Special Note: Any student who receives the MD/MPH waiver does not have to pay for the credits at the Bursar. However, all paperwork must be received prior to taking a Challenge Exam.

TIME LIMITS

Not including granted leaves of absence, all requirements towards the MPH degree, the BS/MPH degree, the MBA/MPH, and the MPH/MAPP degree must be completed within five years from matriculation in the Program. The MD/MPH joint degree and the DDS/MPH concurrent degrees can take six years.

GRADUATION

The *Program in Public Health* has only one graduation ceremony (convocation), which is held each year in the Spring. This ceremony serves all students who graduate from the Program during the year. It is the responsibility of students to notify the University through SOLAR of their intent to graduate.

In addition, students should be tracking their academic progress to ensure that they are meeting all University and Program requirements for graduation.

Prior to their final semester in the program, students should schedule a meeting with the Academic Coordinator to finalize the remaining coursework.

ADVISING POLICY

Each student is assigned a Faculty Advisor upon matriculation into the program. Whenever possible, that advisor will be a faculty member in the student's concentration: Health Analytics, Community Health, or Health Policy and Management. The student may change advisors at any time with the consent of the Director of the *Program in Public Health*. In addition, students who change their concentration will be assigned, or may select, a Faculty Advisor in the new concentration.

Faculty Advisors must meet with their advisees at least twice a year to discuss students' progress through the program, assess academic growth, and provide guidance with independent study and Practicum projects. The Faculty Advisor also discusses the students' expectations for the future and acts as a touchstone if the student is having problems. The two mandatory meetings take place at the end of the Fall and Spring semesters and can be conducted in person or by phone, whichever is preferred by both the student and Faculty Advisor. Students will be contacted by the Program to schedule an appointment with their Faculty Advisor. At other times, students should contact their Faculty Advisor directly to make appointments.

Questions and concerns about course offerings, plans of study, degree requirements, deadlines, practicum requirements, and procedural issues including registration, academic standing, leaves of absence, change of concentration, and graduation should be directed to the MPH Senior Academic Coordinator (444-2074).

Questions about classroom assignments, text books, and class schedules should be directed to the Program Secretary, Eileen Zappia (444-9396). Questions related to student employment, research assistantships, scholarships, and other matters related to finance, should be directed to the Office Administrator, Mary Vogelle-Buscemi (444-1120).

All programmatic concerns (faculty, grading, etc) should be directed to the Director via e-mail. The Director will follow up, as needed, with the students and/or faculty involved.

FORMAL GRIEVANCES

The Stony Brook University Ombuds Office provides an alternative channel for confidential, impartial, independent and informal dispute resolution services for the entire University community. They provide a safe place to voice your concerns and explore options for productive conflict management and resolution.

The Ombuds Office is a source of confidential advice and information about University policies and procedures and helps individuals and groups address university-related conflicts and concerns.

For more information visit:
<http://www.stonybrook.edu/ombuds/>

ACADEMIC INTEGRITY

Intellectual honesty is a cornerstone of all academic and scholarly work. Therefore, the offenses of plagiarism and cheating are considered by the Program in Public Health to be grave violations of academic integrity. Students are required to take the Plagiarism and Cheating Tutorial (followed by a brief self-test) in our Orientation Program. After the tutorial, students must sign an official document attesting that they understand both 1) what cheating and plagiarism are and 2) the consequences for cheating or plagiarizing while pursuing their MPH or certificate program at Stony Brook. Any student found to have cheated or plagiarized on an assignment will fail the assignment on which they cheated or plagiarized. The following represents the **Program in Public Health's Four Part Policy** on Cheating or Plagiarism.

1. **Education:** Our students undergo an educational experience, taught or administered by a core faculty member of Public Health in orientation, to define and explain plagiarism and cheating and to clarify the consequences of engaging in cheating or plagiarism. Students may additionally be required to go through a more comprehensive educational experience about cheating and plagiarism, for example in the required HPH 501, "Introduction to the Research Process."
2. **Definitions:** The Program in Public Health distinguishes instances of blatant or deliberate cheating and plagiarism from unintentional misuse of sources. Our policy is designed to address unambiguous cases of plagiarism or cheating. The following definitions are used to make a distinction between cheating, plagiarism, and misuse of sources.

A. Cheating: Cheating is intentional fraud for the purpose of improving a grade or obtaining course credits, but includes all behavior intended to gain unearned academic advantage. Cheating also includes either helping or attempting to help another person cheat.

Examples of Cheating

- Copying from another student's test
- Allowing another student to copy from your test
- Using unauthorized notes or "crib sheets" during an exam or using your cell phone to text answers to other students during an exam
- Informing students in later sections of the content of an exam
- Using unauthorized assistance in a take-home exam (e.g. working with another student when the instructor has not explicitly authorized it, or using reference works when that is not permitted by the instructor)

B. Plagiarism: Plagiarism occurs when a student attempts to deceive by using someone else's language, ideas, or

other original (not common-knowledge) material without acknowledging its source (see: The Council of Writing Program Administrators. "Defining and Avoiding Plagiarism: The WPA Statement on Best Practices." WPA Position Statements and Resolutions Jan. 2003, 12 Feb. 2004

<http://www.wpacouncil.org/positions/WPAplagiarism.pdf>)

Examples of Plagiarism

- Downloading an entire paper or sections of a paper from a website without acknowledgement
- Copying sentences or paragraphs from a book or website without citing them, without using quotation marks when appropriate, or both
- Turning in a paper someone else has written
- Having someone else write a portion of your paper (even a sentence)

C. Misuse of Sources: Misuse of sources is defined as "carelessly or inadequately citing ideas and words borrowed from another source. . . . Ethical writers make every effort to acknowledge sources fully and appropriately in accordance with the contexts and genres of their writing. **A student who attempts (even if clumsily) to identify and credit his or her source, but who misuses a specific citation format or incorrectly uses quotation marks or other forms of identifying material taken from other sources, has NOT plagiarized.** Instead, such a student [has] failed to cite and document sources appropriately" (Council of Writing Program Administrators. "Defining and Avoiding Plagiarism: The WPA Statement on Best Practices." While Misuse of sources is not plagiarism, it is still represents an error in citation. As such, depending on the context and particular professor involved, a student may still lose points or be downgraded on an assignment in which he or she has misused a source or has failed to properly cite in an instance that has determined not to be cheating or plagiarism. WPA Position Statements and Resolutions Jan. 2003. 12 Feb. 2004 ; Caps our own emphasis. See

<http://www.wpacouncil.org/positions/WPAplagiarism.pdf> .)

3. Consequences for Cheating or Plagiarism:

- A. First offense: Any student who has deliberately or blatantly cheated or plagiarized on any graded assignment will at a minimum fail the assignment and at a maximum fail the course. Additionally, students may be required to attend remediate coursework or submit written assignments on cheating and/or plagiarism. All charges and consequences will be recorded in the student's academic file.
- B. Second offense: Any student found to have deliberately or blatantly cheated or plagiarized on a second assignment for any course taken en route to their degree should expect to be expelled from the Program in Public Health.

4. Process:

- A. The faculty member of Public Health or instructor of a Public Health graduate course who accuses a student of plagiarism will present evidence of the infraction in hand to the Committee on Academic Integrity, composed of the Program in Public Health Director and one other faculty member appointed yearly.
- B. The student will be made aware of the charge by the committee and will have three days to submit any additional evidence to the committee in writing.
- C. The committee will confer about whether or not plagiarism or cheating has indeed occurred. This is intended to confirm that the identified offense actually rises to the level of "deliberate" cheating or plagiarism.
- D. If the committee determines that plagiarism or cheating has occurred and was deliberate, the faculty member who brought the charge is expected to recommend a suitable consequence within the parameters mentioned above. The ultimate decision on punishment, however, rests with the committee.
- E. A meeting will be scheduled between the student and the committee to inform them of their decision. The faculty member who initially submitted the charge may choose whether to be present.

For more comprehensive information on academic integrity, please refer to the academic judiciary website at <http://www.stonybrook.edu/uaa/academicjudiciary/>.

STUDENT CONDUCT

Stony Brook University expects students to respect the rights, privileges, and property of other people. Faculty are required to report to the Office of the Student Judiciary any disruptive behavior that interrupts their ability to teach, compromises the safety of the learning environment, or inhibits students' ability to learn. Faculty members are required to follow their school-specific procedures.

For further information about the Student Conduct Code see: <http://studentaffairs.stonybrook.edu/ucs/conduct.shtml>

ATTENDANCE REQUIREMENTS

Attendance is mandatory, unless there is a medical reason or the student is excused by the Program Director or course instructor. If a course instructor has no written policy in the syllabus regarding the consequences for being absent from class, the *Program in Public Health* policy will apply: three or more unexcused absences from class will reduce the final course grade by a full letter grade (e.g., A to B).

HIPAA TRAINING

The *Program in Public Health* requires all students to complete training in the Health Insurance Portability and Accountability Act (HIPAA) by the end of the Fall semester after matriculation in the Program.

- Review and understand the SBU Policy and Procedure on Research Subjects' Right to Privacy at: <http://www.stonybrook.edu/research/orc/human-subjects.shtml#sop-tab>
- Complete HIPAA training. You must carefully read and understand the HIPAA awareness training materials for research investigators and study staff at: <http://www.stonybrook.edu/research/orc/human-subjects.shtml#training-tab>

To satisfy the HIPAA training requirement, send an e-mail to Mary Ellen Herz at maryellen.herz@stonybrook.edu with the subject reading: HIPAA RESEARCH TRAINING COMPLETED, and the body of the text reading: 'I have read and understood the HIPAA awareness training materials and agree to comply with the SBU Policy and Procedures on Research Subjects' Right to Privacy.'

PROTECTION OF HUMAN SUBJECTS TRAINING

The *Program in Public Health* requires all students to successfully complete an on-line training program in protection of human subjects in research, offered by the Collaborative Institutional Training Initiative (CITI) at: <http://www.citiprogram.org>.

This training is part of the Human Subject Protections Program at Stony Brook, which ensures that the University keeps safe those individuals who volunteer to participate in our research activities as well as the use of protected data.

Protection of human subjects training must be completed as part of new student Orientation or by the start of the Fall semester in which the student matriculates in the Program. A copy of the certificate of completion from CITI must be provided to MPH Senior Academic Coordinator.

NON-MATRICULATED STUDENTS

Any person holding a bachelor's degree, its equivalent, or an advanced degree from an accredited institution of higher learning is eligible to be considered for admission to the University as a non-matriculated graduate student. A maximum of twelve (12) credits may be taken as a non-matriculated student in the *Program in Public Health*. Permission to enroll in courses must be obtained from the MPH Senior Academic Coordinator. Non-degree students who later wish to pursue a graduate degree will need to make a formal application for admission.

SEXUAL HARASSMENT POLICY

Stony Brook University is committed to creating and maintaining a working environment that is free from all forms of inappropriate and disrespectful conduct that may be deemed as sexual harassment. Harassment on the basis of sex is a form of sexual discrimination and violates Title VII of the Civil Rights Act of 1964, as amended, Title IX of the Education

Amendments of 1972, the New York State Human Rights Law, and University policies and regulations. Stony Brook University reaffirms the principle that students, faculty and staff have the right to be free from sex discrimination in the form of sexual harassment inflicted by any member of the campus community. This community includes, but is not limited to, employees, students, visitors, contractors, and vendors associated with Stony Brook. Sexual harassment is contrary to the University's values and standards, which recognize the dignity and worth of each member of the campus community.

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

1. submission to such conduct is made, either explicitly or implicitly, a term or condition of an individual's employment or academic advancement;
2. submission to, or rejection of, such conduct by an individual is used as the basis for employment or academic decisions affecting such individual;
3. such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance, or creating an intimidating, hostile, or offensive working, living, or academic environment.

The University is responsible for, and fully committed to, the prevention and elimination of unlawful sexual harassment. Deans, Department Chairs, Directors, Administrators, Managers and Supervisors are responsible for promoting an atmosphere that prohibits such unacceptable behavior. Individuals who are affected by, or are aware of, suspected cases of sexual harassment are urged to bring such situations to the University's attention by contacting the Office of Diversity and Affirmative Action. The Office of Diversity and Affirmative Action has professional staff trained to investigate and provide assistance regarding issues of sexual harassment, and can be reached by calling (631) 632-6280.

DIVERSITY AND AFFIRMATIVE ACTION

Consistent with federal and state guidelines, Stony Brook University does not discriminate on the basis of race, color, sex, age, ethnicity, religion, national origin, sexual orientation, disability, marital status, or veterans' status in its educational programs or employment. If you are a student or an employee of Stony Brook University and you consider yourself to be a target of discrimination or harassment, you may file a complaint in writing with the Office of Diversity and Affirmative Action. If you choose to file a complaint within the University, you do not lose your right to file with an outside enforcement agency such as the State Division of Human Rights, Equal Employment Opportunity Commission, or the Office of Civil Rights.

For additional information go to:

<http://www.stonybrook.edu/diversity/complaint.html>.

Stony Brook University has had a longstanding commitment to express and to demonstrate Equal Employment and Educational Opportunity for all persons in our community, and further, to afford all faculty, staff and members of all groups an environment in which the integrity of all is assumed and each individual is treated with dignity, respect, and fairness.

In compliance with the Civil Rights Act of 1964 (Title VII), as amended, Title IX of the Education Amendments of 1972, The Rehabilitation Act of 1973, The Age Discrimination in Employment Act, the Americans with Disabilities Act and the New York State Human Rights Law, Stony Brook University prohibits unlawful discrimination and harassment on the basis of race, color, sex, age, religion, national origin, sexual orientation, disability, marital status, or status as a disabled or Vietnam-era veteran in the implementation of any of its policies, procedures, or practices regarding the terms, conditions, and privileges of employment and/or access for students, faculty, and staff. This non-discrimination policy affects all employment practices including, but not limited to, recruiting, hiring, transfers, promotions, benefits, compensation, training, educational opportunities, and terminations.

The University's administration, faculty, staff, and students are each responsible for creating and maintaining an environment conducive to work, study, and learning. The result of harassment and discrimination, in any form prohibited by this policy, is to impede the realization of the University's mission to provide an education of distinction in a dignified and respectful learning and employment environment. Any such unlawful discrimination or harassment in any venue of Stony Brook University will not be tolerated.

CAMPUS SAFETY

Campus safety is a priority for Stony Brook University and there is a variety of information and resources available to students, faculty, and staff. Some highlights are listed below, but for more detailed information visit: <http://www.stonybrook.edu/sb/safety/>

SB Alert! - Stony Brook University's emergency notification structure: SB Alert is a comprehensive notification structure used to alert the campus community in the event of a major emergency and to provide important safety and security information.

Voice, Email and Text Messages: A mass notification system is used to provide voice, email and text messages to members of the campus community. To receive these messages, you must provide a cell phone* number and preferred email address in the SOLAR System. If you do not provide a preferred email address the system will use your campus EPO address. Simply log into SOLAR with your Stony Brook ID number and use the phone and email menu selection to enter your data.*Please note that your wireless carrier may charge you a fee to receive messages on your wireless device.

Report all emergencies (police, fire, medical, psychiatric, or other) to University Police:
Dial **911** or **3333** from a campus phone
From a non-campus phone dial: **(631) 632-3333**

Dial **321** to report a fire (Code Red) in the Hospital
Non-Emergency Phone Numbers
(During regular office hours only)

Environmental Health & Safety: **632-6410**

University Police: **632-6350**

Weather-related Information/Closings:
632-SNOW: 444-SNOW

For an escorted walk:
Dial **2-WALK (2-9255)** from a campus phone.

Dial **631-632-WALK** from a non-campus phone.

For a ride after dark: Call **632-RIDE (2-7433)**

STUDENT HEALTH POLICIES & RESOURCES

The Student Health Service is the on-campus source for meeting students' primary health care needs. The staff includes physicians, physician assistants, nurse practitioners, nurses, social workers, health educators, laboratory technologists, and technical and administrative staff, dedicated to providing students with quality medical care and the services necessary to optimize health and wellness. We encourage you to explore their website and learn about the resources available to you.

The student health policies of the University ensure that all students meet the physical examination and health history requirements of the University and that students working in clinical settings meet the requirements of University healthcare facilities and clinical affiliates, as well as the state health code. These policies also comply with Public Health Law 2165, which requires all students in post-secondary education to be immunized against poliomyelitis, mumps, measles, diphtheria, and rubella.

Information about the University's Student Health Service and health policies is provided, with links to all forms, at the Student Health Services website:
<http://studentaffairs.stonybrook.edu/shs/index.shtml>

Medical and Health Insurance Requirements

The requirements for full and part-time students are different and are explained in detail at:
<http://www.stonybrook.edu/sb/newstudents/nshealthrequirements.shtml>

In addition, all forms are available on-line at this address.

Full-Time Students

Following are the requirements for full-time students:

- A completed Health Form signed and completed by their physician.
- Documentation of Immunizations on the health form as per New York State law.
- All full-time students must read the medical information about meningococcal meningitis at the Student Health Services website, and complete and return the Meningitis Information Response Form. The information and form can be downloaded. Those who have a SOLAR account and are 18 years of age or older may use SOLAR to submit the response form.
- *All full-time matriculated students must have health insurance coverage at all times without exception.* Stony Brook offers a health insurance plan for all full time domestic* students that meets this requirement. This plan pays for most medically necessary bills, such as doctor visits, mental health counseling, prescriptions, emergency room, lab testing, diagnostic testing, surgery, hospitalization, etc. The plan covers our students anywhere in the world, every day, no matter whether on campus or on semester breaks.

Part-Time Students

Following are the requirements for part-time students:

- Immunization Record Form signed and completed by their physician.
- Documentation of Immunizations on the health form as per New York State law.
- All part-time students must read the medical information about meningococcal meningitis at the Student Health Services website, and complete and return the Meningitis Information Response Form. The information and form can be downloaded. Those who have a SOLAR account and are 18 years of age or older may use SOLAR to submit the response form.

Some part-time students may be eligible for the health insurance plan under special circumstances. Please contact the Insurance Office at (631) 632-6331.

Stony Brook Infirmary Fee

All students must pay the Stony Brook Infirmary Fee. The fee covers comprehensive health services for both medical and mental health problems, for students and visiting scholars. It is not a substitute for health insurance. The Student Health Service building is the only location on campus where the mandatory health fee can be used. Medical Services that are beyond the scope of the Student Health Service can be obtained either at University Hospital Medical Center or through other medical providers in the community. However, the infirmary fee will not cover the cost of any medical services outside the Student Health Service Building. Call (631) 632-6740 for further information.

AMERICANS WITH DISABILITIES ACT

Students with a physical, psychological, medical or learning disability that may impact course work, should contact Disability Support Services, ECC (Educational Communications Center) Building, Room 128, (631) 632-6748. The staff will determine with the student what accommodations, if any, are necessary and appropriate. All information and documentation is confidential.

FINANCIAL AID AND TUITION ASSISTANCE

Inquiries about financial aid should be directed to the Health Sciences Center, Office of Student Services: HSC Level 2, Room 271, (631) 444-2111.

Tuition Assistance & Reimbursement

Several tuition assistance and reimbursement programs are available to full-time state employees at Stony Brook University and state hospital employees represented by United University Professions (UUP).

More information about these programs is available at:
<http://sbumc.informatics.sunysb.edu/medicalcenter/tuitionreimbursement>

Employee Tuition Waiver Program

All full-time state employees at Stony Brook University are eligible for tuition assistance for one course each semester. The waiver program pays a percentage of tuition for courses that are deemed to be job-related. The waiver is intended to be used by full-time employees for a second course, or a course not covered by any other program.

For more information or to contact the Benefit staff, call 631-632-6180. For the application, see:
<http://naples.cc.sunysb.edu/Admin/HRSForms.nsf/webstate?OpenPage>
The application is available under the 'Benefits' category.

UUP Tuition Assistance Program

The UUP Tuition Assistance Program covers tuition, but not fees, for one course each semester throughout the year, including Fall, Spring, Winter Session, Summer Session 1, and Summer Session 2 on a space-available basis. More information about this program, including application procedures, is available at:
<http://sbumc.informatics.sunysb.edu/medicalcenter/tuitionreimbursement>

Shirley Menzies, Hospital Human Resources, at 631-444-4759 is the contact person for residents and fellows who are hospital employees.

Table 1 Program in Public Health Goal Statements and Measurable Objectives

Goal	Objectives
GOAL 1: (Education) Admit and retain a high quality MPH student body.	<p>1a) Require a Bachelor's degree from an accredited U.S. college or university for domestic students' admission to the program. For students with an international degree, require transcript validation by completing an official course-by-course educational credential evaluation for admission to the program.</p> <p><i>Targets:</i></p> <ul style="list-style-type: none">• <i>At least 95% of admitted students will have a 3.0 grade point average (GPA) or equivalent or better in their previous educational program.</i>• <i>100% of students with an international degree will complete a credential evaluation by World Education Service (http://www.wes.org) or a similar evaluation service.</i> <hr/> <p>1b) Require a national standardized test (e.g., GRE, MCAT) score demonstrating high academic potential, with an exception for those with a doctorate degree, for admission to the program.</p> <p><i>Targets:</i></p> <ul style="list-style-type: none">• <i>By 2016, the average verbal GRE scores for each admitted class will be at or above the 65th percentile and the average quantitative and analytical writing GRE scores for each admitted class will be at or above the 50th percentile.</i>• <i>By 2016, the average MCAT score for each admitted class will be at or above the 75th percentile.</i> <hr/> <p>1c) Require students whose native language is one other than English to demonstrate high English language proficiency based upon the TOEFL exam score prior to admission to the program.</p> <p><i>Target:</i></p> <ul style="list-style-type: none">• <i>At least 90% of accepted international students with a native language other than English will have a score of at least 213 for the Computer-Based Test or 550 for the Paper-Based Test or 90 for the Internet-Based Test.</i> <hr/> <p>1d) Monitor student performance to encourage optimum achievement.</p> <p><i>Targets:</i></p> <ul style="list-style-type: none">• <i>100% of students will maintain a 3.0 overall GPA, consistent with program and Graduate School policies.</i>• <i>100% of student records will be assessed after each semester by the Senior Academic Coordinator.</i>• <i>By Fall 2014, 80% of students will have a documented meeting with their faculty advisor or the Senior Academic Coordinator each semester.</i>• <i>30% of students will graduate with distinction, or at least a 3.75 GPA; at least 10% will graduate with a 3.90 GPA for</i>

high distinction.

1e) Require that students maintain an acceptable standard of professionalism and academic integrity.

Target:

- *100% of students will receive a copy of both the Stony Brook University Student Conduct Code and the APHA Principles of Ethical Practice of Public Health during Orientation.*

GOAL 2: (Education)
Monitor and refine the curriculum to ensure that our students are prepared to meet the needs of the evolving public health field.

2a) Evaluate student perceptions of course content, instructors, and learning experiences.

Targets:

- *At least 90% of students will complete a Pre- and Post- Competency Assessment survey for each MPH Course.*
- *100% of students will complete the Orientation Survey. By Fall 2016, 90% of students will complete the Graduation Survey.*
- *Course evaluations for 100% of MPH courses will be administered and results will be analyzed.*

2b) Involve students directly in the curriculum evaluation process.

Targets:

- *The Curriculum Committee will include at least one student representative throughout each academic year.*
- *An annual group exit interview will take place with graduating students every spring.*

2c) Obtain information regarding graduates' perceptions about how well the program prepares them for work in the public health field through the Alumni Survey.

Target:

- *At least 30% of alumni from the cohort that graduated during the previous academic year will complete the Alumni Survey.*

2d) Revise as necessary the MPH curriculum to meet the changing needs of the field.

Targets:

- *90% of Core faculty members will attend at least one professional society meeting per year, in order to keep abreast of current public health issues.*
- *A minimum of 9 Curriculum Committee meetings will be held each year to review the MPH curriculum, incorporating*

feedback from current students, alumni, the Core and Affiliated Public Health Faculty, community leaders, regional public health officials, and public health-related employers.

GOAL 3: (Program) Maintain a high quality MPH program.

3a) Maintain CEPH accreditation.

3b) Achieve a reputation of quality among employers of our graduates.

Targets:

- *By 2016, at least 30% of employers of our graduates who receive the Employer Survey will return a completed survey annually.*
- *At least 80% of employers of our graduates who complete the Employer Survey will rate the program as very good, excellent, or exceptional.*

3c) Achieve a reputation of quality among alumni.

Target:

- *At least 80% of PPH alumni will rate the program as very good, excellent, or exceptional on the Alumni Survey.*

GOAL 4: (Program) Maintain sufficient resources to run a high-quality MPH program.

4a) Maintain the fiscal health of the Program.

Targets:

- *Maintain or grow the PPH total source of funds compared to Fiscal Year 2011-2012.*
- *By 2014, increase the number of new students enrolling in the program to 35.*
- *By Fiscal Year 2015-16, at least 35% of our Core Faculty will have at least 10% of their time offset by non-PPH sources (e.g., sponsored programs, external departmental support).*
- *By Academic Year 2014-15, increase the number of registrants enrolling in Summer Session courses to 125.*

4b) Offer scholarships to attract high-quality students to the program.

Target:

- *Offer up to 4 tuition waivers each year to incoming MD/MPH students and up to 2 tuition waivers for incoming DDS/MPH students.*

4c) Ensure that students will have adequate access to professors, and that professors will not be overburdened by the number of students in their classes.

Target:

- *Maintain a maximum student-faculty ratio of 10:1 in each concentration per semester.*

4d) Maintain relationships with agencies which provide high quality practicums/internships for our MPH students.

Targets:

- *Maintain a verbal agreement with the Suffolk County Department of Health Services to have our MPH students conduct practicums or internships at that agency.*
- *Maintain a Memorandum of Understanding with the Nassau County Department of Health to have our MPH students conduct practicums or internships at that agency.*

GOAL 5: (Diversity) Cultivate a diverse environment for our student population.

5a) Maintain active diversity recruitment efforts.

Targets:

- *By 2014, provide Stony Brook's Center for Inclusive Education with a minimum of 100 flyers advertising the PPH each year, to be distributed at racial/ethnic minority recruitment events around the country.*
- *Provide a minimum of one information session annually to students from undergraduate programs that have a majority representation of racial/ethnic minorities in relevant fields (e.g., SBU Bachelor of Science in Health Science students).*

5b) Admit a diverse student body in terms of ethnicity/race and clinical background.

Targets:

- *By Academic Year 2015-16, at least 20% of accepted applicants will be underrepresented minorities; at least 10% of accepted applicants will be Black and at least 10% will be Hispanic/Latino.*
- *By Academic Year 2015-16, at least 25% of accepted applicants will have a clinical background.*

GOAL 6: (Diversity) Cultivate a diverse faculty and staff environment.

6a) Improve recruitment efforts of racial/ethnic minorities to faculty and staff positions.

Targets:

- *100% of job postings for faculty and staff will contain the following statement: "Women and minorities are strongly encouraged to apply."*
- *100% of job postings for faculty will be circulated to Deans/Chairs of health-related programs training qualified*

faculty at historically black colleges and other minority-serving institutions.

6b) Improve the diversity of the Core Faculty.

Target:

- *By 2016, the PPH will hire at least one qualified racial/ethnic minority candidate (i.e., Asian, Black/African American, Hispanic/Latino) as a Core Faculty member.*

**GOAL 7: (Cultural Competence)
Foster a meaningful sense of cultural competence in MPH students.**

7a) Through the PPH curriculum, instill awareness and sensitivity to the cultural differences between populations, especially underserved populations.

Target:

- *At least two cultural competency discussions will take place within the MPH curriculum per year: a 2-hour class on the topic of cultural competence in Year 1 of the curriculum (during HPH 500: Contemporary Issues in Public Health) and an in-depth discussion during the Capstone Seminar as a part of the Culminating Experience.*

7b) Ensure that students' research efforts are informed by best practices regarding cultural competence.

Targets:

- *100% of incoming students will complete the Collaborative Institutional Training Initiative's (CITI) Social and Behavioral Human Subjects Research Basic Course, which includes the "Group Harms: Research with Culturally or Medically Vulnerable Groups" module.*
- *Each year, the program will hold a two-hour class on the topic of community engagement and participatory research principles and practices in Year 1 of the curriculum (during HPH 501: Introduction to the Research Process).*

**GOAL 8: (Cultural Competence)
Foster the cultural competence of faculty and staff.**

8a) Instill a sense of cultural competency in the hiring process.

Target:

- *100% of job searches will begin with an "Unconscious Bias in Interviewing" training session for the search committee involved.*

8b) Promote opportunities for faculty and staff to participate in professional development activities that foster cultural competence.

Target:

- *The program will hold a one-hour diversity and cultural competence workshop, led by the Office of Diversity and Affirmative Action, for all faculty and staff members once every three years.*

<p>GOAL 9: (Research) Advance knowledge in public health through MPH faculty research in population health, health services, and health policy research.</p>	<p>9a) Maintain and promote faculty research productivity. <i>Targets:</i></p> <ul style="list-style-type: none"> • <i>A minimum of 50% of Core Faculty members will publish in refereed journals at least one time per year and 25% will publish twice or more per year.</i> • <i>Junior faculty without external support will be supported to present research at a minimum of one academic conference per year.</i> • <i>The PPH Mentoring Committee, composed of senior faculty (tenured), will meet one-on-one at least once annually with each junior (pre-tenure) faculty member to provide mentorship and to monitor research progress.</i> <hr/> <p>9b) Encourage scholarly activities among the faculty in national and international scholarly organizations related to public health. <i>Target:</i></p> <ul style="list-style-type: none"> • <i>100% of the Core Public Health Faculty will be active in a national or international scholarly organization.</i> <hr/> <p>9c) Encourage extramural funded research among the faculty. <i>Target:</i></p> <ul style="list-style-type: none"> • <i>At least 50% of Core Public Health Faculty will have external grant funding each year.</i>
<p>GOAL 10: (Research) Actively involve students in scholarly endeavors.</p>	<p>10a) Encourage students to participate in academic research activities. <i>Target:</i></p> <ul style="list-style-type: none"> • <i>By Academic Year 2014-15, at least 10 MPH students will participate in a mentored, research-based Independent Study or Internship each academic year.</i> <hr/> <p>10b) Involve students in research presentations at scientific conferences. <i>Target:</i></p> <ul style="list-style-type: none"> • <i>By 2016, at least 10 MPH students or recent alumni per year will be involved in presentations of research at scientific conferences.</i>
<p>GOAL 11: (Service) Participate in service activities, and develop and maintain public health-based community partnerships of the highest quality.</p>	<p>11a) Serve the needs of public health organizations through high-quality partnership experiences with students. <i>Targets:</i></p> <ul style="list-style-type: none"> • <i>At least 60% of practicums will include a public health-based partnership outside of the University.</i> • <i>For 100% of practicums and internships, ongoing feedback between the student and the student's</i>

practicum/internship team will occur, especially at both mid-service and completion, to ensure a high quality community partnership throughout the entire period.

11b) Facilitate communication and collaboration between community organizations and students.

Targets:

- *At least once per month, the Senior Academic Coordinator will inform students of Practicum, Internship, and voluntary service opportunities within the community by means of website postings and emails.*
- *By Academic Year 2015-16, place six MPH students in internship or practicum opportunities at the Suffolk or Nassau County Departments of Health.*
- *Through 2015, hold four face-to-face meetings annually between faculty and staff of the PPH and high-level administrators of Nassau and Suffolk County Departments of Health to discuss needs of the health departments that can be filled by our MPH students.*

11c) Core Faculty members will lend their expertise to engaging in public health-related professional service efforts.

Targets:

- *50% of Core Faculty members will serve as peer reviewers for refereed journals.*
- *50% of Core Faculty members will serve in a leadership position for a professional society (e.g., Board member, Committee/Council Chair).*

**GOAL 12: (Workforce Development)
Serve the continuing education needs of
the public health workforce.**

12a) Educate the current public health workforce, including employees of the Suffolk County Department of Health Services, the Nassau County Department of Health and public health-related non-governmental organizations (NGOs).

Target:

- *At least 15% of accepted Advanced Graduate Certificate applicants (in Health Communication or Health Education and Health Promotion) each academic year will be members of the public health workforce.*

12b) Provide offsite (i.e., not on the campus of Stony Brook University) educational opportunities for the regional public health workforce.

Targets:

- *Through the New York City-Long Island-Lower Tri County Public Health Training Center (NYC-LI-LTC PHTC), hold 12 face-to-face trainings per year with the Nassau and Suffolk County Departments of Health and other*

community organizations through 2015.

- *Through the NYC-LI-LTC PHTC, offer 22 online public health courses to the regional public health workforce through 2015.*

12c) Provide the Advanced Graduate Certificate in Health Communication courses in a distance-learning format.

Target:

- *By Academic Year 2015-16, make three courses for the Advanced Graduate Certificate in Health Communication available online.*