

College of Public Health and Health Professions Office of the Dean 101 S. Newell Drive PO Box 100185 Gainesville, FL 32611-0185 352-273-6379 352-273-6199 Fax www.phhp.ufl.edu

<u>MEMORANDUM</u>

- TO: Angel Kwolek-Folland, PhD Associate Provost for Academic Affairs
- FROM: Stephanie Hanson, PhD Executive Associate Dean

DATE: December 10, 2010

SUBJECT: Response to BOG

We are happy to address the questions the Board of Governors raised with the University of Florida regarding the proposed Ph.D. program in Public Health. You will find three documents attached in response to the concerns regarding duplication and communication with the other doctoral programs in the State of Florida. First, we have provided two letters of support, one from Dr. Donna Petersen, Dean of the College of Public Health at the University of South Florida and the other from Dr. Michele Ciccazzo, Interim Dean of the Robert Stempel College of Public Health and Social Work at Florida International University. These colleges offer the only other Ph.D. programs in the state and as such, were the two colleges with which we corresponded during the development of our public health Ph.D. proposal. The third university, about which you inquired, FAMU, is unique in that it offers a practice degree with a dissertation component. Because it offers the Doctor of Public Health, the practice degree, we did not view its curriculum as significantly overlapping with the UF PhD program proposed, which is the reason the program was not included in our original proposal. Our third attachment provides a summary of the differences between the FAMU program and our proposed PhD program, consistent with the different types of degree offered. In the remainder of the letter we will attempt to provide additional detail regarding duplication concerns as well as address the other questions raised by the Board of Governors.

Enrollment and Duplication. In their letters of support, both Dean Petersen and Dean Ciccazzo reference the fact that their doctoral programs can not address the expanding public health work force needs because the doctoral programs are small. Both deans indicate they expect no impact of implementation of the UF PhD program on their program enrollments. They do not

The Foundation for The Gator Nation An Equal Opportunity Institution see our program as competitive, but rather complementary. We share this complementary view. We believe that the practice degree targets a different population of students - those focused on application of advanced practice skills in addressing public health problems. The PhD program focuses on research and teaching. Although the letter from FAMU dated December 6, 2010 indicates the social and behavioral sciences concentration is similar in scope and course offerings, an examination of the curricula suggests minimal overlap in the social and behavioral sciences concentration. Granted all PhD programs have a dissertation requirement, but dissertations are highly individualized and do not create significant overlap across students. Similarly, all doctoral programs in public health, whether PhD or DrPH, must demonstrate core competencies for accreditation purposes at the college level, a goal for which we assume FAMU is positioning itself. That is where the universal similarities end, however. As a complement to the document in which Dr. Peoples-Sheps summarizes the differences between the FAMU program and the proposed UF PhD program, we offer comments below to suggest that the overlap in the specific social behavioral sciences concentration is minimal if one scrutinizes the concentration itself.

The PhD at UF requires 36 credits of social and behavioral science (SBS) coursework. This includes 5 prescriptive courses totaling 12 credits. These 12 credits focus on methodological evaluation, research methods and the development of methodological tools to be used in research. The intent of these courses is to ensure students have strong methodological design skills for research project development. The remaining 24 credits in our proposed UF SBS concentration are highly individualized. They include the requirement for the student to learn important theoretical approaches as well as an in depth area of specialization that he or she can then integrate into dissertation research.

At FAMU, the courses in the SBS concentration for the DrPH are all prescribed. For the 72credit hour curriculum, courses specific to SBS and not shared with epidemiology (taken from their web site) include:

- *Planning and Evaluation of Health Education* (analysis of planning and administration of health education and administrative programs)
- *Community Organizing and Public Health* (included in their MPH program; introduces student to community organizing from an historical, healthcare, and health education perspective....gain knowledge about community organizing, leadership development, building organizations, grassroots fundraising, prejudice and power, accountability, strategy, tactics, holding actions...)
- Advanced Health Promotion Evaluation (no description available)
- *Health Education Seminar Series* (vehicle for students to present and discuss conference papers, current research, and research proposals)
- Planning and Administration of Health Education and Promotional Programs (analysis of planning and administration of health education and administrative programs in a variety of public health and health care settings, such as schools, communities, and worksites...)

• *Advanced Theory in Health Education* (introduces students to models used for behavioral science and the development of health education programs...to develop behavior change programs).

The descriptions of these courses suggest the emphasis of the social and behavioral sciences curriculum at FAMU is on learning applied skills for the practice setting, a significantly different focus than the UF curriculum and consistent with typical differences in DrPH versus PhD public health program curricula. Therefore, we do not believe approval of the UF PhD will significantly impact FAMU's enrollment. In addition, the primary feeder for our PhD program is our internal UF MPH program, as noted by Dr. Peoples Sheps, again mitigating the likely impact of the proposed UF PhD program on the FAMU DrPH program. Finally, it is important to comment that the proposed environmental and global health concentration is not offered at FAMU, either through a PhD or DrPH program.

Collaboration. We are in the process of planning or have already developed active collaborations with other SUS colleges that have the potential to benefit public health doctoral education. Notable examples are listed below.

- An LBR was jointly developed with USF and FIU and submitted in 2007 and 2008. It was recycled as a congressional budget request in 2008. The purpose was to address needs in the state for training of the public health workforce. It was not funded and set aside given the economic situation. However, the discussions contributed to ideas for an Annual Public Health Conference and a collaborative spirit regarding continuing education. As noted by Dr. Peoples-Sheps, FAMU is interested in joining this partnership, and last month, Dr. Peoples-Sheps extended an invitation to FAMU (Cynthia Harris) to join the planning group.
- UF has collaborated with USF (and UM) on the successful National Children's Study grant.
- UF collaborates with the USF Center for Inclusive Communities, a partner of the CECfunded Florida Office on Disability and Health. Through this partnership two faculty (Nita Benito and Bobby Vaughn) are funded to work with UF faculty on improved disability training for state law enforcement cadets and in-service.
- As part of the Florida Office on Disability and Health, UF and USF faculty, along with others on a multi-institution team, recently produced the following peer-reviewed paper. The lead author is a UF PhD student in epidemiology.
 - Cannell MB, Brumback BA, Bouldin ED, Hess J, Wood DL, Sloyer PJ, Reiss JG, Andresen EM. Age group differences in health care access for people with disabilities: Are young adults at increased risk? Results from the 2007 Florida Behavioral Risk Factor Surveillance System. J Adolescent Health, 2011: In press-

The team is: Janet Hess, MPH, CHES at the University of South Florida; David Wood, MD, MPH at the University of Florida in Jacksonville; Phyllis Sloyer, RN, PhD, FAHM, FAAP at Children's Medical Services; and John Reiss, PhD at the University of Florida, who are members of the Governor's Health Care Transition Services Task Force for Youth and Young Adults with Disabilities.

- The deans of the colleges of public health at UF, USF, and FIU meet at least twice each year to discuss mutual interests and opportunities for collaboration. One outcome of these meetings is that we are in the process of organizing a day-long meeting of the department chairs from the three colleges in the spring in Gainesville. Its primary intent is to facilitate potential collaborations across the schools.
- Through the Academic Committee of Florida Public Health Association, Dr. Peoples-Sheps has collaborated with representatives of all public health schools and programs in Florida on an assessment of educational opportunities in the state.
- UF faculty from Environmental and Global Health participate in the recently funded collaborative clustering grant with USF on detection, prevention, and treatment of vector borne diseases.

FAMU expressed concerns regarding geographic proximity. Our current collaborative activities with USF suggest that if anything, proximity enhances rather than lessens opportunities to work together to the benefit of our students. If FAMU were to offer a PhD program in public health, we would hope to build successful collaborations with FAMU faculty, as well.

Budget Changes and Library Resources. We have attached the revised budget documents for Tables 2, 3, and 4. The .02 error you noted in Table 4 was due to a rounding difference. When we originally calculated the faculty effort, we did so out to three digits (thousands' place) past the decimal. We then converted these values to two decimal place values. Because we did not re-total the values, the .02 difference was created by rounding error. We have corrected this in Table 4, which now shows year 1 total person year FTE effort as 1.15 and year 5 total person year FTE effort as 1.45. In Table 2, the cost per FTE in year one is \$29,569 compared to the cost per FTE in year five of \$11,558. In Table 3, we have added the descriptive account labels requested.

We did not include the library resources in the budget because our understanding of the \$40,000 - based on both the letter provided by Dr. Russell and a conversation with the PHHP library liaison - was that the library resources were adequate for the proposed PhD program. The \$40,000 was being recommended for enhancements to those already adequate materials the library provides. As Dr. Russell stated in her letter, "with additional funding, the libraries could enhance these proposed degree programs by adding access".... Because of the current fiscally conservative environment, we opted not to include dollars for enhancements in the proposal. That said, our intention would be to evaluate the adequacy of journals, books, and other relevant materials as the program grows. If we added the \$40,000, the year 5 per FTE cost would be \$12,879.

Events Leading to Implementation. Below we provide a revised timetable for implementing the PhD program, as requested.

Date	Implementation Activity
	Approval Process
Dec. 11, 2009	1. Approved by College; proposal submitted to Graduate Council for
	review and approval
Feb. 18, 2010	2. Approved by UF Graduate Council
April 26, 2010	3. Approved by UF Faculty Senate
June 11, 2010	4. Approved by the UF Board of Trustees
January, 2011	5. Anticipated review by the Board of Governors
	Preparation Process
February, 2010	1. Sent letter to current and former MPH students in the
	Environmental Health and SBS concentrations to respond to inquiries
	related to the development of a PhD program and its possible
	timeframe, including Senate approval and remaining approval
	process; outlined admissions procedures to be used if program is
	approved
March, 2010	2. Organized first year schedule of classes
March, 2010	3. Drafted student applicant rating form and related student
	selection criteria material
NovDec., 2010	4. Begin creating a student handbook and keep students making
	inquiries apprised of progression of review of PhD proposal
Beginning late	5. Invite applications for admission and begin accepting applications
January, 2011	from students, contingent upon favorable decision by the Board of
	Governors
Spring, 2011	6. Review applicants and select first student cohort
Late Spring,	7. Notify students of acceptance status
2011	
Summer, 2011	8. Admit first cohort

Finally, we echo Dean Petersen's and Dean Ciccazzo's statements that, because doctoral programs are small and the need is great, additional PhD programs in public health help address public health's work force challenges. If FAMU were interested in proposing a PhD program in public health, we would be supportive of their efforts. In addition, if the PhD in

Public Health were approved at FAMU, we would seek collaborations with FAMU, similar to the types of productive initiatives we have shared with USF and FIU.

We hope the documents and responses provided satisfy the Board of Governors' concerns and questions regarding the Public Health PhD proposal. Please let us know if you require additional information or clarification.

Comparison of FAMU Doctor of Public Health and Proposed UF PhD in Public Health

On November 7, 2010, Dr. Cynthia Harris, Professor and Director of the Florida A&M Institute of Public Health and Dr. Mary Peoples-Sheps, Senior Associate Dean for Public Health in PHHP at UF met to discuss the two programs, specifically areas of overlap, recruitment issues and potential effects of the UF program on FAMU enrollment, and opportunities for collaboration.

Overlap and duplication: The table below summarizes the differences between the DrPH program at FAMU and the proposed PhD in Public Health program at UF. On these characteristics, the two programs complement each other much more than they duplicate. The DrPH is a 72 credit program with a strong emphasis on public health practice. While the program includes courses on research methods, they are balanced with courses in other program areas, and many of them appear to contribute to the core competencies for DrPH programs released by the Association of Schools of Public Health (ASPH) in 2009. There are 54 competencies covering the following seven domains of skills: advocacy, communication, community/cultural orientation, critical analysis, leadership, management, and professionalism/ethics. While the competencies are not intended to be prescriptive, they reflect a clear recognition in the public health field that DrPH programs educate students for different professional careers than PhD programs. These differences in program purpose, curriculum, and expected employers are evident in our comparison of the FAMU and UF programs.

Characteristic	DrPH at FAMU	PhD at UF
Credit hours	54 or 72 credit hours	90 credit hours
Specializations/con	Behavioral Science	Social and Behavioral Science
centrations	Epidemiology	Environmental and Global Health
Purpose	Conduction or supervision of	Independent research;
	applied research;	Graduate level teaching
	Integration of new knowledge and	
	techniques into community and/or	
	public health practice	
Curriculum	Breadth across major aspects of	Depth in research methods with
	public health, consistent with DrPH	application to an area of
	Core Competency Model	specialization within the
		concentration
Culminating	Dissertation (no descriptive	Dissertation consistent with UF
experience	information available)	Graduate School requirements
Expected	Community or public health	Research universities
employers	programs at local, state, national or	Governmental research agencies
	international levels in	Research firms
	governmental, private, or voluntary	
	agencies, as well as colleges and	
	universities	

Program Characteristics DrPH at FAMU and Proposed PhD at UF

With regard to specializations, FAMU and UF overlap on behavioral science, however, since the training purposes of the two programs are quite different, this overlap should not affect either program. UF's second concentration addresses a major need in Public Health - researchers in environmental health with a global focus. These are the people who conduct research on the effects of infectious diseases and chemical toxicants on human health. Concerns about bioterrorism, chemical attacks and climate change have highlighted the need for researchers in this important area, and the US Bureau of Health Professions has identified graduate education in environmental health as an area of need and, thus, eligible for federal student traineeship funds. The FAMU DrPH program does not specialize in environmental health.

Recruitment Issues: The UF PhD in Public Health program would recruit from UF undergraduate students and those who have completed the MPH degree at UF. The large body of well-qualified applicants on the UF campus and significant differences in the curricula and career opportunities across the two programs suggest strongly that the proposed UF program would not affect FAMU DrPH enrollment at all.

Collaboration: Dr. Harris and Dr. Peoples-Sheps discussed opportunities for collaboration in regard to the doctoral programs as well as other areas. Dr. Harris expressed interest in co-sponsoring the annual public health conference at UF. A meeting of the social behavioral faculty in each college is being planned for early spring to consider other opportunities for collaboration. Options include sharing courses and short-term faculty assignments.



November 22, 2010

Michael G. Perri, PhD Dean and Professor College of Public Health and Health professions University of Florida PO Box 100185 Gainesville, FL 32610-0185

Dear Dean Perri:

I am pleased to write in support of the UF College of Public Health and Health Professions proposal for a PhD degree in Public Health.

The need for Public Health professionals to fill positions being vacated by retirees in Florida has been highlighted in recent reports by the American Public Health Association and the Association of Schools of Public Health. Individuals trained at the doctoral level are qualified to fill highly specialized positions in academia, research firms, and governmental agencies at all levels. Their unique skills in specific research areas are needed to understand the determinants of health conditions and health behaviors, and to develop and evaluate interventions to modify the effects of these factors.

Education at the doctoral level requires a great deal of faculty time and resources. As a result, these PhD programs tend to graduate only a few students each year. The Robert Stempel College of Public Health and Social Work (RSCPHSW) at FIU offers a PhD in Public Health, but we are not able to meet the full level of need in Florida.

I have reviewed the UF proposal, which includes concentrations in social / behavioral sciences and environmental/global health. The RSCPHSW offers a PhD in Public Health with concentrations that overlap these areas, but do not fully duplicate them. Moreover, the need for well-trained graduates is high and this additional program will help the State address Public Health workforce needs. We have many well-qualified applicants each year; from this pool, we can accept only a small number. The UF program will provide another option for applicants, although it is clear that the large number of UF bachelor's degree graduates is likely to fill the PhD program positions available at UF. I do not expect UF's program to affect enrollments at FIU in a negative way.

Faculty in our colleges have collaborated on academic Public Health matters for several years. We look forward to opportunities to collaborate further on our public health PhD programs.

Sincerely,

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Michele Ciccazzo, Interim Dean Robert Stempel College of Public Health and Social Work Robert Stempel College of Public Health and Social Work Office of the Dean

Dietetics & Nutrition • Epidemiology & Biostatistics • Environmental & Occupational Health • Health Policy & Management Health Promotion & Disease Prevention • School of Social Work

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November 18, 2010

Michael G. Perri, PhD Dean and Professor College of Public Health and Health professions University of Florida PO Box 100185 Gainesville, FL 32610-0185

Dear Dean Perri:

As Dean of the first accredited college of public health in the State of Florida, I am honored to support your proposal to create a PhD in Public Health at the UF College of Public Health and Health Professions. As you know, we offer the PhD in public health with multiple concentrations and have found it works well to prepare leaders and scholars for the challenges of public health work.

We know we remain in critical need of highly skilled public health professionals to fill positions in the growing number of schools of public health and, more important, in the state of Florida to fill leadership positions that are being vacated by retirees. This is a national trend but is particularly acute in Florida. Further, Florida's interest in being a destination point for start-up and established research companies demands that we continue to produce highly trained professionals in specific research areas particular to the health industry. Schools of public health are uniquely positioned to prepare such individuals with skills that range from the molecular to the global.

Education at the doctoral level requires a great deal of faculty time and resources. As a result, these PhD programs tend to graduate only a few students each year. We are grateful to you for expanding your doctoral degree options as we at USF cannot meet the needs alone. We receive applications from many highly qualified applicants each year and have to turn many away. The UF program will provide another option for these students. I fully believe even with three accredited schools in the state, we are far from filling all the needs in these areas.

Our colleges have collaborated on academic and continuing education programs in Public Health for several years, and we meet regularly in support of these activities. We look forward to opportunities to collaborate further on our public health PhD programs.

Sincerely. Donna J. Petersen, ScD, MHS Dean

OFFICE OF THE DEAN • COLLEGE OF PUBLIC HEALTH University of South Florida • 13201 Bruce B. Downs Boulevard, MDC56 • Tampa, FL 33612-3805 (813) 974-6603 • Fax (813) 974-6616 • www.publichealth.usf.edu

					TABL						
					STS ANI) FUNDI	NG SOUR	CES			
			Yea	510 / 352/2					Year 5		
Instruction &		F	unding Source	ce				Funding	g Source		
Research Costs (non- cumulative)	Reallocated Base* (E&G)	Enrollment Growth (E&G)	Other New Recurring (E&G)	New Non- Recurring (E&G)	Contracts & Grants (C&G)	Subtotal E&G and C&G	Continuing Base** (E&G)	New Enrollment Growth (E&G)	Other*** (E&G)	Contracts & Grants (C&G)	Subto E&G a C&C
Faculty Salaries and Benefits	0	135,716	0	0	4,473	\$140,189	200,217		0	5,034	\$205,2
A & P Salaries and Benefits	0	0	0	0	0	\$0	0	0	0	0	\$0
USPS Salaries and Benefits	0	0	0	0	0	\$0	11,646	akarah (a	0	0	\$11,64
Other Personnel Services	0	0	0	0	0	\$0	0	0	0	0	\$0
Assistantships & Fellowships	0	0	0	0	0	\$0	50,000		0	0	\$50,00
Library	0	0	0	0	0	\$0	0	0	0	0	\$0
Expenses	0	300	0	0	0	\$300	500		0	0	\$500
Operating Capital Outlay	0	0	0	0	0	\$0	0	0	0	0	\$0
Special Categories	0	0	0	0	0	\$0	0	0	0	0	\$0
Total Costs	\$0	\$136,016	\$0	\$0	\$4,473	\$140,489	\$262,363	\$0	\$0	\$5,034	\$267,3
*Identify reallocat **Includes recurri ***Identify if non Faculty and Staf	ng E&G fund i-recurring.		allocated bas	e," "enrollmo	ent growth,"		ew recurring" Cost per St		1-4 that con	tinue into Ye	ar 5.
Total Positions		Year 1	Year 5			Carculateu		Yea	r 1	Yea	ur 5
Faculty		1.15	1.45			Total E&	G Funding	\$136	,016	\$262	,363
A & P		0	0				udent FTE	4.	6	22	.7
USPS		0	3			E&G Cos	t per FTE	\$29,	560	\$11.	550

TABLE 3 ANTICIPATED REALLOCATION OF EDUCATION & GENERAL FUNDS				
Program and/or E&G account from which current funds will be reallocated during Year 1	Base before reallocation	Amount to be reallocated	Base after reallocation	
33040000-101-1100 State appropriation, SBS dept.	505,947	77,358	\$428,589	
33160000-101-1100 State appropriation, EGH dept.	384,549	58,358	\$326,191	
	0	0		
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Totals	\$890,496	\$135,716	\$754,780	

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Facul ty Code	Faculty Name or "New Hire" Highest Degree Held Academic Discipline or Speciality	Rank	Contract Status	Initial Date for Participation in Program	Mos. Contract Year 1	FTE Year 1	% Effort for Prg. Year 1	PY Year 1	Mos. Contract Year 5	FTE Year 5	% Effort for Prg. Year 5	PY Year 5
A	Barbara Curbow, Ph.D.	Professor	Tenure	Fall 2010	12	1.00	0.14	0.14	12	1.00	0.14	0.1
	Social & Behavioral Sciences		Earning		Contraction of the Second			ter i cher i dei estat postere	earling himsen in growt	1996 (1997) - Anna (1997)		
A	Giselle Mann, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.10	0.10	12	1.00	0.10	0.1
	Social & Behavioral Sciences	Professor	Earning									
A	Dennis Thombs,Ph.D	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0,0
	Social & Behavioral Sciences	Professor									· · · · · · · · · · · · · · · · · · ·	
Α	Tracey Barnett, Ph.D.	Assistant	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Social & Behavioral Sciences	Professor	Earning					2.1				
D	Bridgett Rahim-Williams, Ph.D	Assistant	MYA	Fall 2010	12	1.00	0.05	0.05	12	1.00	0.05	0.0
	Social & Behavioral Sciences	Professor			Contemporture da la constitución de							
А	Mary Ellen Young, Ph.D.	Associate	MYA	Fall 2010	12	1.00	0.11	0.11	12	1.00	0.11	0.11
	Social & Behavioral Sciences	Professor	i e construction de la construcción		1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.							
A	Jamie Pomeranz, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.09	0.09	12	1.00	0.09	0.09
	Social & Behavioral Sciences	Professor									0.07	0.07
A	TBD	Associate	Tenure	Fall 2011	12	1,00	0.00	-	12	1.00	0.10	0.10
	Social & Behavioral Sciences	Professor	Earning									
A	Natalie Freeman, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning				0.00	0.00		1.00	0.00	0.00
A	Andrew Kane, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning		in the second second	1.00	0.00	0.00	• •	1.00	0.00	0.00
A	Vito Ilacqua, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.05	0.05	12	1.00	0.05	0.05
	Environmental & Global Health	Professor				1.00	0.00	0.00	12	1.00	0.05	0.05
A	Bernard Okech, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor						0,00		1.00	0.00	0.00
A	Traci Krueger, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.03	0.03	12	1.00	0.03	0.03
	Environmental & Global Health	Professor	1			1.00	0.00	0.00		1.00	0.05	0.05
A	David Barber, Ph.D.	Assistant	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning					0.00		1.00	0.00	0.00
A	Stephen Roberts, Ph.D.	Professor	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health						0.00	0.00	12	1.00	0.00	0.00
A	Brian Mayer, Ph.D.	Assistant	Tenure	Fall 2010	9	0.75	0.03	0.02	9	0.75	0.03	0.02
	Environmental & Global Health	Professor	Earning	1 411 2010		0.75	0.05	0.02		0.75	0.05	0.02
A	TBD	Associate	Tenure	Fall 2012	12	1.00	0.00	-	12	1.00	0.10	0.10
	Environmental & Global Health	Professor	Earning			1.00	0.00		12	1.00	0.10	0.10
A	TBD	Associate	Tenure	Fall 2012	12	1,00	0.00	-	12	1.00	0.10	0.10
	Environmental & Global Health	Professor	Earning			1100	0.00		12	1,00	0.10	0.10
	Total Person-Years (PY)							1.15				1.45
	Total Person-Tears (FT)							1.15				1.45
Faculty			r					DV V	orkload b	Dudaat	Classeifia	4:0-
Code			Source of	Funding				Year 1	rorkioau by	Budget		Year 5
2010000000000000	Exisitng faculty on a regular line			lucation & Gen	eral Revenu	e		1.10				1.40
	New faculty to be hired on a vacant	line		lucation & Gen				-				1.40
20120	New faculty to be hired on a new li			ation & General		-		-				-
	Existing faculty hired on contracts/		Contracts/					0.05				0.05
	New faculty to be hired on contract		Contracts/					-				-
		0	1		Overall To	Anla fr	Ver 1	1.1.2			Vec. 7	1 10
					overall 10	nais for	Year 1	1.15			Year 5	1.45



Florida Agricultural and Mechanical University

TALLAHASSEE, FLORIDA 32307

COLLEGE OF PHARMACY AND PHARMACEUTICAL SCIENCES

December 6, 2010

Dr. Richard P. Stevens, Director Academic and Student Affairs State University System of Florida Board of Governors 325 West Gaines Street, Suite 1614 Tallahassee, Florida 32399-0400

Dear Dr. Stevens:

Attached, please find the College of Pharmacy and Pharmaceutical Sciences response to the proposed PhD Program in Public Health by the University of Florida.

We offer how this proposal will impact the public health programs at Florida A&M University (FAMU) and if approval is granted, it must be with the assurances that FAMU will be permitted to develop such PhD programs in Public Health in the future. The PhD in Public Health is already in the College's Strategic Plan for 2009-2014.

If additional information is needed, please contact me at 850-599-3301.

Sincerely,

Henry Lewis III Dean and Professor

HLIII:vy

Attachment

c: Dr. Dorothy J. Minear, BOG Dr. Cynthia Hughes-Harris, FAMU Dr. Gita Pitter, FAMU Dr. Mary Peoples-Sheps, UF Dr. Michael Perri, UF Dr. Cynthia M. Harris, FAMU Dr. Marlon Honeywell, FAMU TELEPHONE: (850) 599-3301 FAX: (850) 599-3347

Florida A&M University College of Pharmacy and Pharmaceutical Sciences

Response to UF Proposal to the BOG (PhD in Public Health)

After review of the proposal (PhD in Public Health) of the University of Florida (UF), previously submitted to the State Board of Governors, we have the following comments, concerns and recommendations:

<u>Comments</u>

In March of 2004, the Florida A&M University Board of Trustees approved the Doctor of Public Health degree (DrPH). Subsequently, this degree was also approved by the Board of Governors (BOG) in October of 2004. Prior to this time, there were no doctoral public health degree programs in North Florida and FAMU was the first to offer the DrPH degree in the state. This approval was based on the following: (a) need for doctoral public health practitioners in the state of Florida; (2) assessment and demand for doctoral public health education by state public health workers and demand by current master level (MPH) students at FAMU and in North Florida; (3) historical focus on the public health needs of the poor and underserved and magnitude of health disparities in the state of Florida; and (4) quality of the current public health program. FAMU was the **first** public health program to be fully accredited by the Council on Education for Public Health in North Florida (2000) and was re-accredited for the maximum tenure during both accreditation cycles. The current and inaugural director, Dr. Cynthia M. Harris, also served on the Council on Education for Public Health.

The FAMU DrPH Program currently offers doctoral education in two areas of specialization: (1) behavioral sciences and health education; and (2) epidemiology and biostatistics. Additional areas in environmental and occupational health and health policy and management are currently in the program strategic plan and will be offered within the next five years. In addition, a **PhD in Public Health degree program** is also in the College Strategic Plan (College of Pharmacy and Pharmaceutical Sciences).

<u>Concerns</u>

After review of the UF proposal , we have the following concerns: (1) The social and behavioral sciences concentration area is very similar in scope, course offerings, and research and dissertation requirements to the FAMU DrPH degree concentration in behavioral sciences and health education; (2) Given the similarities, the offering of this particular specialization, by UF, and the close geographic proximity of our institutions (contrary to those course offerings and degree programs offered by South Florida institutions, University of South Florida (USF) and Florida International University (FIU)), the offering of this concentration by UF may adversely impact the FAMU doctoral program. UF has also expressed plans to increase the number of concentration offerings over time; and (3) Despite the close proximity of FAMU to UF, there is no mention of the FAMU doctoral program or the potential for collaboration with the FAMU public health program within the context of the UF proposal, contrary to the expressed desire to collaborate with public health programs at USF and FIU, in the proposal narrative.

Recommendations

- (1) Given the similarities, we recommend that UF re-consider offering the social and behavioral sciences concentration area in its proposed PhD in Public Health.
- (2) If the PhD in Public Health is approved, as proposed, we respectfully request assurances that UF's approval will not preclude FAMU from offering the PhD in Public Health, particularly in the areas of health policy and management, occupational health, and public health genomics. Although UF offers the PhD in health services administration and epidemiology and biostatistics, these PhD degree programs are also offered at USF and FIU. Given FAMU's historical mission and the offering of concentration areas also at the masters level (MPH) in epidemiology and biostatistics, behavioral sciences and health education, health policy and management, and environmental and occupational health, FAMU should be allowed to offer the PhD in these areas.

JOHNS HOPKINS

Bloomberg School of Public Health

Department of Health, Behavior and Society 624 N. Broadway, 7th Floor Baltimore, MD 21205-1996 410-955-2312 / Fax 410-955-7241

August 11, 2010

Joanne J. Foss, PhD., OTR

Associate Dean for Student and Academic Affairs College of Public Health and Health Professions Program Director, Masters in Occupational Therapy Department of Occupational Therapy University of Florida at Gainesville

Dear Dr. Foss,

I have reviewed the proposal to develop a PhD in Public Health within the College of Public Health and Health Professions and strongly support the addition of doctoral studies as clearly outlined in the document. The current leadership and faculty appear qualified to successfully undertake this effort. Please note the few comments that I have made with respect to the proposal by section:

- *I.A.* The formation of interdisciplinary and interdepartmental collaborations is critically important for creating courses and other training opportunities for doctoral students who typically want for more depth in particular areas of study.
- *I.A.* In addition to the places and types of employment listed where graduating students may work, I would include policy/advocacy organizations. We're finding a growing interest and desire from our students for this type of training and employment setting. Granted this may be a reflection of Hopkins' proximity to Washington, DC, but for environmental health graduates these settings may have greater appeal.
- I.A. (Note there are two I.A.'s in the document I think the second is supposed to be I.B.) The proposal is consistent with the description set forth in the University's strategic plan highlighting public health as one of its targeted areas for growth given the shortage in the public health profession workforce. Also, duly noted is the fact that only **three** accredited colleges of public health currently exist in the state with similar programs to UF's, providing further evidence that overlap in recruitment and training is unlikely and more importantly, that the program has the potential to fill this void.
- In reviewing the planning process outlined in the table in section V.C. it is clear that a great deal of thinking, time and effort has gone into developing this proposal. I am pointing this out because I believe it shows the strength of the leadership team and the commitment to expanding and advancing the educational opportunities within public health. Also, I believe it is fair to say that given the extent of the planning effort it is likely that few details will be missed or go unnoticed when actual implementation occurs.



- In section VII.B., there is a description of the admission requirements and I noticed that GRE nor TOFEL scores are not listed. Do you have a specific range that you will consider for acceptance and if so, is it worth mentioning in the proposal? Additionally, (and I may have missed this) will the initial program be only offered to full-time students or also, offered to part-time or special students? Will requirements be different for these different groups?
- In reviewing the list in VII.C., I assume these courses are already being offered and that there is (or will be) sufficient teaching faculty coverage. If not, it would be useful to label which courses exists and which, if any, will have to be created. I raise this issue, in part, because of the current economic situation in many institutions making it harder to hire faculty, especially on the tenure track. As such, teaching and advising responsibilities are being handled by fewer faculty than should be required for the scope of responsibility. This is a point of caution (and a quality assurance check for at least the minimum amount of resources) as the college moves forward in growing its doctoral program.
- Another concern in reviewing the table is to make certain that courses, which aren't obvious from the listing, include research and practice opportunities, some of which should occur outside of the walls of the university. There is reference to "applied" work but it is unclear in what form this would happen. The potential benefit to interfacing with organizations outside the university is reciprocal; it demonstrates the college's commitment to the needs of the broader community as well as the community showing its support and interest in the training of UF's students.
- Two editorial observations:
 - 1. On p. 4 under section C., correct the spelling of "institutions" and also, "significant."
 - 2. On p. 11 under section E. (PHC 6313), correct the spelling of "Environmental."

Please feel free to contact me at <u>ibowie@jhsph.edu</u> or call 410-614-6119 if you have questions or need clarification on any of the items reported here. I wish you the very best of success.

Sincerely.

Janice V. Bowie, PhD, MPH Associate Professor

Florida Board of Governors

Request to Offer a New Degree Program

<u>University of Florida</u> University Submitting Proposal Fall 2010 Proposed Implementation Date

College of Public Health & Health Professions Name of College or School

<u>PhD in Public Health</u> Academic Specialty or Field Name of Department(s)

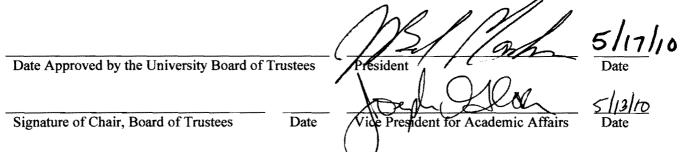
Departments of Behavioral Science and

Community Health and Environmental and

(CIP 51.2201, Public Health) Complete Name of Degree (Include Proposed CIP Code)

Global Health

The submission of this proposal constitutes a commitment by the university that, if the proposal is approved, the necessary financial resources and the criteria for establishing new programs have been met prior to the initiation of the program.



Provide headcount (HC) and full-time equivalent (FTE) student estimates of majors for Years 1 through 5. HC and FTE estimates should be identical to those in Table 1. Indicate the program costs for the first and the fifth years of implementation as shown in the appropriate columns in Table 2. Calculate an Educational and General (E&G) cost per FTE for Years 1 and 5 (Total E&G divided by FTE).

Implementation	Projected Student		Proje	ected Program C	Costs		
Timeframe	Enrollment (F	rom Table 1)	(From Table 2)				
	НС	FTE	Total E&G Funding	Contract & Grants Funding	E&G Cost per FTE		
Year 1	6	4.6	136,016	4473	29,569		
Year 2	14	10.6					
Year 3	22	15.8					
Year 4	29	19.9					
Year 5	32	22.7	262,363	5034	11,558		

Note: This outline and the questions pertaining to each section <u>must be reproduced</u> within the body of the proposal to ensure that all sections have been satisfactorily addressed.

INTRODUCTION

I. Program Description and Relationship to System-Level Goals

A. Briefly describe within a few paragraphs the degree program under consideration, including (a) level; (b) emphases, including concentrations, tracks, or specializations; (c) total number of credit hours; and (d) overall purpose, including examples of employment or education opportunities that may be available to program graduates.

The proposed PhD in Public Health, offered by the College of Public Health and Health Professions, will require a minimum of 90 post-baccalaureate credit hours. These credits will include core public health coursework (15 credits); quantitative methods and statistics (12 credits); professional issues (6 credits); a concentration area (36 credits); supervised research (3 credits); supervised teaching (3 credits); and dissertation research (15 credits). Initial areas of concentration include environmental and global health and social and behavioral sciences. However, it is expected concentrations will be added over time and that students will also be able to specialize within each concentration. Drawing upon the existing strengths of UF to develop areas of concentration not only makes the proposed program unique, but the program will lead to broader interdepartmental and interdisciplinary collaborations. Upon successful completion of all program components, culminating in the dissertation defense, program graduates will be awarded the PhD in Public Health (CIP 51.2201, Public Health). Examples of places of employment include universities, federal and state government agencies (e.g. Centers for Disease Control, Public Health Departments), health and environmental research firms, and non-profit local, national, and international agencies.

A. Describe how the proposed program is consistent with the current State University System (SUS) Strategic Planning Goals. Identify which goals the program will directly support and which goals the program will indirectly support. (See the SUS Strategic Plan at <u>http://www.flbog.org/about/strategicplan/</u>)

The Board of Governors' document State University System of Florida Strategic Plan 2005-2013¹ includes an assessment of the areas in which programmatic growth is needed. The Board of Governors approved seven accountability measures; measure III is to "meet statewide professional and workforce needs" (page A1). The accountability outcome for this measure is "Producing more degrees in education, the health professions, programs that promote economic development, programs involving emerging technologies, and other high-wage/high demand areas," and level of priority for growth in each of the CIP areas is provided. Public health is a targeted area for growth under descriptive heading I.B.3.c Medical Science and Technology Programs.

Based on the University's strategic goals, the proposed program would contribute to the strategic plan in at least the following ways: (1) "increase the relative size and quality of the graduate program to align with peer AAU public universities;" (2) "assist the state in addressing critical shortages of health-care professionals;" and (3) "strengthen the educational facets of professional

programs and colleges with special emphasis on interdisciplinary endeavors." There are currently only two other accredited colleges of public health with a PhD program in similar tracks (University of South Florida and Florida International University) and there is a serious shortage of public health professionals (Contribution 2). Our program will add to the pool of trained professionals within the state. The interdisciplinary design of this doctoral program directly addresses contribution number 3. We will be training doctoral students who have a background in public health that is enhanced by several other disciplines (e.g. toxicology, environmental health science for environmental and global health; liberal arts for social and behavioral sciences). Conversely, the program provides the opportunity for interdisciplinary research in the identification and management of both social and physical aspects of disease transmission.

Overall, the public health PhD program provides the opportunity to develop linkages around core topics highlighted in the strategic plan, including environmental and global health issues and related social medical issues of aging, families, and children. All of these areas are strongly associated with advanced public health education.

Public Health issues often cross geographical and political boundaries. For example, toxic stack emissions from industrial countries can be found in countries where the emissions were not generated, dust and biological particles from the sub-Saharan desert are carried to Florida on seasonal air currents; infectious diseases such as SARS can travel from one continent to another; and arboviruses can be carried by individuals across the globe, and use local insects to spread transmission. Thus, while public health problems can arise within a specific country or location, the global impact also needs to be addressed. The global health component of the public health program will focus on these regional and world-wide issues.

Finally, as an accredited college of public health, we must offer a minimum of 3 doctoral programs relevant to public health knowledge. Each program must include at least 5 full-time equivalent faculty in the college and at least one graduate student in each program. Currently there are three established public health PhD programs in the college (i.e. Health Services Research, Epidemiology, and Biostatistics), allowing us to meet minimal accreditation requirements. However, minimal standards are not where one expects UF to be as a university. As part of the evolution of public health education at UF, it is important to create the opportunity for students in each core public health discipline to achieve the highest academic credential, the PhD.

Core public health areas are defined by the public health accrediting body as biostatistics, epidemiology, environmental health, health management and policy, and social and behavioral sciences. Therefore, the public health PhD with concentration areas in environmental and global health and social and behavioral sciences provides that opportunity for advanced public health training consistent with accreditation requirements and appropriate expectations of a Research One institution. This contribution is consistent with both the SUS strategic plan and UF work plan related to becoming a premier academic entity.

INSTITUTIONAL AND STATE LEVEL ACCOUNTABILITY

II. Need and Demand

A. Need: Describe national, state, and/or local data that support the need for more people to be prepared in this program at this level. Reference national, state, and/or local plans or reports that support the need for this program and requests for the proposed program which have emanated from a perceived need by agencies or industries in your service area. Cite any specific need for research and service that the program would fulfill.

The state of the national public health work force has recently been described in documents released by the American Public Health Association² (APHA) and the Association of State and Territorial Health Officials (ASTHO).³ The APHA report states:

There is a growing public health workforce shortage at the local, state, and federal levels. The number of public health workers declined to 158 workers per 100,000 Americans in 2000, as compared to 220 workers per 100,000 in 1980. Within the next few years, state and federal public health agencies could lose up to half of their workforce to retirement, the private sector and other opportunities.... the potential for a shortage of highly skilled public health professionals has become more immediate and severe in scope (p. 2).²

The recent *ASPH Policy Brief: Confronting the Public Health Workforce Crisis*⁴ indicated that by 2020, "the nation will be facing a shortfall of more than 250,000 public health workers" … and that "over the next 11 years, schools of public health would have to train three times the current number of graduates to meet projected needs", which are created by "more than 100,000 government public health workers – approximately one-quarter of the current public sector workforce – [being] eligible to retire by 2012" (p.1). Two specific recommendations to address this looming crisis are to educate more graduate students and to significantly increase research training, both consistent with the establishment of the Public Health PhD program.

Public health doctoral programs in environmental health typically generate 2-3 graduates per year. (PhD.org). Similarly for SBS, in a report on trends in public health training between 1994 to 2005, the Association of Schools of Public Health (ASPH) noted that among member schools (accredited schools of public health) 76 PhDs were awarded during 2004-2005 in the area "HED/BS," which includes health education, behavioral sciences, public health education, health education administration, health behavior, community health sciences, community health practice, and health promotion.⁵ Only 5 universities in the United States with accredited schools of public health have PhD programs in somewhat similar areas of training to the EGH concentration proposed. There are 12 universities that offer a specific behavioral focus applied to PhD public health education as proposed here. Clearly, yearly production of doctorally trained experts in both EGH and SBS is quite low. These graduates play a critical role in the upkeep of the public health infrastructure through serving in leadership positions at federal and state government agencies, and through providing a workforce for university and college faculty members and research firms.

B. Demand: Describe data that support the assumption that students will enroll in the proposed program. Include descriptions of surveys or other communications with prospective students.

Because we offer a master of public health degree with concentrations in environmental health and social and behavioral sciences, students have communicated directly with us about their interest in the public health PhD program. This year, five students who graduated from our MPH program indicated they would have applied to the UF public health PhD program with a concentration in social and behavioral sciences if it had been available. (These students were all accepted into other PhD programs.) Similarly, this year three students in our EH concentration have inquired about the availability of the PhD program and 3 additional students from other majors have inquired about this concentration. At this year's American Public Health Association meeting, several students visiting the UF booth inquired whether UF offered a doctoral program in public health and expressed significant interest in applying if the program were to become available within a reasonable timeframe.

C. If similar programs (either private or public) exist in the state, identify the institution(s) and geographic location(s). Summarize the outcome(s) of any communication with such programs with regard to the potential impact on their enrollment and opportunities for possible collaboration (instruction and research). Provide data that support the need for an additional program.

In Florida, three universities have accredited schools of public health (University of South Florida, Florida International University, and the University of Florida College of Public Health and Health Professions). Michael G. Perri, dean of PHHP, has corresponded with the deans of the colleges of public health at both USF and FIU, Dr. Donna Peterson and Dr. Fernando Trevino, respectively. They have provided enthusiastic support for the PhD program at UF. There is limited overlap among the insitutions yet signicant potential for collaboration. Both of these issues are briefly expanded upon below.

The University of South Florida (USF) does not offer a PhD program in environmental and global health but offers one in toxicology and one in environmental and occupational health. FIU has a PhD in toxicology with a primary focus on forensic toxicology but FIU only recently became accredited and manages a very small program. Similarly, FIU has a PhD in health promotion, which includes some similar components of our proposed SBS concentration but their public health program focuses on the needs of south Floridians and therefore serves a different consumer group. USF is the closest potential partner, such as via distance learning. USF does not offer advanced (doctoral level) coursework in EGH or SBS on line. If appropriate coursework were made available via distance education and USF had increased student capacity, we would be open to discussing sharing this coursework. Dr. Peterson has been supportive of our doctoral level program development, believes there is needed growth, and assisted us with program development during the accreditation process. We believe there is significant opportunity for multi-university collaboration. For example, we recently proposed to build the state's public health workforce by creating training opportunities throughout the state for public health workers. Although this proposal did not ultimately receive legislative funding, it

involved all three universities and is an example of the potential for shared expertise and collaboration. Given that the public health colleges of all three universities are now accredited by CEPH, we anticipate future collaborative opportunities in research and training to grow.

We believe that the factors noted throughout Section II – a critical need for training in public health, a small number nationally of accredited schools of public health with similar PhD programs, the relatively low production of PhDs in public health within the State of Florida, the distinct differences in our curriculum, and the support of the deans of the colleges of public health at USF and FIU – all promote the need for the doctoral program at the University of Florida. In addition, we believe there is sufficient interest from current and past public health students at UF to provide an immediate cohort of qualified applicants for the PhD program

D. Use Table 1 (A for undergraduate and B for graduate) to categorize projected student headcount (HC) and Full Time Equivalents (FTE) according to primary sources. Generally undergraduate FTE will be calculated as 40 credit hours per year and graduate FTE will be calculated as 32 credit hours per year. Describe the rationale underlying enrollment projections. If, initially, students within the institution are expected to change majors to enroll in the proposed program, describe the shifts from disciplines that will likely occur.

Our estimates represent a conservative build out of our PhD program during the first five years. We plan to recruit 3 students into each PhD concentration in year one, thus starting with 6 PhD students, and 4 students in each concentration beginning in year two. Based on the student interest already expressed, we believe this will be easily accomplished. In addition, because the students for each concentration are expected to come from different areas (e.g. SBS students will be drawn from social and behavioral science majors whereas environmental and global health students more likely from environmental and biological science, etc.) our recruitment pool is expected to be fairly broad. It is possible that students within the MPH program who are interested in advanced training will want to pursue the PhD prior to completing the MPH, and we would manage these on a case-by-case basis, with some students likely to pursue concurrent enrollment.

Instead of using 32 credits per student as the numerator in calculating student FTE, we used the more conservative number of credits typically taken by graduate assistants (i.e. 24 credits: 9, 9, and 6 in Fall, Spring, and Summer, respectively). In the fourth year of each student's program, we used 18 credits instead of 24, given this represents the minimum number of credits necessary to complete the degree. In all years, we used the denominator of 32.

E. Indicate what steps will be taken to achieve a diverse student body in this program, and identify any minority groups that will be favorably or unfavorably impacted. <u>The university's Equal Opportunity Officer should read this section and then sign and date in the area below.</u>

If our MPH program is an indication of the diversity of the PhD program, we can anticipate a diverse student body. As shown below, approximately 36% of our MPH cohort in our SBS and Environmental Health concentrations are Black or Latino. Overall, ½ of the students identified with racial or ethnic groups different from white (non-hispanic). Because the MPH program is

one of the applicant pools from which we will draw, we are optimistic that we will be able to have a group of students who are racially and ethnically diverse.

•		
Group	Total	Percent
White	21	50.0
Black	11	26.2
Latino/Hispanic	4	9.5
Native American	0	0.0
Asian	6	14.3
Other	0	0.0
Total	42	100%

Race/Ethnicity Breakdown of Students in MPH EH/SBS concentrations

To help ensure racial and ethnic diversity, we will work actively with the Director of Graduate Minority Programs at the University of Florida, to recruit minority students. Here is a brief summary of their current programs. Recruitment services involve creating a pool of students from groups traditionally underrepresented in the student body by participating in 1) graduate fairs nationwide, 2) partnerships with foundations and organizations, and 3) the Campus Visitation Program. Retention services are provided in the form of the Florida Board of Education (FBOE) Summer Program, the Office of Graduate Minority Programs (OGMP) Supplemental Retention Program (SRP), and academic support services and programs for graduate students. There are partnerships with (1) the Florida Educational Fund, (2) the Florida A&M University (FAMU) Feeder program, (3) the Santa Fe Community College Development Project, (4) the National Consortium for Graduate Degrees for Minorities in Engineering and Sciences, Inc. (GEM), and (5) the National Science Foundation-Alliance for Graduate Education and the Professorate.

The Campus Visitation program, for example, is conducted twice a year, during the fall and spring semesters. The program is intended to provide an opportunity for prospective minority graduate students and school advisers to visit our campus. Students meet with administrators, faculty members, and current graduate students.

Potential students identified through any of these activities will be actively recruited. Once the student is recruited we will focus on helping the student be successful. For example, the Florida Board of Education Summer Fellowships prepare new graduate students from underrepresented demographic groups, admitted to the University of Florida for fall semester, during the summer. Participants receive a stipend and tuition waiver to enroll in summer graduate coursework and preparatory coursework. This enables new graduate students to spend the summer on campus prior to the fall semester, and we will pursue these scholarships for eligible graduate students.

Another retention effort is the Professional Development Workshop offered to enrich the educational experience of students who are typically underrepresented in graduate education. This series of mentoring workshops addresses issues such as writing literature reviews, effective reading strategies, summarizing and critiquing readings or lectures, passing qualification examinations, getting manuscripts published, using professional meetings to advance one's career, and getting research grants. Opportunities also exist for additional funding should a

student from an underrepresented group need longer to complete the degree, but are no longer eligible to receive a fellowship, assistantship or other funding from their department or college. Limited tuition assistance and the help of a structured retention program are provided to the student.

These University programs will supplement the efforts of the program faculty members to recruit, retain and graduate PhD students from underrepresented groups.



III. Budget

A. Use Table 2 to display projected costs and associated funding sources for Year 1 and Year 5 of program operation. Use Table 3 to show how existing Education & General funds will be shifted to support the new program in Year 1. In narrative form, summarize the contents of both tables, identifying the source of both current and new resources to be devoted to the proposed program. (Data for Year 1 and Year 5 reflect snapshots in time rather than cumulative costs.)

It is anticipated that in year one, 1.13 faculty FTE will be required. The total for salary and benefits is \$140,189 from existing college sources, including E & G (\$135,716) and contracts and grants (\$4473). In addition, \$50,000 is requested for graduate student fellowships, one in each concentration as part of recruitment in year two, to be requested from the Graduate School. We anticipate that new program expenses will be minimal given we had to enhance our public health infrastructure last year as part of our accreditation process. Similarly, library resources (e.g. journals, etc.) to support the PhD program are already in place given our existing public health concentrations at the master's level. By year 3, we plan to add three faculty, one in SBS in year two and two in EGH in year three, totaling .30 effort (.10 each x three faculty) to support program growth. Therefore, by year 5 we anticipate requiring 1.43 faculty FTE for a total of \$205,251 for salary and benefits, of which \$200,217 is from E & G and \$5034 is from contracts and grants. Support for the additional FTE comes from existing resources received as part of the hiring package for our new dean. The total proposed year 5 budget is \$267,397. As noted, the bulk of this dollar amount is associated with salaries of existing faculty members from E & G.

B. If other programs will be impacted by a reallocation of resources for the proposed program, identify the program and provide a justification for reallocating resources. Specifically address the potential negative impacts that implementation of the proposed program will have on related undergraduate programs (i.e., shift in faculty effort, reallocation of instructional resources, reduced enrollment rates, greater use of adjunct faculty and teaching assistants). Explain what steps will be taken to mitigate any such impacts. Also, discuss the potential positive impacts that the proposed program might have on related undergraduate programs (i.e., increased undergraduate research opportunities, improved quality of instruction associated with cutting-edge research, improved labs and library resources).

We do not anticipate any negative impact on existing programs. No resources will be taken from our undergraduate program. Our Bachelor of Health Science Program is delivered independently of the faculty proposed to support our PhD program with the exception of Dr. Mary Ellen Young. However, Dr. Young had been previously assigned to the rehabilitation counseling program, which is being closed. Therefore, her effort is, in part, being redirected to the doctoral program. We believe there are several potential advantages the PhD program offers to our undergraduate program. First, given that the majority of our undergraduates pursue advanced study, the doctoral program will offer undergraduates an additional academic path at UF, thus expanding their career opportunities. Second, we anticipate that undergraduates will indirectly benefit from doctoral students and the resources associated with having a doctoral program (e.g., more invited guest speakers and mentors) available to them. Third, we anticipate that the PhD program will result in expanded opportunities for undergraduate honors research projects.

F. Describe other potential impacts on related programs or departments (e.g., increased need for general education or common prerequisite courses, or increased need for required or elective courses outside of the proposed major).

The largest concentration of courses needed are public health courses taught within our college. However, program concentrations do include courses taught outside the college. These courses are typically courses that are already open as general electives to all UF students, and we anticipate very few students (maximum of 3 or 4 if all students chose the same course) needing these courses during any given semester. In addition, we have talked with appropriate representatives from other departments in order to ensure availability of required courses taught by other colleges. This was particularly important for the environmental and global health concentration, that includes three core courses from the College of Veterinary Medicine. Dr. Roberts, who teaches these courses, will be participating in the PhD program as a core graduate faculty member.

G. Describe what steps have been taken to obtain information regarding resources (financial and in-kind) available outside the institution (businesses, industrial organizations, governmental entities, etc.). Describe the external resources that appear to be available to support the proposed program.

Most faculty members have external (to the college) funding to offset some salary support. This funding comes from federal agencies (e.g., Veterans Affairs, NIH), and national non-profit organizations (e.g., National Cancer Institute, Susan G. Komen Foundation). We will continue to seek support from these agencies, and we will be expanding our efforts to include international agencies. Our recent accreditation has made us eligible for additional funding sources we could not previously tap (e.g. CDC funding) and therefore, our opportunities for funding have grown based on this accreditation. For example, we recently received public health traineeship funds (2 in 2009) and traineeship funding (1) through the American Recovery and Reconciliation Act, for which environmental health is a priority. We believe we will remain competitive for these funding sources and plan to request additional traineeships.

III. Projected Benefit of the Program to the University, Local Community, and State

Use information from Table 1, Table 2, and the supporting narrative for "Need and Demand" to prepare a concise statement that describes the projected benefit to the university, local community, and the state if the program is implemented. The projected benefits can be both quantitative and qualitative in nature, but there needs to be a clear distinction made between the two in the narrative.

The public health work force is declining, creating a shortage that can not be addressed by the yearly production of public health professionals. Graduates of doctoral programs play a critical role in the upkeep of the public health infrastructure and contribute to cutting edge research and training. Currently, however, the production of doctorally prepared experts in both EGH and SBS is quite low, both in the state of Florida and nationally. The relative costs for the proposed PhD program (cost compared to FTE production) by year five are modest and student interest is evident; thus this program represents a sound investment. The reasonable cost at this point is in part because we can capitalize on the overall college infrastructure already in place that was necessary for college level public health accreditation acquired earlier this year. We also have a clear feeder to the PhD program from our MPH program. In addition, establishment of the PhD program creates expanded opportunities beyond our existing MPH program for research and training collaborations with USF and FIU, the only other public health PhD programs in the state. Both deans at these universities are supportive of our proposed PhD. A direct benefit is assisting with the shortage of public health professionals. PhD graduates at academic institutions help teach direct line public health workers, and public health is a targeted area of needed growth in Florida. In addition, PhD graduates have the skills necessary to address critical health priorities in Florida through research assessing effective prevention and containment strategies regarding transmission and development of disease in communities and populations. Finally, we expect an ethnically diverse student body, contributing to the richness of the educational experience of all students.

IV. Access and Articulation – Bachelor's Degrees Only

A. If the total number of credit hours to earn a degree exceeds 120, provide a justification for an exception to the policy of a 120 maximum and submit a request to the BOG for an exception along with notification of the program's approval. (See criteria in BOG Regulation 6C-8.014)

Insert response here. N/A

B. List program prerequisites and provide assurance that they are the same as the approved common prerequisites for other such degree programs within the SUS (see Common Prerequisite Manual http://www.facts.org). The courses in the Common Prerequisite Counseling Manual are intended to be those that are required of both native and transfer students prior to entrance to the major program, not simply lower-level courses that are required prior to graduation. The common prerequisites and substitute courses are mandatory for all institution programs listed, and must be approved by the Articulation Coordinating Committee (ACC). This requirement includes those programs designated as "limited access."

If the proposed prerequisites they are not listed in the Manual, provide a rationale for a request for exception to the policy of common prerequisites. NOTE: Typically, all lower-division courses required for admission into the major will be considered prerequisites. The curriculum can require lower-division courses that are not prerequisites for admission into the major, as long as those courses are built into the curriculum for the upper-level 60 credit hours. If there are already common prerequisites for other degree programs with the same proposed CIP, every effort must be made to utilize the previously approved prerequisites instead of recommending an additional "track" of prerequisites for that CIP. Additional tracks may not be approved by the ACC, thereby holding up the full approval of the degree program. Programs will not be entered into the State University System Inventory until any exceptions to the approved common prerequisites are approved by the ACC.

Insert response here. N/A

C. If the university intends to seek formal Limited Access status for the proposed program, provide a rationale that includes an analysis of diversity issues with respect to such a designation. Explain how the university will ensure that community college transfer students are not disadvantaged by the Limited Access status. NOTE: The policy and criteria for Limited Access are identified in BOG Regulation 6C-8.013. Submit the Limited Access Program Request form along with this document.

Insert response here. N/A

D. If the proposed program is an AS-to-BS capstone, ensure that it adheres to the guidelines approved by the Articulation Coordinating Committee for such programs, as set forth in Rule 6A-10.024 (see Statewide Articulation Manual <u>http://www.facts.org</u>). List the prerequisites, if any, including the specific AS degrees which may transfer into the program.

Insert response here. N/A

INSTITUTIONAL READINESS

V. Related Institutional Mission and Strength

A. Describe how the goals of the proposed program relate to the institutional mission statement as contained in the SUS Strategic Plan and the University Strategic Plan.

(Please also see section IB.) Encompassed within the mission of the Board of Governors' document State University System of Florida Strategic Plan 2005-2013¹ are strategic goals referenced previously in this document. The public health PhD program is consistent with both the SUS and UF University Strategic mission⁶ related to increasing PhD production (SUS goal 1 and UF goal regarding graduate students). The PhD program provides access to a new program for which students have clearly expressed interest. In addition, the establishment of the PhD further increases access to high quality teaching not only for the PhD students but also for

advanced master's students. The establishment of this PhD is also consistent with other accredited colleges of public health in the state and contributes to appropriate competitiveness nationally. The PhD program supports enhanced research capacity in public health, consistent with building world class academics and research capacity, cited explicitly in the SUS plan (goal 3) and implicit in the context of the work plan referencing UF's aspiration to attain top ten AAU status. Students in the EGH concentration will also have the ability to acquire technical expertise in emerging pathogens and environmental impacts, specific workforce needs identified in the SUS Strategic Plan (goal 2) and in UF's work plan under maximum impact areas. Similarly, students in the SBS concentration will have the opportunity to address policy, rehabilitation, and the health needs of individuals across the developmental spectrum (from children and families to the elderly), consistent with additional maximum impact areas cited in the UF work plan. For example, specific researchers are currently focusing on malaria transmission, pesticide risks in humans, damage of hookah smoking, and preventative behaviors related to cancer, providing research opportunities for public health doctoral students. Finally, public health is interdisciplinary by nature as well as ethnically diverse. As previously noted, we anticipate a diverse student class, which contributes to the stated goal of further diversification of the student body and the overall goal of diverse human capital in the UF work plan. Consider, for example, that of the 5 SBS students who inquired about the PhD program, 4 were nonwhite (2 were Black, 2 were Latino, and 1 was White, non-Hispanic). The design of the PhD lends itself well to the recruitment of students with diverse backgrounds.

B. Describe how the proposed program specifically relates to existing institutional strengths, such as programs of emphasis, other academic programs, and/or institutes and centers.

The existence of the environmental health and social and behavioral sciences concentrations in the Master of Public Health (MPH) program creates the foundation for the development of the environmental and global health (EGH) and social and behavioral sciences (SBS) concentrations in the public health PhD program, of which students select one. The faculty members who will form the core instructional team for the doctoral program teach in the MPH program. The MPH program is expected to serve as a feeder for the proposed degree. Conversely, the doctoral program will strengthen the MPH program by introducing additional courses that can be opened to advanced master's students, by providing trained teaching assistants for larger MPH courses, by offering MPH students the opportunity to work on research projects with doctoral students, and by raising the overall intellectual climate through the use of journal clubs and guest speakers.

The breadth of coursework available at UF represents a significant institutional strength that will be used in the Ph.D program through the student's selection of specialty coursework within a concentration. Specifically, EGH students have the opportunity to acquire training in a disciplinary perspective (i.e., toxicology, exposure assessment, zoonotic and vector borne diseases, and global health). Similarly, in social and behavioral sciences, students will select coursework representing a specific behavioral or social science theoretical perspective. In both of these concentrations, the disciplinary perspective will involve coursework crossing colleges (for example human health risk assessment in veterinary medicine; medical anthropology and social inequality in liberal arts and sciences). As our program grows, we also anticipate offering our graduate courses to students from other departments (e.g., Environmental Engineering, Soil Science, etc). Students both within and outside the program will therefore have the opportunity to learn from faculty members with different disciplinary perspectives. Faculty members will also have the opportunity to develop interdisciplinary contacts through the co-mentoring of students. We believe that these activities will lead to greater collaboration with other departments and programs. This type of collaboration is already evident in our relationship with specific centers. We are forging a new collaboration with the Center for Latin American Studies around global health. We believe this will provide opportunities for PhD students as this relationship develops. We already have excellent UF partnerships with Dr. Steve Roberts, Director of the Center for Environmental and Human Toxicology and Dr. Glenn Morris, Director of the Emerging Pathogens Institute, both of whom have been integrally involved in public health PhD planning. There is great potential for both direct and indirect benefits to the PhD program as these collaborations mature.

C. Provide a narrative of the planning process leading up to submission of this proposal. Include a chronology (table) of activities, listing both university personnel directly involved and external individuals who participated in planning. Provide a timetable of events necessary for the implementation of the proposed program.

Planning for the PhD program has occurred via varied levels of interaction, including departmental faculty, departmental subcommittees, administrative meetings between the dean's office and departmental representatives, and between chairs and specific faculty representatives. Faculty representatives from the two concentrations initially worked independently to design critical concentration components and then met together to discuss and finalize core coursework for the program as a whole. Dr. Glenn Morris, director of the Emerging Pathogens Institute, also participated in the discussion regarding overall program components and the EGH concentration.

(For table below, SBS refers to Social Behavioral Sciences faculty and EH refers to environmental health faculty; environmental health changed to EGH this past year. EGH faculty includes Dr. Roberts, director of the Center for Environmental and Human Toxicology and Dr. Barber.)

Thanning Trocess		
Date	Participants	Planning Activity
1/11/08, 2/1/08,	SBS Faculty as a whole	Initial general discussions of public
3/7/08, 5/2/08		health PhD program
5/13/08	EH faculty, Dean Perri, Dr. Glenn	Initial discussion of PhD program;
	Morris	discussion of creating department of
		EGH
6/13/08	EH faculty	Discussion of potential admission
		criteria and standards for EGH
		students
7/18/08	SBS faculty	Continued general discussion of PhD
		program
7/25/08	EH faculty	Discussion of standards and course
		development
8/12/08	SBS faculty	Retreat to discuss PhD program design
		as part of overall educational program

Planning Process

		discussion
8/15/08	EH faculty	Discussion of lab experiences for
		students
8/22/08	SBS faculty and potential doctoral	Discussion to gain student input on
	students	program requirements
9/29/08	SBS faculty	Team meeting to discuss
		administrative issues
1/9/09	SBS faculty	Team meeting to discuss
		administrative issues
1/15/09	SBS doctoral committee – Dr.	Dr. Mann appointed director of SBS
	Giselle Mann, Dr. Tracey Barnett,	doctoral program planning group and
	Dr. Dennis Thombs, and Dr.	holds planning meeting
	Curbow, ex officio	
2/6/09	SBS faculty	Update on planning for PhD program
3/13/09, 5/1/09	SBS doctoral committee	In depth program planning
5/11/09	EH faculty, Dean Perri	Review of status of department and
		plans for future
5/27/09	EH faculty	Discussion of PhD prerequisites
6/12/09	EGH fculty	Discussion of overall program,
	SBS faculty	identification of faculty and courses
6/22/09	Dr. Freeman and Dr. Morris	Identification of supplemental faculty
		for EGH concentration
7/10/09	SBS faculty	Update for faculty as a whole
7/17/09	EGH faculty and Dr. Greg Gray	Update on umbrella design for
		program
8/5/09	Dr. Freeman, Dr. Morris, Dr.	Establish draft of shared
	Curbow, Dr. Stephanie Hanson,	requirements/courses and credits hours
	executive assoc. dean	
8/14/09	SBS faculty	Update on agreed curriculum
9/10/09/9/11/09	EGH faculty/SBS faculty respectively	Update on combined curriculum
9/21/09	Dr. Freeman, Dr. Morris	Continued discussion of supplemental
		faculty
10/8/09	EGH faculty and Dr. Gray	Discussion of lab rotation course
		specifically and other courses
		generally
10/15/09	EGH faculty	Further discussion of outside faculty
11/12/09	EGH faculty	Further discussion of lab rotations
11/13/09	SBS faculty	General update at monthly faculty
11/24/00	De Curbon De English and D	meeting
11/24/09	Dr. Curbow, Dr. Freeman, and Dr.	Review and revision of curricular draft
11/20/00	Hanson	Discussion of the difference
11/30/09	EGH faculty, Dr. Gray	Discussion of bioethics course
11/30/09	SBS doctoral committee and	Gain input on program requirements
	doctoral students	and course offerings as currently
		designed

12/8/09	Dr. Curbow, Dr. Freeman, and Dr.	Complete proposal
	Hanson	

Events Leading to Implementation

Date	Implementation Activity
	Approval Process
December, 2009	1. Submit proposal to Graduate Council for review and approval
February, 2010	2. Submit proposal to University Faculty Senate for review and approval
March, 2010	3. Submit proposal to Board of Trustees for review and approval
June, 2010	4. Submit proposal to Board of Governors for review and approval
	Preparation Process
February, 2010	1. Send letter to current and former MPH students in the Environmental
	Health (EH) and SBS concentrations to respond to inquiries related to the
	development of a PhD program and its possible timeframe, including Senate
	approval and remaining approval process; outline admissions procedures to
	be used if program is approved
March, 2010	2. Organize first year schedule of classes
March, 2010	3. Draft student applicant rating form and related student selection criteria
	material
June, 2010	4. Send letter to current and former MPH students in the EH and SBS
	concentrations alerting them to approval of PhD program by BOT
	(contingent on favorable BOT decision) and approval required by BOG
Beginning late	5. Invite applications for admission and begin accepting applications from
June, 2010	students, contingent upon favorable decision by Board of Governors
June-July, 2010	6. Review applicants and select first student cohort
June-August,	7. Notify students of acceptance status
2010	
August, 2010	8. Admit first cohort

VI. Program Quality Indicators - Reviews and Accreditation

Identify program reviews, accreditation visits, or internal reviews for any university degree programs related to the proposed program, especially any within the same academic unit. List all recommendations and summarize the institution's progress in implementing the recommendations.

The College received initial accreditation as a school of public health this year (June 25, 2009). Accreditation was awarded for 5 years. The Council on Education for Public Health (CEPH), the accrediting body, offered a handful of recommendations, including ensuring research concepts are integrative in the undergraduate program, and changing the public health experience for students in the college in programs outside of public health. All recommendations have already been implemented or are substantially completed. We have redesigned the undergraduate research methods program, which will be implemented in Spring, 2010 and an internally managed public health grounding course has been designed and implemented. As a bit of background to the latter issue, as part of public health education, all students are required to

demonstrate grounding in public health. We had initially used an externally offered on line program to achieve this grounding in public health. CEPH questioned the rigor of this course. We therefore eliminated this course and developed an on line course taught by our faculty. The course includes assessment of content mastery for each core public health area.

VII. Curriculum

A. Describe the specific expected student learning outcomes associated with the proposed program. If a bachelor's degree program, include a web link to the Academic Learning Compact or include the document itself as an appendix.

Key Learning Objective	Credits	•
Area of Study		Learning Objectives
Core Public Health	15	• Explain the contributions of the different core areas
		to public health research and practice
		• Apply public health principles learned in core
		courses to a focused area of study
Methods and Statistics	12	 Demonstrate understanding of methodological issues applied to public health problems Demonstrate appropriate research design and use of
		methods in laboratory and applied (field) settings
		 Demonstrate competency in quality
		assurance/quality control methods
		 Demonstrate skills necessary to assess the soundness
		of assessment and intervention tools used to measure public health concerns
		• Apply basic univariate statistics to a dataset (e.g., mean, median, standard deviation, skew) using statistical software such as SPSS
		• Apply basic bivariate statistics to a dataset (e.g., t- test, one-way ANOVA, chisquare) using statistical software such as SPSS
		• Apply basic multivariate statistics to a dataset (e.g., multiple regression, logistic regression; hierarchical regression) using statistical software such as SPSS
Professional Issues	6	• Describe ethical challenges in conducting public health research and possible solutions
		 Develop a full draft of a grant proposal using the NIH format
		Critically evaluate public health research
		 Develop a syllabus and evaluation plan for a public health course
Concentration	36	• Demonstrate an in-depth understanding of public health issues/problem solving approaches in a core public health concentration and specialization

Key Learning Objectives by Area of Study

		• Develop concentration-specific expertise to successfully conduct research and teach in that area		
Supervised Research	3	 Perform key research tasks (e.g., literature search; literature review; database development; data collection; data analysis; dissemination of findings) Participate productively as a member of a research team 		
Supervised Teaching	3	 Effectively deliver course material, organize and lead group learning activities/discussions Appropriately interact with students Provide and receive constructive feedback concerning teaching skills 		
Dissertation Research	15	 Independently craft a research question suitable for a doctoral dissertation Independently develop a research procedure suitable for a doctoral dissertation Design and submit an IRB application appropriate to the dissertation research project Independently carry out a dissertation research project Independently analyze dissertation data Independently communicate, verbally and in writing, the results of the doctoral dissertation 		

B. Describe the admission standards and graduation requirements for the program.

The program has adopted the graduate program admission standards of the University of Florida, which at a minimum include (1) a baccalaureate degree from an accredited university or college, (2) GRE test scores submitted, (3) a 3.0 junior-senior level grade point average, and (4) a completed application for Graduate School, including a letter of intent, official transcripts, completed application form, and 3 letters of recommendation. International students whose primary language is not English will have to demonstrate language proficiency. The graduation requirements include: (1) successful completion of all course/curricular requirements; (2) successful passage of all components of the qualifying exam leading to admission to candidacy; (4) successful completion of a college level teaching experience, (4) successful execution and defense of the dissertation; and (4) appropriate paperwork completion for UF graduation. Students will be eligible to sit for the qualifying examination after completion of the coursework in foundation courses (15 credit hours of public health core), methods and statistics (9 credit hours completed; 3 remaining credits can be taken during the semester of the qualifying exam), concentration core plus majority of specialty work (minimum of 23 credit hours in concentration completed). After passing the examination, students will be advanced to candidacy, at which time they will complete any remaining concentration hours, supervised research and teaching, and dissertation research. All University of Florida Graduate School policies and procedures will be followed in this program.

C. Describe the curricular framework for the proposed program, including number of credit hours and composition of required core courses, restricted electives, unrestricted electives, thesis requirements, and dissertation requirements. Identify the total numbers of semester credit hours for the degree.

Curriculum

Public Health	Core Courses: 15 credits				
PHC 6050	Statistical Methods for Health Sciences	Required	3		
	Research I	_			
PHC 6001	Principles of Epidemiology in Public Health	Required	3		
HSA 6114			3		
PHC 6410	Psychological, Behavioral, and Social Issues	Required	3		
	in Public Health				
PHC 6313	Environmental Health Concepts in Public	Required	3		
	Health				
Quantitative Methods and Statistics: 12 credits					
STA 6166	Statistical Methods Research I	Required	3		
PHC 6053 or	Regression Methods for the Health and Life	Required	3		
EDF 7412	Sciences or				
	Structural Equation Models				
PHC 6000 or	Epidemiology Methods I or	Required	3		
PHC 6700	Social and Behavioral Research Methods				
	rse approved by supervisory committee based	Required	3		
	cus of the student				
Professional Issues: 6 credits					
PHC 6937	Public Health Journal Club	Required	1		
PHC 6937	Public Health and Biomedical Ethics	Required	2		
PHC 6162	Public Health Grant Writing	Required	2		
PHC XXXX	Seminar in Public Health Teaching	Required	1		
	Area: 36 credits; students choose one conce	entration			
Environmenta	l and Global Health				
VME 6602	General Toxicology	Required	3		
PHC 6702	Exposure Measurement and Assessment	Required	3		
PHC 6937	Risk Communication	Required	2		
VME 6607	Human Health Risk Assessment	Required	4		
PHC 6762 or	International Public Health or Global Health	Required	3		
PHC XXXX					
PHC 6937	Environmental and Global Health Journal	Required	1		
	Club				

Students choos	e an area of specialization within EGH in	Required	12
consultation with their supervisory committee		but courses	
		not dictated	
PHC XXXX	Laboratory Rotation – Setting is selected	Required	4
	based on academic focus of student	1	
VME 6767	Issues in the Responsible Conduct of	Required	1
	Research	-	
General electiv	re from different specialization area to round	Elective	3
	n environmental and global health		
Social and Be	havioral Science		
PHC 6112	Assessment and Surveillance in Public	Required	3
	Health		
PHC XXXX	Instrument Development for Health	Required	3
	Behavior		
PHC XXXX	Public Health Qualitative Methods	Required	3
PHC 6937	Theory Development and Testing for Public	Required	2
	Health Social and Behavioral Science		
PHC 6937	Perspectives in Public Health: Social and	Required	1
	Behavioral Science		
	l social science theory – courses representing	Required	12
	vioral and social theories (e.g. Psychological,	but courses	
	l, social) approved by supervisory committee	not dictated	
	se an area of specialization within SBS in	Required	12
consultation w	ith their supervisory committee	but courses	
		not dictated	
	esearch: 3 credits		
PHC 7979	Supervised Research	Required	3
	eaching: 3 credits		
PHC 6940	Supervised Teaching in Public Health	Required	3
	Iours: 15 credits		
PHC 7980	Research for Doctoral Dissertation	Required	15
		TOTAL	90

D. Provide a sequenced course of study for all majors, concentrations, or areas of emphasis within the proposed program.

Tuble Health The Troposed Loff Concentration Sequence			
Fall	Spring	Summer	
Statistical Methods for	US Health Care System –	Exposure Measurement and	
Health Sciences Research	HSA 6114 (3)	Assessment – PHC 6702 (3)	
I– PHC 6050 (3)			
Principles of Epidemiology	Environmental Health	Risk Communication - PHC	
in Public Health – PHC	Concepts in Public Health –	6937 (2)	
6001 (3)	PHC 6313 (3)		
Psychological, Behavioral,	Introduction to	Lab Rotation - (1)	
and Social Issues in Public	Biostatistical Methods –		

Public Health PhD – Proposed EGH Concentration Sequence

Health – PHC 6410 (3)	PHC 6052 (3)	
Total: 9	Total: 9	Total: 6

Year Two

Fall	Spring	Summer	
Human Health Risk	Epidemiology Methods I –	Public Health Grant Writing	
Assessment – VME 6607	PHC 6000 (3)	- PHC 6162 (2)	
(4)			
Issues in the Responsible	Seminar in Public Health	Specialization Course - (3)	
Conduct of Research –	Teaching - (1)		
VME 6767 (1)			
Laboratory Rotation $-(1)$	Laboratory Rotation – (2)	Public Health Journal Club	
		- PHC 6937 (1)	
Specialization Course - (3)	Regression Methods for the		
	Health and Life Sciences –		
	PHC 6053 (3)		
Total: 9	Total: 9	Total: 6	

Year Three

Fall	Spring	Summer
International Public Health-	Public Health and	Supervised Research – PHC
PHC 6762 (3)	Biomedical Ethics (2)	7979 (3)
Specialization Course (3)	General Toxicology - VME	Advanced Statistics - (3)
	6602 (3)	
Supervised Teaching – PHC	Specialization Course - (3)	
6940 (3)		
	EGH Journal Club - (1)	
Total: 9	Total: 9	Total: 6

Year Four

Fall	Spring	Summer
Research for Doctoral	Research for Doctoral	
Dissertation PHC 7980 (6)	Dissertation - PHC 7980	
	(9)	
General Elective - (3)		
Total: 9	Total: 9	

Public Health PhD – Proposed SBS Concentration Sequence

Fall	Spring	Summer
Statistical Methods for	US Health Care System –	Theory Breadth Course (3)
Health Sciences Research	HSA 6114 (3)	
I– PHC 6050 (3)		
Theory	Public Health and	Specialization Course (3)
Development/Testing PHC	Biomedical Ethics – PHC	
6937 (2)	6937 (2)	

Psychological, Behavioral,	Introduction to	
and Social Issues in Public	Biostatistical Methods –	
Health – PHC 6410 (3)	PHC 6052 (3)	
Seminar in Public Health	Perspectives in Public	
Teaching (1)	Health: Social and	
_	Behavioral Science PHC	
	6937 (1)	
Total: 9	Total: 9	Total: 6

Year Two

Fall	Spring	Summer
Social and Behavioral	Regression Methods for the	Public Health Grant Writing
Research Methods – PHC	Health and Life Sciences –	- PHC 6162 (2)
6700 (3)	PHC 6053 (3)	
Principles of Epidemiology	Environmental Health	Specialization or Theory
in Public Health – PHC	Concepts in Public Health –	Breadth (3)
6001 (3)	PHC 6313 (3)	
Specialization or Theory	Assessment and	Public Health Journal Club
Breadth (3)	Surveillance in Public	– PHC 6937 (1)
	Health – PHC 6112 (3)	
Total: 9	Total: 9	Total: 6

Year Three

Fall	Spring	Summer	
Public Health Qualitative	Specialization or Theory	Supervised Research – PHC	
Methods – PHC 6937 (3)	Breadth (3)	7979 (3)	
Instrument Development for	Specialization or Theory	Specialization or Theory	
Health Behavior - PHC	Breadth (3)	Breadth (3)	
6937 (3)			
Advanced Statistics Course	Specialization or Theory		
(student's area of	Breadth (3)		
specialization) (3)			
Total: 9	Total: 9	Total: 6	

Year Four

Fall	Spring	Summer
Supervised Teaching PHC -	Research for Doctoral	
6940(3)	Dissertation - PHC 7980 (9)	
Research for Doctoral		
Dissertation PHC - 7980 (6)		
Total: 9	Total: 9	

E. Provide a one- or two-sentence description of each required or elective course.

Core Public Health HSA 6114 U.S. Health Care System (3) Basic concepts and ideas concerning the distribution of health and illness, the organization of the health care system and the relationship of one to the other. Definitions of health and illness, as well as the historical context for developments of our health care system are discussed and debated. The course concludes with a discussion on trends that could impact the health care system in the future.

PHC 6001 Principles of Epidemiology in Public Health (3)

Distribution and determinants of health-related states or events in specific populations and application to control of health problems.

PHC 6050 Statistical Methods for Health Sciences Research I (3)

Appropriate use of data summarization and presentation of basic statistical methods, including ANOVA, nonparametric methods, inference on discrete data, inference on survival data, and regression methods for continuous, binary, and survival data.

PHC 6313 Enivonmental Health Concepts in Public Health (3)

Survey of major topics of environmental health: sources, routes, media, and health outcomes associated with biological, chemical, and physical agents in the environment; effects of agents on disease, water quality, air quality, food safety, and land resources; and current legal framework, policies, and practices associated with environmental health and intended to improve public health.

PHC 6410 Psychological, Behavior and Social Issues in Public Health (3)

Explore how social and behavioral sciences theories and public health concepts and methods can be applied throughout the health-illness experience

Quantitative Methods and Statistics

PHC 6052 Introduction to Biostatistical Methods (3)

General introduction to statistical methods based on t, F, and Chi² tests. Analysis of variance for basic experimental designs. Factorial experiments. Regression analysis and analysis of covariance.

PHC 6053 Regression Methods for the Health and Life Sciences (3)

This course introduces graduate students in fields other than statistics to a wide range of modern regression methods. Emphasis is on modeling driven by actual data from studies in a variety of areas, primarily from health, biology, and ecology. The primary topics are multiple linear regression, logistic regression, and Poisson regression.

EDF 7412 Structural Equation Models (3)

Confirmatory factor analysis and causal models.

PHC 6000 Epidemiology Methods I (3)

PHC 6700 Social and Behavioral Research Methods (3)

Research methods and their specific applications to public health issues.

Professional Issues

PHC 6937 Public Health Journal Club (1)

Critical analysis and discussion of contemporary research literature and professional topics in public health. Includes student critiques of public health research designs.

PHC 6937 Public Health and Biomedical Ethics (2)

Overview of bioethical principles applied to public health, and discussion of historical and current ethical issues and cases in public health research and practice.

PHC 6--- Seminar in Public Health Teaching (1)

Discussion and practice of the fundamental skills associated with quality university teaching in public health.

PHC 6162 Public Health Grant Writing (2)

Preparation, submission, and management of competitive grants, including operations of national review panels and finding sources of extramural funding. This course provides instruction in the grant process, with a specific focus on National Institutes of Health (NIH) procedures.

Concentration Area: Environmental and Global Health

VME 6602 General Toxicology (3)

This course is structured to comprehensively provide the student with the fundamental concepts of toxicology as they relate to specific organ and tissue systems.

PHC 6702 Exposure Measurement and Assessment (3)

Explore methods to measure, estimate and prevent exposure to hazardous agents in the context of public health practice with emphasis on the use and application of methods.

PHC 6937 Risk Communication (2)

Identify and develop successful techniques for effective and productive risk communication within the context of environmental health, risk assessment, and regulatory activities. This course will focus of issues relevant for environmental health, toxicology, and environmental engineering.

VME 6607 Human Health Risk Assessment (4)

Conceptual approaches and computational techniques for quantitative health risk assessment.

PHC 6762 International Public Health (3)

Overview of international health. Several health determinants that impact health outcomes from around the globe are discussed. Special attention is provided to continents that are economically disadvantaged and suffering from major pandemics such as HIV/AIDs, TB, and malaria, and from other emerging and re-emerging diseases.

PHC--- Global Health (3)

Overview of challenges in global health surveillance, research, and intervention; discussion of current and emerging public health trends and implications of policy decisions on global health management

PHC 6--- Laboratory Rotation (4)

Provide familiarity with the diversity of activities carried out in laboratories.

PHC 6937 Public Health Journal Club (1)

Critical analysis and discussion of contemporary research literature and professional topics in environmental and global health.

VME 6767 Issues in the Responsible Conduct of Research (1)

A graduate-level course addressing laws, policies, guidelines and principles concerning the conduct of research in an ethical manner. Presentation and discussion of issues; guiding principles and potential pitfalls.

Concentration Area: Social and Behavioral Sciences

PHC 6112 Assessment and Surveillance in Public Health (3)

This is the first of two courses designed to provide skills to execute public health programs. Integrating in-class and community-based work, students develop the knowledge, skills, and methods necessary to conduct community assessment and surveillance that will inform the design of interventions, which impact social and behavioral factors in health and illness.

PHC 6--- Instrument Development for Health Behavior (3)

Content focuses on practical development and testing of psychometric properties of an instrument to measure health related behavior. Explores principles of measurement and assessment as they apply to health research.

PHC 6937Theory Development and Testing in Behavioral and Community PublicHealth (2)

Students develop a theoretical model to explain a key public health behavior by using one or more behavioral science constructs. Emphasis is on developing an in-depth understanding of the history, measurement, and methodological issues surrounding important theoretical constructs.

PHC 6937 Perspectives In Public Health: Social And Behavioral Science (1)

Examination of primary literature from across the behavioral sciences on important public health topics with a goal of developing an integrative theoretical perspective.

PHC 6--- Public Health Qualitative Methods (3)

Common qualitative methods used to assess public health problems in applied settings.

Supervised Research

PHC 6910 Supervised Research (1-6)

Students work on a research project under the supervision of a faculty member

Supervised Teaching

PHC 6940 Supervised Teaching In Public Health (1-3)

Advanced doctoral students co-teach a course with a faculty member prior to completion of the PhD degree.

Dissertation

PHC 7980 Research for Doctoral Dissertation (1-15)

Dissertation research following advancement to candidacy in the doctoral program.

F. For degree programs in the science and technology disciplines, discuss how industrydriven competencies were identified and incorporated into the <u>curriculum and identify</u> <u>if any industry advisory council exists to provide input for curriculum development and</u> <u>student assessment.</u>

Insert response here. N/A

G. For all programs, list the specialized accreditation agencies and learned societies that would be concerned with the proposed program. Will the university seek accreditation for the program if it is available? If not, why? Provide a brief timeline for seeking accreditation, if appropriate.

The College received initial accreditation as a school of public health this year (June 25, 2009) from the Council on Education for Public Health. Accreditation was awarded for 5 years (to July 1, 2014).

H. For doctoral programs, list the accreditation agencies and learned societies that would be concerned with corresponding bachelor's or master's programs associated with the proposed program. Are the programs accredited? If not, why?

College level accreditation requires that all academic programs offered by our college be compliant with public health accreditation standards. Therefore, CEPH, the accrediting body, comprehensively reviewed the master of public health program and the master of health administration program (both considered to be part of public health academics). These programs were accredited by CEPH as part of college level accreditation. The site team also reviewed all of our other academic programs. Each had to demonstrate that students acquired fundamental knowledge of public health and varying degrees of public health competency based on the level and type of program. College level accreditation required compliance with these standards.

I. Briefly describe the anticipated delivery system for the proposed program (e.g., traditional delivery on main campus; traditional delivery at branch campuses or centers; or nontraditional delivery such as distance or distributed learning, self-paced instruction, or external degree programs). If the proposed delivery system will require specialized services or greater than normal financial support, include projected costs in Table 2. Provide a narrative describing the feasibility of delivering the proposed program through collaboration with other universities, both public and private. Cite specific queries made of other institutions with respect to shared courses, distance/distributed learning technologies, and joint-use facilities for research or internships.

Although the delivery system for this degree program will predominantly be a traditional graduate education model with delivery on the main campus, the core public health courses (15 credits) are currently available online, and it is possible additional courses will become available

via distance education in the future. Some components of the program require intensive interaction with and supervision by faculty member (e.g., supervised research, supervised teaching). Therefore, substantial components of this program will always remain at the main campus or affiliated site where research is being conducted as part of program requirements. USF is the closest potential partner for distance learning. They do not offer advanced (doctoral level) coursework in EGH or SBS on line. If appropriate coursework were made available via distance education and USF had increased student capacity, we would be open to discussing sharing this coursework. Dr. Donna Peterson, dean of the College of Public Health at USF, has been supportive of our doctoral level program development and assisted us with program development during the accreditation process. We also plan to capitalize on the expertise of diverse Health Science Center faculty members and the professional relationships we have built with faculty members from other universities and agencies to enhance students' classroom exposure to experts in the field.

VIII. Faculty Participation

A. Use Table 4 to identify existing and anticipated ranked (not visiting or adjunct) faculty who will participate in the proposed program through Year 5. Include (a) faculty code associated with the source of funding for the position; (b) name; (c) highest degree held; (d) academic discipline or specialization; (e) contract status (tenure, tenure-earning, or multi-year annual [MYA]); (f) contract length in months; and (g) percent of annual effort that will be directed toward the proposed program (instruction, advising, supervising internships and practica, and supervising thesis or dissertation hours).

Please see Table 4.

B. Use Table 2 to display the costs and associated funding resources for existing and anticipated ranked faculty (as identified in Table 2). Costs for visiting and adjunct faculty should be included in the category of Other Personnel Services (OPS). Provide a narrative summarizing projected costs and funding sources.

The projected faculty costs, salary and benefits, in Year 1 and Year 5, respectively, are \$140,189 and \$205,251. All but \$5034 in faculty costs is paid from E & G; the remainder is from contracts and grants. We do not anticipate use of adjunct faculty for this program.

C. Provide the number of master's theses and/or doctoral dissertations directed, and the number and type of professional publications for each existing faculty member (do not include information for visiting or adjunct faculty).

The numbers requested are provided below. It is important to note that the MPH program is a non-thesis master's. Dr. Krueger, in particular, has significant experience working with master's students (N=24) on culminating projects, which includes a final paper. However, nonthesis research projects are not reflected below. For theses and dissertations, the numbers include students currently being supervised on their research projects.

Faculty Name	Theses	Dissertations	Professional Publications		
Barnett, Tracey	2	0	8		
Curbow, Barbara	23	82	83		
Mann,Giselle	10 (USA),	7	49		

	22 (AUS)		
Pomeranz, Jamie	0	2	12
Rahim-	0	0	4
Williams, Bridgette			
Thombs, Dennis	14	15	98
Young, Mary Ellen	4	15	53
Barber, David	11	13	46
Freeman, Natalie	2	9	56
Ilacqua, Vito	2	1	8
Kane, Andrew	10	14	59
Krueger, Traci	0	0	4
Mayer, Brian	4	7	16
Okech, Bernard	2 (Kenya)	1 (Kenya)	18
Roberts, Steve	7	29	91

D. Provide evidence that the academic unit(s) associated with this new degree have been productive in teaching, research, and service. Such evidence may include trends over time for average course load, FTE productivity, student HC in major or service courses, degrees granted, external funding attracted, as well as qualitative indicators of excellence.

The public health program has been highly successful since its initiation, as reflected in the fiveyear growth trend from 2004 to 2008. During this time period, the master of public health program grew from 53 students (Fall, 2004) to 129 students (Fall 2008). During the five-year period from 2004 to 2008, the number of MPH graduates has grown from 21 to 61, including 8 environmental health graduates and 20 social and behavioral sciences graduates. Research awards during that same time period grew almost 4-fold, from \$1,379,126 to \$4,843,182. The degree program has also been complemented by a popular certificate program, which enrolled 7 students in an on-campus format in 2004 and currently has 72 students (26 on campus and 46 on line).

IX. Non-Faculty Resources

A. Describe library resources currently available to implement and/or sustain the proposed program through Year 5. Provide the total number of volumes and serials available in this discipline and related fields. List major journals that are available to the university's students. Include a signed statement from the Library Director that this subsection and subsection B have been reviewed and approved for all doctoral level proposals.

1.a Overall Access

The University Library System, composed of 9 libraries, constitutes the largest information resource in the state of Florida. It contains more than 4,000,000 volumes, 1,000,000 government documents, 4,200,000 microforms, and 550,000 maps and images. In addition, the Libraries provide over 425,000 links to online resources, including e-books, databases, government documents, tutorials and full texts of journals. The Digital Library Center is

developing the UF Digital Collections and contributes to the Publication of Archival, Library & Museum Materials (PALMM) initiative of the State University System. All of the libraries serve all of the university's faculty members and students; however, each has a special mission to be the primary support of specific colleges and degree programs. The Health Science Center Libraries are among the eight libraries in the system known as the George A. Smathers Libraries of the University of Florida. The Legal Information Center (aka the UF Law Library) is attached to its administrative unit.

The University of Florida Health Science Center (HSC) Library serves as a primary information center for the staff, faculty members and students within the Health Science Center. The University of Florida Health Science Center has expanded into the one of the most comprehensive public academic health centers in the Southeast. The "center" now encompasses six colleges (Medicine, Nursing, Public Health & Health Professions, Veterinary Medicine, Dentistry and Pharmacy), affiliated centers and institutes, a statewide network of affiliated hospitals and clinics that includes Shands Hospital as the flagship teaching hospital, and the neighboring Veterans Affairs Medical Center of Gainesville.

HSC Library provides access to relevant propriety databases: CINAHL, Web of Knowledge (Science/Social Science Citation Indexes, CAB, BIOSIS, Zoological Record), Health and Psychosocial Instruments, Dissertation and Theses, Journal Citation Reports, the Cochrane suite of Evidence-Based Medicine resources, Knovel, LexisNexis Academic Universe, SciFinder Scholar and multiple additional databases available through Cambridge Scientific Abstracts, EbscoHost, FirstSearch, Gale and WilsonOmniFiles. It also provides clear navigation to public databases such as PubMed, TOXNET, Agricola and Ageline and is considering subscription to CABI Global Health database. Remote library access to databases and other electronic information resources is provided through a campus-wide fiber optic backbone, proxy services and a downloadable Virtual Private Network software package. Classes on database searching, authoritative websites and use of bibliographic software packages such as EndNote and RefWorks are taught each semester for UF faculty members, staff, and students. These classes can help to improve library and information searching skills. Some classes are taught through course-integrated instruction while others are offered for the whole UF community. Tutorials are available for off-campus users. When not in use for classes, the HSC Libraries' Informatics Lab provides public access to electronic resources and productivity software such as Microsoft Office. The library has 106 computers (total) available: 71 in the public areas (including 5 largescreen, multiple keyboard group study workstations in the Collaboration Commons and 3 scanning stations); 8 in private study rooms and 27 in the open computer laboratory/electronic classroom. Several PC and iMAC computer stations within the HSC Libraries have SPSS and SAS statistical software and software for editing and sharing sound and image files for research and presentations. HSC students can also reserve 23 several private study rooms for group discussion or private work and 2 rooms for AV viewing. In addition, HSC students can use the primary student study area--available 24/7--called the "blue room."

The HSC Libraries' collection supports instruction and research for the six HSC colleges. The Collection Management department selects materials in all formats and evaluates the quality and use of the materials received. As of June 30, 2008 the Health Science Center Libraries' collection totaled 340,866 volumes; this includes 103,853 monograph (book) volumes; 237,013 journal volumes; and 6,605 audiovisual resources. As of August, 2009, UF users have access to

more than 64,000 electronic journals and 219,574 electronic books campus-wide. Participating in the National Network of Libraries of Medicine facilitates HSCL's interlibrary loan service for health-related materials outside this collection.

1.b Environmental and Global Health

The UF Library system holds, licenses or provides links to over 1,700 books and videos and 3,700 periodical volumes, including electronic and print and electronic-only access. The extent of full-text vs. Table of Contents with or without abstracts and the stability of access on the electronic media varies among these titles and their providers.

2. Serials. (Provide the total number available in this discipline and related fields, and list those major journals which are available at your institution.) The UF Libraries catalog identified 122 journal titles under the subject heading "Environmental Health" and 17 under "World Health" held by UF libraries. Among the essential and research core serials (journals with one exception) specific to Environmental and Global Health are the following:

Annals of Tropical Medicine and Parasitology Archives of Environmental and Occupational Health: An International Journal Archives of Environmental Contamination and Toxicology Archives of Toxicology Asian Journal of WTO & International Health Law and Policy BMC International Health and Human Rights Bulletin of Environmental Contamination and Toxicology Bulletin of the World Health Organization *Chemosphere* [subject heading: Pollution--physiological effects] Clinical Toxicology [Official journal of the American Academy of Clinical Toxicology and European Association of Poisons Centres and Clinical Toxicologists] Critical Reviews in Toxicology Eastern Mediterranean Health Journal European Journal of Public Health Environmental and Molecular Mutagenesis Environmental Health: A Global Access Science Source **Environmental Health Perspectives** Environmental Research Environmental Toxicology and Chemistry Ethnicity and Disease Health Care for Women International Human and Experimental Toxicology IARC Monographs on the Evaluation of Carcinogenic Risks to Humans Indoor Air Inhalation Toxicology International Archives of Occupational and Environmental Health International Journal of Global Health and Health Disparities International Journal of Occupational Medicine and Environmental Health Journal of the Air and Waste Management Association

Journal of Applied Toxicology Journal of Environmental Health Journal of Exposure Science and Environmental Epidemiology Journal of Toxicology and Environmental Health Neurotoxicology and Teratology [subject headings: Environmental Pollution--adverse effects, Nervous System Diseases--chemically induced] Reproductive Toxicology Revista Panamericana de Salud Publica Scandinavian Journal of Work, Environment and Health Science of the Total Environment Toxicology Toxicology and Environmental Health, Parts A (Current Issues) and B (Critical Reviews) Transactions of the Royal Society of Tropical Medicine and Hygiene Tropical Medicine and International Health Other available relevant core journals include: Annals of Agricultural and Environmental Medicine Aquatic Toxicology

Asian Journal of WTO & International Health Law and Policy Cell Biology and Toxicology Environmental Geochemistry and Health Environmental Health in Emergencies and Disasters Environmental Management and Health *Environmental Pollution [subject heading: Pollution—physiological effect]* Environmental Toxicology Environmental Toxicology and Pharmacology Florida Journal of Environmental Health Food and Chemical Toxicology Food and Cosmetics Toxicology Forensic Toxicology Fundamental and Applied Toxicology Genomics and World Health Global Change and Human Health Global Health Global Health Action **Global Health Promotion** Global Tuberculosis Control: WHO Report Globalization and Health Hazardous Substances and Public Health Indoor & Built Environment International Journal of Environmental Health Research International Journal of Environmental Research and Public Health International Journal of Hygiene and Environmental Health International Journal of Toxicology International Journal of Toxicology, Occupational and Environmental Health Internet Journal of World Health and Societal Politics

Journal of the Air Pollution Control Association Journal of Analytical Toxicology Journal of Biochemical Toxicology Journal of Environmental and Public Health Journal of Environmental Health Research Journal of Environmental Science and Health Journal of Nutritional and Environmental Medicine Journal of Rural and Remote Environmental Health Medical Anthropology Quarterly Molecular and Cellular Toxicology Mutation Research: Genetic Toxicology and Environmental Mutagenesis Mutation Research: Fundamental and Molecular Mechanisms of Mutagenesis Regulatory Toxicology and Pharmacology Reviews in Pesticide Toxicology Toxicology and Industrial Health Transactions of the Royal Society of Tropical Medicine and Hygiene Tropical Medicine and International Health Veterinary and Human Toxicology Veterinary Toxicology World Health World Health Forum

The UF Library system holds, licenses or provides links to approximately 10,000 books and videos and 2800 periodical volumes within the SBS area, including electronic and print and electronic-only access. Again, the extent of full-text and stability of access for electronic media vary by title and provider.

2. Serials (Provide the total number available in this discipline and related fields, and list those major journals which are available at your institution.)

There are approximately 1,000 related journals. Among the essential core journals in public health specifically pertinent to SBS are the following:

AIDS Education and Prevention American Journal of Health Behavior American Journal of Health Promotion Annals of Behavioral Medicine Culture, Health and Sexuality Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine Health Education and Behavior Health Promotion Practice Health Promotion Practice Health Psychology Journal of Adolescent Health Journal of Community Health Journal of Health and Social Behavior Perspectives on Sexual and Reproductive Health Preventing Chronic Diseases Social Science and Medicine

Other available relevant core journals include: Addiction Addictive Behaviors AIDS and Behavior AIDS: An International Monthly Journal Allied Health and Behavioral Sciences American Journal of Community Psychology American Sociological Review Applied behavioral science review Archives of Sexual Behavior The Behavioral and Brain Sciences Behavioral Biology **Behavioral Science Behavior Science Research** Behavioral Sciences & the Law British Journal of Health Psychology Canadian journal of Behavioural Science Cognitive, Affective & Behavioral Neuroscience Culture, Medicine and Psychiatry Ethnicity and Disease Evaluation and the Health Professions Health Risk and Society Hispanic Journal of Behavioral Sciences Human Behavior Integrative Physiological and Behavioral Science: The Official Journal of the Pavlovian Society The Journal of Applied Behavioral Science Journal of Behavioral Medicine Journal of Behavioural Science Journal of Biosocial Science Journal of Consulting and Clinical Psychology Journal of Health and Social Behavior Journal of Health Politics, Policy and Law Journal of Legal Medicine (Chicago, IL) Journal of Nutrition Education and Behavior Journal of Personality and Social Psychology Journal of School Health Journal of Studies on Alcohol Journal of the American Geriatrics Association Medical Anthropology Quarterly Omega Journal of Death and Dying Patient Education and Counseling Psychological Bulletin Psychology and Health

Psycho-Oncology Sexually Transmitted Diseases Social Marketing Quarterly Sozial- und Präventivmedizin: Social and Preventive Medicine Sociological Methodology Substance Use and Misuse Systems Research and Behavioral Science Techniques in the Behavioral and Neural Sciences Tobacco Control Women and Health: The Multidisciplinary Journal of Women's Health Issues Library document to be attached to final proposal.

B. Describe additional library resources that are needed to implement and/or sustain the program through Year 5. Include projected costs of additional library resources in Table 3.

Please see attached letter from Dean Russell, Appendix A.

Library Director

Date

C. Describe classroom, teaching laboratory, research laboratory, office, and other types of space that are necessary and currently available to implement the proposed program through Year 5.

The PhD program will benefit from Health Science Center educational resources available to the College of Public Health and Health Professions. The majority of classroom teaching is scheduled in two facilities: the HPNP Complex and the Communicore. The HPNP building is a state-of-the-art teaching facility that opened for student use in 2003. The HPNP is equipped with classrooms and teaching labs ranging in size from 20 seats to 139 seats, plus a 500-seat auditorium and a 76-seat distance-learning lab. The smaller classrooms have moveable seats and are designed for discussion groups and teaching labs. All HPNP classrooms are equipped with a broad range of audio-visual services, including a podium with an enclosed, networked PC, already attached to one or more ceiling mounted projectors. The Communicore houses classrooms ranging in size from 10 to 179 plus a 520-seat auditorium and two large rooms (165, 179 capacity) for videoconferencing. A series of 15-seat classrooms have moveable seating and are designed for use for discussion groups. The faculty members' office and research space for the SBS and EGH concentrations in the PhD program in the HPNP building includes 4140 square feet, including offices for each chair, faculty and staff, two conference rooms, and dedicated space for doctoral students. The EGH concentration also includes 4 faculty member offices located in the Center for Environmental and Human Toxicology, one office in the Aquatic Pathobiology facility, and a conference room in the Center for Environmental and Human Toxicology.

D. Describe additional classroom, teaching laboratory, research laboratory, office, and other space needed to implement and/or maintain the proposed program through Year
5. Include any projected Instruction and Research (I&R) costs of additional space in Table 2. Do not include costs for new construction because that information should be

provided in response to X (J) below.

No additional facilities are anticipated for this program. The infrastructure of the College of Public Health and Health Professions and the Health Science Center provides adequate instructional support.

E. Describe specialized equipment that is currently available to implement the proposed program through Year 5. Focus primarily on instructional and research requirements.

All students at the University of Florida are required to have access to a computer with minimum specifications for coursework. This access will satisfy the equipment needs for course related and research activities. Faculty members have access to a wide variety of teaching facilities to meet educational goals. As noted above, standard equipment in each classroom includes a podium and computer access to the web as well as PowerPoint presentations. The Health Science Center provides staff who are capable of diagnosing and repairing common A/V problems onsite and have a cache of commonly used equipment (e.g. DVD players, VCRs, video recorders, etc) available to address A/V needs not met by the equipment already in the classrooms. The faculty labs are equipped with appropriate materials to satisfy program requirements related to lab rotations.

F. Describe additional specialized equipment that will be needed to implement and/or sustain the proposed program through Year 5. Include projected costs of additional equipment in Table 2.

Insert response here. N/A

G. Describe any additional special categories of resources needed to implement the program through Year 5 (access to proprietary research facilities, specialized services, extended travel, etc.). Include projected costs of special resources in Table 2.

Insert response here. N/A

H. Describe fellowships, scholarships, and graduate assistantships to be allocated to the proposed program through Year 5. Include the projected costs in Table 2.

The College of PHHP has a proven record of support of its doctoral students. In academic year 2008-2009, graduate assistantship support totaled \$1.43 million for 161 students. We also provided tuition waiver support of \$894,031. It is the intention of the program to secure appropriate funding for students in the new PhD program. Anticipated primary sources of support include research assistantships from externally funded faculty member research, internal and external fellowship opportunities, and teaching assistantships available through the master of public health progam and the bachelor of health science program. We plan to request \$50,000 in graduate student fellowship support from the Graduate School, consistent with previous new PhD program requests.

I. Describe currently available sites for internship and practicum experiences, if appropriate to the program. Describe plans to seek additional sites in Years 1 through 5.

Insert response here. N/A

J. If a new capital expenditure for instructional or research space is required, indicate where this item appears on the university's fixed capital outlay priority list. Table 2 includes only Instruction and Research (I&R) costs. If non-I&R costs, such as indirect costs affecting libraries and student services, are expected to increase as a result of the program, describe and estimate those expenses in narrative form below. It is expected that high enrollment programs in particular would necessitate increased costs in non-I&R activities.

Insert response here. N/A

REFERENCES

¹www.fldu.org-StrategicPlan-pdf-StrategicPlan_05-13.pdf.url

² Association of State and Territorial Health Officials (2004). State Public Health Employee Worker Shortage Report: A Civil Service Recruitment and Retention Crisis <u>http://www.astho.org/pubs/Workforce-Survey-Report-2.pdf</u>

³ American Public Health Association (September, 2006). The Public Health Workforce Shortage: Left Unchecked, Will We Be Protected? <u>http://www.apha.org/workforcebrief.pdf#search=%22APHA%20Public%20Health%20Workforc</u> <u>e%22</u>

⁴ ASPH Policy Brief (December 2008). *Confronting the Public Health Workforce Crisis. Executive Summary* <u>http://www.asph.org/UserFiles/WorkforceShortage2010Final.pdf</u>

⁵ Association of Schools of Public Health (2006). 2005 Annual Data Report. http://www.asph.org/userfiles/ADR%202005.pdf

⁶ From Achievement to Recognition: Strategic Work Plan for the University of Florida, March 8, 2007. <u>http://www.president.ufl.edu/workPlan-20070503.pdf</u>

TABLE 1-B
PROJECTED HEADCOUNT FROM POTENTIAL SOURCES
(Graduate Degree Program)

Source of Students	Ye	ar 1	Ye	ar 2	Year 3		Ye	ar 4	Ye	ar 5
(Non-duplicated headcount in any given year)*	НС	FTE	нс	FTE	НС	FTE	нс	FTE	НС	FTE
Individuals drawn from agencies/industries in your service area (e.g., older returning students)	0	0	0	0	1	0.75	1	0.75	1	0.75
Students who transfer from other graduate programs within the university**	0	0	0	0	0	0	0	0	0	0
Individuals who have recently graduated from preceding degree programs at this university	4	3.06	7	5.28	9	6.72	12	8.28	12	8.47
Individuals who graduated from preceding degree programs at other Florida public universities	2	1.53	4	3.03	7	4.53	11	7.91	11	7.84
Individuals who graduated from preceding degree programs at non-public Florida institutions	0	0	1	0.78	1	0.75	1	0.72	2	1.47
Additional in-state residents***	0	0	0	0	0	0	0	0	0	0
Additional out-of-state residents***	0	0	2	1.53	4	3.03	4	2.22	6	4.13
Additional foreign residents***	0	0	0	0	0	0	0	0	0	0
Other (Explain)***	0	0	0	0	0	0	0	0	0	0
Totals	6	4.59	14	10.62	22	15.78	29	19.88	32	22.66

List projected yearly cumulative ENROLLMENTS instead of admissions
 If numbers appear in this category, they should go DOWN in later years.
 Do not include individuals counted in any PRIOR category in a given COLUMN.

			Yea	ar 1					Year 5		
T (() 0		I	Funding Sourc	e	_						
Instruction & Research Costs (non-cumulative)	Reallocated Base* (E&G)	Enrollment Growth (E&G)	Other New Recurring (E&G)	New Non- Recurring (E&G)	Contracts & Grants (C&G)	Subtotal E&G and C&G	Continuing Base** (E&G)	New Enrollment Growth (E&G)	Other*** (E&G)	Contracts & Grants (C&G)	Subtotal E&G and C&G
Faculty Salaries and Benefits	135,716	0	0	0	4,473	\$140,189	200,217		0	5,034	\$205,251
A & P Salaries and Benefits	0	0	0	0	0	\$0	0	0	0	0	\$0
USPS Salaries and Benefits	0	0	0	0	0	\$0	11,646		0	0	\$11,646
Other Personnel Services	0	0	0	0	0	\$0	0	0	0	0	\$0
Assistantships & Fellowships	0	0	0	0	0	\$0	50,000		0	0	\$50,000
Library	0	0	0	0	0	\$0	0	0	0	0	\$0
Expenses	300	0	0	0	0	\$300	500		0	0	\$500
Operating Capital Outlay	0	0	0	0	0	\$0	0	0	0	0	\$0
Special Categories	0	0	0	0	0	\$0	0	0	0	0	\$0
Total Costs	\$136,016	\$0	\$0	\$0	\$4,473	\$140,489	\$262,363	\$0	\$0	\$5,034	\$267,397

TABLE 2PROJECTED COSTS AND FUNDING SOURCES

*Identify reallocation sources in Table 3.

**Includes recurring E&G funded costs ("reallocated base," "enrollment growth," and "other new recurring") from Years 1-4 that continue into Year 5.

***Identify if non-recurring.

Faculty and Staff Summary

Total Positions (person-years)	Year 1	Year 5
Faculty	1.13	1.43
A & P	0	0
USPS	0	3

Calculated Cost per Student FTE

	Year 1	Year 5
Total E&G Funding	\$0	\$262,363
Annual Student FTE	4.6	22.7
E&G Cost per FTE	\$0	\$11,558

Program and/or E&G account from which current funds will be reallocated during Year 1	Base before reallocation	Amount to be reallocated	Base after reallocation
33040000-101-1100	505,947	77,358	\$428,589
33160000-101-1100	384,549	58,358	\$326,191
	0	0	
	0	0	
	0	0	
	0	0	
Totals	\$890,496	\$135,716	\$754,780

 TABLE 3

 ANTICIPATED REALLOCATION OF EDUCATION & GENERAL FUNDS

Faculty Code	Faculty Name or "New Hire" Highest Degree Held Academic Discipline or Speciality	Rank	Contract Status	Initial Date for Participation in Program	Mos. Contract Year 1	FTE Year 1	% Effort for Prg. Year 1	PY Year 1	Mos. Contract Year 5	FTE Year 5	% Effort for Prg. Year 5	PY Year 5
Α	Barbara Curbow, Ph.D.	Professor	Tenure	Fall 2010	12	1.00	0.14	0.14	12	1.00	0.14	0.14
	Social & Behavioral Sciences		Earning									
Α	Giselle Mann, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.10	0.10	12	1.00	0.10	0.10
	Social & Behavioral Sciences	Professor	Earning									
Α	Dennis Thombs,Ph.D	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Social & Behavioral Sciences	Professor										
Α	Tracey Barnett, Ph.D.	Assistant	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Social & Behavioral Sciences	Professor	Earning									
D	Bridgett Rahim-Williams, Ph.D	Assistant	MYA	Fall 2010	12	1.00	0.05	0.05	12	1.00	0.05	0.05
	Social & Behavioral Sciences	Professor										
Α	Mary Ellen Young, Ph.D.	Associate	MYA	Fall 2010	12	1.00	0.11	0.11	12	1.00	0.11	0.11
	Social & Behavioral Sciences	Professor										
Α	Jamie Pomeranz, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.09	0.09	12	1.00	0.09	0.09
	Social & Behavioral Sciences	Professor										
Α	TBD	Associate	Tenure	Fall 2011	12	1.00	0.00	0.00	12	1.00	0.10	0.10
	Social & Behavioral Sciences	Professor	Earning									
Α	Natalie Freeman, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning									
Α	Andrew Kane, Ph.D.	Associate	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning									
Α	Vito Ilacqua, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.05	0.05	12	1.00	0.05	0.05
	Environmental & Global Health	Professor										
Α	Bernard Okech, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor										
А	Traci Krueger, Ph.D.	Assistant	MYA	Fall 2010	12	1.00	0.03	0.03	12	1.00	0.03	0.03
	Environmental & Global Health	Professor										
А	David Barber, Ph.D.	Assistant	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health	Professor	Earning									

 TABLE 4

 ANTICIPATED FACULTY PARTICIPATION

Α	Stephen Roberts, Ph.D.	Professor	Tenure	Fall 2010	12	1.00	0.08	0.08	12	1.00	0.08	0.08
	Environmental & Global Health											
А	Brian Mayer, Ph.D. Environmental & Global Health	Assistant Professor	Tenure Earning	Fall 2010	9	0.75	0.03	0.02	9	0.75	0.03	0.02
А	TBD Environmental & Global Health	Associate Professor	Tenure Earning	Fall 2012	12	1.00	0.00	0.00	12	1.00	0.10	0.10
А	TBD Environmental & Global Health	Associate Professor	Tenure Earning	Fall 2012	12	1.00	0.00	0.00	12	1.00	0.10	0.10
	Total Person-Years (PY)							1.13				1.43

Faculty			PY Workload by Budget Classsification				
Code		Source of Funding	Source of Funding				
Α	Exisitng faculty on a regular line	Current Education & General Revenue		1.08		1.38	
В	New faculty to be hired on a vacant line	Current Education & General Revenue	Current Education & General Revenue				
С	New faculty to be hired on a new line	New Education & General Revenue		0.00		0.00	
D	Existing faculty hired on contracts/grants	Contracts/Grants		0.05		0.05	
Е	New faculty to be hired on contracts/grants	Contracts/Grants		0.00		0.00	
		Overall Totals for	Year 1	1.13	Year 5	1.43	



George A. Smathers Libraries Office of the Dean of University Libraries 535 Library West PO Box 117000 Gainesville, FL 32611-7000 352-273-2505 352-392-7251 Fax www.uflib.ufl.edu

December 22, 2009

Dr. Stephanie Hanson Executive Associate Dean PO Box 100185 4101 HPNP Room 4114 Gainesville FL 32611

Dear Dr. Hanson:

I am providing the following in response to your request for information outlining library resources in support of the new PhD in Public Health being proposed. Please note the need for additional funding should not exceed \$30,000 for ongoing resources and \$10,000 for backfiles.

1.a Overall Access

The University Library System, composed of 9 libraries, constitutes the largest information resource in the state of Florida. It contains more than 4,000,000 volumes, 1,000,000 government documents, 4,200,000 microforms, and 550,000 maps and images. In addition, the Libraries provide over 425,000 links to online resources, including e-books, databases, government documents, tutorials and full texts of journals. The Digital Library Center is developing the UF Digital Collections and contributes to the Publication of Archival, Library & Museum Materials (PALMM) initiative of the State University System. All of the libraries serve all of the university's faculty members and students; however, each has a special mission to be the primary support of specific colleges and degree programs. The Health Science Center Libraries are among the eight libraries in the system known as the George A. Smathers Libraries of the University of Florida. The Legal Information Center (aka the UF Law Library) is attached to its administrative unit.

The University of Florida Health Science Center (HSC) Library serves as a primary information center for the staff, faculty members and students within the Health Science Center. The University of Florida Health Science Center has expanded into the one of the most comprehensive public academic health centers in the Southeast. The "center" now encompasses six colleges (Medicine, Nursing, Public Health & Health Professions, Veterinary Medicine, Dentistry and Pharmacy), affiliated centers and institutes, a statewide network of affiliated hospitals and clinics that includes Shands Hospital as the flagship teaching hospital, and the neighboring Veterans Affairs Medical Center of Gainesville.

HSC Library provides access to relevant propriety databases: CINAHL, Web of Knowledge (Science/Social Science Citation Indexes, CAB, BIOSIS, Zoological Record), Health and Psychosocial Instruments, Dissertation and Theses, Journal Citation Reports, the Cochrane suite of Evidence-Based Medicine resources, Knovel, LexisNexis Academic Universe, SciFinder Scholar and multiple additional databases available through Cambridge Scientific Abstracts, EbscoHost, FirstSearch, Gale and WilsonOmniFiles. It also provides clear navigation to public databases such as PubMed, TOXNET, Agricola and Ageline and is considering subscription to CABI Global Health database. Remote library access to databases and other electronic information resources is provided through a campus-wide fiber optic backbone, proxy services and a downloadable Virtual Private Network software package. Classes on database searching, authoritative websites and use of bibliographic software packages such as EndNote and RefWorks are taught each semester for UF faculty members, staff, and students. These classes can help to improve library and information searching skills. Some classes are taught through course-integrated instruction while others are offered for the whole UF community. Tutorials are available for offcampus users. When not in use for classes, the HSC Libraries' Informatics Lab provides public access to electronic resources and productivity software such as Microsoft Office. The library has 106 computers (total) available: 71 in the public areas (including 5 large-screen, multiple keyboard group study workstations in the Collaboration Commons and 3 scanning stations); 8 in private study rooms and 27 in the open computer laboratory/electronic classroom. Several PC and iMAC computer stations within the HSC Libraries have SPSS and SAS statistical software and software for editing and sharing sound and image files for research and presentations. HSC students can also reserve 23 several private study rooms for group discussion or private work and 2 rooms for AV viewing. In addition, HSC students can use the primary student study area--available 24/7--called the "blue room."

The HSC Libraries' collection supports instruction and research for the six HSC colleges. The Collection Management department selects materials in all formats and evaluates the quality and use of the materials received. As of June 30, 2008 the Health Science Center Libraries' collection totaled 340,866 volumes; this includes 103,853 monograph (book) volumes; 237,013 journal volumes; and 6,605 audiovisual resources. As of August, 2009, UF users have access to more than 64,000 electronic journals and 219,574 electronic books campus-wide. Participation in the National Network of Libraries of Medicine facilitates HSCL's interlibrary loan service for health-related materials outside this collection.

1.b Environmental and Global Health

The UF Library system holds or licenses over 1700 books and videos and 3700 periodical volumes, including electronic and print and electronic-only access. The extent of full-text vs. Table of Contents with or without abstracts and the stability of access on the electronic media varies among these titles and their providers.

2. Serials. (Provide the total number available in this discipline and related fields, and list those major journals which are available at your institution.)

The UF Libraries catalog identified 122 journal titles under the subject heading "Environmental Health" and 17 under "World Health." Among the essential and research core serials (journals with one exception) specific to Environmental and Global Health are the following:

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Annals of Tropical Medicine and Parasitology Archives of Environmental and Occupational Health: An International Journal Archives of Environmental Contamination and Toxicology Archives of Toxicology Asian Journal of WTO & International Health Law and Policy BMC International Health and Human Rights Bulletin of Environmental Contamination and Toxicology Bulletin of the World Health Organization *Chemosphere* [*subject heading: Pollution--physiological effects*] Clinical Toxicology [Official journal of the American Academy of Clinical Toxicology and *European Association of Poisons Centres and Clinical Toxicologists*] Critical Reviews in Toxicology Eastern Mediterranean Health Journal European Journal of Public Health Environmental and Molecular Mutagenesis Environmental Health: A Global Access Science Source Environmental Health Perspectives Environmental Research Environmental Toxicology and Chemistry Ethnicity and Disease Health Care for Women International Human and Experimental Toxicology IARC Monographs on the Evaluation of Carcinogenic Risks to Humans Indoor Air Inhalation Toxicology International Archives of Occupational and Environmental Health International Journal of Global Health and Health Disparities International Journal of Occupational Medicine and Environmental Health Journal of the Air and Waste Management Association Journal of Applied Toxicology Journal of Environmental Health Journal of Exposure Science and Environmental Epidemiology Journal of Toxicology and Environmental Health *Neurotoxicology and Teratology [subject headings: Environmental Pollution--adverse effects, Nervous System Diseases--chemically induced*] Reproductive Toxicology Revista Panamericana de Salud Publica Risk Analysis (bimonthly scholarly journal on health risks from Wiley-Blackwell) Scandinavian Journal of Work, Environment and Health Science of the Total Environment Toxicology Toxicology and Environmental Health, Parts A (Current Issues) and B (Critical Reviews) Toxicology and Applied Pharmacology Transactions of the Royal Society of Tropical Medicine and Hygiene Tropical Medicine and International Health

Other available relevant core journals include:

AIHA (American Industrial Hygiene Association) Journal Annals of Agricultural and Environmental Medicine Aquatic Toxicology Asian Journal of WTO & International Health Law and Policy Atmospheric Environment Cell Biology and Toxicology Environmental Geochemistry and Health Environmental Health in Emergencies and Disasters Environmental Management and Health Environmental Pollution [subject heading: Pollution—physiological effect] Environmental Toxicology Environmental Toxicology and Pharmacology Florida Journal of Environmental Health Food and Chemical Toxicology Food and Cosmetics Toxicology Forensic Toxicology Fundamental and Applied Toxicology Genomics and World Health Global Change and Human Health Global Health Global Health Action Global Health Promotion Global Tuberculosis Control: WHO Report Globalization and Health Hazardous Substances and Public Health Indoor & Built Environment International Journal of Environmental Health Research International Journal of Environmental Research and Public Health International Journal of Hygiene and Environmental Health International Journal of Toxicology International Journal of Toxicology, Occupational and Environmental Health Internet Journal of World Health and Societal Politics Journal of the Air Pollution Control Association Journal of Analytical Toxicology Journal of Biochemical Toxicology Journal of Environmental and Public Health Journal of Environmental Health Research Journal of Environmental Science and Health Journal of Nutritional and Environmental Medicine Journal of Rural and Remote Environmental Health Medical Anthropology Quarterly Molecular and Cellular Toxicology Mutation Research: Genetic Toxicology and Environmental Mutagenesis Mutation Research: Fundamental and Molecular Mechanisms of Mutagenesis Regulatory Toxicology and Pharmacology Reviews in Pesticide Toxicology Toxicology and Industrial Health Transactions of the Royal Society of Tropical Medicine and Hygiene

The Foundation for The Gator Nation

Tropical Medicine and International Health Veterinary and Human Toxicology Veterinary Toxicology World Health World Health Forum

The UF Library system holds or licenses approximately 10,000 books and videos and 2800 periodical volumes within the SBS area, including electronic and print and electronic-only access. Again, the extent of full-text and stability of access for electronic media vary by title and provider.

2. Serials (Provide the total number available in this discipline and related fields, and list those major journals which are available at your institution.)

There are approximately 1,000 related journals. Among the essential core journals in public health specifically pertinent to SBS are the following:

AIDS Education and Prevention American Journal of Health Behavior American Journal of Health Promotion Annals of Behavioral Medicine Culture, Health and Sexuality Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine Health Education and Behavior Health Promotion Practice Health Promotion Practice Health Psychology Journal of Adolescent Health Journal of Community Health Journal of Health and Social Behavior Perspectives on Sexual and Reproductive Health Preventing Chronic Diseases Social Science and Medicine

Other available relevant core journals include:

Addiction Addictive Behaviors AIDS and Behavior AIDS: An International Monthly Journal Allied Health and Behavioral Sciences American Journal of Community Psychology American Sociological Review Applied behavioral science review Archives of Sexual Behavior The Behavioral and Brain Sciences Behavioral Biology Behavioral Science Behavioral Science Research Behavioral Sciences & the Law

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British Journal of Health Psychology Canadian journal of Behavioural Science Cognitive, Affective & Behavioral Neuroscience *Culture, Medicine and Psychiatry* Ethnicity and Disease Evaluation and the Health Professions Health Risk and Society Hispanic Journal of Behavioral Sciences Human Behavior Integrative Physiological and Behavioral Science: The Official Journal of the Pavlovian Society The Journal of Applied Behavioral Science Journal of Behavioral Medicine Journal of Behavioural Science Journal of Biosocial Science Journal of Consulting and Clinical Psychology Journal of Health and Social Behavior Journal of Health Politics, Policy and Law Journal of Legal Medicine (Chicago, IL) Journal of Nutrition Education and Behavior Journal of Personality and Social Psychology Journal of School Health Journal of Studies on Alcohol Journal of the American Geriatrics Association Medical Anthropology Quarterly *Omega Journal of Death and Dying* Patient Education and Counseling Psychological Bulletin Psychology and Health Psycho-Oncology Sexually Transmitted Diseases Social Marketing Quarterly Sozial- und Präventivmedizin: Social and Preventive Medicine Sociological Methodology Substance Use and Misuse Systems Research and Behavioral Science Techniques in the Behavioral and Neural Sciences Tobacco Control Women and Health: The Multidisciplinary Journal of Women's Health Issues

With additional funding, the libraries could enhance these proposed degree programs by adding access to the following:

Database: CABI Global Health Specific Journals: *Risk Analysis Journal of Toxicology and Environmental Health,* Parts A and B (backfiles, unembargoed access to most recent issues) *Toxicology and Industrial Health*

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Behavioral sciences: back issues of lapsed subscriptions related to health Environmental health/Toxicology journals:

"Media" (air, water, etc)-specific titles Back issues of lapsed subscriptions International journals on global health

Please feel free to contact me if you have any questions or require additional information.

Sincerely,

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Judith C. Russell Dean of University Libraries

cc: Michael Perri, College of Public Health and Health Professions Nancy Schaefer, Health Science Center Libraries