AY 18/19 MPH Exit Survey

**Semester of Graduation**

|  |  |  |
| --- | --- | --- |
| Answer | % | Count |
| fall | 61.11% | 11 |
| spring | 22.22% | 4 |
| summer | 16.67% | 3 |
| Total | 100% | 18 |

Format

|  |  |  |  |
| --- | --- | --- | --- |
| # | Answer | % | Count |
| 1 | Campus-based student (may have taken some online classes) | 27.78% | 5 |
| 2 | Online student | 72.22% | 13 |
|  | Total | 100% | 18 |

 **During your time in the MPH program, did you...**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| # | Question | Yes |  | No |  | Total |
| 1 | Attend/view orientation? | 83.33% | 15 | 16.67% | 3 | 18 |
| 2 | H2 Seek/receive career advice from advisor or instructor? | 72.22% | 13 | 27.78% | 5 | 18 |
| 3 | Participate in PHUGAS? | 22.22% | 4 | 77.78% | 14 | 18 |
| 4 |  F2 Join KPHA? | 33.33% | 6 | 66.67% | 12 | 18 |
| 5 | F2 Engage in community service beyond GrAPE requirements? | 94.44% | 17 | 5.56% | 1 | 18 |
| 6 | R2 Engage in research? | 66.67% | 12 | 33.33% | 6 | 18 |
| 7 | R3 Present research/project at conference? | 33.33% | 6 | 66.67% | 12 | 18 |
| 8 |  R3 Author/Co-author publication? | 16.67% | 3 | 83.33% | 15 | 18 |
| 9 | H2 Engage with WKU Career Services? | 11.11% | 2 | 88.89% | 16 | 18 |
| 10 | Engage with Student Accessibility Resource Center? | 11.11% | 2 | 88.89% | 16 | 18 |
| 11 | I7 Complete a certificate? | 66.67% | 12 | 33.33% | 6 | 18 |
| 12 | F2 Attend professional development workshop/training/conference? | 80.00% | 8 | 20.00% | 2 | 10 |
| 13 |  F2 Participate in a professional organization other than KPHA? | 80.00% | 8 | 20.00% | 2 | 10 |
|  |  |  |  |  |  |  |

**Please rate your overall experience with career advice from advisor/instructor.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| # | Field | Minimum | Maximum | Mean | Std Deviation | Variance | Count |
| 1 | . | 3.63 | 5.00 | 4.52 | 0.52 | 0.27 | 13 |

**PH\_LD - Did you hold a leadership position in PHUGAS?**

|  |  |  |  |
| --- | --- | --- | --- |
| # | Answer | % | Count |
| 1 | Yes | 25.00% | 1 |
| 2 | No | 75.00% | 3 |
|  | Total | 100% | 4 |

**PH\_No - What is your primary reason for not participating in PHUGAS?**

|  |
| --- |
| I am off campus |
| I felt like I already had a lot of involvement and didn't want to overwhelm myself. |
| distance since I was an online student |
| 100% online student who had limited time so chose not to be an active member. |
| I am an adult learner and not campus based. |
| Too busy with professional work. |
| Time. |
| No time |
| I'm an online student and thus didn't participate in opportunities that were in Bowling Green. |
| I don't recall getting information​ on it. |
| I would have to take off work to travel to Bowling Green, which is an hour to and from where I live (Owensboro). |
| Being an online student. |
| Working full time, plus school, plus taking care of baby/family life so no extra free time. |
| Being a online student and living over an hour away. |

**KPHA\_LD - Did you hold a leadership position in KPHA?**

|  |  |  |  |
| --- | --- | --- | --- |
| # | Answer | % | Count |
| 1 | Yes | 50.00% | 3 |
| 2 | No | 50.00% | 3 |
|  | Total | 100% | 6 |

**KPHA\_No - What is your primary reason for not joining KPHA?**

|  |
| --- |
| Haven't had the opportunity to this point |
| distance |
| 100% online student. I think organizations like this are great but being an online student while working I was unable to be an active member. |
| Didn’t knew about it |
| Too busy with professional and personal life. |
| Time. |
| No time |
| Already a member through place of employment. |
| I don't recall getting information on it. |
| I was never given enough information as to why I should join KPHA and what the benefits of doing so are. |
| Being an online student (living in TN). |
| Same as previous answer. Lack of free time due to other obligations |

**Q31 - Please describe how you engaged in community service beyond GrAPE requirements**

|  |
| --- |
|  |
| I work on helping patients with opioid use disorder get the resources they need |
| Through my graduate assistantship at Health Education and Promotion I had various opportunities to collaborate with community entities such as Hope Harbor, the Domestic Violence Awareness Committee, Sexual Assault Prevention Committee, and the MTSU vs. WKU Blood Drive Committee. All of these opportunities involved multiple different community areas. |
| worked with organization I initially did my GrAPE for over a year - long after fulfilled the GRAPE requirements. |
| Attended events organized by KPHA, BRIGHT coalition meetings, and tobacco free campus events. |
| Volunteered with a professor from undergrad with her non-profit in Guatemala, TEN FE |
| I led the evaluation of a regional Community Health Improvement Plan |
| Did many workplace hazard evaluations and community health issue evaluations. |
| Volunteered in schools, and within the local community's after school programs. |
| Internship led me to opportunities to community events and other Public Health opportunities in the community |

**Q32 - Please check all that apply regarding your research.**

|  |  |  |  |
| --- | --- | --- | --- |
| # | Answer | % | Count |
| 1 | I collaborated with other WKU students | 25.00% | 3 |
| 2 | I collaborated with WKU faculty | 25.00% | 3 |
| 3 | I collaborate with others outside of WKU | 50.00% | 6 |
| 4 | I did not collaborate with others. | 0.00% | 0 |
|  | Total | 100% | 12 |

**Res\_No - You stated you did not engage in research. Which best describes you?**

|  |  |  |  |
| --- | --- | --- | --- |
| # | Answer | % | Count |
| 1 | I wasn't interested in doing research. | 50.00% | 3 |
| 2 | I was interested in research, but did not reach out to faculty about research opportunities. | 16.67% | 1 |
| 3 | other: | 33.33% | 2 |
|  | Total | 100% | 6 |

other:

|  |
| --- |
| other: - Text |
| I was interested in research, but I was an online student, so it would have been hard for me to commute back and forth. |
| I engaged in a literature review but didn’t conduct a research study or anything of that nature, due to lack of time and interest |

**SARC - Please rate your experience with Student Accessibility Resource Center (SARC)**

**car\_wku - Please rate your experience with WKU Career Services.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| # | Field | Minimum | Maximum | Mean | Std Deviation | Variance | Count |
| 1 | . | 3.00 | 5.00 | 4.00 | 1.00 | 1.00 | 2 |

**Q29 - Please list the workshops, trainings, and/or conferences attended while at student at WKU**

|  |
| --- |
| KPHA Annual Conference KPHAST training CASPER Training Green Dot Active Bystander Training SafeZone Workshop |
| Kentucky Harm Reduction Workshop in Northern Kentucky as a Student Ambassador Attended Unite for Sight Global Conference at Yale in April 2019 Attended and was panelists at Morehead State University Gender Studies "Transgender Panel" Nov 27, 2018 Attended "Breaking Down Barriers to Health Equity for All Kentuckians" Lexington Oct 19, 2018 sponsored by KY Voices for Health |
| TFGCI conference, K-PHAST and events with BRIGHT. |
| Language Access Forum hosted by the health collaborative in Cincinnati, Ohio. Refugee Initiative Summit hosted by Xavier University North American Refugee Health Conference (June, 2018) in Portland, Oregon. |
| Did residency training in Occupational and Environment Medicine. |
| KAND - 2018 AND- 2015, 2017, 2018 CPSDA - 2016, 2018 SCAN - 2017 |
| Prevention Training |

|  |
| --- |
| **Q30 - Please list the professional organizations, other than KPHA, you participated in while at student at WKU.** ACEP |
| NASPA, BACCHUS, ACHA |
| Global Community Interest Group of American Academy of Family Physicians Member of American Academy of Family Physicians and Kentucky Academy of Family Physicians |
| BRIGHT coalition |
| Honor's Society |
| APHA , ACHE |
| Fund for Global Health |
| AND Nutrition and Behavioral Health SCAN CPSDA |

**rate - Please rate the program overall on each of these items.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| # | Field | Minimum | Maximum | Mean | Std Deviation | Variance | Count |
| 1 | C2. Instructor availability | 3.45 | 4.98 | 4.44 | 0.56 | 0.31 | 18 |
| 2 | H1. Advisor availability | 2.60 | 5.00 | 4.52 | 0.63 | 0.39 | 18 |
| 3 | Class sizes conducive to learning | 3.46 | 5.00 | 4.65 | 0.41 | 0.17 | 18 |
| 4 | Quality of courses | 2.50 | 5.00 | 4.01 | 0.84 | 0.70 | 18 |
| 5 | I4. Quality of faculty | 2.74 | 5.00 | 4.15 | 0.68 | 0.46 | 18 |
| 6 | H1. Quality of advising | 2.43 | 4.98 | 4.36 | 0.69 | 0.47 | 18 |
| 7 | Competency development | 2.83 | 4.98 | 4.33 | 0.58 | 0.34 | 18 |
| 8 | Diversity/cultural competence | 2.92 | 5.00 | 4.44 | 0.59 | 0.35 | 18 |
| 9 | Value of program | 3.43 | 5.00 | 4.32 | 0.55 | 0.30 | 18 |

**Q8 - Please comment on class size relative to learning**

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| --- |
|  |
| Class size was not a problem |
| The class sizes were amazing in terms of learning. All of the classes were fairly small which facilitated a lot of discussion and comfort. |
| unknown size of many classes because they were in online format |
| The classes were typically around 6-20 students. Having small classes was easier to learn in my experience. |
| All my classes were quite small....never had an issue with too many people. |
| The classes where small enough for student interaction |
| Perfect |
| Class size was not an issue |
| Most classes were online where class size wasn't relevant. |
| Class size was appropriate for all of my online courses. Sometimes if a professor wanted us to comment on each week's reading/lecture and then reply to comments on every single classmates' BlackBoard post, it was a bit much. But maybe that's because I didn't find that type of interaction very helpful from a learning standpoint. |
| not relevant​ for online. |
| I think that the class sizes were perfect relative to learning. There was just the right number of students in each class to be able to engage in meaningful and insightful discussion with my peers, with the exception of the summer class I took. I also completed my undergrad at a small university with small class sizes, so I preferred smaller class sizes. I feel that if the classes are too large, it takes away from the learning experience. |
| I experienced no issues with classes being too large for the instructors to handle. The classes were small and it allowed for the students to get to know one another and also have a relationship with the instructor. |
| For an online program, the class sizes were still small and I think this was beneficial. |
| Some classes had more people than others however the only time I felt it was a problem was during group projects. |

**Q11 - Please comment on instructor availability.**

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| --- |
| Instructors are prompt to reply when contacted |
| All of my instructors have been available if an appointment has been made for the most part. I feel a lot of instructors have been overwhelmed with responsibilities which made them more unorganized but I was always eventually able to meet if necessary. |
| For most courses, instructors were easily available by email within two to three days response. |
| I had no issues with instructor availability. |
| Almost always got very quick replies from all professors. |
| But for two instructors, they generally very available |
| Always available |
| Great instructors and big fan of Dr. Marilyn Gardner. |
| Most of instructors got back to me in a timely manner. |
| The majority of the instructors were available, always willing to meet, and responded to emails in a very quick manner. Some instructors were much harder to get in contact with, particularly summer on-demand courses. |
| Some instructors were available within 24-36 hours every single time I reached out. Others would go weeks with no reply. Although a 24 hour turnaround is too quick to expect, more than a few days to answer a question seems unresponsive. |
| Most instructors were accessible​. |
| Throughout my two years as an MPH student, I had never had any issues with instructor availability until this semester. I had one professor whom I would email regarding a paper that we were to write, and I had some very important questions/concerns about, however he did not email me back for two weeks. I had to eventually reach out to the graduate assistant in the class to contact him. Other than that, I have no complaints! |
| Every instructor I had was available pretty much whenever I needed them. If I were to email an instructor, I would usually receive a reply within minutes. |
| I never had difficulty getting in touch with an instructor if I needed to. |
| Some instructors were definitely available like Dr. Gardner. Others, got back to you when they wanted too like Farwell, Watkins, and Griffin~ Ellis. |

**Q28 - Please comment on the program's climate of diversity/inclusion and cultural competence.**

|  |
| --- |
| No issues |
| I feel like the MPH is extremely culturally competent because that is the foundation of what public health is. |
| Very inclusive and culturally competent |
| Excellent. |
| I felt like all of my professors were very culturally aware. MPH is unique because we actually learn about these things and this disparities that exist. All of my professors seemed very appropriate and kind and inclusive of all groups. |
| Very good inclusive climate |
| It was diverse and inclusive of all cultures |
| Very good program. Recommended to two of my other classmates in residency training and one already joined. |
| Learned about cultural barriers with health disparities |

**Q13 - What are the program's greatest strengths?**

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| --- |
|  |
| Only online course available currently in KY Good content and competencies are met |
| The program is very diverse in terms of competencies so it touches on every area of public health. I also feel like the instructors are passionate. I feel like our program also focuses on disparity a lot which is crucial in this field. |
| Breadth of exposure to public health issues. Faculty who are knowledgeable and selected worthwhile learning activities |
| Small class size and well structured courses. Many courses had application based problems. |
| Accredited. 100% online. Overall an amazing program. I learned so much. Small classes. Faculty with real world experience. Professors that really care about the students and their learning. |
| Competency based approach |
| Accreditation Faculty Members |
| Instructors and their course development and its applicability. |
| The advisors/professors. |
| Its online and fairly straight forward with what is expected |
| The applied courses (581, 591) are excellent courses for pulling the program together and really push students to integrate, synthesize, and apply (ha!) what they have learned in previous courses. |
| Instructor availability and the flexibility of the online/on-demand/in-person program. GrAPEs are also another strength. |
| The online forum to facilitate communication between classmates. Decent flexibility for listening to lectures. Assignments are stated early in the course and can be completed ahead of time for some classes. Several of the professors are outstanding and truly seem to enjoy the content. |
| Having an​ MPH online |
| The program's greatest strengths are that it is offered 100% online. This was super beneficial to me because I work full-time, so to be able to have a full-time job and complete my degree was amazing. The majority of the faculty associated with this program were super helpful and always willing to answer any questions I might have, no matter how redundant or silly :) The faculty was also very delightful to speak to in person, whenever I was given the opportunity. |
| The MPH program provided an excellent education at an incredible value. Everyone that is a part of the program exhibited a high level of knowledge on each of the topics covered. I can't speak for the other students but I was always treated as an equal rather than the instructor being above me-- that's something that I feel is a really special aspect of this department here at WKU. |
| Convenience, this program really is great for working professionals and people with families. All of my instructors were great to work with and also recognized the importance of flexibility, as myself and the majority of my peers have several obligations outside of school. I would definitely recommend this program. |
| The strengths are definitely the core courses beyond those some courses like Public Health Administration instructor Griffin~ Ellis are just busy work. |

**Q14 - What can be done to improve/strengthen the program?**

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| --- |
|  |
| Offer more elective courses. |
| Improvement can come from ensuring instructors are not as overwhelmed with their responsibilities. I feel as if when instructors are overwhelmed their assignments are less useful and more surface level versus assignments that will actually allow me to feel prepared to enter this field as a professional. |
| Environmental Health Spring 2018 PH584 with Jarrod Nelm was somewhat of a wasted course- did not learn a lot from assignments. Better system for group work in some of the classes. More interactive discussion with instructors with the discussion boards |
| Include more class options to tailor to students interests and career goals. |
| Biostatistics should not ever be offered as a 6 week summer class ever again. This is the most painful memory of the program. I was certainly not sleeping and neither was Dr. Farrell. |
| There should a good conversation among as to who the students are: early, mid , or executive careerist. |
| Provide Funding |
| None at this point. |
| I think that Program Evaluations class should be modified to fit online students schedules. There are in person exams and it takes more than the intended class hours per week doing all the work. This class was honestly the only real challenge because it was not like any of the other classes in its expectations and work load. |
| Since this program is intended to be practice-focused rather than research-focused, it would be useful to have stronger links between the MPH program and local agencies. It may be that with the GrAPES coordinator position this will happen organically, but I did feel like I was working hard to make local connections on my own. |
| Challenge the students more. |
| One of the primary reasons i chose the online program was for the flexibility of classes. Once I was a few classes in, I quickly realized how heavy the content would be for group work; and that is not flexible. Additionally, proctored exams were burdensome. |
| n/a |
| I think that online students should be given more options for electives and certificates. For example, I wanted to complete a certificate in Global Health, however, I could not because some of the courses required were only offered face-to-face, and it was impossible for me to take those courses. |
| There were some components in coursework that didn't seem to match up with the goals for the course and, at times, turned into busywork. Another issue, and this is something that goes beyond just this program, is student accountability. There were times when group worked turned into one student doing all the work. Holding the students more accountable at this level in their educational career is something I feel should be of utmost importance. |
| Nothing |
| Make instructors be held accountable for NOT answering emails and not having course content. On the evaluations of courses more action needs be paid to the student's perspective of the course. |

**Comps - Please rate the extent to which the MPH core curriculum prepared you in each of the following competency areas. 1 = Did not prepare, 5 = Prepared very well**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| # | Field | Minimum | Maximum | Mean | Std Deviation | Variance | Count |
| 1 | 1. Apply epidemiological methods to the breadth of settings and situations in public health practice | 4.00 | 5.00 | 4.60 | 0.49 | 0.24 | 10 |
| 2 | 2. Select quantitative and qualitative data collection methods appropriate for a given public health context | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 3 | 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate | 3.00 | 5.00 | 4.40 | 0.80 | 0.64 | 10 |
| 4 | 4. Interpret results of data analysis for public health research, policy or practice | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 5 | 5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings | 1.00 | 5.00 | 4.00 | 1.18 | 1.40 | 10 |
| 6 | 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels | 3.00 | 5.00 | 4.80 | 0.60 | 0.36 | 10 |
| 7 | 7. Assess population needs, assets and capacities that affect communities’ health | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 8 | 8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs | 4.00 | 5.00 | 4.90 | 0.30 | 0.09 | 10 |
| 9 | 9. Design a population-based policy, program, project or intervention | 3.00 | 5.00 | 4.40 | 0.66 | 0.44 | 10 |
| 10 | 10. Explain basic principles and tools of budget and resource management | 1.00 | 5.00 | 3.80 | 1.33 | 1.76 | 10 |
| 11 | 11. Select methods to evaluate public health programs | 3.00 | 5.00 | 4.80 | 0.60 | 0.36 | 10 |
| 12 | 12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence | 2.00 | 5.00 | 3.90 | 1.14 | 1.29 | 10 |
| 13 | 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes | 3.00 | 5.00 | 4.40 | 0.80 | 0.64 | 10 |
| 14 | 14. Advocate for political, social or economic policies and programs that will improve health in diverse populations | 3.00 | 5.00 | 4.30 | 0.64 | 0.41 | 10 |
| 15 | 15. Evaluate policies for their impact on public health and health equity | 4.00 | 5.00 | 4.40 | 0.49 | 0.24 | 10 |
| 16 | 16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making | 1.00 | 5.00 | 4.10 | 1.14 | 1.29 | 10 |
| 17 | 17. Apply negotiation and mediation skills to address organizational or community challenges | 3.00 | 5.00 | 4.30 | 0.64 | 0.41 | 10 |
| 18 | 18. Select communication strategies for different audiences and sectors | 4.00 | 5.00 | 4.50 | 0.50 | 0.25 | 10 |
| 19 | 19. Communicate audience-appropriate public health content, both in writing and through oral presentation | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 20 | 20. Describe the importance of cultural competence in communicating public health content | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 21 | 21. Perform effectively on interprofessional teams | 3.00 | 5.00 | 4.50 | 0.67 | 0.45 | 10 |
| 22 | 22. Apply systems thinking tools to a public health issue | 3.00 | 5.00 | 4.30 | 0.64 | 0.41 | 10 |
| 23 | 23. Apply health behavior theories and models to address public health problems. | 4.00 | 5.00 | 4.90 | 0.30 | 0.09 | 10 |
| 24 | 24. Describe the role of budgeting; methods of seeking extramural funding; and methods of financial analysis in making decisions about policies, programs and services. | 2.00 | 5.00 | 3.80 | 1.08 | 1.16 | 10 |
| 25 | 25. Discuss theoretical models and methods used to understand, explain, and ameliorate health disparities. | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 26 | 26. Integrate social determinants into public health science, practice, and research. | 4.00 | 5.00 | 4.70 | 0.46 | 0.21 | 10 |
| 27 | 27. Identify the direct and indirect population health effects of environmental hazards (biological, chemical and physical) on humans, animals and the ecology. | 1.00 | 5.00 | 4.30 | 1.19 | 1.41 | 10 |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| # | Question | 1 - Did not prepare |  | 2 |  | 3 |  | 4 |  | 5 - Prepared very well |  | Total |
| 1 | 1. Apply epidemiological methods to the breadth of settings and situations in public health practice | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 40.00% | 4 | 60.00% | 6 | 10 |
| 2 | 2. Select quantitative and qualitative data collection methods appropriate for a given public health context | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 3 | 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate | 0.00% | 0 | 0.00% | 0 | 20.00% | 2 | 20.00% | 2 | 60.00% | 6 | 10 |
| 4 | 4. Interpret results of data analysis for public health research, policy or practice | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 5 | 5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings | 10.00% | 1 | 0.00% | 0 | 10.00% | 1 | 40.00% | 4 | 40.00% | 4 | 10 |
| 6 | 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 0.00% | 0 | 90.00% | 9 | 10 |
| 7 | 7. Assess population needs, assets and capacities that affect communities’ health | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 8 | 8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 90.00% | 9 | 10 |
| 9 | 9. Design a population-based policy, program, project or intervention | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 40.00% | 4 | 50.00% | 5 | 10 |
| 10 | 10. Explain basic principles and tools of budget and resource management | 10.00% | 1 | 10.00% | 1 | 10.00% | 1 | 30.00% | 3 | 40.00% | 4 | 10 |
| 11 | 11. Select methods to evaluate public health programs | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 0.00% | 0 | 90.00% | 9 | 10 |
| 12 | 12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence | 0.00% | 0 | 20.00% | 2 | 10.00% | 1 | 30.00% | 3 | 40.00% | 4 | 10 |
| 13 | 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes | 0.00% | 0 | 0.00% | 0 | 20.00% | 2 | 20.00% | 2 | 60.00% | 6 | 10 |
| 14 | 14. Advocate for political, social or economic policies and programs that will improve health in diverse populations | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 50.00% | 5 | 40.00% | 4 | 10 |
| 15 | 15. Evaluate policies for their impact on public health and health equity | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 60.00% | 6 | 40.00% | 4 | 10 |
| 16 | 16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making | 10.00% | 1 | 0.00% | 0 | 0.00% | 0 | 50.00% | 5 | 40.00% | 4 | 10 |
| 17 | 17. Apply negotiation and mediation skills to address organizational or community challenges | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 50.00% | 5 | 40.00% | 4 | 10 |
| 18 | 18. Select communication strategies for different audiences and sectors | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 50.00% | 5 | 50.00% | 5 | 10 |
| 19 | 19. Communicate audience-appropriate public health content, both in writing and through oral presentation | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 20 | 20. Describe the importance of cultural competence in communicating public health content | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 21 | 21. Perform effectively on interprofessional teams | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 30.00% | 3 | 60.00% | 6 | 10 |
| 22 | 22. Apply systems thinking tools to a public health issue | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 50.00% | 5 | 40.00% | 4 | 10 |
| 23 | 23. Apply health behavior theories and models to address public health problems. | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 10.00% | 1 | 90.00% | 9 | 10 |
| 24 | 24. Describe the role of budgeting; methods of seeking extramural funding; and methods of financial analysis in making decisions about policies, programs and services. | 0.00% | 0 | 20.00% | 2 | 10.00% | 1 | 40.00% | 4 | 30.00% | 3 | 10 |
| 25 | 25. Discuss theoretical models and methods used to understand, explain, and ameliorate health disparities. | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 26 | 26. Integrate social determinants into public health science, practice, and research. | 0.00% | 0 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 70.00% | 7 | 10 |
| 27 | 27. Identify the direct and indirect population health effects of environmental hazards (biological, chemical and physical) on humans, animals and the ecology. | 10.00% | 1 | 0.00% | 0 | 0.00% | 0 | 30.00% | 3 | 60.00% | 6 | 10 |

**Com - What else would you like us to know?**

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| What else would you like us to know? |
| For public health students I think it would be beneficial to go more in depth with the administration policy side of things. I feel like I am not extremely comfortable analyzing policies that effect the health of populations. I also feel like some of the online courses could be more developed. There were just a few classes where I felt like I wish I could have learned more. |
| Learned a lot in this program and all staff involved were kind - almost all exhibited a passion for their work and great care and concern for the those facing health disparities. |
| Please consider reducing the amount of group work in the program. While I understand the importance of being able to perform on a team, it became exhausting. Every group project had one member that lacked quality work or did not contribute equally to the project. It is not my job as a student to hold someone's hand and teach the basics such as why wikipedia cannot be used as a reference. |
| I have and will continue to recommend this program to others. Dr. G makes the world go round. |
| I have said enough |
| Nothing at this point. |
| From learning about public health to practicing it was a bit different than I expected honestly. |