

FLORIDA BOARD OF GOVERNORS

October 21, 2004

SUBJECT: Implementation Authorization for a Doctor of Public Health (DrPH) at Florida A&M University

PROPOSED BOARD ACTION

Consider implementation authorization for a Doctor of Public Health (DrPH) (CIP 51.2201) at Florida A&M University.

AUTHORITY FOR BOARD OF GOVERNORS ACTION

Article IX, Section 7 (d), Constitution of the State of Florida

BACKGROUND INFORMATION

FAMU is requesting to implement a DrPH in Public Health to prepare students for careers in public health professional practice, teaching, or research. Graduates will be oriented toward applied research in development, implementation, and evaluation of public health programs and will be employed by government, private, or volunteer agencies at the local, state, national, or international levels, as well as in colleges and universities. This would be the first DrPH in Florida, and the program will strive to fill three recognized gaps in the public health workforce: preparing professionals for leadership positions in public health practice rather than in academic settings, addressing health disparities among the poor and disadvantaged, and addressing the recognized lack of minority public health professionals and paucity of doctoral level African Americans in schools of public health and public health agencies.

FAMU's Institute of Public Health is housed in the College of Pharmacy and Pharmaceutical Sciences, which has been recognized as the top producer of African-American doctoral level degrees in the pharmaceutical sciences, as well as ranking first in securing extramural funding among pharmacy schools in the Southeast. The proposed program is 72 credit hours in length with 30 hours of public health and health education core courses, 15 hours of coursework in a health education specialization, 12 hours of courses in research methods, and 15 hours of dissertation research. Completion of the program includes successful matriculation in the required courses and practicums, passing a comprehensive exam, passing a qualifying exam (oral and written), a written dissertation, and oral dissertation defense. Dr. LuAnn White, of Tulane University, was retained as an external consultant to review the proposal and recommends the program's approval. She states in her report that the program is well thought out, the curriculum is sound, and the proposal is both timely and fills a state and national need.

The FAMU Board of Trustees approved the proposal for the DrPH at its March 9, 2004 meeting. If the Board of Governors approves the proposal, the University plans to implement the program in the spring of 2005.

Supporting Documentation Included:
Facilitators / Presenters:

Staff Analysis
Chancellor Austin / R. E. LeMon

FAMU Representatives
**Florida A&M University Request for a Doctor in Public Health (DrPH)
 Staff Analysis**

Estimated costs:

	Total	% & \$ Current	% & \$ New	% & \$ C&G	Cost per FTE	SUS 02-03 Average Costs
Year 1	\$221,402	17%; \$37,275	49%; \$107,913	34%; \$76,214	\$28,468	\$25,717 for CIP 51
Year 5	\$396,376	55%; \$218,188	35%; \$138,188	10%; \$40,000	\$14,086	

NOTE: SUS Average Costs are calculated using the 2002-03 Expenditure Analysis.

Projected FTE and headcount are:

	Projected Headcount	Student FTE
First Year	6	5.1
Second Year	9	7.5
Third Year	12	10.1
Fourth Year	20	16.9
Fifth Year	30	25.3

On April 30, 2003, the Florida Board of Governors approved eight criteria, divided into the two categories of Readiness and Accountability, by which implementation authorization of new doctorates were to be assessed. The following is an analysis of the University's proposal based on further delineations of those eight criteria.

Evidence that the proposed program is listed in the current State University System Master Plan and/or that the goals of the proposed program relate to the institutional mission statement as contained in the Master Plan

The program was not listed on the 1998-2003 State University System Master Plan. However, Public Health is listed as an area of Emerging Technology in Medical Science and Health Care in the January Draft of the BOG strategic planning documents. The program has been in the planning stages since the Council for Education on Public Health accreditation site visit in February 2000. Due to the substantial health disparities in Florida and the nation, as well as the need for trained culturally competent public health leaders in research and service, the FAMU Institute of Public Health (IPH) has included in its strategic plan the development of new degree

programs (including the Doctor of Public Health). It is aligned with the mission of the University. Further, the mission of the IPH is “to improve the health status of the poor and underserved through graduate training, research, and service,” which is directly addressed by the proposed program. The goals of the program are also in concert with University commitments.

Evidence of a relationship to specific institutional strengths

The IPH is housed in the College of Pharmacy and Pharmaceutical Sciences (COPPS), which has been recognized as the top producer of African-American doctoral level degrees in the pharmaceutical sciences, as well as ranking first in securing extramural funding (National Institutes of Health) among pharmacy schools in the Southeast. There is an interface between pharmacy and public health, and the IPH faculty contribute to the pharmacy school by teaching pharmacy students, acting as members of thesis and dissertation committees, and serving as co-investigators on grants and contracts. The IPH has also developed collaborative relationships in research and teaching with the School of Allied Health Sciences, School of Nursing, Environmental Sciences Institute, Department of Social Work, School of Business and Industry, and Department of Health, Physical Education, and Recreation. Finally, FAMU, in partnership with the Harvard School of Public Health (HSPH), was awarded federal funding to establish a health disparities research center. The IPH serves in a leadership role in the development and implementation of this Center (the Center for Health Options and Innovative Community Empowerment [Project CHOICE]), particularly in the areas of community outreach/information dissemination and training.

Evidence that planning for the proposed program has been a collaborative process involving academic units and offices of planning and budgeting at the institutional level, as well as external consultants, representatives of the community, etc.

The planning process was initiated in 2000, and according to the proposal, has involved internal and external constituents and stakeholders (including faculty members, students, advisory committee members, and administrators). The planning chronology indicates a collaborative process, including IPH faculty and staff, the Dean of COPPS, the FAMU Health Sciences Committee, the IPH Advisory Committee, the IPH New Degree Committee, the University New Degree Committee, the Office of the Provost/Academic Affairs, other SUS institutions (including support from the Dean of the USF College of Public Health), and the FAMU Board of Trustees, among others.

Dr. Luann White of Tulane University was retained as an external consultant to review the proposal, and supports implementation of the program. She states that the program is well thought out, the curriculum is sound, and the proposal is both timely and fills a state and national need. Additional comments by the external consultant are included in corresponding areas within this staff analysis. DCU staff also conducted a site visit to campus to meet with interested parties and to evaluate facilities, library resources, space, equipment, and other resources.

Evidence of an appropriate timetable of events leading to the implementation of the proposed program

A timetable is provided and is associated with the events identified in the narrative. The proposed implementation date is spring 2005, and all hires needed for Year 1 were expected to

be finalized as of August 2004. In addition, all courses and syllabi have been submitted and approved by the University Curriculum Committee. The proposed curriculum was submitted to the Office of the Provost in July, and the Office of the Registrar reviewed the information in August. Dissertation-hour courses will be submitted no later than January 2005.

Evidence that progress has been made in implementing the recommendations from program reviews or accreditation activities in the discipline pertinent to the proposed program

The Council on Education for Public Health (CEPH) is the national accrediting body for graduate programs and schools of public health. CEPH conducted a review of the Master of Public Health (also within the Institute of Public Health) in 2000, granting full accreditation for the period of 2000-2005 (which is the maximum term available for the initial review). The FAMU MPH program is the only accredited public health program in North Florida, and the second CEPH accredited program at a historically black college and university (HBCU). FAMU's MPH Program received primarily evaluations of "fully met" (the highest possible score), and due to its high rating, no interim reports were required for the 2000-2005 period. Although the entire accreditation report was not provided, the proposal did include recommendations from the review that indicted a need for dedicated faculty in biostatistics and occupational health areas. Since the site visit determining that need, three additional faculty positions have been procured, and faculty members were hired in the areas of biostatistics and behavioral science and health education. It is the program's intention to fill the position in occupational health shortly. The review also indicated a general need for more faculty in the program. This is pertinent to the proposed program, as two faculty members are to be hired prior to implementation (with two more the following year). Whereas it is evident that the program is working toward addressing the recommendation provided by CEPH in the accreditation review for the MPH, the shortage in faculty members remains a concern for implementation of the proposed program. Workload of faculty and diversity of the faculty were two other issues arising in the review. The proposal states that, in reference to the faculty workload, dedicated time is allotted weekly to each faculty member for drafting publications and writing proposals. Also, the proposal indicates that outreach to largely Hispanic-serving institutions in the state will assist in increasing the diversity of both the faculty and student body.

Evidence of an appropriate, sequenced, and fully described course of study; evidence of specific learning outcomes and industry driven competencies for any science and technology programs

The proposal provides a very detailed curriculum listing, complete with course descriptions and learning outcomes, which appears consistent with the curriculum and learning objectives of other DrPH programs in the nation. The proposed program is a 72-hour program, with 21 hours of public health core courses, 9 hours of health education core courses, 15 hours of coursework in a health education specialization, 12 hours of courses in research methods, and 15 hours of dissertation research. Completion of the program includes successful matriculation in the required courses and practicums, passing a comprehensive exam, passing a qualifying exam (oral and written), a written dissertation, and oral dissertation defense. The proposal indicates that successful matriculation may range from 4-5 years for those without a previous public health degree, and 2-3 years for those with an MPH from an accredited program or school. The

external consultant noted that the MPH program received very high praise when reviewed by CEPH, which endorses the quality of the MPH curriculum. She continued on to note that the DrPH curriculum is a natural extension of the MPH curriculum and the proposed coursework will fill out the current course offerings. She assessed the proposed curriculum as being very sound.

Evidence that, if appropriate, the bachelor's and master's degree programs associated with the program are accredited and that the institution anticipates seeking accreditation for the proposed program if available

CEPH is the body associated with accreditation of all graduate public health programs and schools of public health in this country, including Master of Public Health (MPH), Master of Science in Public Health (MSPH), Doctorate in Public Health (DrPH), Doctor of Philosophy (Ph.D.), and Doctor of Science (Sc.D.) programs. The FAMU MPH program received full, maximum accreditation from 2000-2005 in its initial review. The addition of the DrPH will be considered as part of the accreditation of the public health program (MPH and DrPH), thus a separate accreditation process for the DrPH is not required. The MPH is also a member of the Delta Omega Public Health Honorary Society, inducted in November of 2001 as the Alpha Mu Chapter at the 2001 meeting of the American Public Health Association (which makes the FAMU MPH one of only two Delta Omega Chapters at an HBCU).

Evidence that the proposed institution has analyzed the feasibility of providing all or a portion of the proposed program through distance learning technologies via its own technological capabilities as well as through collaboration with other universities

The program will be delivered primarily through traditional delivery on the FAMU main campus, particularly during Years 1-3. However, there is evidence that the program is willing to explore distance learning alternatives, and the proposal indicates that the exploration of such delivery alternatives will be conducted at the conclusion of Year 2 (as this program is the first of its kind in Florida). Program faculty have held preliminary discussions with personnel in the University of South Florida College of Public Health regarding their public health distance-learning program, and intend to continue discussions to determine the feasibility of collaboration. The proposal indicates that potential exists for the planning and implementation of dual Pharm.D./DrPH and Pharm.D./MPH programs via distance learning in Tampa, Miami, Jacksonville, and Orlando through the FAMU College of Pharmacy and Pharmaceutical Sciences.

Evidence that there is a critical mass of faculty available to initiate the program based on estimated enrollments

At the time of submission of the proposal, two additional faculty members were needed to initiate the program. That recruitment/hiring process was scheduled to be completed in August, 2004. The two additional faculty needed are proposed to have expertise in behavioral science and health education, which is one of the core course areas. The proposal indicates that no additional faculty will be needed to teach core courses necessary for students entering the program without an MPH from an accredited program. This is because those core courses are already offered to MPH students. The proposal lists 10 faculty members by Year 5 (6 of whom are currently employed by FAMU). It is important to note that the program will also be

supported by 5 part-time faculty and 11 adjunct faculty, with adjunct faculty serving primarily as guest lecturers and seminar speakers. Advertisements for 2 more faculty for the 2005-06 year are expected to be completed by April 2005, with offers to be made in May 2005. By Year 5, the student/faculty ratio is expected to be 3:1 for the DrPH program. The external consultant noted that the faculty have solid credentials, but the numbers are low for instituting a doctoral program. She mentioned that the proposal does recognize this fact, and makes a commitment to hire more faculty to deal with the shortage.

Evidence that the faculty in aggregate have the necessary experience and research activity to sustain the program

The proposal indicates that the faculty have the necessary experience and research activity to sustain this program, although the number of those with such qualifications is at the minimum end for what is preferable for such a program. The proposed faculty members are very experienced in their field, as well as in teaching at the master's level. However, not all have been directly involved with doctoral programs. Of the six faculty members currently employed by the University, only three are currently tenured. Of the three remaining existing faculty, only two are on a tenure track (one is visiting), and only those two have served as committee members on dissertation committees (one has served for two dissertations, and the other has served for only one dissertation). The senior faculty of the College of Pharmacy and Pharmaceutical Sciences will conduct workshops and serve as mentors for the IPH faculty. The first of the workshops will take place in October 2004, and will be held on an annual basis with regular updates and progress reports on the doctoral program. In addition, in August of 2004, each faculty member who had not previously served as a doctoral preceptor was assigned a senior-level mentor. Finally, the School of Graduate Studies and Research has guidelines for faculty obtaining doctoral directive status, and all IPH faculty will be appointed consistent with those guidelines. The external consultant mentioned that the credentials of the existing faculty are solid, and their vitae show competence and accomplishment in their areas of expertise. She stated that there should be no issue with their ability to serve as core faculty for the program, but did recommend the additional hires already planned.

Evidence that, if appropriate, there is a commitment to hire additional faculty in later years, based on estimated enrollments

The proposal indicates a commitment to hire additional faculty in later years. This commitment was also expressed to DCU staff during the site visit by FAMU leadership.

Evidence that library volumes and serials are sufficient to initiate the program

The holdings of the library appear to be more than sufficient to meet the mission and needs of the program. The Samuel H. Coleman Library (the main library) and branch libraries provide traditional print and non-print resources, electronic access to full-text, bibliographic and abstracting databases, and numerous online and traditional services. The main library has holdings in the health sciences amounting to the following: 68,225 print volumes, 1,224 microforms, 44 non-print resources, more than 227 electronic books, 1,338 serial/periodical titles, and 89 full-text electronic journals. The Science Research Center Library (SRC) is a branch library providing additional support for health sciences in the amount of 17,331 periodical volumes, 23,340 books, and 198 audio/video holdings. Faculty and students have

access to the library resources (and have full access to the FAMU library catalog and library catalogs of the State of Florida University and Community College libraries on and off campus through the University Libraries' Web page – <http://www.famu.edu/library>), and librarians work with all academic units to ensure that the collection supports defined curricular goals. There are also library collections containing materials directly and indirectly (through interdisciplinary medical and science collections) that support the DrPH curriculum. Support services (including instruction, inter-library loan, loan renewal, course reserves, reference assistance, and distance learning services) are also accessible from the Web page. FAMU is also a depository for United States Government documents (totaling more than 1,495 full-text electronic titles and 134,382 print volume equivalents). Of that number, 1,514 are specific to medicine and science, and 12 are specific to health sciences. Listings of 89 online databases and 1,233 full-text serial titles in medicine and health science are provided. The listing of full-text serial titles is provided at <http://www.famu.edu/library/ejournal.html>. Funding for the securing of additional public health periodicals and other library support services will be available, particularly for Years 2-5 of the program. For instance, funds have been secured (\$125,000) from Research Careers at Minority Institutions (RCMI) to secure additional periodicals and other library support services. The external consultant mentioned that the public health databases within the school are impressive. She continued on to state that these will be particularly important to DrPH students who seek to use data within their studies and projects.

Evidence that classroom, teaching laboratory, research laboratory, office, and any other type of space that is necessary for the proposed program is sufficient to initiate the program

The proposal indicates that there are ample office, classroom, laboratory, computer facility, and library/information resources available to initiate the program. Offices are located on the first and second floors of the SRC. An additional office is available on the fifth floor. There are currently 18 offices (representing 1,848 square feet of space available for IPH faculty and staff). One of those offices is currently used as a resource center/library. With the exception of two offices, an entire wing (including two storage areas, copy room, classrooms/meeting rooms) on the SRC's second floor will now house the public health program (due primarily to a relocation of several pharmacy faculty). Classes are also held in other buildings (such as Dyson and the new pharmacy building which includes six 40-seat classrooms and a 200-seat classroom and 500-seat auditorium that will be available for seminars and doctoral research presentations). Dedicated study-carrels are available for graduate student use, and a break area is available for faculty and staff. There are also "state-of-the-art" computer facilities available to the proposed program, which will be discussed in more detail under the equipment criterion. The external consultant mentioned that the program should be able to operate without any substantial addition of space or labs, and that the program should not be resource intensive in terms of building and space.

Evidence that necessary and sufficient equipment to initiate the program is available

The proposal indicates that there are "state-of-the-art" computer facilities available to the proposed program, and that, as a result of their availability, each faculty member will have access to a wealth of databases and other software (and personal computers and printers will also

be provided to each new faculty member). The Geographic Information Systems (GIS) Data and Spatial Analysis Laboratory (GDSAL) serves as the principal academic computing support structure in the Institute of Public Health. The GDSAL provides hardware, software, and consultation support for research by students, faculty, and staff of FAMU. The Laboratory occupies 600 square feet, and is populated with 11 networked Dell Intel Pentium 3 computers, 5 HP Laserjet printers, 1 HP Deskjet printer, and 1 HP Design Jet plotter. The software available to the faculty, staff, and students includes several different types of productivity, research, statistical, and data management software. The laboratory also houses a variety of public use data sets to facilitate research. A 100-station computer laboratory is available to public health students in the new pharmacy building.

Evidence that, if appropriate, fellowships, scholarships, and graduate assistantships are sufficient to initiate the program

The proposal indicates that the FAMU MPH program receives approximately \$223,000 per year to support public health students. Due to increased enrollment, this amount has largely supported tuition and fees (plus fee waivers) for all public health students. During the past two years, approximately \$40,000 per year of expense dollars from the IPH recurrent account has been used to supplement the \$223,000 allotment for payment of tuition and fees. Due largely to the program's success in obtaining extramural funding, most full-time students have also obtained stipends to work with IPH on select projects. A total of \$212,109.84 in assistantship/fellowship dollars has been awarded to 39 students in the last 2.5 years. The University will extend its current funding of \$14,000 per year per PhD student (through Title III funding) for graduate assistantships in the DrPH program. Faculty members have been successful in getting extramural funding (more than \$10 million so far), and this is also sufficient to support doctoral students. In addition, the program intends to offer all DrPH students a tuition and fee waiver from a variety of sources. The proposal notes that there will be no adverse effect on the MPH program. The external consultant mentioned that the program has been very successful in obtaining student scholarships and fellowships, and noted that this is particularly important for its constituency who may not be able to afford student loans to enter public health (a recognized barrier for minority students).

Evidence that, if appropriate, clinical and internship sites have been arranged

The IPH has engaged in many projects that required field placements of public health students, and the proposal indicates that the program has been actively involved in community-based participatory research. The proposal includes a listing of 45 identified internships for the Institute of Public Health (which includes both the MPH and the proposed program) for the years 1999-2004.

Evidence that there is a need for more people to be educated in this program at this level

The MPH degree provides the basic core competencies needed as a public health practitioner, but is not considered sufficient in the preparation of public health leaders in a post 9/11 world. Existing data indicate that the current number of students formally trained in public health is inadequate to effectively address the magnitude of outbreaks and health disparities that could occur. In 2003, the Association of Schools of Public Health held a retreat for associate deans of schools of public health with a focus on the status of the DrPH degree. The group reviewed

survey data and discussed issues pertaining to enrollment, market value and demand, perception of academic rigor, interest of schools in future development of the degree program, educational/delivery formats, and comparison of degree requirements between the DrPH and the PhD in Public Health. It was determined that 58% of the 29 schools of public health offer a DrPH degree, that the number of DrPH graduates has increased significantly from an average of 20 graduates per year in 1920 to an average of 110 per year in 2002. Also, 76% of the group believes that there is a market demand for DrPH graduates, based on employers seeking practice-based public health graduates, the focus on community-based participatory research, and the significance of social determinants of health, health disparities, and need for culturally competent public health leaders.

Finally, while it is a different degree, it may be helpful to consider the enrollment, and graduation rates of the PhD in Public Health at USF. Since 1998, the PhD at USF has had a steady headcount enrollment of about 90 students, and numbers of degrees granted ranging from 6-13. Also, there is a substantial increase in applications at the graduate level ranging from 525 in 2000 to 747 in 2002 (figures obtained from the USF Office of Budget and Policy Analysis website). At least 27 FAMU students, at the time of the proposal, had indicated an intention to matriculate into the DrPH program upon its approval. This interest was very much echoed during the site visit while meeting with a group of current MPH students and alumni.

The external consultant stated that the program has recognized three major gaps in the preparedness of the public health workforce (preparing professionals for leadership in public health practice rather than careers in academia, targeting health disparities among the poor and disadvantaged, and the recognized lack of minority public health professionals and the paucity of doctoral level African-Americans in leadership positions in public health), and is proposing a program that should move to fill those gaps. She continued on to note that the proposal addresses a very pertinent issue for Florida. She stated that this is reflected in their meeting a need, as there is not currently a DrPH offered at a university in Florida, even though the DrPH is considered the degree for future leaders in public health. She also mentioned that since the state health department is located in Tallahassee, there would likely be an immediate draw from professionals seeking to advance their careers.

Evidence that the proposed program does not duplicate other SUS or independent college offerings or, otherwise, provides an adequate rationale for doing so

There are currently no DrPH programs in Florida. Additionally, the only southern states that have schools of public health offering the DrPH are Alabama (University of Alabama – Birmingham), North Carolina (University of North Carolina – Chapel Hill), South Carolina (University of South Carolina), and Louisiana (Tulane University). Implementation of the DrPH would also be a natural evolutionary step toward development of an accredited School of Public Health at FAMU, which would make it the first and only accredited School of Public Health at an HBCU.

Evidence of reasonable estimates of student headcount and FTE who will major in the proposed program, and commitment to achieve a diverse student body

The proposal indicates reasonable estimates of headcount and FTE, which are comparable with

or lower than peer institutions. The proposal indicates that the Year 5 student/faculty ratio should be no more than 3:1, which is satisfactory, particularly relative to accreditation standards. The signed EEO statement is included with the proposal, and incorporates steps for maintaining and increasing diversity.

Evidence of a budget for the program that is complete, reasonable, comparable to the budgets of similar programs at other SUS institutions, and reflective of the proposal's text

The budget provided is reasonable and reflects the narrative of the proposal. Current resources are available through recurrent legislative funds for the IPH and the MPH program, and the program has garnered significant extramural funding through securing research grants and contracts. The salaries for the new faculty are funded via the Office of Academic Affairs. Administrative personnel are needed to provide assistance with processing of doctoral student applications, assistantships, tuition, and fees. OPS funds will support the doctoral students, as will half of the expense dollars. The remainder of the expense dollars will be used for supplies, travel, and professional development opportunities for DrPH faculty. OCO monies will be used to purchase four computers. There is no anticipated new capital expenditure for instructional or research space during the first five years of program implementation. New dollars, as approved by the FAMU Board of Trustees, will be through sources such as Contracts and Grants, College of Pharmacy and Pharmaceutical Sciences, and the Office of Academic Affairs. As there are no other DrPH programs in Florida, a specific comparison cannot be drawn. However, in comparison to other SUS institutions for programs in Health Professions and Related Sciences (CIP 51), the Year 1 costs are comparable to the SUS average of \$25,717 (as calculated using the 2002-03 Expenditure Analysis), and the Year 5 costs are much lower. The external consultant noted that the program has managed to build a substantial program on a relatively small budget, and that their successes in obtaining extramural funding are a major factor. The consultant continued on to state that the substantial research funding is important not only for contribution to the budget, but the science it generates is an essential factor for any doctoral program. She encouraged the program to have plans in place for sustaining the program should a decrease in extramural support occur.

Evidence that, in the event that resources within the institution are redirected to support the new program, such a redirection will not have a negative impact on undergraduate education

It is not anticipated that the program will negatively impact existing undergraduate education. As indicated in the original proposal, there will be a shift in effort for current faculty teaching in the MPH program from 100% to 50% to instruct in both programs. However, this will be offset by 50% of new hires who will also teach in the MPH program. The proposal notes positive impacts on undergraduate education in such things as an increased level of applied community-based participatory research, attraction of additional quality faculty and competitive students to the program, and eligibility for earmarked funding for doctoral students. Also, the implementation of the DrPH is a critical step in development of an accredited school of public health.

Evidence that the academic unit(s) associated with this new degree have been productive in teaching, research, and service

The proposal provides sufficient evidence of productivity to indicate that the academic unit associated with the proposed degree have been productive in teaching, research, and service. The program achieved full, maximum accreditation from an initial review (2000-2005), which is rare in the discipline. In Spring 2003, the IPH graduated its sixth class of students, and since the graduation of its first MPH class in Spring 1997, the program has graduated a total of 86 students (with the total after Spring 2004 graduation being over 100). The public health faculty are involved in a number of research activities at the local, state, and federal levels, and have been proactive in identifying funding for research in public health disciplines, involving community-based programs. IPH has secured more than \$10 million (including dedicated funding for outlying and previous years) of extramural research project funding since Fall 1997. The Institute houses the statewide Florida Birth Defects Registry (FBDR). It has also partnered with the March of Dimes in an educational folic acid campaign, and the Centers for Disease Control and the Association of School of Public Health in the CDC/ASPH Institute for HIV Prevention Leadership (also providing training for community-based organizations in HIV/AIDS education).