



Department of Society, Human
Development and Health

*Curriculum and
Advising Guide*

Academic Year 2004–05

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Please contact Michele Brooks, Doctoral Academic Coordinator regarding any corrections, updates or suggestions for change to this Curriculum Guide.

Students will be informed regarding any changes via group E-mail announcement, postings on the SHDH bulletin boards, handouts and updates to the SHDH web site, www.hsph.harvard.edu/shdh.

DEPARTMENT OF SOCIETY, HUMAN DEVELOPMENT AND HEALTH

CURRICULUM AND ADVISING GUIDE

It is my pleasure to welcome all the new students who are matriculating in the masters and doctoral programs of the Department of Society, Human Development and Health in September 2004.

This Curriculum and Advising Guide is the guide for all students entering their programs this year. Those students who are returning doctoral or masters students will be following the curricula in force at the time of their matriculation unless they have received approval to change to the new curriculum from their advisor and degree program coordinator.

The Guide's main purpose is to provide details of the requirements for each degree program and their relevant academic procedures. (The School's Student Handbook is the final word on all academic procedures, so everyone should be familiar with its contents.) Use this information and the help of your academic advisor to design your program.

We all have goals for our time here at HSPH. The appendices contain lists of some of the jobs taken by recent alumni/ae and the general public health competencies required for those positions. Finally, there is information about finding internships, linking up with alumni/ae, and the Career Services Office at the School, all of which can contribute to planning and beginning your career after the School of Public Health.

My very best wishes for an enjoyable and successful time as members of our department and at the School of Public Health.

Lisa Berkman.
Department Chair

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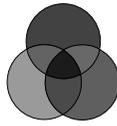
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DEPARTMENT OF SOCIETY, HUMAN DEVELOPMENT AND HEALTH CURRICULUM AND ADVISING GUIDE

1. INTRODUCTION

1.1. SHDH Department

1.1.1. Overview

The mission of the Department of Society, Human Development, and Health (SHDH) is to improve health throughout the lifespan, including a special emphasis on children and adolescents. This mission is achieved through research to identify the social and behavioral determinants of health, development and evaluation of interventions and policies leading to the improvement of population health, and the preparation of professionals and researchers who will fill leadership positions in advocacy and public service.

The department's educational mission is to train both scholars and practitioners: scholars whose research will illuminate basic social determinants of health and who will identify and test innovative social policy and service interventions; practitioners who are skilled in designing, implementing, and evaluating health-enhancing interventions in action settings.

1.1.2. The academic work of the department

The department highlights four areas of interest:

Health and Social Policy. A wide range of social policies—including but not limited to labor, poverty, family, housing, and educational policy—have a dramatic impact on health. This area of interest prepares students to design new and improve existing social policies and focuses on strategies for the successful implementation of social policies that improve health. Students who study in this area may be interested in working on public policy through research, within the government, or in a nonprofit organization.

Human Development. The department's emphasis on human development across the life course results from faculty research and interest in three areas: the physical, mental and behavioral health and well-being of children and adolescents; basic developmental processes (including physical growth, nutrition, and psychological development); and growing attention to the impact of early-life conditions on long-term health and functioning. Course work includes material on physical growth and development, principles of psychological and social development, and longitudinal research methods. Research conducted by faculty members involves longitudinal studies of both at-risk and community samples, emphasizing cumulative risk and protective influences across the lifespan and implications for prevention, early intervention, and treatment strategies.

Planned Social Change. This area of interest focuses on the application of theory in the design of intervention programs, as well as on research and evaluation methodology.

The area includes work on interventions using randomized clinical trial designs and quasi-experimental approaches. Attention is given to the following design steps: problem diagnosis, assessment, formative research, program design, and evaluation. The social settings for interventions may be communities, workplaces, schools and colleges, and health care facilities. Populations of interest include those who are underserved, marginalized, and in special need. Intervention strategies include educational interventions, community organizing and development, social marketing, communication, adult-learning approaches, and advocacy.

Social Determinants of Health. This area of interest emphasizes the analysis of the major social conditions that affect the health of populations. Research stresses socioeconomic position, social and economic inequality, discrimination, social networks and support, social capital, work conditions, and psychological states. Seminars, tutorials, and courses enable students to explore a range of the health consequences of various social factors by studying varied subgroups, at different times and places and under diverse and changing conditions. Students examine mechanisms and processes through which social factors exert their impact, and also investigate mechanisms that mediate or moderate relationships between social factors and health outcomes.



1.2. **SHDH Community**

We are committed to maintaining a strong and supportive Society, Human Development and Health community. We hope you become an active member of this community, attending department events and lending your ideas, time and energy. Please give thought to how we might be able to strengthen our department and stay attuned to emerging needs.

We are now a large community. Most of the primary faculty and the department's administrative staff can be found on the sixth and seventh floors of the Kresge Building. Some have their main offices with their research teams and colleagues in other buildings in the Longwood Medical Area. Other faculty who teach at the school have their primary appointments at other institutions in the area. (See lists in 1.2.1. and 1.2.2.)

The department has students in both doctoral and masters programs, and is host to the Family and Community Health concentration of the Masters of Public Health program.

□ **SHDH Socials**

The Department hosts four social events: one at the start of the school year, a holiday party in December before WinterSession, a party to toast the graduates in June, and a year-end celebration party also in June. As always, students are welcome to help plan and organize these events. Please contact Michele Brooks. Additional events are coordinated by HSPH, by SHDH students and by SHDH faculty advisors.

□ **SHDH Student Committees**

In past years, several “grass-roots” based student organizations have flourished based on the initiative of volunteer student participation:

Buddy Program. This links returning students with new students as mentors. A school year kick-off event is usually scheduled. Recipients of previous year's Buddy Program normally step forward and volunteer to carry on this valuable mentoring program.

SHDH Student Committee. Volunteer students provide feedback/ideas to the Academic Coordinators and faculty regarding curriculum issues, social event planning, communication issues, etc.

Social Events Planning Committee. Volunteer students work with Michele Brooks, Doctoral Academic Coordinator, and the Departmental Chair to help plan the menu, decorations, entertainment, etc.



1.2.1. Faculty

Note: For more information on faculty research activities and publications [and pictures], please turn to the Harvard School of Public Health Web site at www.hsph.harvard.edu for all faculty and at www.hsph.harvard.edu/shdh for SHDH department faculty.

Primary Teaching and Advising Faculty

Chair

Lisa F. Berkman, M.S., Ph.D., Thomas D. Cabot Professor of Public Policy and Chair. (Kresge Room 709; 617-432-3915; lberkman@hsph.harvard.edu)

- Social epidemiology
- Epidemiology of aging

Faculty

Dolores Acevedo-Garcia, M.P.A., Ph.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 722; 617-432-4486; dacevedo@hsph.harvard.edu)

- Effects of residential segregation on minority health
- Health effects of welfare reform and immigration policies on U.S. immigrants and citizens

Iain Aitken, M.B. B.Chir., M.P.H, Lecturer on Society, Human Development, and Health. (Kresge Room 613; 617-432-4622; iaitken@hsph.harvard.edu) [Leave of absence 6/04 – 6/06]

- Maternal health care
- Management of primary health care workers
- Design and financing of urban health care systems in developing countries

Elizabeth Barbeau, M.P.H., Sc.D., Assistant Professor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building Room 268; 617-632-5390 or 617-432-1135; elizabeth_barbeau@dfci.harvard.edu)

- Workplace health and safety policy
- Work-site cancer prevention
- Tobacco policy
- Health inequalities

Gary Bennett, M.A., Ph.D., Assistant Professor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building Room 256; 617-632-4050; gary_bennett@dfci.harvard.edu)

- Social/psychosocial determinants of racial and ethnic disparities in chronic disease morbidity and mortality
- Development of web-based health behavior change interventions

Stephen Buka, M.S., M.A., Sc.D., Associate Professor of Society, Human Development, and Health and of Epidemiology. (Kresge Room 603; 617-432-3870; sbuka@hsph.harvard.edu)

- Causes and prevention of behavioral and developmental disorders of children

Felton Earls, MD, Professor of Human Behavior and Development. [1430 Massachusetts Ave.; 617-695-5381; fearls@hsph.harvard.edu]

- Longitudinal research to understand how community, family and individual factors influence delinquent and criminal behavior

Karen Emmons, M.A., Ph.D., Professor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building Room 249; 617-632-2188; karen_m_emmons@dfci.harvard.edu)

- Cancer prevention
- Health communication
- Smoking and health effects of environmental tobacco smoke
- Healthcare and community-based interventions

Michael Ganz, M.S., Ph.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 615; 617-432-2382; mganz@hsph.harvard.edu)

- Relationship between socioeconomic factors, behaviors, ecologic factors, and maternal and child health measures

Stephen Gilman, S.M., S.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 605; 617-432-6383; sgilman@hsph.harvard.edu)

- Social and environmental determinants of psychiatric disorders
- Risks for psychopathology over the life course

Steven Gortmaker, M.S., Ph.D., Professor of Society, Human Development, and Health. (Kresge Room 720; 617-432-1029; sgortmak@hsph.harvard.edu)

- Statistical evaluation methods
- Socioeconomic position and child health
- Social, behavioral, environmental, and policy influences on obesity and other chronic conditions

Andre D. Gurmankin, Ph.D., Mbe, Assistant Professor of Society, Human Development, and Health. [Dana Farber Cancer Institute, Smith Building Room 253; 617-582-7942; andrea_gurmankin@dfci.harvard.edu]

- Risk perception
- Risk communication
- Medical decision making
- Medical ethics

Jody Heymann, M.D., Ph.D., Associate Professor of Society, Human Development, and Health. (Kresge Room 718; 617-432-4471 or 617-432-1135; jheyman@hsph.harvard.edu)

- Influence of social, labor, education, and poverty policies on health
- Strategies for decreasing the incidence and impact of diseases burdening poor and marginalized populations

Ichiro Kawachi, M.D., Ph.D., Professor of Social Epidemiology. (Kresge Room 713; 617-432-0235; ichiro.kawachi@channing.harvard.edu)

- Social inequalities in health, especially related to income distribution
- Stress and cardiovascular disease
- Quality of life and healthy aging
- Tobacco control

Karestan C. Koenen, M.A., Ph.D., Assistant Professor of Society, Human Development and Health. (Kresge Room 613; kkoenen@hsph.harvard.edu)

- Causes of trauma exposure and post-trauma psychopathology, particularly PTSD, across the lifespan
- Interaction of genetic and environmental risk in the development of psychopathology
- Women's status and child health

Nancy Krieger, M.S., Ph.D., Associate Professor of Society, Human Development, and Health. (Kresge Room 717; 617-432-1571; nkrieger@hsph.harvard.edu)

- Social inequalities in health, especially regarding race/ethnicity, social class, and gender
- Cancer, especially breast cancer
- Cardiovascular disease, especially hypertension

Laura Kubzansky, M.P.H., Ph.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 714; 617-432-3589; lkubzans@hsph.harvard.edu)

- Psychosocial determinants of health
- Social inequality and health
- Emotion and cardiovascular disease

Marie McCormick, M.D., Sc.D., Sumner and Esther Feldberg Professor of Maternal and Child Health. (Kresge Room 619; 617-432-3579; mmccormi@hsph.harvard.edu)

- Infant mortality
- Outcomes of high-risk neonates and interventions to ameliorate these outcomes

Beth Molnar, Sc.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 601; 617-432-2433; bmolnar@hsph.harvard.edu)

- Studying causes and consequences of violence against children, particularly its mental health and behavioral sequelae
- Social epidemiological studies of family and community violence with a focus on risk factors for child abuse and sexual assault
- Prevention of violent behavior, suicide, substance abuse and other high-risk behaviors among adolescents

Karen Peterson, Sc.D., R.D., Associate Professor of Nutrition and Society, Human Development, and Health. (Kresge Room 617; 617-432-4028; kpeterso@hsph.harvard.edu)

- Factors influencing how growth and body size go 'off track' throughout the lifecycle
- U.S. and international nutrition and physical activity surveillance systems
- Population-based intervention trials targeting risk factors for over- and undernutrition in low income, multi-ethnic populations

Rima E. Rudd, M.S.P.H., Sc.D., Senior Lecturer on Society, Human Development, and Health. (Kresge Room 719; 617-432-3753; rrudd@hsph.harvard.edu)

- Literacy and health communication
- Participatory pedagogy
- Theory based program design and evaluation

Venkata Sankaranarayanan, Ph.D., Assistant Professor of Society, Human Development, and Health. (Kresge Room 716; 617-432-6299; svsubram@hsph.harvard.edu)

- Social and health inequalities in developing and developed economies
- Multilevel quantitative methodologies
- Applied research includes investigating the independent effects of neighborhoods and contexts on health outcomes/behaviors in the U.S. and India

Jay Silverman, M.S., Ph.D., Assistant Professor of Society, Human Development, and Health. (Kresge 705a; 617-432-0081; jsilverm@hsph.harvard.edu)

- Etiology, epidemiology and prevention of intimate partner and other forms of gender-based violence against women, with an emphasis on adolescent dating violence
- Effects of intimate partner violence on children
- Related practice-based research

Glorian Sorensen, M.P.H., Ph.D., Professor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building Room 258; 617-632-4673; glorian_sorensen@dfci.harvard.edu)

- Cancer prevention in the workplace
- Intervention research in community and occupational settings

Kasisomayajula Viswanath, M.C.J., M.A., Ph.D., Associate Professor of Society, Human Development, and Health. [Dana Farber Cancer Institute, Smith Building Room 251; 617-632-2225; vish_viswanath@dfci.harvard.edu].

- Mass media and public health
- Communication and social inequities in health
- Risk communication
- New media developments in health communication

Henry Wechsler, M.A., Ph.D., Lecturer on Society, Human Development, and Health. (Kresge Room 704a; 617-432-1137; hwechsle@hsph.harvard.edu)

- Alcohol, tobacco and illicit drug use and related problem behaviors among college students and youth
- Evaluating interventions to decrease excessive alcohol use and consequent harms
- Examination of the role of public policy and environmental change strategies

Additional Appointments

Secondary

Allen Crocker, M.D., Associate Professor in the Department of Society, Human Development, and Health. (Children's Hospital, contact Yorlanda @ 617-355-6509)

- Chronic illness and developmental disabilities in children
- Mechanisms of disability

Barbara Gottlieb, M.D., M.P.H., Assistant Professor in the Department of Society, Human Development, and Health. (Brigham and Women's Hospital; 617-432-1080; bgottlieb@pchi.partners.org)

- Women's health
- Health of underserved/minority communities (esp. Latino)
- Depression
- Unintended pregnancy

Charles Homer, M.D., M.P.H., Associate Professor in the Department of Society, Human Development, and Health. (National Initiative for Children's Health Care Quality; 617-754-4800; chomer@nichq.org)

- Quality improvement in children's health care
- Chronic illness in children
- Business case for quality

Ellice Lieberman, M.D., M.P.H., Dr.P.H., Associate Professor in the Department of Society, Human Development, and Health. (Brigham and Women's Hospital; 617-278-0700; elieberman@partners.org)

- Perinatal epidemiology (mother and neonate)
- Pregnancy, labor
- Technology/management practices and outcome

Judith Palfrey, M.D., Professor in the Department of Society, Human Development, and Health. (Children's Hospital; contact Justine @ 617-355-4661; palfrey@a1.tch.harvard.edu)

- Health care for children with special health care needs
- Intersection of health and education
- Child health advocacy

Joan Reede, M.D., M.P.H., M.S., Assistant Professor in the Department of Society, Human Development, and Health. (Harvard Medical School; contact Jabbar Bennett @ jabbar_bennet@hms.harvard.edu)

- Biomedical manpower and academic/research career development
- Health services to/impact of health policy on minority and other populations

Michael Rich, M.D., M.P.H., Assistant Professor in the Department of Society, Human Development, and Health. (Children's Hospital; michael.rich@tch.harvard.edu)

- Children's health and communications media
- The illness experience from the patient's perspective

Benjamin Sachs, M.D., M.R.C.S., L.R.C.P., Dr.P.H., Professor in the Department of Society, Human Development, and Health. (Beth Israel Hospital; contact Patty Curtin @ 617-667-3160 or 617-667-2286; bsachs@caregroup.harvard.edu)

- Epidemiology and health policy relating to women and children in technological evaluation
- Infant mortality
- Medical services

Edward Tronick, M.S., Ph.D., Associate Professor in the Department of Society, Human Development, and Health. (Children's Hospital; 617-355-6948; contact Betty Woo @ betty.woo@tch.harvard.edu)

- Neurodevelopment of infants and children exposed to drugs in utero
- Depressive symptoms and mother-infant interaction

Adjunct

Norman Anderson, M.A., Ph.D., Adjunct Professor in Society, Human Development, and Health. (American Psychological Association; 202-336-6080; nanderson@apa.org)

- Health disparities
- Health and behavior

Robin Blatt, R.N., M.P.H., Adjunct Lecturer on Society, Human Development, and Health. (Kresge Room 611; 617-633-5522; robinblatt@biogenuity.com or robinblatt_blatt@comcast.net)

- Impact of genetics and biotechnology on public health planning and policy development
- Integration of emerging genetic technologies into clinical and public health practice
- Design of methods for continuing professional education, training and development

Mary Jean Brown, S.M., S.D., Adjunct Assistant Professor of Society, Human Development and Health. [National Center for Environment Health, Centers for Disease Control and Prevention; 770-488-7492; mjb5@cdc.gov]

- Program evaluation
- Geographic risk for adverse health effects
- Measuring the health impact of regulatory policies

William DeJong, M.A., Ph.D., Adjunct Professor of Society, Human Development, and Health. (Boston University School of Public Health; 617-432-0296; bdejong@cdc.org)

- Health communications
- Technology transfer
- Alcohol and tobacco control

Johanna Dwyer, R.D., M.S., S.M., Sc.D., Adjunct Professor of Society, Human Development, and Health. (New England Medical Center; 617-432-1080; JDwyer1@tufts-nemc.org)

- Diet related risks for degenerative diseases

- Nutrition interventions to decrease risks of diet related disease in infants, children and adolescents
- Effects of dietary supplements on total diet and health of mothers and children

Roberta Goldman, M.A., Ph.D., Adjunct Assistant Professor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building; 617-632-2146; Roberta_Goldman@dfci.harvard.edu)

- Qualitative research methods
- Social context of diverse populations and health communications for multi-ethnic groups

David Helm, M.A., Ph.D., Adjunct Lecturer on Society, Human Development, and Health. (Children's Hospital; david.helm@tch.harvard.edu)

- Applying sociologic methods to rehabilitation research
- Methods of enhancing the effectiveness of parents' management of disabled children

Daniel Kindlon, M.S., Ph.D., Adjunct Lecturer on Society, Human Development, and Health. (Kresge Room 611; 617-432-1080; DKindlon@aol.com)

- Child and adolescent psychopathology
- Stress and resiliency
- Parenting

Lawrence Kleinman, M.D., M.P.H., Adjunct Associate Professor of Society, Human Development, and Health. (Kresge Room 611; 617-432-1080; kleinman@creatovations.com)

- Impact of health policy on access, costs, and quality of care
- Disease management development, implementation, and evaluation
- Primary care and preventive services

Michael Marmot, M.B., M.P.H., Ph.D., Adjunct Professor of Society, Human Development, and Health. (m.marmot@ucl.ac.uk)

- Social inequalities in health and social epidemiology
- Chair of the International Centre for Health and Society at University College London
- Collaborates with the Center for Society and Health on an exchange program and research opportunities

Laura McCloskey, Ph.D., Adjunct Associate Professor of Society, Human Development, and Health. (School of Social Work, University of Pennsylvania; 215-898-5511; lmcclosk@hsph.harvard.edu)

- Family violence with a focus on the origins and impact of domestic violence and child abuse
- Health impact of domestic violence on women and children and cost-effective interventions

Anne Stoddard, Sc.D., Adjunct Lecturer on Society, Human Development, and Health. (New England Research Institutes; astoddard@neri.org)

- Study design and statistical methods for evaluation of behavioral intervention studies

Norma Swenson, M.P.H., Adjunct Lecturer on Society, Human Development, and Health. (Kresge Room 611; 617-969-8444; nswenson@hsph.harvard.edu)

- Women, gender, sexuality and public health
- Science, technology and media health information impacts on women's health policy and practice worldwide
- Activism by women's and community groups, global, national and local

Lisa Tieszen, M.A., L.I.C.S.W., Adjunct Lecturer on Society, Human Development, and Health. (Beth Israel Deaconess Medical Center; 617-667-8241; ltieszen@caregroup.harvard.edu)

- Domestic violence and its impact on the health and well-being of victims and their children
- The benefits to victims/survivors of health care intervention in domestic violence, sexual assault, and other forms of interpersonal violence

Debra Klein Walker, Ed.M., Ed.D., Adjunct Lecturer on Society, Human Development, and Health. [Abt Associates, Inc.; 617-349-2390; Deborah_Walker@abtassoc.com]

- Public health practice; application of core functions and essential services to improvement of the public's health
- Program evaluation
- Measurement and data systems; public health informatics
- Child and adolescent development, including children with special health care needs
- Alcohol and other drug use programs and policies

Annual

Jennifer Allen, R.N., M.P.H., Sc.D., Instructor of Society, Human Development, and Health. (Dana Farber Cancer Institute, Smith Building Room 274; jennifer_allen@dfci.harvard.edu)

- Women's health, intervention research and community-based approaches to cancer prevention and control

S. Bryn Austin, S. M., Sc.D., Instructor of Society, Human Development, and Health. (Division of Adolescent and Young Adult Medicine, Children's Hospital; bryn.austin@tch.harvard.edu)

- Population-based approaches to the prevention of eating disorders
- Designing and evaluating school-based nutrition and physical activity interventions
- Lesbian, gay, bisexual and transgender health

Rick Bell, M.S., Sc.D., Instructor of Society, Human Development and Health. (Natick RD & E Center; rbell@hsph.harvard.edu)

- The role of food involvement and environmental factors in influencing choice and intake of food
- The effects of dietary patterns and variety on food cravings and quality of life
- The influence of repeatedly eaten foods on health, disease and performance

Gregory Connolly, D.M.D., M.P.H., Instructor of Society, Human Development, and Health. (1552 Tremont St.; gconnoll@hsph.harvard.edu)

- State, national and international tobacco control policy
- Intervention concerning overseas marketing of tobacco

Charles Deutsch, Sc.D., Instructor of Society, Human Development, and Health. (Kresge Room 701a; cdeutsch@hsph.harvard.edu)

- School health
- Nonprofessionals in domestic and international health education/intervention systems
- The role of colleges and universities in improving health

Alison Earle, M.P.P., Ph.D., Instructor of Society, Human Development, and Health. (1637 Tremont St.; aearle@hsph.harvard.edu)

- The effect of public policies on the health and well-being of working families in the United States and worldwide
- Gender and class differences in social and work conditions and their impact on children's health and development

Jane Gardner, R.N., M.S., D.S., Instructor of Society, Human Development, and Health. [gardner99@juno.com]

- Human growth and development
- Program planning and evaluation

Bernard Glassman, M.A., Instructor of Society, Human Development, and Health. (bg@bernardglassman.net)

- Development and application of computer-based technologies for health communication
- Internet-connected and wireless devices and the evolution of technologies that will affect health information consumers and those at risk
- Inventor of context (<http://www.contexteditor.org>)

Robin Herman, Instructor of Society, Human Development, and Health. (Kresge Room 1015; rherman@hsph.harvard.edu)

- Director of Communications for HSPH
- Health communication and the media

1.2.2. SHDH Staff

The Department is well served by talented and energetic staff.

Laura Jay (617-432-3087; ljay@hsph.harvard.edu) is the Director of Administration (Room 711) and oversees the administrative unit.

Loretta LaFratta (617-432-3758; llafratt@hsph.harvard.edu) is the Assistant Director of Administration (Room 712a). Loretta handles financial and administrative processes.

Elaine Lynch (617-432-0156; elynych@hsph.harvard.edu) is the Accounting Assistant (Room 712) and processes accounts payable transactions and reimbursements and coordinates temporary and work-study payroll related to student employment.

Michele Brooks (617-432-3775; mbrooks@hsph.harvard.edu) is the Doctoral Academic Coordinator (Room 612) and can address inquiries about courses, doctoral degree requirements, and student departmental events.

Trish Lavoie (617-432-3762; tlavoie@hsph.harvard.edu) is the Masters Academic Coordinator (Room 610) and can address inquiries about courses and masters degree requirements.

Maribel Herrera, (617-432-3893; mherrera@hsph.harvard.edu) Staff Assistant (Room 701), organizes and distributes course materials for SHDH courses.

Cathy Zoza (617-432-1136; czoza@hsph.harvard.edu) is the Grants Manager (Room 614). Cathy is responsible for grant preparation for all new and continuing grant applications for all researchers in the department.

Toby Bernstein, (617-432-3915; tbernste@hsph.harvard.edu) Administrative Assistant (Room 710), serves as Assistant to the Chair, Dr. Lisa Berkman. Please see Toby to schedule appointments with Dr. Berkman.

Noreen Loughran, (617-432-1135; nloughra@hsph.harvard.edu) Staff Assistant, serves as our 7th floor receptionist and coordinates mail, conference room reservations and messages.

Armand Inezian (617-432-1080; ainezian@hsph.harvard.edu) Staff Assistant, serves as our 6th floor receptionist and coordinates mail and messages and assists in grant preparation.



2. ACADEMIC PROGRAMS

2.1. Introduction to Educational Programs

This section sets out the requirements for the departmental programs for those students matriculating in the 2004/05 academic year. For each degree are listed the general department requirements and those specific to the particular area of interest. Section three lists a selection of recommended elective courses by subject matter.

The **HSPH Student Handbook** is the final word on academic regulations for the School of Public Health. It provides important information on registration, courses, student grading, course evaluation, advising, etc. There is a separate section on the special regulations for doctoral students. These sections, and especially the section on academic integrity, should be read by all students to become familiar with school regulations and values, and to avoid making unnecessary and unwitting mistakes. In addition, there are helpful sections on student services and student life. There are also lists of the names and contact information of members of the school administration involved in different student services.

Degree Program Coordinators

Doctoral Program: Dr. Ichiro Kawachi

Masters Programs: To be determined

One-Year Masters of Science Program

Dual SHDH/Simmons Masters Degree

Two-Year Masters of Science Program

Master of Public Health (MPH) Program

2.2. SHDH DOCTOR OF SCIENCE AND DOCTOR OF PUBLIC HEALTH PROGRAMS

Program Coordinator: Dr. Ichiro Kawachi

2.2.1. Introduction

The doctoral program provides a common core education addressing issues of society, human development and health. At the same time, students are able to develop in-depth expertise in one of the four main academic areas of interest in the department.

Social Determinants of Health Area of Interest. This area of interest emphasizes the analysis of the major social conditions that affect the health of populations. Research stresses socioeconomic position, social and economic inequality, discrimination, social networks and support, social capital, work conditions, and psychological states. Seminars, tutorials, and courses enable students to explore a range of the health consequences of various social factors by studying varied subgroups, at different times and places and under diverse and changing conditions. Students examine mechanisms and processes through which social factors exert their impact, and also investigate mechanisms that mediate or moderate relationships between social factors and health outcomes.

Planned Social Change. This area of interest focuses on the application of theory in the design of intervention programs, as well as on research and evaluation methodology. The area includes work on interventions using randomized clinical trial designs and quasi-experimental approaches. Attention is given to the following design steps: problem diagnosis, assessment, formative research, program design and evaluation. The social settings for interventions may be communities, workplaces, schools and colleges and health care facilities. Populations of interest include those who are underserved, marginalized and in special need. Intervention strategies include educational and literacy interventions, community organizing and development, social marketing, communication, adult-learning approaches and advocacy.

Health and Social Policy. A wide range of social policies - including but not limited to labor, poverty, family, housing, and educational policy - have a dramatic impact on health. This area of interest prepares students to design new and improve existing social policies and focuses on strategies for the successful implementation of social policies that improve health. Students who study in this area may be interested in working on public policy through research, within the government or in a nonprofit organization.

Human Development. The department's emphasis on human development across the life course results from faculty research and interest in three areas: the physical, mental and behavioral health and well-being of children and adolescents; basic developmental processes (including physical growth, nutrition, and psychological development); and growing attention to the impact of early-life conditions on long-term health and functioning. Course work includes material on physical growth and development, principles of psychological and social development, and longitudinal research methods. Research conducted by faculty members involves longitudinal

studies of both at-risk and community samples, emphasizing cumulative risk and protective influences across the lifespan and implications for prevention, early intervention and treatment strategies.

In addition to the four departmental areas of interest, there are two special programs, *Cancer Education* and *Health and Literacy* that can be followed as part of these areas of interest, and two concentrations, the *Maternal and Child Health* and the *Interdisciplinary Concentration in Women, Gender and Health* which can be taken as minors.

The SHDH doctoral program

Most students enter the doctoral program with a strong foundation in the social, behavioral, clinical, public health, or natural sciences and with an earned master's degree in a social science (such as sociology, psychology, economics, political science, public policy, and anthropology); clinical health (such as nursing and social work); public health (such as epidemiology and health education); or natural sciences (such as biology, physiology, and neurosciences). For the Doctor of Science (SD), the department accepts a small number of students without a master's degree directly into the program. Applicants to the Doctor of Public Health (DPH) program must hold an MPH and a prior doctoral degree.

SD and DPH students must fulfill the residency requirements by completing at least 120 credits of graduate work normally over a 4-year period. This includes a minimum of 80 credits during the first two years of course work (60 for ordinal grades), and another 40 credits in independent study and research credits to complete the dissertation. In particular, students must take 40 ordinal credit units in graduate-level courses, distributed over one major (a minimum of 20 ordinal credits within SHDH) and two minor fields (a minimum of 10 ordinal credits in each field). [Note: the HSPH required courses do NOT count towards major or minor fields.] All students enrolled in the doctoral program must maintain satisfactory progress in the academic program and all courses in the major and minor fields must be completed with grades of B- or better.

Of special note: Students who have received a one-year masters degree (SM1) from HSPH within three years of enrolling in the doctoral program will be assessed one year full-time tuition and one year doctoral full-time reduced tuition. Students who have received a two-year masters degree (SM2) from HSPH within three years of enrolling in the doctoral program will be assessed one year of full-time reduced doctoral tuition. Please note: the words "full-time reduced tuition" refers to half tuition fees. Therefore, a student who received an SM1 pays full tuition for the 1st year in the doctoral program and half tuition for the 2nd year in the doctoral program (only facility fees for the 3rd year); a student who received an SM2 pays half tuition for the 1st year in the doctoral program and only facility fees for the 2nd year in the doctoral program.

The doctoral program is designed to move students through course work and into the research phase with due speed. By the end of the first semester of study, all students in the doctoral program will have selected their area of interest (major) and prepared a course plan of required and elective courses for the rest of the two years. (See also 2.2.7. on the Timetable.) Written and oral examinations are taken subsequent to the end of the two years of course work (see 2.2.8. and 2.2.9.). Students who satisfactorily

complete these requirements become doctoral candidates and proceed to conduct original research and prepare and defend their dissertation.

2.2.2. Common Requirements

Required Courses for all HSPH Doctoral Students

All Harvard School of Public Health Students must take or be qualified to waive one of the introductory Biostatistics and Epidemiology courses.

- BIO 200, Principles of Biostatistics, 5 credits **OR** BIO 205, Statistical Methods for Health and Social Policy, 5 credits.
- EPI 200, Principles, 2.5 credits **OR** EPI 201, Introduction to Epidemiology, 2.5 credits

In addition, two intermediate-level courses in Biostatistics are required. Examples include:

- BIO210, Analysis of Rates & Proportions [5 credits]
- BIO211, Regression & Analysis of Variance in Experimental Research [5 credits]
- BIO213, Applied Regression for Clinical Research [5 credits]
- HUGSE S030, Intermediate Statistics: Applied Regression & Data Analysis [5 credits] (Other courses are available both here and at the Harvard Graduate School of Education that fulfill this requirement).

All SHDH doctoral students are required to take the following departmental courses:

- ID 508, Human Development and Public Health: A Lifecourse Approach, 2.5 credits
- SHH 201, Society and Health, 2.5 credits
- SHH 215, History, Politics, and Public Health: Theories of Disease Distribution, 5 credits
- SHH 221, Psychosocial Theories of Health and Health Behavior, 5 credits
- SHH XXX, Multilevel Statistical Methods: Concept & Application, 5 credits
- SHH 245, Social and Behavioral Research Methods (Part 1), 5 credits
- SHH 269, Doctoral Seminar on SHDH, 1.25 credits*
- SHH 271, Doctoral Seminar on SHDH, 1.25 credits*
- SHH 295, Health and Social Policy Doctoral Seminar, 2.5 credits

***Note:** All first year doctoral students must take SHH 269 and SHH 271.

Doctoral students in special programs

Doctoral Students in the **Cancer Education Program** are required to take:

- EPI 224, Cancer Prevention, 2.5 credits.

Doctoral Students in the **Health and Literacy Program** are required to take:

- SHH 203, Communication in Health Care Setting, 2.5 credits **AND**
- SHH 275, Health Literacy, 2.5 credits.

Doctoral students wishing to take a minor in **Women, Gender and Health:**

- See section 2.6. for full details.

Doctoral students wishing to take a minor in **Maternal and Child Health Concentration** are required to take:

- SHH 246, Issues in MCH Programs and Policies, 2.5 credits
- 7.5 additional credits in MCH courses (even numbered SHH courses and SHDH ID courses)
- SHH 290, MCH Doctoral Seminar

Ordinal Credits for SHDH Requirements

The minimum requirement of 20 credits in SHDH (15 credits for the 1-year MS Degree Program) must be comprised of SHDH courses taken for ordinal credits. Consequently, courses taken P/F, tutorial, and research study, and independent study credits are not included for the minimum credit requirements. When approved as a substitute, up to 2.5 credits taken outside SHDH may be counted towards the 20 SHDH credits.

Course Plan for Doctoral Students

By the end of the first semester of study, you should select your area of interest (major) and outline your course plan. Course work is generally completed within two years.

All doctoral students are expected to augment the basic requirements with substantial course work appropriate for a research orientation and in the topic of their interest.

Current students have recommended that doctoral students consider taking EPI 205 (Practice of Epidemiology) to help them plan their research proposal.

Those students who will be incorporating qualitative research methods are urged to consider the Qualitative Research Design course(s) at HUGSE.

Please note that all doctoral students should review the ***Doctoral Student Supplement*** in the ***HSPH Student Handbook***. Your advisors will help you follow and meet the "Doctoral Student's Timetable".

Advisors are responsible for submitting a yearly progress memo to the SHDH chair. You prepare a report for your advisor and then work with your advisor in the preparation of this memo.

See following sections for the **Doctoral Studies Requirements Tracking Sheets**, which can be used as a tool in monitoring completion of degree requirements. You should **complete a tracking sheet on an on-going basis during meetings with your advisor.**

In addition, during your final year of coursework (normally your 2nd year), you should meet with your advisor before the start of the spring semester to confirm that you have met or are meeting all of the degree requirements. Any appropriate waivers should be requested at that time.

A completed tracking sheet signed by your advisor and any approved waiver forms (see Section 4.1) should be turned in to the Academic Coordinator by mid January. This will provide you with the opportunity to add any remaining required classes during the spring semester.

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

**2.2.3. SOCIAL DETERMINANTS OF HEALTH AREA OF INTEREST
REQUIREMENTS TRACKING SHEET**

In the Social Determinants of Health Area of Interest, each person will choose a substantive field of concentration in addition to completing core theory and methods requirements. By the time the student comes forward for the written exam (usually at the end of the 2nd year of full-time study), the student must have completed the following required courses in the areas of Theory, Methods and Content:

SOCIAL DETERMINANTS OF HEALTH	Completed [check]	Credits earned	Grade
NAME: _____ ADVISOR: _____			
A. HSPH REQUIREMENTS [17.5 ordinal credits]			
BIOSTATISTICS: [15 credits] BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy [5.0 credits] Other: _____ Waived: _____ [attach form]			
Intermediate or Advanced Biostatistics [10 credits] such as: BIO 210 (Analysis of Rates & Proportions) [5 credits] BIO 211 (Regression & Analysis of Variance in Experimental Research) [5 credits] BIO 213 (Applied Regression for Clinical Research) [5 credits] HUGSE S030 (Intermediate Statistics: Applied Regression & Data Analysis) [5 credits] Other: _____ Waived: _____ [attach form]			
EPIDEMIOLOGY: 2.5 credits EPI 200 (Principles of Epi.) [2.5 credits] or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. SPECIAL REQUIREMENTS. If on a training grant, please check grant requirements. For example: Cancer Education Progr.: EPI 224 (Cancer Prevention) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] or Not applicable: _____			
Health and Literacy Program: SHH 211 (Health Promotion through Mass Media) [2.5 ordinal credits] and SHH 275 (Health Literacy) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] or Not applicable: _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

SOCIAL DETERMINANTS OF HEALTH continued	Completed [check]	Credits earned	Grade
C. GENERAL SHDH REQUIREMENTS [30 credits] [20 SHDH credits required – ordinal grades only – no independent study, tutorial or research study]			
SHH 201 (Society & Health) [2.5 credits]			
ID 508 (Human Development and Public Health: A Lifecourse Approach) [2.5 credits]			
SHH 215 (History, Politics & Public Health: Theories of Disease Distribution & Inequalities in Health) [5 credits]			
SHH 221 (Psychosocial Theories of Health & Health Behavior) [5 credits]			
SHH 245 (Social & Behavioral Research Methods: Part I) [5 credits]			
SHH XXX (Multilevel Statistical Methods: Concept & Application) [5 credits]			
SHH 269 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 271 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 295 (Health and Social Policy Doctoral Seminar) [2.5 credits]			
D. SOCIAL DETERMINANTS OF HEALTH SPECIFIC STUDIES [20 ordinal credits]			
Intermediate or Advanced Epi [5 credits] such as: EPI 202 (Elements of Epidemiologic Research) [2.5 credits] EPI 203 (Design of Cohort & Case-Control Studies) [2.5 credits] EPI 204 (Analysis of Case-Control & Cohort Studies) [2.5 credits]			
Human Biology [5.0 credits] such as: EH 205 (Human Physiology) [5 credits] ID 208 (Pathophysiology of Human Disease) [5 credits]			
Sociology or Policy course [2.5 credits]			
Content in Area of Expertise [7.5 credits] Other: [attach form] _____			
E. ADDITIONAL COURSE WORK [12.5 credits] Please list: _____ _____ _____ _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

SOCIAL DETERMINANTS OF HEALTH continued	Completed [check]	Credits earned	Grade
<p>F. REVIEW CHECK LIST Total # of credits [80 course credits required]: _____ % outside HSPH [no more than 50% accepted] _____ Human Subjects Protection on-line training (prior to orals exam) Yes ____ No ____</p> <p>MAJOR AND MINORS Major Field [20 credits] _____ Minor Field [10 credits] _____ Minor Field [10 credits] _____</p> <p>Advisor's Signature: _____ Date: _____</p>			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

**2.2.4. PLANNED SOCIAL CHANGE AREA OF INTEREST
REQUIREMENTS TRACKING SHEET**

In the Planned Social Change Area of Interest, each person will choose a methodological area for advanced study and a substantive field of concentration. By the time the student comes forward for the written exam (usually at the end of the 2nd year of full-time study), the student must have completed the following required courses in the areas of Basic Coursework, Theory, Methods and Content:

PLANNED SOCIAL CHANGE	Completed [check]	Credits earned	Grade
NAME: _____ ADVISOR: _____			
A. HSPH REQUIREMENTS [17.5 ordinal credits]			
BIostatISTICS: [15 credits] BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy [5 credits] Other: _____ Waived: _____ [attach form] Intermediate or Advanced Biostatistics [10 credits] such as: BIO 210 (Analysis of Rates & Proportions) [5.0 credits] BIO 211 (Regression & Analysis of Variance in Experimental Research) [5 credits] BIO 213 (Applied Regression for Clinical Research) [5 credits] HUGSE S030 (Intermediate Statistics: Applied Regression & Data Analysis) [5 credits] Other: _____ Waived: _____ [attach form]			
EPIDEMIOLOGY: [2.5 credits] EPI 200 (Principles of Epi.) [2.5 credits] or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. SPECIAL REQUIREMENTS. If on a training grant, please check grant requirements Cancer Education Program: EPI 224 (Cancer Prevention) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] Not applicable: _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

PLANNED SOCIAL CHANGE continued	Completed [check]	Credits earned	Grade
B. SPECIAL REQUIREMENTS continued			
Health and Literacy Program: SHH 211 (Health Promotion through Mass Media) [2.5 ordinal credits] and SHH 275 (Health Literacy) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] Not applicable: _____			
C. GENERAL SHDH REQUIREMENTS [30 credits] [20 SHDH credits required – ordinal grades only – no independent study, tutorial or research study]			
SHH 201 (Society & Health) [2.5 credits]			
ID 508 (Human Development and Public Health: A Lifecourse Approach) [2.5 credits]			
SHH 215 (History, Politics & Public Health: Theories of Disease Distribution & Inequalities in Health) [5 credits]			
SHH 221 (Psychosocial Theories of Health & Health Behavior) [5 credits]			
SHH 245 (Social & Behavioral Research Methods: Part I) [5 credits]			
SHH XXX (Multilevel Statistical Methods: Concept & Application) [5 credits]			
SHH 269 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 271 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 295 (Health and Social Policy Doctoral Seminar) [2.5 credits]			
D. PLANNED SOCIAL CHANGE SPECIFIC STUDIES [20 ordinal credits]			
SHH 231 (Community Intervention Research Methods) [2.5 credits]			
Social Science (examples include sociology, psychology, policy) [2.5 credits]			
Methods – 7.5 credits (Biostatistics/Statistics, Epidemiology, Ethnographic/Qualitative Research Methods, Program Evaluation or Other Research Methods)			
Content in Area of Expertise [7.5 credits] Other: [attach form] _____			
E. ADDITIONAL COURSE WORK [12.5 credits] Please list: _____ _____ _____ _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

PLANNED SOCIAL CHANGE continued	Completed [check]	Credits earned	Grade
<p>F. REVIEW CHECK LIST Total # of credits [80 course credits required]: _____ % outside HSPH [no more than 50% accepted] _____ Human Subjects Protection on-line training (prior to orals exam) Yes ____ No ____</p> <p>MAJOR AND MINORS Major Field [20 credits] _____ Minor Field [10 credits] _____ Minor Field [10 credits] _____</p> <p>Advisor's Signature: _____ Date: _____</p>			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

**2.2.5. HEALTH AND SOCIAL POLICY AREA OF INTEREST
REQUIREMENTS TRACKING SHEET**

In the Health and Social Policy Area of Interest, each person will choose a methodological area for advanced study and a substantive field of concentration. By the time the student comes forward for the written exam (usually at the end of the 2nd year of full-time study), the student must have completed the following courses in the areas of Theory, Methods and Content:

HEALTH AND SOCIAL POLICY	Completed [check]	Credits earned	Grade
NAME: _____ ADVISOR: _____			
A. HSPH REQUIREMENTS [17.5 ordinal credits]			
BIostatISTICS: [15 credits] BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy [5 credits] Other: _____ Waived: _____ [attach form]			
Intermediate or Advanced Biostatistics [10 credits] such as: BIO 210 (Analysis of Rates & Proportions) [5 credits] BIO 211 (Regression & Analysis of Variance in Experimental Research) [5 credits] BIO 213 (Applied Regression for Clinical Research) [5 credits] HUGSE S030 (Intermediate Statistics: Applied Regression & Data Analysis) [5 credits] Other: _____ Waived: _____ [attach form]			
EPIDEMIOLOGY: [2.5 credits] EPI 200 (Principles of Epi.) [2.5 credits] or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. SPECIAL REQUIREMENTS. If on a training grant, please check grant requirements. For example: Cancer Education Program: EPI 224 (Cancer Prevention) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] or Not applicable: _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

HEALTH AND SOCIAL POLICY continued B. SPECIAL REQUIREMENTS continued	Completed [check]	Credits earned	Grade
Health and Literacy Program: SHH 211 (Health Promotion through Mass Media) [2.5 ordinal credits] and SHH 275 (Health Literacy) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] or Not applicable: _____			
C. GENERAL SHDH REQUIREMENTS [30 credits] 20 SHDH credits required – ordinal grades only – no independent study, tutorial or research study]			
SHH 201 (Society & Health) [2.5 credits]			
ID 508 (Human Development and Public Health: A Lifecourse Approach) [2.5 credits]			
SHH 215 (History, Politics & Public Health: Theories of Disease Distribution & Inequalities in Health) [5 credits]			
SHH 221 (Psychosocial Theories of Health & Health Behavior) [5 credits]			
SHH 245 (Social and Behavioral Research Methods: I [5 credits]			
SHH XXX (Multilevel Statistical Methods: Concept & Application) [5 credits]			
SHH 269 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 271 Doctoral Seminar in SHDH [1.25 pass/fail credits]			
SHH 295 (Health and Social Policy Doctoral Seminar) [2.5 credits]			
D. POLICY SPECIFIC STUDIES [20 ordinal credits]			
Advanced methods graduate course – 2.5 credits in one area: Biostatistics; Econometrics; Analytic Methods; Ethnographic Methods			
Choice of Graduate Course in Political Science or Government [5 credits]			
Choice of Graduate Course in Microeconomics [5 credits]			
Content in Area of Expertise [7.5 credits] Other: [attach form] _____			
E. ADDITIONAL COURSE WORK [12.5 credits] Please list: _____ _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

HEALTH AND SOCIAL POLICY continued	Completed [check]	Credits earned	Grade
<p>F. REVIEW CHECK LIST Total # of credits [80 course credits required]: _____ % outside HSPH [no more than 50% accepted] _____ Human Subjects Protection on-line training (prior to orals exam) Yes ____ No ____</p> <p>MAJOR AND MINORS Major Field [20 credits] _____ Minor Field [10 credits] _____ Minor Field [10 credits] _____</p> <p>Advisor's Signature: _____ Date: _____</p>			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

**2.2.6. HUMAN DEVELOPMENT AREA OF INTEREST
REQUIREMENTS TRACKING SHEET**

In the Human Development Area of Interest, each person will choose a methodological area for advanced study and a substantive field of concentration. By the time the student comes forward for the written exam (usually at the end of the 2nd year of full-time study), the student must have completed the following courses in the areas of Theory, Methods and Content:

HUMAN DEVELOPMENT	Completed [check]	Credits earned	Grade
NAME: _____ ADVISOR: _____			
A. HSPH REQUIREMENTS [17.5 ordinal credits]			
BIostatISTICS: [15 credits] BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy [5 credits] Other: _____ Waived: _____ [attach form] Intermediate or Advanced Biostatistics [10 credits] such as: BIO 210 (Analysis of Rates & Proportions) [5 credits] BIO 211 (Regression & Analysis of Variance in Experimental Research) [5 credits] BIO 213 (Applied Regression for Clinical Research) [5 credits] HUGSE S030 (Intermediate Statistics: Applied Regression & Data Analysis) [5 credits] Other: _____ Waived: _____ [attach form]			
EPIDEMIOLOGY: [2.5 credits] EPI 200 (Principles of Epi.) [2.5 credits] or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. SPECIAL REQUIREMENTS. If on a training grant, please check grant requirements. For example: Cancer Education Program: EPI 224 (Cancer Prevention) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] Not applicable: _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

HUMAN DEVELOPMENT continued B. SPECIAL REQUIREMENTS continued	Completed [check]	Credits earned	Grade
Health and Literacy Program: SHH 211 (Health Promotion through Mass Media) [2.5 ordinal credits] and SHH 275 (Health Literacy) [2.5 ordinal credits] Other: _____ Waived: _____ [attach form] Not applicable: _____			
C. GENERAL SHDH REQUIREMENTS [30 credits] [20 SHDH credits required – ordinal grades only – no independent study, tutorial or research study]			
SHH 201 (Society & Health) [2.5 credits]			
ID 508 (Human Development and Public Health: A Lifecourse Approach) [2.5 credits]			
SHH 215 (History, Politics & Public Health: Theories of Disease Distribution & Inequalities in Health) [5 credits]			
SHH 221 (Psychosocial Theories of Health & Health Behavior) [5 credits]			
SHH 245 (Social & Behavioral Research Methods: Part I) [5 credits]			
SHH XXX (Multilevel Statistical Methods: Concept & Application) [5 credits]			
SHH 269 (Doctoral Seminar on SHDH) [1.25 pass/fail credits]			
SHH 271 (Doctoral Seminar in SHDH) [1.25 pass/fail credits]			
SHH 295 (Health and Social Policy Doctoral Seminar) [2.5 credits]			
D. HUMAN DEVELOPMENT SPECIFIC STUDIES [20 ordinal credits]			
Advanced Methods Graduate Course [5 credits] in <u>one area</u> : Biostatistics, Ethnography or other Qualitative methods, Longitudinal methods			
Advanced Human Development Courses [5 credits] such as: developmental psychology, developmental physiology or growth and nutrition			
Advanced Social Sciences, Policy or Educational Theory Course [2.5 credits]			
Content in Area of Expertise - substantive courses in advanced human development [7.5 credits] Other: [attach form] _____			

**DOCTORAL STUDIES REQUIREMENTS TRACKING SHEETS
FOR STUDENTS ENTERING 9/04**

HUMAN DEVELOPMENT continued	Completed [check]	Credits earned	Grade
<p>E. ADDITIONAL COURSE WORK [12.5 credits] Please list:</p> <p>_____</p> <p>_____</p> <p>_____</p>			
<p>F. REVIEW CHECK LIST Total # of credits [80 course credits required]: _____ % outside HSPH [no more than 50% accepted] _____ Human Subjects Protection on-line training (prior to orals exam) Yes ____ No ____</p> <p>MAJOR AND MINORS Major Field [20 credits] _____ Minor Field [10 credits] _____ Minor Field [10 credits] _____</p> <p>Advisor's Signature: _____ Date: _____</p>			

2.2.7. SHDH Doctoral Student Timetable

The following is an important excerpt from the HSPH Student Handbook:

“The following outlines the timetable to which all doctoral students must adhere in order to be considered in satisfactory academic standing. This progress must be made by all doctoral students and must be reported to and approved by the CAD (Committee on Admissions for Degrees). The timetable outlines the semester in which each progressive step must be completed.

A student in noncompliance with the timetable will be considered conditionally registered until a specified date set by the Registrar (normally two weeks after the beginning of the semester). Receipt of the appropriate form by the HSPH Registrar’s Office and/or the completion or submission of the progress milestone (i.e., the Oral Qualifying Examination or Progress Report) will clear this conditional registration.

Students who fail to clear these conditions by the specified date will be administratively withdrawn from HSPH degree candidacy.”

Of special note: “Students who received a master’s degree from HSPH may submit a combined Prospective/Final Program as early as the end of their first semester of doctoral study, but no later than the end of the third semester.”

Doctoral Student Timetable

	Progress	Progress Due
1.	<i>Prospective Program Form</i>	End of 2nd Semester*
2.	<i>Final Program Form Nomination of Oral Qualifying Examination Committee Form</i>	End of 3rd Semester*
3.	<i>Oral Qualifying Examination Scheduling Form</i>	End of 4th Semester* After successful completion of Written Exam
4.	<i>Nominations for Research Committee Form</i>	One month after successful completion of Oral Exam
5.	<i>Progress Report Form</i> (must be submitted at least twice a year until thesis defense)	After beginning thesis research
6.	<i>Application for Degree Form</i>	Before the degree granting period in which thesis is defended
7.	<i>Thesis Defense</i>	End of 5 th Year**

Notes:

* Double the time for part-time students

** End of the 7th year for part-time students

“Full-time doctoral students have five academic years from the date of entry into the program to complete required course work, to defend the thesis, and to submit the dissertation. Any deviation from the five-year limit must be approved by the CAD prior to the second semester in the fifth year. Part-time students have seven academic years from date of entry to complete degree requirements.”

2.2.8. Qualifying Written Examinations

It is the policy of the Department and the school that, to earn a doctoral degree, students should acquire a breadth of knowledge in their fields that extends beyond the subject matter of their theses. All students in the SHDH doctoral program will take written qualifying examinations to demonstrate this knowledge.

All students must complete the required core curriculum prior to taking the written exam. It is expected that the exam will be taken at the end of the 2nd year of doctoral work. Anyone considering an alternate time should discuss this with their advisor. Documentation of the completion of the required coursework must be submitted before taking the exam.

The exam is given in mid-June each year. Dates and other details are provided to all students who are eligible to take the exam (those in their 2nd year of doctoral studies or those in later years who have not yet taken the exam) in November each year.

2.2.9. Dissertation Proposal and Oral Exam

After completing and passing the written examinations, doctoral students develop a research proposal and complete the oral examination. See Section 2.2.9.1. for policy regarding human subjects protection for all research conducted in SHDH. You are required to design an independent and original research protocol. Preparation proceeds as follows:

- The student works closely with the advisor on proposal drafts.
- Potential members of the Oral Examining Committee see a draft of the thesis proposal before they will agree to serve on the committee.
- An Oral Examination Committee is officially formed and a date determined.
- Committee members are given a copy of the final thesis proposal two weeks prior to the scheduled examination date.

The decision to go before the Committee implies that the advisor has determined that the student is well prepared and the proposal document ready. Doctoral students present their research protocol in this oral examination with representatives of the student's major and minor fields present. Members of the Oral Examining Committee must officially assess the student's potential to perform research in the chosen field of study.

NOTE: The Department recommends that the Oral Examining Committee and the Dissertation Committee have the same members. Students do have the option of changing committee members if it is deemed appropriate.

After completing and passing both the written and the oral examinations, SHDH doctoral students become **doctoral candidates** and engage in an original research study conducted by the candidate after approval by the dissertation committee.

2.2.9.1. Human Subjects Protection for SHDH Dissertations

1. All doctoral students are required to take the on-line HSPH IRB (Institutional Review Board) training as one stipulation of their orals exam (i.e., complete the training before the orals exam).
2. All orals exam proposals should:
 - a. include a statement about the IRB status of the data with which the students propose to work:
 - if secondary data, ascertain available information on what sort of informed consent was used to obtain these data and what the current IRB approval status is for research using these data (including exemption)
 - if primary data, some description of the steps that will be taken to ensure human subjects protection and obtain IRB approval
 - and, in either case, include a brief statement about likely risks & benefits of the project for the human research subjects, and steps taken to minimize risks
 - b. include a statement about plans for submitting a protocol for HSPH IRB approval within 90 days of their oral exam (cf the 90 day requirement for submitting a protocol for NIH grants)
3. After completing their oral exams and before conducting their research, all doctoral students must present to their thesis advisor documentation that they have obtained HSPH IRB approval (or exemption) and have obtained their IRB certification.
4. No dissertation will be approved as completed unless the student has obtained IRB approval (or exemption) for the work conducted for the dissertation.

See Section 4.5. for additional information regarding the Human Subjects Committee.

2.2.10. Doctoral Thesis

Doctoral candidates form a dissertation committee at the completion of the oral examinations and candidates are expected to work closely with the committee in the implementation of the research plan. Candidates are expected to conduct an original research study. All research must conform to ethical standards and basic principles of informed consent.

The candidate will either prepare a traditional dissertation (including sections on problem formulation, theory, hypotheses, methods, data analysis, findings, study implications) or will prepare three papers for publication linked by an articulated theoretical perspective and by substantive areas. Committee members must, of course,

have an opportunity to see and comment on drafts of written work. All work for publication must be submitted to the Department before publication.

The date for the doctoral defense is determined by the candidate and the chair of the committee. The decision to defend the dissertation implies that the candidate, the advisor, the committee chair, and all members of the committee deem that the research is complete and the candidate ready.

2.2.11. Doctoral Desk Policy

1. The Landmark Center Building desks have a priority for research purposes. Students who are working as Research Assistants (RA's) have 1st priority for a desk space at the Landmark Center Building.

2. The Kresge Building doctoral desks are designated for academic purposes. Kresge Building doctoral desks will be assigned on the basis of four categories of priorities in the following order: 1) students who have completed both the written and oral exam; 2) students who have completed the written exam and scheduled their oral exam; 3) students who have completed the written exam; 4) doctoral students who have not completed the written exam. [Please note that in the best of possible worlds, we support the idea that all doctoral students should have a workspace. These priorities are developed due to HSPH space limitations].

a. **During the 04-05 academic year, the doctoral desks may be SHARED between 2 - 3 students.** This policy will ensure all doctoral students in the department have desk storage space. It is critical that students keep the Doctoral Academic Coordinator informed whenever doctoral desk space is no longer needed so it can be reassigned.

b. Doctoral Candidates (who have completed both the written and oral exam) have 1st priority for doctoral desks. 2nd priority for doctoral desks will be given to doctoral students who have completed the written exam and scheduled their oral exam. 3rd priority for doctoral desks will be given to doctoral students who have completed their written exam. This assignment period will normally commence in September of the new academic year and conclude in August of that same academic year. Assignments will be made in response to a September notice requesting interested students notify the Doctoral Academic Coordinator.

c. However, if a shortage of desks occurs for the first 3 categories of students, desks will be assigned on a random basis according to each category's priority and a waiting list will be created. Students in any of these 3 categories who come forward later in the academic year will be added to the bottom of the waiting list within the appropriate category on a 1st-come-1st-served basis. As desks may become vacant during the academic year, students on the waiting lists will continue to be given their category's priority in desk assignment. However, they cannot "bump" a lottery winner (see below).

d. A lottery will be held for any extra doctoral desks remaining for interested doctoral students in the 4th category [those who have not completed the oral or written exam]. A new lottery notice will go out each September if desks remain after all interested students in categories 1-3 are assigned a desk.

2.2.12. Doctoral Students Seeking a Masters Degree

1. Be certain to review and, of course, meet the masters course requirements as of the time of your matriculation in the doctoral program:

HSPH Required Courses [or official waivers]:

- Bio 200 or 205 - 5 credits
- Epi 200 or 201 - 2.5 credits

Additional Core Requirements for Professional Public Health Degrees:

- Health Policy and Management – choose from among those courses listed by HPM as meeting the core requirement
- Environmental Health – choose from among those courses listed by Environmental Health as meeting the core requirement
- Health and Social Behavior – See SHDH Requirements in next paragraph

Note: See Section 4.1. for sample forms and guidelines for requesting waivers or substitutes..

SHDH Requirements

- Health and Social Behavior: - both SHH 281 and SHH 201
- Human Development: - see list of options on tracking sheet
- 15 credits of SHDH courses

Note: All 15 credits must be ordinal. SHDH credits include SHH 281 and SHH 201 and may also include 2.5 credits of a related course from another department.

2. **Prepare and submit a paper. This paper will be bound and kept in the SHDH library.**

All SM students in SHDH must complete a “culminating experience” defined as a paper focused on an internship, a research experience, or on a topic of study submitted as a further augmentation of a paper completed for a course. The paper should be suitable for publication in the journal *Public Health Reports*.

A Checklist and Process Notes from Roy Ahn (doctoral student) and Dr. Rima Rudd

- ❑ Declare your intention to obtain an SM degree as early as possible. Discuss this with your advisor and send a memo to the Masters Program Faculty Coordinator. You will need to meet the requirements in place at the time of your matriculation at HSPH.
- ❑ Check the SM requirements checklist in the back of the most current "*Dept. of SHDH Curriculum and Advising Guide*".

Note: The doctoral requirements differ and do not necessarily overlap in terms of courses. For example, SM students will have to take one of the designated 2.5 credit environmental health courses as well as one of the 2.5 or 5 credit courses in health policy and management in order to meet the SM degree requirement for SHDH. You will need to take these core public health practice courses **and** submit a paper to meet the SM requirements.

- ❑ If you wish to obtain a waiver or exemption for a course (e.g., environmental health), you must complete an SHDH "*Substitution/Exemption Form*". See Section 4.1. for a sample form and guidelines.

Note: If you wish to waive out of a particular requirement, you should not fill out a "Core Course Waiver" form from the Registrar's office--this form is only valid for exempting out of the school-wide Biostatistics or Epidemiology core requirements.

- ❑ At the beginning of the spring semester obtain the "*Petition for Degree Application*" from the Registrar's office.

Note: Students should not obtain the "*Petition for Admission*" application. The Registrar's office often mixes up these two forms because they sound so much alike. A doctoral student *need not* apply and gain admittance to the SM degree program, for which the "Petition for Admission" application is appropriate.

- ❑ Complete the "Petition for Degree Application" and have your advisor sign the form. Submit this form to the Registrar's office by early March (specific deadlines vary from year to year).

Note: The SHDH department chair does not sign this copy yet, because the Registrar's Office will eventually send the form back up to the department to confirm that all departmental requirements have been met. You should keep one copy for your records.

- ❑ Be certain that all waiver/substitute forms are included in your folder. Submit these forms to the Masters Academic Coordinator. The folders will be reviewed prior to graduation.

Note: Do not wait until the review process to be certain that all requirements are met.

- ❑ Prepare a paper. Do note the requirement in place that all SM students must submit a paper. Review paper requirements with your advisor and submit your

proposal to the instructor of SHH 259 at the start of the spring semester. Complete and submit your paper before the end of the semester, meeting the requirements set out for the Seminar. Doctoral students will submit their papers a minimum of two weeks before graduation to the SHH 259 instructor.

Note: You may choose to focus your paper on the literature review or theoretical background prepared for your orals.

2.3. ONE YEAR MASTER OF SCIENCE PROGRAM

Program Coordinator: To be determined

2.3.1. Introduction

The 40-credit SM program is intended to prepare students for research careers in public and private agencies. Students in the 40-credit program are usually established practitioners or investigators holding prior masters or doctoral degrees in the social/behavioral sciences, health care, or a public health field.

Because of the diverse backgrounds and needs of those entering this program, the requirements are kept to a minimum, allowing flexibility to design a program to best meet each student's academic needs and career plan. Masters students are not required to declare areas of concentration. However, to the extent that their needs approximate one of the doctoral areas of interest in the department, students are encouraged to use the area of interest curriculum as a guide. Students who are interested in maternal and child health (MCH), especially those who are receiving funding from the MCH Training Grant, will do their required SHDH electives in MCH courses (even numbered SHH and SHDH ID courses).

2.3.2. Requirements

Over a one-year period, students in this program accrue 40 credits (30 credits must be ordinal). Students must fulfill the school-wide requirements and earn 15 ordinal credits in departmental courses. Students are encouraged to organize a tutorial, research study, or independent study to supplement regular courses, but any such courses taken P/F are not included for the minimum credit requirements. When a course is approved as a substitute, up to 2.5 credits taken outside SHDH may be counted towards the 15 SHDH credits.

Students should work closely with their advisers to develop a study plan within the "Fall 1" term to meet their particular academic and career goals. Because this program is quite short, students are encouraged to focus their work in a specific content or skill area.

Students may petition for waivers and substitutes - see Section 4.1 for the appropriate form and guidelines.

HSPH Requirements and Courses:

The Harvard School of Public Health requires each student, regardless of degree program, to complete 5 units of course work in biostatistics and 2.5 units of course work in epidemiology. All accredited schools of public health require students preparing for public health practice to take additional departmental core courses in health and social behavior, environmental health, and health policy and management.

Biostatistics:

- BIO 200, Principles of Biostatistics, 5 credits OR
- BIO 205, Statistical Methods for Health and Social Policy, 5 credits

Epidemiology:

- EPI 200: Principles of Epidemiology, 2.5 credits OR
- EPI 201: Introduction to Epidemiology, 2.5 credits

SHDH Requirements and courses

The SHDH core courses (SHH 281 and SHH 201) have been designed to introduce the field of study and research approaches and provide a conceptual and empirical foundation for practice and research.

- SHH 201, Society and Health, 2.5 credits
- SHH 281, Methods for Research on Social and Behavioral Dimensions of Public Health, 2.5 credits
- Additional 10 credits in SHDH courses to accrue the required 15 SHDH credits. Students in the MCH Concentration and/or receiving MCH Training Grant funding, should complete these additional 10 SHDH credits with MCH courses (even numbered SHH and SHDH ID courses).

SHDH students traditionally choose from an array of courses in the various departments of the School of Public Health as well as in the Graduate School of Education, the Kennedy School of Government, and the Graduate School of Arts and Science. These courses at other graduate schools include qualitative research, program evaluation, policy, management, and intermediate and advanced courses in biostatistics and epidemiology. Travel time must be planned into the schedule.

See following section for the One-Year Masters Degree Requirements Tracking Sheet which can be used as a tool in monitoring completion of degree requirements. You should **complete a tracking sheet on an on-going basis during meetings with your advisor. In addition, you should meet with your advisor before the start of the spring semester to confirm that you have met or are meeting all of the degree requirements. Any appropriate waivers should be requested at that time (see Section 4.1.). A completed tracking sheet and any approved waiver forms should be turned into the Academic Coordinator by mid January.** This will provide you with the opportunity to add any required classes during the Spring semester.

**2.3.3. TRACKING SHEET FOR ONE-YEAR SM STUDENTS
ENTERING 9/04**

NAME: _____ ADVISOR: _____	Completed [check]	Credits earned	Grade
A. HSPH REQUIREMENTS			
BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy) [5 credits] Other: _____ Waived: _____ [attach form]			
EPI 200 (Principles of Epi.) or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. SHDH COURSE REQUIREMENTS: All students in the 1-year SM program take the required SHDH courses and accumulate a total of 15 SHDH credits. Note: The required 15 credits will be accrued through a combination of the 5 credits of required SHDH courses and additional selected SHDH courses of interest. All of the required credits must be for ordinal grades.*			
<u>Required:</u> SHH 201 (Society & Health) [2.5 credits] Waived: _____ [attach form and select another SHDH course: _____]			
<u>Required:</u> SHH 281 (Methods for Research on Social & Behavioral Dimensions of Public Health) [2.5 credits] Waived: _____ [attach form and select another SHDH course: _____]			
C. ELECTIVE CREDITS IN SHDH To meet the requirements, SM1 students need an additional 10 SHDH credits. Students in the MCH Concentration and/or receiving MCH Training Grant funding, should complete these additional 10 SHDH credits with MCH courses (even-numbered SHH and SHDH ID courses). *Note: Students may choose to take independent study or tutorial credits; however these credits and any other SHDH courses taken for P/F options do not count towards the required number of credits for SHDH. All 15 required credits must be for ordinal grades. LIST: _____ _____ _____ Other: [attach letter] _____			

**TRACKING SHEET FOR ONE-YEAR SM STUDENTS
ENTERING 9/04 CONT.**

<p>D. ADDITIONAL COURSE WORK Please list: _____ _____</p>			
<p>E. REVIEW CHECK LIST Total # of credits: SM1 requires 40 _____ # of credits ordinal: SM1: 30 min. _____ % outside HSPH _____ (Waiver request required when exceeds 50%)</p>			

Areas of Concentration/Strength: _____

Work/Practice Experience: _____

Advisor's Signature: _____

Date: _____

2.4. DUAL DEGREE PROGRAM WITH SIMMONS COLLEGE

Program Coordinator: To be determined

2.4.1. Introduction

The dual degree program with Simmons is a Master of Science degree in SHDH (HSPH 40-credit program) and Parent-Child Nursing or Women's Health (Simmons College 40-credit program) (80 credits total).

This professional, dual-degree program, which requires that 40 credits be earned at HSPH and 40 at Simmons, is designed to prepare nurse practitioners for leadership roles in child, youth, women's, or school health programs. This dual-degree program additionally prepares the graduate to deliver care to aggregate populations of women/children at a public health level. Graduates of the program are eligible to sit for the appropriate certification exam administered by the professional nursing organization.

Applicants should hold a bachelor's degree from a program accredited by the National League for Nursing, a license to practice nursing, and the equivalent of at least three years of full-time nursing experience. International nurses with equivalent backgrounds are eligible to apply. Applicants must meet the general admission requirements of both HSPH and Simmons College.

Exit Competencies

Advisors and advisees are encouraged to discuss exit competencies and plan a course of study suitable for the individual needs of the student. Advisors and advisees should set aside some time to review students' college and master's level courses. This review should be conducted with an eye toward filling in theory as well as quantitative knowledge/skills.

A list of public health competencies is provided in appendix B. Review these periodically as you develop your career and academic plans. Feedback from recent graduates* emphasizes the need to develop skills in program planning and evaluation, management, cultural competence, grant-writing and public speaking. Those in health education emphasize the need for a thorough knowledge of theory and how to apply it in practice.

2.4.2. Requirements

Students enroll in half-time study at both Simmons College and HSPH for two academic years, in addition to studying at Simmons for one summer session. Continued matriculation is dependent on maintaining satisfactory academic progress in both programs.

HSPH Requirements and Courses:

During the two years, students must accrue a minimum of 40 credits (30 credits must be ordinal). Students in this program must earn at least 15 ordinal credits in departmental courses. Students are encouraged to organize a tutorial, research study,

* Roberta Friedman, 2001. Survey of Health Promotion and Education Practitioners. HSPH Independent study.

or independent study to supplement regular courses, but any such courses taken P/F are not included for the minimum credit requirements. When a course is approved as a substitute, up to 2.5 credits taken outside SHDH may be counted towards the 20 SHDH credits.

The Harvard School of Public Health requires each student, regardless of degree program, to complete 5 units of course work in biostatistics and 2.5 units of course work in epidemiology. All accredited schools of public health require students preparing for public health practice to take additional departmental core courses in health and social behavior, environmental health, and health policy and management.

Biostatistics:

- BIO 200, Principles of Biostatistics, 5 credits OR
- BIO 205, Statistical Methods for Health and Social Policy, 5 credits

Epidemiology:

- EPI 200, Principles of Epidemiology, 2.5 credits OR
- EPI 201, Introduction to Epidemiology, 2.5 credits

Recommended courses in **environmental health** and **health policy and management** are listed on the tracking sheet. A wide range of options exist in each of these areas in order to meet the needs of a diverse student body.

Students may petition for waivers and substitutes - see Section 4.1 for the appropriate form and guidelines.

SHDH Departmental Requirements:

All students are required to take a minimum of 15 ordinal credits in SHDH courses. This includes the 2.5 credits of required SHDH courses listed below and an additional 12.5 credits of elective SHDH courses.

The SHDH core courses have been designed to introduce the field of study and research approaches and provide a conceptual and empirical foundation for practice and research.

- SHH 201, Society and Health, 2.5 credits **OR**
- SHH 281, Methods for Research on Social and Behavioral Dimensions of Public Health, 2.5 credits

Practicum and culminating experience

To meet the requirements for a practicum and culminating experience, students in the dual degree will normally offer the research project that is part of the second year of the Simmons program. Dual degree students are, however, encouraged to participate with the SM2 students in the spring course SHH 259 (SHDH Masters Seminar) and present their practicum there.

Dual SHDH/Simmons Masters Degree Requirements Tracking Sheet

See following section for the Degree Requirements Tracking Sheet, which can be used as a tool in monitoring completion of degree requirements. You should **complete a tracking sheet on an on-going basis during meetings with your advisor. In**

addition, during your final year of study, you should meet with your advisor before the start of the spring semester to confirm that you have met or are meeting all of the degree requirements. Any appropriate waivers should be requested at that time (see Section 4.1.). A completed tracking sheet and any approved waiver forms should be turned into the Academic Coordinator by mid January. This will provide you with the opportunity to add any required classes during the Spring semester.

Elective courses

SHDH students make full use of the array of courses in the various departments of the School of Public Health as well as in the Graduate School of Education, the Kennedy School of Government, and the Graduate School of Arts and Sciences. Most SHDH masters students choose to wait until the second year of study before they take courses at other Harvard graduate schools. Travel time must be planned into the schedule.

A list of recommended elective courses can be found in Section 3. It is organized by topic and the selections have been made with the particular needs of professional masters students in mind. It is not intended as an exhaustive list, and needs continual feedback from students to keep it up-to-date and relevant.

**2.4.3. TRACKING SHEET FOR STUDENTS IN DUAL DEGREE PROGRAM
WITH SIMMONS COLLEGE ENTERING 9/04**

NAME: _____ ADVISOR: _____	Completed [check]	Credits earned	Grade
A. HSPH REQUIREMENTS			
BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy) [5 credits] Other: _____ Waived: _____ [attach form]			
EPI 200 (Principles of Epi.) or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. ADDITIONAL DEPARTMENTAL CORE REQUIREMENTS Note: ORDINAL OR PASS/FAIL OPTION			
Environmental Health [2.5 credits required] Choose one: EH 201 (Intro. to Environmental Health) EH 202 (Principles of Environmental Health) ID 215 (Environmental & Occupational Epidemiology) EH 232 (Introduction to Occupational and Environmental Medicine) EH 278 (Human Health & Global Environmental Change) EH 270 (Environmental Risk Management) ID 285 (Environmental Health Risk: Concepts and Cases) Other: _____ Waived: _____ [attach form]			
Health Policy & Management [2.5 credits required] Choose one: HPM 205 (Economic Analysis for Public Health) HPM 206 (Economic Analysis) HPM 209 (Economics of Health Policy) (Summer2) HPM 219 (Financial Transactions and Analysis) HPM 220 (Financial Management and Control) HPM 228 (Introduction to the New American Health Care System: Law, Policy and Management) HPM 230 (Managing People in Health Care Organizations) HPM 232 (Operations Management in Service Delivery Organizations) HPM 247 (Political Analysis and Strategy for US Health Policy) ID 242 (Politics & Strategies for Change in Health Policy) HPM 253 (Quality Improvement in Health Care) HPM 277 (Current Issues in Health Policy) HPM 510 (Intro. to Management of Health Care Organization) (Summer) HPM 516 (Quality Improvement in Health Care) EH 231 (Occupational Health Policy and Administration) PIH 211 (Management Control in Health Organizations) PIH 244 (Health Sector Reform: A Worldwide Perspective) RDS 280 (Decision Analysis for Health & Medical Practices) RDS 286 (Decision Analysis in Clinical Research)			

**TRACKING SHEET FOR STUDENTS IN DUAL DEGREE PROGRAM
WITH SIMMONS COLLEGE ENTERING 9/04 CONT.**

B. ADDITIONAL DEPT. CORE REQUIREMENTS continued Health Policy & Management continued	Completed [check]	Credits earned	Grade
Other: _____ Waived: _____ [attach form]			
C. SHDH COURSE REQUIREMENTS: All students in the Dual Degree Program with Simmons take the required SHDH courses and accumulate a total of 15 SHDH credits. Note: The required 15 credits will be accrued through a combination of required SHDH courses [2.5 credits as noted below] and additional selected SHDH courses of interest. All of the required credits must be for ordinal grades.*			
<u>Required:</u> SHH 201 (Society & Health) [2.5 credits] OR SHH 281 (Methods for Research on Social & Behavioral Dimensions of Public Health) [2.5 credits] Waived: _____ [attach form and select another SHDH course: _____]			
The Simmons research project satisfies the requirement for SHH 259 (SHDH Masters Seminar) [2.5 credits] including the SHDH final paper.			
D. ADDITIONAL CREDITS IN SHDH To meet the requirements, dual degree students need an additional 12.5 SHDH credits. *Note: Students may choose to take independent study or tutorial credits, however these credits and any other SHDH courses taken for P/F options do not count towards the required number of credits for P/F options do not count towards the required number of credits for SHDH. All 15 required credits must be for ordinal grades. LIST: Other: [attach letter] _____			
E. ADDITIONAL COURSE WORK Please list: _____ _____ _____			

**TRACKING SHEET FOR STUDENTS IN DUAL DEGREE PROGRAM
WITH SIMMONS COLLEGE ENTERING 9/04 CONT.**

	Completed [check]	Credits earned	Grade
F. REVIEW CHECK LIST Total # of credits: SM1 degree requires 40 _____ # of credits ordinal: SM1 degree: 30 min. _____ % outside HSPH _____ (Waiver request required when exceeds 50%)Waived: _____ [attach form] CEPH On-Line Practice Reporting Form (subsequent to culminating experience) Yes ____ No ____			

Areas of Concentration/Strength: _____

Work/Practice Experience: _____

Advisor's Signature: _____

Date: _____

2.5. TWO YEAR MASTER OF SCIENCE PROGRAM

Program Coordinator: To be determined

2.5.1. Introduction

The 80-credit, professional SM program prepares students for a variety of roles in community, public, and private settings. These include the design, management and evaluation of programs, particularly health promotion, health protection/disease prevention programs, health communication programs and those providing services to women, youth, and children. Others include work in research teams, public policy analysis and advocacy. (See appendix E for a selection of positions held by graduates.)

Students entering the program usually come with interests in certain population groups or health problems. They also have some idea of their aptitudes, e.g. in communication, research or administration, which, along with other skills, they want to develop. The program provides students an opportunity to explore new knowledge and skills, and to focus on those that seem the most appropriate basis for the next steps in their individual public health careers. Applications are encouraged from students who have a strong social sciences/natural sciences background, public health experience and defined public health goals. Solid mathematics and writing skills and successful experience with course work requiring critical reading and writing, drawing of inferences and rigorous analysis are crucial. Previous graduate work is not required.

Students in the masters programs are not required to declare an area of interest within the department but are encouraged to take course work in all four. In addition to fulfilling HSPH, SHDH, and practice core requirements, students are expected to delineate professional goals and to develop an area of expertise. This might include a subject area (such as AIDS, addiction, cardiovascular or cancer risk reduction, the health of children, adolescents or women, or mental health) and skill areas (such as program design and evaluation, health literacy, health communication, policy analysis, or marketing). Those with interests in maternal and child health should consider completing the additional requirements for the MCH Concentration (see 2.5.5.).

Exit Competencies

Advisors and advisees are encouraged to discuss the competencies they wish to have at the end of their program and plan a course of study suitable for the individual needs of the student. Advisors and advisees should set aside some time to review students' college and masters level courses. This review should be conducted with an eye toward filling in theory as well as quantitative knowledge/skills.

A list of public health competencies is provided in appendix B. Review these periodically as you develop your career and academic plans. Feedback from recent graduates* emphasizes the need to develop skills in program planning and evaluation, management, cultural competence, grant-writing and public speaking. Those in health education emphasize the need for a thorough knowledge of theory and how to apply it in practice.

* Roberta Friedman, 2001. Survey of Health Promotion and Education Practitioners. HSPH Independent study.

2.5.2. Requirements

HSPH Requirements and Courses:

During the two years, students must accrue a minimum of 80 credits (60 credits must be ordinal). Students in this program must earn at least 20 ordinal credits in departmental courses. Students are encouraged to organize a tutorial, research study, or independent study to supplement regular courses, but any such courses taken P/F are not included for the minimum credit requirements. When a course is approved as a substitute, up to 2.5 credits taken outside SHDH may be counted towards the 20 SHDH credits.

The Harvard School of Public Health requires each student, regardless of degree program, to complete 5 units of course work in biostatistics and 2.5 units of course work in epidemiology. All accredited schools of public health require students preparing for public health practice to take additional departmental core courses in health and social behavior, environmental health, and health policy and management.

Biostatistics:

- BIO 200, Principles of Biostatistics, 5 credits OR
- BIO 205, Statistical Methods for Health and Social Policy, 5 credits

Epidemiology:

- EPI 200, Principles of Epidemiology, 2.5 credits OR
- EPI 201, Introduction to Epidemiology, 2.5 credits

Recommended courses in **environmental health** and **health policy and management** are listed on the tracking sheet (2.5.3.). A wide range of options exist in each of these areas in order to meet the needs of a diverse student body.

Students may petition for waivers for required HSPH core courses if they can show graduate level courses taken elsewhere. Approvals must be granted by the departments within which the course resides. (See Section 4.1. for the appropriate form and guidelines.)

SHDH Departmental Requirements:

All students are required to take a minimum of 20 ordinal credits in SHDH courses. This includes the 15 credits of required SHDH courses listed below and an additional 5 credits of elective SHDH courses.

The SHDH core courses have been designed to introduce the field of study and research approaches and provide a conceptual and empirical foundation for practice and research.

- SHH 201, Society and Health, 2.5 credits
- SHH 281, Methods for Research on Social and Behavioral Dimensions of Public Health, 2.5 credits
- ID 508, Human Development and Public Health: A Lifecourse Approach, 2.5 credits:
- SHH 233, *SHDH Department Proseminar* [first year], 2.5 credits, will introduce students to the faculty and the work of the department.

- SHH 257, *SHDH Masters Practicum and Seminar* [second year], 2.5 credits, consists of seminars and a practicum which provides opportunities to implement and develop skills in a practice situation (see Section 2.5.4.).
- SHH 259, *SHDH Masters Seminar* [second year], 2.5 credits, consists of the seminar and the final paper which provides opportunities to prepare their final paper as a culminating experience, and prepare for the next stage in their careers (see Section 2.5.4.).

Masters Degree Requirements Tracking Sheet

See following section for the Two-Year Masters Degree Requirements Tracking Sheet, which can be used as a tool in monitoring completion of degree requirements. You should **complete a tracking sheet on an on-going basis during meetings with your advisor. In addition, during your final year of study, you should meet with your advisor before the start of the spring semester to confirm that you have met or are meeting all of the degree requirements. Any appropriate waivers should be requested at that time (see Section 4.1.). A completed tracking sheet and any approved waiver forms should be turned into the Academic Coordinator by mid January.** This will provide you with the opportunity to add any required classes during the Spring semester.

Elective courses

SHDH students make full use of the array of courses in the various departments of the School of Public Health as well as in the Graduate School of Education, the Kennedy School of Government, and the Graduate School of Arts and Sciences. Most SHDH masters students choose to wait until the second year of study before they take courses at other Harvard graduate schools. Travel time must be planned into the schedule.

A list of recommended elective courses can be found in Section 3. It is organized by topic and the selections have been made with the particular needs of professional masters students in mind. It is not intended as an exhaustive list, and needs continual feedback from students to keep it up-to-date and relevant.

**2.5.3. TRACKING SHEET FOR 2-YEAR SM STUDENTS
ENTERING 9/04**

NAME: _____ ADVISOR: _____	Completed [check]	Credits earned	Grade
A. HSPH REQUIREMENTS			
BIO 200 (Principles of Bio.) or BIO 205 (Statistical Methods for Health & Social Policy) [5 credits] Other: _____ Waived: _____ [attach form]			
EPI 200 (Principles of Epi.) or EPI 201 (Intro. to Epi.) [2.5 credits] Other: _____ Waived: _____ [attach form]			
B. ADDITIONAL DEPARTMENTAL CORE REQUIREMENTS Note: ORDINAL OR PASS/FAIL OPTION			
Environmental Health [2.5 credits required] Choose one: EH 201 (Intro. to Environmental Health) EH 202 (Principles of Environmental Health) ID 215 (Environmental & Occupational Epidemiology) EH 232 (Introduction to Occupational and Environmental Medicine) EH 278 (Human Health & Global Environmental Change) EH 270 (Environmental Risk Management) ID 285 (Environmental Health Risk: Concepts and Cases) Other: _____ Waived: _____ [attach form]			
Health Policy & Management [2.5 credits required] Choose one: HPM 205 (Economic Analysis for Public Health) HPM 206 (Economic Analysis) HPM 209 (Economics of Health Policy) (Summer2) HPM 219 (Financial Transactions and Analysis) HPM 220 (Financial Management and Control) HPM 228 (Introduction to the New American Health Care System: Law, Policy and Management) HPM 230 (Managing People in Health Care Organizations) HPM 232 (Operations Management in Service Delivery Organizations) HPM 247 (Political Analysis and Strategy for US Health Policy) ID 242 (Politics & Strategies for Change in Health Policy) HPM 253 (Quality Improvement in Health Care) HPM 277 (Current Issues in Health Policy) HPM 510 (Introduction to Management of Health Care Organizations) HPM 516 (Quality Improvement in Health Care) EH 231 (Occupational Health Policy and Administration) PIH 211 (Management Control in Health Organizations) PIH 244 (Health Sector Reform: A Worldwide Perspective) RDS 280 (Decision Analysis for Health & Medical Practices)			

TRACKING SHEET FOR 2-YEAR SM STUDENTS ENTERING 9/04 CONT.

B. ADDITIONAL DEPT. CORE REQUIREMENTS continued Health Policy & Management continued	Completed [check]	Credits earned	Grade
RDS 286 (Decision Analysis in Clinical Research) Other: _____ Waived: _____ [attach form]			
<p>C. SHDH COURSE REQUIREMENTS: All students in the 2-year SM program take the required SHDH courses and accumulate a total of 20 SHDH credits .</p> <p>Note: The required 20 credits will be accrued through a combination of required SHDH courses [15 credits as noted below] and additional selected SHDH courses of interest. All of the required credits must be for ordinal grades.*</p>			
<u>Required:</u> SHH 233 (SHDH Department Proseminar) [year 1] [2.5 credits]			
<u>Required:</u> SHH 257 (SHDH Masters Practicum and Seminar) [year 2] [2.5 credits]			
<u>Required:</u> SHH 259 (SHDH Masters Seminar) [year 2] [2.5 credits]			
<u>Required:</u> SHH 281 (Methods for Research on Social & Behavioral Dimensions of Public Health) [2.5 credits] Waived: _____ [attach form and select another SHDH course: _____]			
<u>Required:</u> SHH 201 (Society & Health) [2.5 credits] Waived: _____ [attach form and select another SHDH course: _____]			
ID 508 (Human Development and Public Health: A Lifecourse Approach) [2.5 credits]			
D. SHDH FINAL PAPER [this paper is submitted as part of SHH 259]			
<p>E. ADDITIONAL CREDITS IN SHDH To meet the requirements, SM2 students need an additional 5 SHDH credits. *Note: Students may choose to take independent study or tutorial credits; however these credits and any other SHDH courses taken for P/F options do not count towards the required number of credits for SHDH. All 20 required credits must be for ordinal grades. LIST: _____ _____ _____ Other: [attach letter] _____</p>			

TRACKING SHEET FOR 2-YEAR SM STUDENTS ENTERING 9/04 CONT.

<p>F. ADDITIONAL COURSE WORK Please list: _____ _____</p>			
<p>G. REVIEW CHECK LIST Total # of credits: SM2 requires 80 _____ # of credits ordinal: SM2: 60 min. _____ % outside HSPH _____ (Waiver request required when exceeds 50%) CEPH On-Line Practice Reporting Form (subsequent to culminating experience) Yes ____ No ____</p>			

Areas of Concentration/Strength: _____

Work/Practice Experience: _____

Advisor's Signature: _____

Date: _____

2.5.4. The Culminating Experience: SHH 257, SHDH Masters Practicum and Seminar and SHH 259, SHDH Masters Seminar

Overview

SHH 257 and SHH 259 are required courses for the 80 credit Master of Science students in the SHDH Department. These courses have two components that are related. The first component (SHH 257) is a practicum based on an internship or project that the student will do, usually, during the summer between first and second years or during the fall semester of the second year. The second component (SHH 259) is the seminar held during the spring semester of the second year. During this seminar, students will both make a presentation based on their practicum and prepare a written report. The Seminar (SHH 259) will also provide an opportunity for students to learn some skills to help in the development and pursuit of career plans.

The purpose of these courses is to allow students to use the practicum to integrate knowledge and skills that they have learned up to that point, and then to reflect on and further integrate their HSPH experiences in the preparation of the report and in the seminar discussions.

- ❖ Because the culminating experience encompasses a full year, students will register for SHH 257, the practicum component, in the fall semester of their second year (2.5 credits) and for SHH 259, the seminar component, in the spring semester of their second year (2.5 credits).
- ❖ Full instructions for the Practicum will be provided to students at the beginning of their first year Spring semester.
- ❖ The program and syllabus for SHH 259 will be handed out at the first meeting of the course.

THE PRACTICUM (SHH 257)

The practicum is designed to enable students to function in public sector and community health settings through a supervised field placement in a sponsoring organization. Field placements are projects in which students work as team members under the supervision of a faculty advisor and field preceptor. Students spend a minimum of 2.5 credit units of time working in their field placements. Students meet/communicate regularly with their preceptor and faculty advisor to solicit feedback and support.

Leadership and Decision Making

An important purpose of the field practica is to develop leadership skills necessary to implement change in public health settings. With this in mind, it is our intention that the field experience provides excellent exposure to all facets of negotiating and managing a complex project. By communicating ideas to senior-level staff in a persuasive and compelling manner, and by confronting unanticipated problems as they arise, students will be given a first-hand look at some of the challenges that public health professionals regularly encounter.

A second essential goal of the field experience is to develop the student's ability to work in a team environment. Although team projects typically require a high degree of coordination and control, the team-generated project is nearly always superior to a purely individualized effort. For this reason, the team model of project management is increasingly becoming the institutional norm in a variety of non-profit and for-profit settings. The team may be defined as one or more students working with one or more members of the sponsoring agency.

This course is intended to provide students opportunities to apply quantitative and qualitative knowledge and skills in the field. They may pursue projects to gain experience in needs assessments, policy development, program evaluation, research methods, clinical practice, management, or other leadership skills.

Objectives

Public Health Practice in Society, Human Development, and Health is designed to enable students to:

- Integrate and strengthen technical knowledge and quantitative skills developed in other courses;
- Develop the capacity to work with others to respond effectively and creatively to the needs of an organization;
- Function within a professional network in the health care field;
- Enhance oral and written communication skills.

THE SEMINAR (SHH 259)

Integrating the past, creating the future, managing the present.

The seminar is designed as the culminating experience for students in the SHDH 2-year Master of Science degree. The purpose is to allow students the opportunity to reflect upon and integrate their experiences at HSPH, to plan for the future, and to lay the foundation for effective professional lives. To accomplish this, students will spend the semester working on four primary activities for the course:

1. A presentation of the practicum experience and what has been learned from it.
2. A formal paper, based upon the practicum where possible, that addresses a public health issue and that integrates the student's HSPH learning experiences.
3. A career/personal strategic plan.
4. A plan for managing current and future career and personal responsibilities.

2.5.5. Maternal and Child Health Concentration

Details about the Maternal and Child Health Concentration will be distributed in the fall of 2004.

2.6. Interdisciplinary Concentration on Women, Gender, and Health

2.6.1. Introduction

Addressing issues of Women, Gender and Health (WGH) requires the study of the health of women and girls--and men and boys--throughout the life course, with gender, gender inequality, and biology understood as important and interacting determinants of well-being and disease. Also included are the study of gender and gender inequality in relation to individuals' treatment by and participation in health and medical care systems, the physical, economic, and social conditions in which they live, and their ability to promote the health of their families, their communities and themselves. Inherent in this definition is recognition of diversity and inequality among women – and men – in relation to race/ethnicity, nationality, class, sexuality and age, and that protection of human rights is fundamental to health.

Web-site: www.hsph.harvard.edu/wgh

2.6.2. Requirements

Students should indicate their interest in the WGH concentration by contacting the staff contact for WGH (Corrine Williams, williams@hsph.harvard.edu). Students are responsible for fulfilling the requirements of the home department in addition to the concentration's requirements in WGH core courses and related courses focusing on women, gender, and health. The comprehensive concentration requires 10 credits, 5 from the core courses and 5 from the other courses listed. Students in a one-year program are eligible for a condensed concentration of 7.5 credits: WGH 200 or WGH 211 and 2.5 credits of WGH core or gender analysis courses, and 2.5 credits from the other courses listed (see table below). Upon graduation, the degree will be issued from the home department and students will receive a letter from the WGH steering committee attesting to completion of the WGH concentration requirements.

WGH Concentration Requirements	
Comprehensive (10 credits):	
Students eligible	2-year masters Doctoral
Required courses	-- WGH 211 (2.5 credits) -- WGH 200 (2.5 credits) -- 3.75 credits from other WGH core courses or courses including gender analysis -- 1.25 credits of any other courses listed
Condensed (7.5 credits):	
Students eligible	1-year masters
Required courses	-- WGH 200 (2.5 credits) <u>OR</u> WGH 211 (2.5 credits) -- 2.5 credits in other WGH core courses or courses with gender analysis -- 2.5 credits of any other courses listed

Introductory Course:

- WGH 211, Women, Gender, and Health: Introductory Perspectives

Core Courses:

- WGH 200, Women, Gender and Health
- WGH 210, Women, Gender and Health-Critical Issues in Mental Health
- WGH 207, Advanced Topics in Women, Gender, and Health

Courses including Gender Analysis:

- PIH 218, Health and Human Rights
- PIH 245, Population and Development Policies: A World of Contention
- SHH 210, Women, Health and Development: Reconciling Science and Policy
- SHH 215, History, Politics and Public Health: Theories of Disease Distribution and Social Inequalities in Health
- SHH 237, The Practice of Preventing Intimate Partner Violence
- SHH 251, Inequality and Health

Courses with Women's Health Content:

- EH 202, Principles of Environmental Health
- EH 241, Occupational Safety and Injury Prevention
- EPI 212, Epidemiology of Cardiovascular Disease
- EPI 213, Epidemiology of Cancer
- EPI 217, Epidemiology of Adult Psychiatric Disorders
- EPI 224, Cancer Prevention
- EPI 255, Epidemiology of HIV Infection, Part I: Etiology, Natural History & Transmission
- EPI 269, Epidemiologic Research in Obstetrics and Gynecology
- EPI 270, Advanced Topics in Reproductive Epidemiology
- EPI 287, Epidemiology of Reproductive Morbidity due to Trauma, Stress, Psych Health
- HPM 213, Public Health Law
- ID 231, Biological and Clinical Foundations of Reproductive Health
- ID 244, Reproductive Health Care in Developing Countries
- ID 246, Community-based Child Health Programs in Developing Countries
- PIH 267, HIV/AIDS in Developing Countries: Epidemiology and National Responses
- SHH 201, Society and Health
- SHH 208, Adolescent Health
- SHH 216, Childbirth: Health Policy and Epidemiology
- SHH 219, Introduction to High Risk Behaviors
- SHH 225, Health & Social Policy in the Workplace
- SHH 246, Issues in MCH Programs and Policies



3. ELECTIVE COURSES

3.1. Introduction

There are many courses of interest at HSPH and at other Harvard Graduate Schools. Note that across Harvard, course offerings change yearly. Course listings for all schools will be found on the Web. The cross-registration guide web site “crossreg.harvard.edu” allows you to connect with other school’s Registrar’s Offices and view course offerings, provides guidelines to convert credits between schools and lists cross-registration deadlines.

3.2. HSPH Department Contacts

The following directory of HSPH department contacts is offered for questions regarding a department’s courses:

<u>Department/ Program</u>	<u>Contact</u>	<u>Telephone #</u>	<u>E-mail</u>
Biostatistics	Carolyn Dueck	617-432-1056	cdueck@hsph.harvard.edu
Div. of Biological Sciences	Ruth Kenworthy	617-432-2932	rkenwort@hsph.harvard.edu
Environmental Health	Frieda Marsh	617-432-1471	fmarsh@hsph.harvard.edu
Epidemiology	Jamie Johnson-Riley	617-432-1055	jjriley@hsph.harvard.edu
Genetics & Complex Diseases	Julie Gound	617-432-0054	jgound@hsph.harvard.edu
Health Policy & Management	Kari Blowers Anne Occhipinti	617-432-0090 617-432-3475	kblowers@hsph.harvard.edu aocchipi@hsph.harvard.edu
Immunology & Infectious Diseases	Angie Andrade	617-432-3475	aandrade@hsph.harvard.edu
Nutrition	Kathy McLoughlin	617-432-1851	kmclough@hsph.harvard.edu
Population & International Health	Anjane Jaimungal	617-432-2253	ajaimung@hsph.harvard.edu
Master of Public Health	Roberta Gianfortoni	617-432-3530	rgianfor@hsph.harvard.edu

3.3. Cross-Registration at other Schools

To cross-register at another Harvard school or other schools in the Cross Registration Consortium, you must pick up a cross-registration form from the HSPH Registrar's Office (or down-load it directly from the cross-registration guide web site). After obtaining the course instructor's signature, drop off the cross-registration form at the other school's Registrar's Office.

Please be sure to check the course offerings for the following schools/ universities: (Note: please be aware that cross-registration deadlines vary.)

- **GSAS** (the Graduate School of Arts and Sciences)
- **HDS** (the Harvard Divinity School)
- **HMS** (the Harvard Medical School)
- **HUGSE** (the Graduate School of Education) -- most especially for course work in statistics, evaluation, methods, communication, and about children
- **KSG** (the Kennedy School of Government) -- most especially for course work in policy
- **MIT** -- most especially for course work in environmental health, business, and marketing
- **Tuft's Fletcher School of Law and Diplomacy**

Note that you will also be able to take non credit course work. For example, English as a Second Language Courses (ESL) can be found at the **Harvard Extension School**. [Note: preliminary placement examination required.]

3.4. Recommendations for Electives

This partial listing of recommended courses will help with initial program planning.

Public Health Policy and Practice

These courses include those that survey or analyze the current US health care system. Some pursue issues of rights, justice and equity further than the required health ethics course. Others analyze the roots of ill health and inequities in health and health care, and consider public policy options to address these problems.

Public Health Policy

ID 506	Theory and Practice of Public Health in the United States
HPM 228	Intro. to the New American Health Care System
HPM 208	Health Care Regulation and Planning
HPM 275	Health Policy Issues: Access to Dental Services
KSG HCP 382	Health Policy Reform: The U.S. in Comparative Perspective
SHH 225	Health and Social Policy in the Workplace
HPM 524	Racial and Ethnic Disparities in Health: Historical and Contemporary Issues
SHH 207	Race, Ethnicity, and Health: Perspectives from Soc. and Behav. Sciences
SHH 293	Place, Migration, and Health
SHH 298	Issues in Minority Health Policy

SHH 251	Inequality and Health <i>[not offered 2004/2005]</i>
PIH 218	Health and Human Rights: Concepts and Methods for Public Health
ID 292	Justice and Resource Allocation
KSG HLE-201	Poverty and Social Policy
KSG ISP 224	Human Rights and International Politics: The Basic Policy Dilemmas
KSG HCP 100	Introduction to Health Care
GSE A109	Education Policy and Urban Poverty

Leadership in Public Health

HPM 245	Public Health Leadership Skills
HPM 223	Public Speaking for Managers
SHH 296	Leadership in Minority Health Policy
ID 242	Politics and Strategies for Change in Health Policy
HPM 247	Political Analysis and Strategy for US Health Policy
KSG PAL 110C	Mobilizing for Political Action

Management in Public Health

BIO 287	Public Health Surveillance <i>[not offered 2004/2005]</i>
EPI 216	Epidemiology in Public Health Practice
SHH 285	Planned Social Change <i>[not offered 2004/2005]</i>
HPM 212	Program Evaluation in Health Policy
PIH 251	Planning and Evaluation of Health Programs
HPM 219	Financial Transactions and Analysis
PIH 211	Management Control in Health Organizations
HPM 233	Strategic Marketing Management in Health Care Systems
HPM 278	Skills and Methods of Health Care Negotiation and Conflict Resolution
PIH 239	Policy Implementation and Management of Health Programs
HPM 230	Managing People in Health Care Organizations
KSG PAL-177	Organizing People, Power and Change
KSG HCP 231	Organizational Behavior and Leadership in Health Care
KSG NPS-201	Strategy and Leadership of Nonprofit Organizations
KSG NPS-203M	Nonprofit Governance
GSE A027	Managing Financial Resources in Nonprofit Organizations
GSE A665	Organizational Decision Making

Leadership and Management in Special Situations

ID 205	Societal Response to Disaster <i>(not offered 2004/2005)</i>
ID 287	Bioterrorism: Public Health Preparedness and Response

Child and Adolescent Health

Prepares public health professionals to improve the health of children and adolescents through primary prevention, intervention strategies and rehabilitation.

Child and Adolescent Growth and Development

ID 202	Physical Growth and Development
ID 209	Nutrition in Child Growth and Development
ID 278	Mental Health of Children and Adolescents

NUT 201	Principles of Nutrition
SHH 208	Adolescent Health
SHH 212	Developmental Disabilities I: Evaluation, Assessment, and Systems
SHH 219	Introduction to High Risk Behavior: Epi, Prevention and Public Policy
SHH 220	Society and its Effects on Child Health (<i>not offered 2004/2005</i>)
SHH 234	Public Health Genetics: Contemporary Issues and Challenges
SHH 286	Personality and Cognitive Development: Application to Public Health
SHH 308	Infant Assessment in the Context of Perinatal Exposures

Child Health Policies and Programs in the United States

SHH 208	Adolescent Health
SHH 214	Developmental Disabilities II: Values, Policy, and Change
SHH 216	Childbirth Health Policy and Epidemiology
SHH 222	Social Services for Children, Adolescents, and Families
SHH 224	Services for Children with Disabilities
SHH 238	Social Policy and Legal Dilemmas: Child Custody and Visitation
SHH 246 (formerly 204)	Issues in MCH Programs and Policies
SHH 306	Clinical Effectiveness Seminar
GSE H-331	Risk and Resilience Across Childhood and Adolescence: Strategies and Systems of Prevention and Intervention
GSE H-610A	Rethinking Girls' Education: Bringing Theory into Practice
KSG HLE 110	Risk and Resilience in Children and Families: Implications for Public Policy

Women and Health

The study of the health of girls and women throughout the life cycle, with gender and biology understood as equally important determinants of health, disease, and well-being.

EPI 269	Epidemiological Research in Obstetrics and Gynecology
PIH 245	Population and Development Policymaking
PIH 280	Measuring Population Health
SHH 210	Women, Health, and Development: Reconciling Science and Policy
WGH 200	Women, Gender and Health
WGH 207	Advanced Topics in Women, Gender and Health
WGH 210	Women, Gender and Health: Critical Issues in Mental Health
WGH 211	Women, Gender and Health: Introductory Perspectives

Health of Women and Children in Developing Countries*

ID 229	Epidemiology of Infectious Diseases of Public Health Importance in Developing Countries
ID 244	Reproductive Health Care in Developing Countries (<i>not offered 2004/2005</i>)

ID246	Community-based Child Health Programs in Developing Countries (<i>not offered 2004/2005</i>)
ID 262	Introduction to the Practice of International Health
NUT 210	Nutrition Problems of Less-Developed Countries
PIH 239	Policy Implementation and Management of Health Programs
PIH 251	Planning and Evaluation of Health Programs
PIH 272	Foundations of Global Population Health I

* See other PIH listings also

Violence, Mental Health and Substance Abuse

For students interested in the interface between mental and physical health and development. Students gain knowledge of epidemiologic methods to ascertain the prevalence of violence and mental disorders and assess their correlates and risk factors in society. Courses also examine how to implement and assess programs of primary and secondary prevention of violence, psychiatric disorders and addictive behaviors.

EPI 217	The Epidemiology of Adult Psychiatric Disorders
EPI 219	Assessment Concepts and Methods in Psychiatric Epidemiology
EPI 220	Psychiatric Diagnosis in Clinic and Community Populations
EPI 244	Genetic Epidemiologic Methods for Psychiatric and Other Disorders
HPM 518	American Violence: The Intersection Between Home and Street
ID 240	Principles of Injury Control
ID 278	Mental Health of Children and Adolescents
ID 283	Epi Investigation of Social and Environmental Risk Factors for Psychiatric Disorders
SHH 208	Adolescent Health
SHH 237	The Practice of Preventing Intimate Partner Violence
SHH 286	Personality and Cognitive Development: Application to Public Health
SHH 219	Introduction to High Risk Behavior: Epidemiology, Prevention and Public Policy
WGH 210	Women, Gender and Health: Critical Issues in Mental Health

Health Promotion and Disease Prevention

This prepares professionals who will work in the public and/or private sectors designing, implementing, and evaluating programs of primary and secondary prevention in communities, work-sites, schools, clinical settings, and across larger populations through the mass media.

Epidemiology and Control of Health Problems

EPI 223	Cardiovascular Epidemiology
EPI 224	Cancer Prevention
EPI 228	Oral Epidemiology
EPI 254	The Epidemiology of Aging
EPI 255	Epidemiology of HIV, Part I: Etiology, Natural History, and Transmission

EPI 256	Epidemiology of HIV, Part II: Therapeutic and Prevention Interventions
ID 228	Principles of Screening
ID 269	Respiratory Epidemiology
ID 286	Implementing Prevention
NUT 201	Principles of Nutrition
PIH 267	HIV/AIDS in Dev. Countries: Epidemiology and National Responses
SHH 249	Approaches to International Tobacco Control
SHH 273	Innovative Strategies in Health Education
SHH 285	Planned Social Change

Health Communication

NUT 301	Nutrition/Health Promotion in the Mass Media
SHH 203	Communication in Health Care Settings
SHH 213	Developing Radio Communications
SHH 221	Psychosocial Theories of Health and Health Behavior
SHH 229	Future of Health Communications: New Media and Emerging Technologies
SHH 273	Innovative Strategies in Health Education
SHH 275	Health Literacy
SHH 285	Planned Social Change (<i>not offered 2004/2005</i>)
GSE H-700	From Language to Literacy
GSE HT-500	Growing Up in a Media World

Research Methods

Public health practitioners produce, commission and consume research. The following is a (not exhaustive) list of courses on a variety of research approaches and methods that have been found helpful by many students in the FCH (and other Masters) concentration(s).

BIO 111	Introduction to Programming in SAS
BIO 113	Introduction to Data Management and Programming in SAS
BIO 210	The Analysis of Rates and Proportions
BIO 212	Survey Research Methods in Community Health
BIO 213	Applied Regression for Clinical Research
EPI 202	Elements of Epidemiologic Research
EPI 235	Epidemiologic Methods in Health Services Research
EPI 241	Measuring Health Status
HPM 276	Survey of Methods and Application in Health Services Research
ID 236	Social Epidemiology
ID 274	Oral Health Policy Research Seminar

RDS 280	Decision Analysis for Health and Medical Practices
SHH 231	Community Intervention Research Methods
SHH 235	Qualitative Research Methods for Public Health
SHH 245	Social and Behavioral Research Methods, Part 1
SHH 281	Methods for Research on Social and Behavioral Dimensions of Public Health
GSE S-030	Intermediate Statistics: Applied Regression & Data Analysis
GSE S-052	Applied Data Analysis

4. ACADEMIC PROCEDURES

4.1. Course Waivers and Substitutes

4.1.1. School-Wide Core Courses

Students wishing to waive core courses in either Biostatistics or Epidemiology must obtain a *Waiver of Core Course Form* from the Office of Enrollment Services and have it signed by the relevant instructor. Students must present a transcript and a copy of the course description to the instructor to verify appropriate coursework. You should submit a copy of this signed form to your departmental program Academic Coordinator for the departmental records, and retain a copy for your own files.

4.1.2. Courses Required for SHDH programs

The *Substitution/Exemption Form* for all other courses required for departmental programs can be obtained from the academic coordinators for the doctoral and masters programs.

The procedure for requesting that a required course be waived or substituted is as follows:

1. The student prepares a petition to the relevant SHDH program committee with an explanation of why the course should be waived or substituted. The student should build a case for the petition, giving the committee clear reasons. The Substitution/Exemption Form (see the next page for a sample) should also be completed.
2. The student's academic advisor approves the petition.
3. If the required course is a SHDH course (SHH or ID course number), the course instructor must first approve the waiver. The instructor's signature on the Form agrees that the petitioner is sufficiently prepared in the material or that the substitute is suitable. (An instructor's signature is not required for non SHDH courses.)
4. The Faculty Doctoral or Masters Program Coordinator for the relevant program signs approval/denial of the petition.
5. A copy of the completed form should be given to the program academic coordinator for the student's file.

HARVARD SCHOOL OF PUBLIC HEALTH
Department of Society, Human Development and Health

Substitution/Exemption Form

****This form must be completed and approved prior to the drop/add deadline for the period in which the required course starts***

_____ of the _____ Program has my permission
(student's name) (doctoral/SM)

to waive/substitute _____
(required course's number and name)

This exemption/substitution is granted because:

- Equivalent work was done at the graduate level at Harvard or another university with a grade of A- or A. ***(Course description and transcript are attached.)***

(course name, number and grade)

- A substitute course will be completed. ***(Course description is attached.)***

(course name and number)

(signature of student's advisor) **(date)**

(signature of course instructor
(N/A for non-SHDH courses) **(date)**

(signature of the Faculty Program Coordinator) **(date)**

Copy to the Academic Coordinator

4.2. WinterSession Requirements

Harvard School of Public Health requires that all full time students be engaged in academic work during the WinterSession. (This is not required for part-time students.)

General information on WinterSession can be found at www.hsph.harvard.edu/registrar/WinterSession/index.shtml.

All SHDH students should meet with their advisors during Fall 1 to discuss plans for their WinterSession activities.

In general, full-time SHDH students are expected to participate in activities that will enhance the student's academic experience. Students are not required to take courses. Because the nature of these experiences is broad, the following are some of the activities that would be appropriate:

- Courses on campus – these may be credit or non-credit courses at HSPH or at other Harvard graduate schools or MIT. Note: students are not required to take more than 1 course, regardless of the length.
- School-sponsored field trips.
- Workshops (i.e., Designing a Web Site, Public Speaking, community education course, Spanish for Medical Professionals, etc.).
- 2nd Year masters students can write up their summer practice work; 1st year masters students can make initial contacts and plans for summer work.
- On-line courses.
- Work on a paper for publication, an op. ed. piece, etc.
- Practice job-related skills: writing resumes, interviews, networking interviews, etc.
- Independent study (does not need to be for credit).
- Independent work: to develop practical experience, independent research, or field study.
- Research work (Note: Human Subjects Committee approval may be needed; verify with advisor).
- Site visits relevant to career opportunities.
- Community based volunteer work clearly linked to learning objectives.
- Doctoral students need to be engaged in preparation for the written doctoral exam, or for their oral exam or else be working on their dissertation.

Every full-time student is required to submit an agreement that designates the nature of the student's WinterSession activity. This **WinterSession Plan** [WinterSession Form Part 1] **must be signed by the advisor and be submitted to the Academic Advisor no later than Friday December 10, 2004.**

After WinterSession, all students must submit the **WinterSession Report** [WinterSession Form Part 2] **to the Academic Coordinator no later than Friday January 28, 2005.** These forms will be placed in your files and in Department Records.

Any completed WinterSession courses (up to 5 credits) will be added to a student's spring credit totals. No additional tuition is charged for full-time students, unless they go beyond 45 credits total for the year.

Part-time students will be charged tuition costs for any credit courses taken. (The WinterSession Report is not required for part-time students or doctoral students who have passed the oral exam.)

SHDH Department WINTERSESSION AGREEMENT 2004- 2005

Part 1: WinterSession Plan

[NOTE: This Contract Has 2 Parts]

Part 1 should be signed by your Advisor and a copy forwarded to the Academic Coordinator no later than Friday December 10, 2004. Please follow guidelines established by the Registrar's Office for course registration, etc.

Name: _____ **Harvard ID #** _____

Advisor: _____

a. Please describe your planned WinterSession activities. Be specific; include course numbers (if applicable), whether activity is for credit or not for credit, location and, if multiple activities are planned, a time frame for each activity.

b. Briefly describe how this activity will enhance your public health training and/or capabilities.

Signature (student): _____ Date: _____

Signature (advisor): _____ Date: _____

SHDH Department WINTERSESSION AGREEMENT 2004- 2005

Part 2: WinterSession Report

Part 2 should be signed by your advisor and a copy forwarded to the Academic Coordinator no later than Friday, January 28, 2005.

Activity Report

Name: _____ **Harvard ID #** _____

Advisor: _____

Title or Name of Activity: _____

Location: _____

Dates: _____

Faculty / Supervisor [if appropriate]: _____

Activity Overview: _____

Skills/Learning/Value: _____

Check as appropriate:

- Non-credit research Non-credit academic work
 Non-credit academic field trip Other academic activities
 Other activities

Signature (student): _____ Date: _____

Signature (advisor): _____ Date: _____



4.3. Independent Studies

□ **300-Level Courses**

You have the opportunity to take 300-level courses with the title “Independent Study” rather than “Tutorial”. The title “Tutorial” will be reserved for work that truly fits the definition of tutorial -- wherein a faculty member actively leads or tutors study in a particular field.

All 300-level courses will now appear with the new title of “Independent Study”. The Registrar’s office will manage on a case-by-case basis those instances when a student and his/her supervisor determine that the 300-level course should be entitled “Tutorial”. It should be noted that faculty are not compensated for their independent study/tutorial teaching time. Availability varies. Several of the Society and Health Post-Doctoral researchers will consider supervising independent studies in specific areas related to Society and Health. A member of the faculty must officially sponsor (sign off on) these courses.

You are responsible for defining an area of study, delineating learning goals and objectives, and specifying an outcome or product (e.g. an annotated bibliography, a literature review, a research paper, etc.). You must seek faculty sponsorship. You will need to complete the appropriate contract form for both “Independent Studies” and “Tutorials,” as agreed upon with your course supervisor and academic advisor. Contracts are available at the Registrar’s office.

□ **Determining Credits**

The number of credits for an independent study/tutorial is determined by the amount of time given to the work/project. You may take up to five credits per independent study/tutorial. The following guidelines are defined by the registrar and must be followed:

1. For a 16 week tutorial:
 - 1 hour per week = .5 credits
 - 2 hours per week = 1 credit
 - 10 hours per week = 5 credits
2. For an 8 week tutorial:
 - 1 hour per week = .25 credits
 - 4 hours per week = 1 credit
 - 10 hours per week = 2.5 credits

□ **SHDH Research Training**

Note: Research credits are limited to doctoral students who have passed their written and oral qualifying exam (doctoral candidates). If you are about to take the oral exam (in the same semester) then you may, with permission of CAD, take research credits that same semester.



4.4. Advisors and Advising

All instructors have a copy of the **HSPH Faculty Handbook** and all students have a copy of the **HSPH Student Handbook**. The advising notes here do not duplicate the information in these handbooks -- but do highlight department specific concerns. This section on advising was revised 9/99 by a small departmental committee of students and faculty.

□ 2004-05 Academic Calendar Highlights

<u>Date</u>	<u>Event</u>
Wednesday, Sep 1	Check-in, new students
Thursday, Sep 2	SHDH Orientation Program
Tuesday, Sep 7	Check-in, returning students
Tuesday, Sep 7	Fall Semester and Fall 1 term courses begin
Friday, Sep 17	Add/Drop/Change Deadline: Fall semester & Fall 1 Term courses
Friday, Oct 22	Fall 1 Term courses end
Monday, Oct 25	Fall 2 Term courses begin
Friday, Nov 5	Add/Drop/Change Deadline: Fall 2 Term courses
Friday, Dec. 10	Deadline for WinterSession Plan (Part 1)
Thursday, Dec 23	Fall Semester and Fall 2 Term courses end
Friday, Dec 24 – Friday, Dec 31	Winter Recess
Monday, Jan 3	WinterSession courses begin
Monday, Jan 3	Cross Registration Deadline: WinterSession courses
Wednesday, Jan 26	WinterSession courses end
Friday, Jan 28	Deadline for WinterSession Report
Monday, Jan 31	Spring Semester and Spring 1 Term courses begin
Friday, Feb 11	Add/Drop/Change Deadline: Spring Semester & Spring 1 Term courses
Friday, Mar 18	Spring 1 Term courses end
Monday, Mar 28	Spring 2 Term courses begin
Friday, Apr 8	Add/Drop/Change Deadline: Spring 2 Term courses
Friday, May 20	Spring Semester and Spring 2 Term courses end
Thursday, Jun 9	Commencement

Student-advisor ties are very important for both masters and doctoral students. Establishing an effective relationship with your advisor (and with other faculty members) will enhance your time at HSPH. Advisor/student relationships vary depending on the interests, abilities, and personalities of the student and the advisor. You should consider the types of assistance you want from your advisor and be up-front about requesting that help. Faculty advisors typically help at some level in the following ways:

- Help students develop a plan reflecting their specific academic and career objectives. This may be the most important role of an advisor. Because the masters program is

only one or two years for full-time students, a tentative study plan (including subject and skill areas of concentration) should be developed within the first semester.

- Keep students on track to finding work they feel passionately about.
- Try to provide students with a realistic appraisal of their strengths and weaknesses.
- Help students meet other people who can help them achieve their educational and career goals.
- Help students navigate the administrative procedural tangles encountered in HSPH. Although some faculty and students consider this to be among the primary roles of an advisor (and their involvement to some extent is obligatory), there are disadvantages to depending on your advisor for this sort of assistance. Most importantly, time your advisor spends helping you fill out forms is time he/she does not spend helping you with other issues.
- Assist students experiencing serious academic troubles. There are other resources in HSPH to help with both academic and emotional issues, and students should also use these resources. (See Acknowledging and Coping with Stress Section below.)

□ **Office Hours**

Note that all advisors post hours during registration week. In addition, faculty post advising hours during each of the four teaching sessions. During non-teaching times, faculty will list hours or a phone number. Some faculty prefer to schedule appointments on request through email. If your advisor does not post hours, you should use email, a note, or the phone to set up an appointment.

□ **Meetings**

The official HSPH student handbook states that students must meet with advisors at least twice during the academic year (once at the beginning of the Fall semester and once at the beginning of Spring semester). Normally, students meet advisors somewhat more frequently (usually at least 4 times a year for Masters students).

Contact your advisor immediately if you are having academic difficulties. Because of the short term period at HSPH (7 weeks), there is not much time to respond if a student is struggling with coursework. Your advisor may be able to intervene on your behalf to avert potential problems, but only if he or she is aware of the situation early enough.

To give you an idea of what to expect during the first meeting, we asked one advisor to outline what he usually covers in a first meeting (though your advisor's agenda may be different from this one):

- Talk about student's background and why she or he has come to HSPH.
- Talk about long-term goals.
- Develop learning objectives for the year.
- Talk about common problems for students.

□ **Group Meetings**

Advisors hold individual and group meetings. In the past, many faculty have invited their advisees to their home for an evening of conversation and pizza. These events offered opportunities for faculty to get to know students better, enabled students to get to know and learn from one another and enriched the advising process. We hope to continue informal group meetings both in the department and 'off site'.

□ **Advising File**

Advisors maintain a file for each of their advisees. Faculty are sent a listing of courses completed/credits/grades. Advisors and advisees will want to check the following:

- Each semester, check the number of credits accumulated. Students need to maintain their full or part-time status. Students with fewer than 20 credits in a semester lose their full time status. This has very serious implications for foreign students.
- Before mid-year in a students' last year here, check the number of credits accumulated.
- At least half of all accumulated credits must be taken in the School of Public Health.
- Check the number of P/F courses taken. Note that a set percentage of the courses must be taken for ordinal grades:
- One-year SM students must take 40 credits, 30 of which must be ordinal
- Two-year SM students must take 80 credits, 60 of which must be ordinal

Tracking sheets are now included in all student folders. Keep your own copy of this so that you can check it together with any appropriate Substitution/Exemption Forms.

□ **Strategic Use of Advisors**

Keep in mind that faculty have many demands on their time as a result of teaching, research, advising, and grant writing responsibilities. They play a different role from that of most advisors at the undergraduate level. A committee of students and faculty offered the following advice:

- Don't rely on only one faculty member to shepherd you through the process. Seek advice from and maintain contact with multiple faculty members, including those in other departments.
- Be selective about how to approach your advisor. Use in-person meeting time carefully - if something can be handled via e-mail, use e-mail. Come to your advisor with clearly defined questions or issues. Try to let your advisor know in advance of a meeting what you would like to discuss.
- Be considerate of the fact that faculty are extremely over-committed. Give them adequate advance time when you need help with something.
- Think strategically about how to ally your goals with those of faculty you are working with. Keep in mind their research goals and try to structure work, such as independent studies, tutorials, etc. so they are "win-win" situations.
- Other students are valuable resources - use them.
- Do not expect faculty to be experts on classes (they usually have never taken them).

- While faculty members try to be conscientious about knowing school policies, this is generally not their area of expertise. If possible, look up your administrative questions in a handbook or ask an administrator. Use the extra 15 minutes with your advisor to talk about your career.

□ **If You and Your Advisor Are Not a Good Match**

Some advisor-student relationships work great from the start, but most require “care and feeding”. If your advisor isn't helping you in the areas you feel you need help, talk to him or her about this. Be clear about your requests. The faculty member may not be able to help you because he or she doesn't have the relevant information or connections. If this is the case, ask who could be more helpful and contact that person. Also, let your advisor know which things he or she does that you find helpful. As one faculty member said, *don't expect faculty to magically improve; they need feedback.*

Feel comfortable changing advisors. Changing advisors is not uncommon. The original matches are based on the application essay and stated areas of interest. Interests and goals change. Students who decide to switch advisors sometimes worry about hurting their advisor's feelings by switching. However, faculty and students see school as a place of discovery and change. If needed, discuss a reassignment with a prospective advisor and your current advisor. You must then prepare a Request To Change Advisor Form (see form at the end of this section). (The Registrar's Office and the SHDH Academic Coordinator also have copies of the form.) Keep in mind that faculty members have both masters and doctoral students and may not be in a position to take on new advisees. You must have an OK from the new advisor. Once the form is signed, the form should be sent to the Registrar's Office with a copy to the SHDH Academic Coordinator for your program.

□ **Registration Forms**

The registrar strongly urges students **not** to request and faculty **not** to sign **blank forms**. The advisor's signature on a form means approval. The registrar noted several problematic areas in the past and alerts advisors and advisees to the following:

- Look carefully at cross registration with other schools. Advisors must sign off that the course is indeed relevant to the student's study. You should be prepared with a course syllabus.
- Note that students cannot get graduate credit for undergraduate level courses. Be particularly attentive to courses at Arts and Sciences and MIT.
- If a student registers for too many credits in one semester, the student must petition CAD. An advisor's signature on a form signals approval.

If you have any questions or concerns, call the **Registrar's Office: 2-1032**.

□ **Acknowledging and Coping with Stress**

The first semester here is very stressful for most students. Many, new to the area or to the country, have left their support system behind. Some initially feel overwhelmed or even inadequate. Others, who have been engaged in productive work, are shocked by the nature of the "student role" and feel like school children again. In addition,

students and faculty alike feel stretched by the 7-week schedule. The Fall 2 term of first year is often a low point for incoming students, but the mood tends to lift in the spring term [warmer weather helps].

Everyone in the department is urged to be attentive to multi-cultural concerns. In the past, HSPH students have felt isolated, invisible, and, at times, discriminated against. Several student organizations and support groups exist to bring students together. We are committed, as a department, to increase dialogue and understanding.

The department is attempting to create a strong support network for students. Students formed the SHDH Student Association as a way to address some of the sources of stress in SHDH and foster a stronger departmental community. Current students in the Department recommend establishing peer support groups - regular meetings of students to discuss programs, problems, issues, and to lend support and encouragement to one another.

The "Buddy Program" was created to match new incoming students to returning students to help ease the transition into the new school year. If you're having a hard time figuring out which classes will help you develop the skill base you want, returning students are often an invaluable source of advice.

Finally, keep in mind that the admissions process to SHDH is rigorous and competitive. Don't be intimidated by all the great things other students have to say about their experiences in those ubiquitous classroom introductions. Everyone is here because she or he has been deemed excellent!

Students feeling overwhelmed by stress or in need of a sympathetic ear are encouraged to contact the Director of Student Affairs at 432-1036 or the Ombudsperson at 432-4040 or the Harvard University Health Services on 275 Longwood Ave. at 432-1370. Both the Advisors and the Academic Coordinator also function as part of the student support system team. Advisors can assist students in assessing their needs and make any appropriate referrals to the necessary resource.

□ **Appeal Procedures**

You may appeal decisions of your advisor or the department by seeking advice from the following in the order listed (as appropriate): (1) Doctoral or Masters Program Coordinator; (2) Chair; (3) Dean for Students; and (4) Ombudsperson.

**REQUEST TO CHANGE ADVISOR
Harvard School of Public Health**

Instructions:

Please print. Submit completed form to the HSPH Registrar's Office, Kresge, G-4.

Name: _____ Harvard ID: _____

Email: _____ Mailbox # _____

Degree Program: SM1 SM2 M60 MPH MOH SD DPH

Department: _____

Have you officially changed departments via the HSPH Admissions Office? Yes No

If yes, please list former department: _____

Former Advisor: _____ Department: _____

New Advisor: _____ Department: _____

REQUIRED SIGNATURES OF APPROVAL	
_____ Student	_____ Date
_____ Former Advisor	_____ Date
_____ New Advisor	_____ Date
_____ New Department Chair or Program Head	_____ Date

OFFICE USE ONLY

OASIS: ____/____/____ Initial: _____

4.5. The Human Subjects Committee

The Human Subjects Committee (HSC) at the Harvard School of Public Health is authorized to function as an Institutional Review Board (IRB) under a Federal Wide Assurance (FWA) approved by the Department of Health & Human Services for projects involving human subjects. In accordance with the Human Subjects Committee Manual of Operations, committee review is required for all research involving human subjects, and all other activities that even in part involve such research, regardless of sponsorship, if one or more of the following apply:

- The research is sponsored by the Institution; or
- The research is conducted by or under the direction of any employee or agent of the Institution (including faculty, staff, students, fellows and visiting scholars) in connection with his or her institutional responsibilities; or
- The research is conducted by or under the direction of any employee or agent of the Institution using any property or facility of the Institution; or
- The research involves the use of the Institution's non-public information to identify or contact human research subjects or prospective subjects.

The Human Subjects Committee as the IRB for the Harvard School of Public Health, is committed to the conduct of scientific research with human beings as participants, in compliance with federal regulations, University policy, and the key ethical principles of: respect for persons, beneficence and justice. The Committee is dedicated to collaborative, educational, administrative, and monitoring programs to ensure that human subjects are treated in our research community in a manner worthy of public trust.

The Committee reviews each research plan and consent form in order to safeguard the rights and welfare of human subjects. To that end, it must determine that each protocol conforms to various ethical standards including: there is a reasonable balance of risks and anticipated benefits; there are adequate provisions for informed consent; and there are plans made for the equitable selection of subjects. The Committee also considers the scientific design because it is unethical to put humans at risk as subjects of badly designed research. Committee review also protects the interests of investigators by minimizing misunderstandings that could lead to litigation or termination of grants and contracts.

The Committee has issued the following requirements for all investigators and researchers who are involved directly with human subjects, or with data or tissue, which they can link back to individual subjects:

- Harvard University online training module
- Attend, or view on CD-ROM or video, "IRB Basics," a 90-minute HSC workshop
- Attend, or view on CD-ROM or video, one workshop on special issues offered by HSC
- Annually after the first year, one refresher module (any of the above, or an acceptable equivalent)

Further information about the Human Subjects Committee can be found on the web at www.hsph.harvard.edu/hsc or by contacting the HSC Office at 617-384-5480 or hsc@hsph.harvard.edu. The website offers important information on contact information, review procedures, and form downloads.



5. FUNDING

5.1. School Resources

Many, but not all of our students do receive some tuition assistance through the Student Financial Services Office; students with financial needs should stay in close contact with the Student Financial Services Office. As part of the school's financial aid program, the Department is assigned a limited number of half- and quarter-tuition scholarships. Some of the funding may have certain restrictions attached. For example, the study of children's issues is a requirement for some of these tuition scholarships. A limited number of university-wide presidential fellowships are available on a competitive basis for those planning on entering public service or academia.

Students also receive funding through research assistantships. Post oral exam doctoral students can apply for their own grants.

In addition, many of our students have received funding for travel and expenses to conferences and, occasionally, some funding to support unpaid summer work (when that work is, according to the advisor, important to a student's course of study). Inquiries should be directed to the Student Financial Services Office.

Training Grants

We currently have students supported on training grants in the areas of aging and psychiatric epidemiology. The department has several Community Health Training Grant slots for underrepresented minority doctoral students. (The Point of Contact is the SHDH Chair.) In addition, there are a limited number of half-tuition fellowships for health professionals in the one-year master's degree programs (MS, MPH) and for doctoral students that are available through our federally funded training grant from The Maternal and Child Health Bureau (HRSA - HHS). MCHB funding also includes two partial tuition scholarships for the study of MCH epidemiology. These MCHB traineeships require US citizenship or permanent residency. (Contact Trish Lavoie for further information.)

All department students should become familiar with the current work of faculty (generally announced during orientation week). All part-time job opportunities related to faculty research/Teaching Assistant (TA) positions will be listed with the Department. If you are interested in working with any particular faculty with similar interests to your own, make a point of getting to know them and let them know of your interest in working with them. You should check the bulletin boards around the Department and the job opportunity notebook at the receptionist's desk for these and other opportunities for funded work. E-mail job announcements will also be sent out periodically to students.

Individual National Research Service Award (NRSA)

Individual NRSA's are available at the predoctoral, postdoctoral, and senior levels. Predoctoral fellowships are available from a limited number of the Institutes of Health, Agency for Health Care Policy and Research (AHCPR), and NIH support postdoctoral fellowship. Senior fellowships are available only at NIH.

Individual NRSA's provide a stipend to the awardee plus a small allowance to the sponsoring institution to defray some of the awardee's training expenses. Individuals sponsored by foreign institutions also receive travel funds. The specifics are provided in the program announcement (PA) or request for application (RFA).

Further information can be found at <http://grants1.nih.gov/grants/funding/416/phs416.htm>. Please see Cathy Zoza in Room 614 for an application kit.

MCHB - New Investigators in MCH Research: Dissertation Awards Program

Competition for this funding is limited to doctoral candidates who are MCHB-funded long-term training program grantees. Grant guidance for completion of an application is available on MCHB's website at www.mchb.hrsa.gov under "Funding Opportunities" - Dissertation Awards (RDA). (Contact Trish Lavoie for further information.)

NOTE: Any grant proposals, including subcontracts, being submitted, either by faculty or students with an HSPH faculty sponsor, must be reviewed and approved by the Office for Financial Services, and Office for Sponsored Research (OSR) in Cambridge, depending on the complexity and/or funding agency. No grants are to be submitted without this approval.

If you are eligible for the federal work-study program and interested in working in a paid position, please obtain the appropriate forms from the Student Financial Services Office.

A particularly energetic doctoral student in the Department alerted us to a variety of resources for funding possibilities. She has noted that listings of funding possibilities can be found in the following places:

- The Committee on General Scholarships, 8 Garden Street, Byerly Hall, Room 218, Cambridge; 617-496-5278; fax 617-496-4545
- Associated Grant Makers, 55 Court Street, Suite 520, Boston; 617-426-2606
- Sponsored Programs Administration, Harvard Medical School, 5th floor of Gordon Hall, Suite 509; 617-432-1596

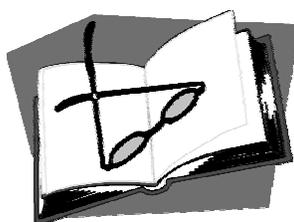
Please be aware that most applications are due in the fall for funding for the following academic year. Plan ahead!!!

5.2. Web Sites for Outside Resources

MCH Research Dissertation Awards Program: www.mchb.hrsa.gov

General scholarship leads: www.hsph.harvard.edu/finaid/external-finaid.shtml

NIH grants: <http://grants2.nih.gov/grants>



APPENDICES

A. RESOURCES

B. PUBLIC HEALTH COMPETENCIES

C. INTERNSHIPS

I. Overview

II. A Student's Guide to Summer Internships

D. DOCTORAL DISSERTATIONS AND MASTERS FINAL PAPERS AND PRACTICUMS/INTERSHIPS

E. CAREERS

I. Available Resources

- A) Getting Started
- B) Career Services Office
- C) Alumni/ae Mentoring Program
- D) Suggested Job Websites

II. Jobs Taken By Departmental Alumni/ae

A. RESOURCES

A. RESOURCES

Countway Library: The Francis A. Countway Library of Medicine combines the resources and services of the Harvard Medical Library and the Boston Medical Library. It is one of the largest libraries in the country serving health professional schools and has recorded holdings of over 500,000 volumes and more than 5,000 current periodicals. In addition, all HSPH students may make use of all of the libraries on the Cambridge campus. Countway Library also offers a copy card service for your use. Library hours are Monday – Thursday 8:00 am – 11:00 pm, Friday 8:00 am – 8:00 pm, Saturday noon – 7:00 pm, and Sunday noon – 11:00. Hours vary on holidays, and should be checked on their website at:
<http://www.countway.harvard.edu/countway/hours.shtml>.

Be sure to register for the Countway Digital Library to get access to the 2,000 on-line journals, literature search engines, and HOLLIS, the electronic listings of all the Harvard libraries. This is accessed through Student Life on the HSPH Home page.

Instructional Computing Facility: HSPH operates its own Instructional Computing Facility dedicated to serving the course work and thesis computing needs of its students and faculty. It is located on the Lower Level of the Kresge 3 Building and at the Landmark Center. Resources include UNIX computers, IBM personal computers, a Novell network, laser printers, a wide array of software including statistical packages, programming languages, and Microsoft Office and services such as remote dial-in, file transfer, electronic mail, connection to the internet, user assistance, short courses and computer accounts for funded research. The facility is open daily throughout the entire year. During the academic year, a knowledgeable staff of user assistants is available from 9 a.m. to 10 p.m. to advise and assist with computing questions and problems.

Meeting Rooms and Workspace: Space is our most limited resource. Advanced doctoral students working on their dissertation can check with Michele Brooks regarding the availability and assignment of study carrels. (See 2.2.11.) The small glass enclosed meeting room on the 7th floor can be used by students; a computer and phone are available. Since it is a meeting room and is used by other faculty and staff, it will be necessary for students to reserve the room. You can come by and reserve time to use the room with the sign up sheet posted on the door. You can come by anytime and if the room is not reserved, you can certainly use it immediately by filling in the time slot. ***The only time the meeting room will not be available to students is 12 p.m. to 1 p.m. every day – at Dr. Berkman’s request.*** Further, there are meeting rooms on the 6th and 7th floors that can be reserved by contacting Noreen Loughran (617-432-1135; nloughra@hsph.harvard.edu). Please note that there is no computer or LCD projector in this meeting room, therefore, if a computer is needed, you must reserve one separately through media services (617-432-2216).

Photocopying: Harvard University Copy maintains a satellite copy and customer service center at 260 Longwood Avenue, Harvard Medical School, Room 123. Most orders are completed on-site, although larger orders may be sent to Harvard University Copy's production location in Cambridge. For more information about the HU Copy Site, please call 432-1481. Self-service copying allows you to do your own copying at a rate of five cents per page utilizing your student card. Self-service copiers

are available in the Kresge Building and Countway Library as well as throughout the Cambridge campus.

Departmental Student Mailboxes: In addition to the student mailboxes on the ground floor of the Kresge Building, SHDH students have mailboxes in the department. SM and MPH students have mailboxes on the 6th floor, and doctoral students have theirs on the 7th floor. **Please make a point of checking them at least once a week.**

Faxing:

Faxing is available through our Harvard Medical School site at 260 Longwood Avenue, Room 123. The cost is as follows:

- domestic outgoing - \$2 first page, \$1 per each additional page
- international outgoing - \$5 first page, \$1 per each additional page, cover page free

The department's fax machine is available for **incoming** faxes only. Faxes will be put in each student's mailbox. The fax numbers are **(617) 432-3123 (7th floor) and (617) 432-3755 (6th floor).**

Books and Supplies: Most books and supplies can be found at the Harvard Medical Coop, located on Longwood Avenue.

Note:

- We sometimes stock course books in the department as well.
- Always do some comparison pricing on the web book suppliers.

Child Care Facilities: Lists of child care facilities sorted by location are available by contacting:

- www.qualitychildcare.org/childcare_choosing.shtml
- Office of Work Life and Family Resources – Harvard University, 124 Mt. Auburn St. 3rd Floor, Cambridge; Judy Walker/Cyndie White; 617-495-4100, work_family@harvard.edu
- Harvard Medical Center Office of Work and Family; 164 Longwood Ave., Rm. #106; Barbara Wolf; 617-432-1615, barbara_wolf@hms.harvard.edu

Local Eateries: You'll enjoy Sebastian's Kresge Cafeteria offerings but may want to explore the outside world as well. Explore the following [those with a * are very close by]:

- Au Bon Pain, Brigham & Women's Hospital, 75 Francis Street
- Brigham Circle Chinese, 728 Huntington Avenue
- Bruegger's Bagel Bakery, 375 Longwood Avenue
- Dunkin Donuts, 1631 Tremont Street
- *Harvard Medical School Cafeteria (Courtyard Cafe) and often open for dinner
- Longwood Galleria (Mr. Chan's, Susan's Subs, McDonalds, La Cucina di Capri Pizza, Beantown Burrito, Dunkin' Donuts, Au Bon Pain, CajunCajun, Red Barn

Coffee Roasters, Subway Sandwiches; also an Orange Julius/Dairy Queen is coming soon), 290 Longwood Avenue

- Rebecca's, 411 Brookline Avenue
- Sami's (Greek and Middle Eastern foods), Vanderbilt Hall or next to Countway Library
- Solstice Café, 1625 Tremont Street
- Souper Salad, Beth Israel Deaconess Medical Center, Brookline Avenue entrance
- *Squealing Pig, 134 Smith Street
- Starbuck's Coffee, 283 Longwood Avenue
- Starbuck's Coffee, 300 Longwood Avenue
- Subway Sandwiches, 1578 Tremont Street
- Tremont House of Pizza, 1590 Tremont Street
- The Wrap, 283 Longwood Avenue (show your student ID for a discount)

B. PUBLIC HEALTH COMPETENCIES

I. COMPETENCIES FOR THE PROFESSIONAL MASTERS DEGREE

The Public Health Faculty/Agency Forum (sponsored by the DHHS, PHS, HRSA, and the Bureau of Health Professions and CDC) identified "universal competencies" in public health. The initial report was prepared by Johns Hopkins University School of Hygiene and Public Health in collaboration with the Association of the Schools of Public Health. Key sections are included in the appendices of this guide.

Universal Competencies have been identified in each of the following areas:

- Analytic Skills
- Communication Skills
- Policy Development/Program Planning Skills
- Cultural Skills
- Basic Public Health Sciences Skills
- Financial Planning and Management Skills

Public Health Practice Skills include the following categories and skills:

- **Analytic Skills:**
 - Be familiar with quantitative and qualitative methods and their most appropriate applications
 - Be able to identify and prepare a situation and context analysis
 - Work with community groups to define a public health problem
 - Determine appropriate use of data and methods for problem analysis, program planning, implementation and evaluation
 - Know research design options and applications
 - Make relevant inferences from data
- **Basic Public Health Sciences Skills**
 - Define, assess and understand determinants of health and illness
 - Define, assess and understand factors influencing use of health services (including political, social and organizational behaviors)
 - Understand and apply research methods basic to public health sciences
 - Understand the historical development and structure of federal, state and local health agencies and services
- **Communication Skills**
 - Communicate effectively in writing and verbally to diverse populations (scientific and lay groups)
 - Establish dialogue (welcoming and soliciting input)
 - Advocate for programs and resources
 - Lead and participate in teams
 - Interact with media to communicate important public health information
 - Support dissemination of information
 - Negotiate and mediate

- **Cultural Competency Skills**
 - Understand the role of cultural, social and behavioral factors in determining health and the form and delivery of health and medical services
 - Understand the linkages between inequalities and health
 - Understand and respect cultural, socioeconomic and educational diversity
 - Collaborate and build partnerships with various population groups
 - Develop and adapt strategies for various population groups

- **Fiscal Management Skills**
 - Develop, present and monitor a budget
 - Develop strategies for determining budget priorities
 - Understand cost containment issues
 - Understand information systems and new technologies

- **Management Skills**
 - Monitor program process and performance
 - Understand organizational behavior and apply basic human relations skills
 - Communicate effectively with colleagues and staff
 - Manage and supervise personnel
 - Prepare proposals for funding from external sources

- **Policy Development Skills**
 - Apply relevant data and research findings to a defined problem
 - Articulate implications and policy options
 - Write clear and concise policy statements
 - Develop structural analyses including an understanding of laws and regulations

- **Program Planning Skills**
 - Collect and summarize data relevant to an issue
 - Incorporate participatory methods for assessment and planning
 - Incorporate social marketing methods
 - Articulate and implement appropriate processes for decision making
 - Develop implementation plans with delineated goals, objectives and measurable outcomes
 - Design theory based plans and programs
 - Develop mechanisms to monitor and evaluate quality and effectiveness of programs (formative, process and outcome measures)

II. SHDH MASTERS PROGRAM – ACADEMIC PLANNING

Consider planning a program of study that will help you develop depth in a particular area of interest (a defined public health problem such as HIV/AIDS, environmental exposure, cancer; or a population group such as African-American women, urban adolescents, the elderly poor) and concentrate on honing specific skills (such as program design, marketing, fiscal management, program evaluation, for example).

Area of Interest: An in-depth understanding of a defined problem or population group may be developed in a variety of ways. You may choose to take courses here at HSPH or within the various Graduate Schools on the Cambridge campus. You might be able to supplement course work with focused reading independent studies. You might also consider developing a deeper understanding of an area by directing your required papers to your topic of interest. For example, if you were primarily interested in adolescent health, you would be able to focus on the adolescent perspective in a course on addictive behavior, in a course on HIV/AIDS, in a course on nutrition . . . even though none of the courses themselves highlighted adolescents.

Skills: While you will hone a variety of skills through many of your courses here, consider developing expertise in a particular area of interest. For example, you may want to learn to design and evaluate programs but need to remember that you will probably also need management skills so that you can oversee such work in the future. Some students have focused on the design and implementation of health education/behavioral change programs. Others have chosen to focus on data analysis and policy. The lists of elective courses in section 3 of this guide provide some suggestions of where to start. Many SHDH students augment course work with part-time jobs and/or with practicum or internships related to their areas of interest.

III. SKILLS CHECK LIST

The Public Health Practice Program here at HSPH, the Association of Schools of Public Health, the Society of Public Health Educators, and various public health graduate programs have listed needed skills for practice.

The following checklist may serve as a guide for your study plan. Consider your experience, your previous course work, and your career goals as you examine this list and check off those areas within which you need to develop a stronger skill base.

You might want to copy this check-list for your advisor folder and/or review the list with your advisor.

Name: _____

Advisor: _____

Substantive Area of Interest: _____

Skill Focus: _____

1. Analytic Skills

Interest: ___ Strong ___ Peripheral

Skills base ___ Strong ___ Adequate ___ Weak

Gaps: _____

Planned Course work:

2. Basic Public Health Sciences Skills

Interest: ___ Strong ___ Peripheral

Skills base ___ Strong ___ Adequate ___ Weak

Gaps: _____

Planned Course work:

3. Methods in Research and Evaluation

[Quantitative and Qualitative]

Interest: ___ Strong ___ Peripheral

Skills base ___ Strong ___ Adequate ___ Weak

Gaps: _____

Planned Course work:

4. Communication Skills

Interest: ___ Strong ___ Peripheral

Skills base ___ Strong ___ Adequate ___ Weak

Gaps: _____

Planned Course work:

5. Cultural Competency Skills

Interest: ___ **Strong** ___ **Peripheral**
Skills base ___ **Strong** ___ **Adequate** ___ **Weak**

Gaps: _____

Planned Course work:

6. Fiscal Management Skills

Interest: ___ **Strong** ___ **Peripheral**
Skills base ___ **Strong** ___ **Adequate** ___ **Weak**

Gaps: _____

Planned Course work:

7. Management Skills

Interest: ___ **Strong** ___ **Peripheral**
Skills base ___ **Strong** ___ **Adequate** ___ **Weak**

Gaps: _____

Planned Course work:

8. Policy Development Skills

Interest: ___ **Strong** ___ **Peripheral**
Skills base ___ **Strong** ___ **Adequate** ___ **Weak**

Gaps: _____

Planned Course work:

9. Program Planning Skills

Interest: ___ **Strong** ___ **Peripheral**

Skills base ___ **Strong** ___ **Adequate** ___ **Weak**

Gaps: _____

Planned Course work:

C. INTERNSHIPS

Overview

Students are encouraged to complete a supervised summer or term-time internship as part of their training. While faculty cannot always arrange for internships, many do provide leads to help students and will work with students to develop a work contract so that learning is maximized. Please see the Student Internship Guide that follows. In previous years, students have worked at the CDC, for state and city health departments, in academic settings, and in a variety of agencies in the US and overseas.

Many, if not most, students will want to use the internship as the practicum portion of SHH 257, SHDH Masters Practicum and Seminar. The presentation of the internship and the culminating experience paper based on the internship will be due during the spring semester as part of SHH 259, SHDH Masters Seminar.

You are advised to seek faculty sponsorship in advance of the internship. As already noted, faculty are not compensated for their independent study/tutorial teaching time and their availability varies.

Some sources of internships

The Maternal and Child Health Information Resource Center Graduate Student Internship Program (GSIP) offers a limited number of paid summer internships at state and local health departments. Applications to this program are usually due early February. For additional information contact Trish Lavoie: 617-432 3762 or tlavoie@hsph.harvard.edu.

The Centers for Disease Control (CDC), as part of a cooperative agreement with the Association of Schools of Public Health, offer competitive 12-week internship assignments during the spring/summer. Full or part-time students enrolled in a masters or doctoral level degree program in an ASPH member school of public health in the United States are eligible. Students selected for the program work with leading experts in all areas of public health. Contact: Internship/Fellow Coordinator, Association of Schools of Public Health (770) 455-6898 or <http://www.asph.org>. Applications for the spring/summer cycle are due in January.

In addition, internship opportunity announcements are posted on the SHDH Bulletin Board and in the Job Opportunity Notebook at the 7th Floor Receptionist's desk. E-mail messages with information on available internships will also be sent out periodically to students.

**EXCERPTS FROM “A STUDENT’S GUIDE
TO SUMMER INTERNSHIP”**

(NOTE: Please refer also to Section 2.5.4. –
SHDH Practicum and Seminar Course)

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Harvard School of Public Health
Spring 2001

Introduction

So, you're interested in finding out more about summer internships? Well, hopefully this guide will prove a useful place to start. My aim in creating this handbook was to give fellow Health and Social Behavior masters students a user-friendly tool for thinking about the internship-hunting process. Rather than trying to be an authoritative resource (which this handbook can't be, since I've only ever done one summer internship!), I've instead focused on helping other students think generally about how to approach internships, and how to help find the "best fit" internship for them.

While written mostly for those with little job-search experience in mind, my hope is that this guide will give you a fresh take on the process even if you do have prior work experience. That being said, understand that you can feel free to take the suggestions here to heart only as you see fit, since advice is seldom one-size-fits all.

Topics addressed in the guidebook fall under broad question headings, based on the kinds of questions I myself had when I went through the internship search process. So, you should feel free to skip from section to section as well, since it is likely that some sections will be more relevant to your situation than others.

Good luck, and happy internship hunting!

Why Do an Internship?

Ah, good question. Perhaps you're thinking your time would be better spent taking summer courses to get ahead on requirements. Or maybe you're thinking that after a hard year of graduate work, you might want to kick back and take that lifeguarding job you had the summer before.

These are legitimate options, of course. But there are several distinct advantages to taking part in a summer internship that make the experience worth considering:

1. An internship allows you to gain bona fide, hands-on experience that you just can't get from your classes. Sure, it's one thing to learn about the importance of community and social networks in your HSB 201 class, but it's another thing entirely to think about them when you are offering a real intervention to real people.
2. An internship offers you the opportunity to "test drive" a particular organization or type of job, before you begin a full-blown job search for post-graduation employment. For example, you can see if an organization that you think would be a great place to work truly suits you. Or you can see if you really are interested in program design, rather than program evaluation. Likewise, if you decide to take an internship in an unfamiliar area or a new city, you can figure out whether that might be a good place for you to be after graduation as well.

3. An internship gives you the opportunity to build professional relationships. Of course, you are already doing so in the school setting, through your interactions with faculty and peers who will someday become your work associates in one fashion or another. But by engaging with new people in a work environment, you get the chance to go beyond academic relationships, and know people who are doing work related to your field, practicing their craft “on the ground,” so to speak.

Of course, there are some final added perks too. If your internship is paid—well, it’s always a good thing to get some extra money! Add to that the fact that a good internship experience can pave the way to a job offer for a permanent position after graduation, and the internship can look mighty appealing!

How Do Students at Other Schools Approach Internships?

Well, just as is the case at HSPH, approaches to internships vary by department and degree program. As you can see from the table in the appendix (Internship Requirements at Other Schools of Public Health), which gives just a sampling of the internship requirements of departments at other schools of public health, there is significant variability in the guidelines and requirements of various programs. At most schools, departments are free to set their own guidelines, making internships requirements as loose or as rigorous as they deem appropriate. In addition, some programs require a written piece at the conclusion of the internship, while others do not.

The routes to internships at these schools vary by department and program as well. For some students, their departments have already established relationships, and so they need only find a host employer among several “endorsed” by their department. For other students, a bit more initiative must be taken to find an internship, and may require contacting their school’s career services department, talking to faculty, or simply pounding the proverbial pavement on their own.

What Kinds of Work Could I Do in an Internship?

There is great variability in the kind of internships available, and what is offered at a given agency or organization is often a function of the larger projects and goals the organization has in place. But, just as a rough sketch of what’s out there, you might be involved in:

- Implementation of a health education program, in either a community or clinic setting
- Development and distribution of community health materials
- Development and delivery of a health training or workshop
- Pilot evaluation of a new or existing program
- Community organizing and outreach
- Survey design or implementation

In addition, work can take place in all sorts of settings. You may be working in a community setting, for a community-based organization (CBO) or through a local or state department of public health (DPH). You could be working in a clinical setting, either in a hospital or community-based health clinic. Or, finally, you could be working in an academic setting, conducting research at HSPH or other schools of public health, or even other academic departments within universities, such as departments of sociology, anthropology, or psychology.

What Should I Know Before I Get Started?

While I know this will sound trite, the most important thing for you to know is yourself. By that I mean you should have a clear sense of your preferences and your priorities. What are the things that are going to be most important to you in finding the right internship? And also, when it comes time to narrowing the field, what do you most want to gain from the internship? What do you think you have to offer potential employers?

Just as an exercise, you might want to take the time to ask yourself the following questions:

What are your preferences for geographic location?

Would you like to stay in Boston, or would you prefer to be out of the area for the summer? Would you like to be in a new city, which might be exciting, but would probably mean you'd have to find housing for the summer? Or would you like to stay in a city near family and friends where you could arrange for summer housing without much trouble? Given that you might end up working wherever you do your internship, is this a place you'd be interested in trying out for post-graduation?

What is your ideal work environment?

Are you interested in working in a large organization, where a lot is happening and job responsibilities tend to be more distinct? Or would you prefer a small organization, where you may get more exposure to direct public health work but job responsibilities tend to be more fluid? What sort of organization are you most interested in? A nonprofit or non-governmental organization (NGO)? Perhaps a government agency? An academic or clinical setting? Or maybe a CBO? Do you prefer a formal or informal work setting? Strict or loose management?

What are the skills you'd like to gain?

Are you more interested in quantitative skills or qualitative skills? Would you like to be doing more people-oriented work or research-oriented work? Do you want to gain experience working in groups or independently?

What strengths do you bring to the table?

What are the types of skills you can offer an employer? What are the “hard” skills you possess, including computer skills, statistical skills, and writing skills? What are the “soft” skills you possess, including analytic ability, communication skills, or creativity?

What is your financial situation?

Do you need to only consider paid positions? Or, do you have the flexibility to take a position that is voluntary, but would give you incredible exposure to public health work?

These are just some of the types of questions you will want to ask yourself to help you gain a better sense of what type of internship will be the right “fit” for you. I mean this not only in terms of the actual job description, but also with regard to less tangible but equally important factors such as your happiness with the location, etc.

When Do I Start Looking for an Internship?

The short answer is, the sooner, the better. Remember that you need to leave yourself time not only to look for organizations and agencies to apply to, but also time to prepare application materials such as an updated resume and cover letters. In addition, you may need time to arrange interviews or to find housing if you are going to be in a city other than Boston.

Just as a suggestion, you’ll find a timeline for your internship search in the Appendix (Timeline for Internship Search). The timeline is just a guide of course, and can be shifted a bit to accommodate your particular situation.

Where Do I Look for Internship Opportunities?

There are lots of places to look for internships these days, but I would suggest three primary resources:

1. Personal and Professional Contacts. Maybe a friend used to do work on HIV/AIDS reduction, an area you’d like to get more experience in. Or maybe you heard a professor speak about school-based health clinics, and you’d like to learn more about them over the summer. Find time to talk to these contacts, who may very well be able to put you in touch with other individuals who would love the support and assistance of a summer intern. Don’t forget that family and friends of family offer contact opportunities as well.
2. The Internet. This resource is becoming a more and more integral part of any job search, and internships are no exception. You can approach your Internet search in a number of ways. If you know a particular agency you’d like to work for—say, for instance, the Centers for Disease Control—you could try looking at their website to get a better sense of their internal departments and projects, and find potential internship openings that way.

Likewise, if you knew what city you wanted to work in, you could go to the internet to find out about hospitals, schools of public health, and community-based health organizations in the area, and figure out which ones might hold promise for summer interns.

3. The Career Services Office. They have binders on a variety of different organizations and jobs, and reviewing them may give you insight on some potential opportunities. In addition, they email job opportunity information to students each week; make a note of organizations that you are interested in, and contact them to see if they have internships available as well.

Regardless of the route you choose to pursue, be sure that you locate the name of a contact individual to whom you can address your inquiries. That way, your email, letters, or phone calls can be directed to a named person, rather than getting lost in cyberspace/snail mail/fiberopticland.

OK, I've Figured Out Some Places Where I Might Like to Work. What's Next?

Fabulous! You've made great headway. Now, you need to start the stepwise process toward securing an internship.

Making contact

Depending on the kind of internship you are applying for, there may be different requirements for your application. For instance, some programs that offer formal internships may require you to fill out a special application for the internships itself. Other agencies may not require an application per se, but will request that you send a cover letter and resume. And still others, perhaps ones you are "cold contacting"—i.e., they have not advertised for interns, but they look like they might be interesting places to work—give you no guidelines whatever on how to go about applying to work there for the summer.

Most potential employers—whether for internships or otherwise—like to see a cover letter and resume before they can consider you further. Not only does this give them a chance to see why you are interested in working for their organization and what your prior experience is, it also gives them a sense of your communication skills. Because this can be a potentially make-or-break first exposure with potential employers, be sure to have other people look over your resume and cover letter for feedback and pointers. You can do this through the folks at the career services office, or you can try having friends or your advisor look them over as well.

Some Extras

In addition, you will want to go ahead and prepare a list of references, should employers require them. These might be professors who know your work well, or your advisor, or if you have work experience, past employers who can vouch for the quality of your work. Make sure you contact these folks ahead of time so they are forewarned that they may be contacted as a reference. And lastly,

you may want to assemble examples of your work, such as a class paper, a published journal article, an evaluation proposal—just in case these items are requested.

OK, you've brushed up your resume, you've written cover letters for every agency you're applying to, and everything is stamped and ready to go. Now you are ready to pop these suckers in the mail, keep your fingers crossed, and play the waiting game!

Following Up

So, a week or two has passed since you have mailed off your letters. With any luck, you will soon be receiving a phone call or email in response to your applications. You may be asked to schedule a phone or in-person interview as well. While potentially nerve-wracking, such interviews allow you to add texture to your written application materials, by providing the opportunity to explain your skills and qualifications. In addition, an interview gives you an opportunity to better learn what the nature of an internship would be, what your day-to-day responsibilities would entail, and what you can anticipate learning on the job.

Don't be alarmed if you don't hear back from everyone you attempted to contact. In general, the folks you are trying to reach are every bit as busy as you are! Give them a little time, and feel free to follow up with a phone call after a few weeks' time has passed to see what the status of your inquiry is.

If and When I Do Get an Internship, What Should I Be Doing While It's Going On?

This will depend a great deal on whether you are taking part in a structured internship. You may be required, for instance, to write an occasional report or reflection as part of your internship requirement. Or you may need to be reporting to your preceptor periodically to provide feedback on your experience.

If your internship is not structured (or even if it is) and you are interested in doing something for your personal growth, my primary recommendation would be to keep a journal while you are undertaking your internship. My own advisor recommended this to me, and I found it was an invaluable tool for recording my thoughts about my summer. In addition to helping me simply log my day-to-day responsibilities and tasks, I also found it helped me to vent my occasional frustrations and to celebrate particularly good days. I also used it as a professional development reflection piece, allowing me to think about what skills I gained, what characteristics I observed in good managers, what I could have done to be more effective at my job, etc. And lastly, I found that a journal gave me a place to write down ethical considerations, cultural issues, and other thoughts that I really needed time to reflect on further, long after the summer was over.

In addition to keeping a journal, I'd recommend that you keep copies of any "products" you create over the course of the summer. If you give a PowerPoint

presentation, keep a copy of the slide show. If you design an educational workshop, keep copies of the materials you developed. These serve as useful examples of your work for future employers, and will give you a tangible sense of accomplishment at the end of your summer!

Lastly, I would suggest that you arrange with your supervisor to have weekly check-in meetings, if they are not already built into your internship. By scheduling regular time to meet, you will have a consistent opportunity to trouble-shoot, to talk about what's working well or isn't, and to formulate plans and ideas. Since most internships are 2-3 months in length, time is often of the essence, and regular meetings can allow you to effectively maximize the use of your time.

What Will Happen at the End of the Internship? Will I Be Evaluated?

Again, this depends a great deal on you, the formality of your internship, and the type of expectations set up by your internship preceptor or supervisor. Your program or agency may require a written evaluation at the end of the summer. Or, you may engage in an informal conversation with your manager in which you discuss what you learned, what skills you gained, and what you felt you contributed to the agency or program as a whole.

If you are not required to complete a formal evaluation, I would suggest that you complete at least an informal self-evaluation and, depending on how comfortable you are with your supervisor, an upward evaluation as well. I have found that the self-evaluation forces me to be critical of my work, but also allows me to realistically assess where I've made meaningful contributions. The upward evaluation—that is, the evaluation of your supervisor and/or his or her supervisors—can really be a place to offer praise of good management skills as well offer constructive criticism. Though the upward evaluation can be a little scary, I have found that most people really appreciate hearing about what they do well, and how they can improve what they don't do well. The key here, of course, is tact and professionalism! And I also recommend asking your supervisor for an evaluation of your work as well, to help you gain another perspective on how you contributed to the agency or organization, and how you could improve your efforts in the future. Keep in mind that in addition to the work you do, the internship is a professional learning opportunity, so you might as well maximize it.

In terms of the logistics of these evaluations, I found that writing my self-evaluation while my supervisor wrote her evaluation of me was the place to start. Once we both completed our evaluations, we “swapped” documents, allowing each of us to read our respective assessments of my performance over the summer. Then, afterward, I sent my supervisor my upward evaluation. Finally, a few days later, we met in person to discuss the various evaluations and clarify any questions. It sounds a little complicated, but I found it worked well, and really gave both of us an opportunity to use the evaluations as vehicles for professional growth.

OK, I Think I Know Enough to Get Started on My Internship Search. What Are the Big Take-Home Messages of This Handbook?

Overall, I'd say there are six take-home messages to keep in mind from this guidebook:

1. **The early bird gets the worm.** OK, not everyone wants to eat worms, but the point still stands that getting an early start is one of the best ways to aid your efforts in securing an internship. Not only will this allow you enough time to search thoroughly for the right organization, but also, logistical issues such as transportation, housing, funding, etc., will be easier to deal with if you have advance notice.
2. **Work your contacts.** Strangely, everyone knows more people than they think they know. Don't be afraid to ask faculty, friends, parents, FOFs (friends of friends) for leads, contacts, or phone numbers of folks who might be able to hook you up with an opportunity. I have found that people are more than happy to help, and are just as eager as you to have you gain a useful, meaningful work experience in an organization or agency that is helping improve people's health.
3. **Know thyself.** As I stressed before, it pays to clearly lay out for yourself what you want, where you want to be, and what is important to you in relation to a potential internship. It's much easier for you to search purposefully if you have a sense of what you are looking for. That being said, though...
4. **Be flexible.** Understand that while you may have the ideal internship in mind, you may not find exactly what you are hoping for, so you may have to opt for the next best thing. Also, the same applies for geographic location, agency, etc.
5. **Be realistic.** Understand that there will be constraints on the part of everyone involved. Though you might be hoping for a great stipend, the organization in which you are most interested could be cash-strapped. Or you may be hoping to have a great deal of involvement from the get-go, but you find that you have limited work responsibilities in the first few weeks. Or perhaps you thought you could be a weekend camp counselor in addition to your 40-hour per week internship responsibilities. Be realistic about the expectations you have, both of your work environment and yourself.
6. **A work/life balance is key.** It's great to use the summer as a learning experience, but it's important to carve out time for yourself as well. Feel free to work hard when your job responsibilities require, but be sure not to burn yourself out—you have another year of school just around the corner! Go hiking with friends, take a weekend road trip, lounge around and read a good novel: do whatever relaxes you most, in addition to working hard in your public health passion.

Appendix A (renumbered from original paper):

Timeline for Internship Search

October-December

- Make a list of what you are looking for in your internship (skills, location, work environment, etc.).
- Poke into career service for ideas on internships/organizations.
- Talk to contacts about internship ideas.
- Use Internet to find out more about potential programs, agencies, and organizations.
- Polish and update resume; get feedback from career services and/or others.

January

- Locate contact information for the agencies and organizations in which you are interested; agency websites may be especially useful for this.
- Request internship applications, if needed.
- Draft cover letters to agencies; take to career services for feedback.
- Follow up on suggestions of contacts.

February

- Mail out internship applications and/or cover letters and resumes.
- Follow up after a few weeks, if you have not heard back regarding your original contact.

March

- Arrange phone or personal interviews, as needed. Hopefully, get multiple internship offers!
- Narrow down field of potential internships to three. Be sure to consider your list of “good fit” characteristics, including any limitations of stipend requirements, location, etc. Also, be sure to contact those agencies in which you are no longer interested to let them know, so that they may offer the summer position to other applicants.

April

- Time to make a final decision. Be sure to contact all other agencies so that they may offer their internship to other candidates.
- Rejoice! You have an internship!!

May

- Time for securing logistical arrangements: locate housing and transportation, if necessary; fill out internship contract or employment paperwork, if necessary, etc.

**D. DOCTORAL DISSERTATIONS AND MASTERS FINAL PAPERS
AND PRACTICUMS/INTERNSHIPS**

SHDH Doctoral Dissertations [Sample]

<u>Grad. Year</u>	<u>Student's Name</u>	<u>Dissertation Title</u>
1995	Yael Caspi-Yavin	The Psychiatric & Functional Impact of Refugee Trauma
1993	Albert Jovell	Society & Health: Clinical Epidemiology, Health Status Assessment & Policy Implications
1995	Dorris V. Hanna	HIV Risk Assessment and Its Relationship to Breastfeeding Advice in the WIC Program
1995	Cheryl Olson	Training Teachers About Adolescent Depression
1995	Randall Sell	Measuring Sexual Orientation for Public Health Research
1995	Gina Wingood	An HIV Risk Reduction Trial for Young African-American Women
1996	Maura Iversen	The Influence of Expectations & Attitudes on Doctor-Patient Communication & Health Outcomes in Arthritis
1996	Ellen Mara Kramer	Energy Intake, Energy Expenditure, and Body Mass Index Among Children Under Five Years and Their Parents in Rural Bangladesh
1996	Long-Yau Lin	The Prevalence of Pre-menstrual Syndrome and the Treatment Effect of Pyridoxine in Taiwanese Adolescents
1996	Ming Yang	Occupational Conditions, Alienation and Alcohol Drinking: A Study of Steel Workers in Taiwan
1997	Helen Achat	Psychosocial Determinants of Health-Related Quality of Life: Social Networks, Rotating Night Shift, & Optimism & Depression
1997	Jennifer Dacey Allen	Factors Associated with Breast Cancer Screening Practices and Intentions
1997	Patricia Case	Health and Addiction: Studies at the Intersection of Policy and Behavior
1997	Everly Macario	Family, Literacy and Diet: Nutrition Education in Social Context
1997	Jacquelynn Meeks	Health-Related Quality of Life: Using the SF-36 to Examine Effects of Rotating Shiftwork & Benign Breast Disease in the Nurses' Health Study II
1997	Liza Molina	Surgical Sterilization in the U.S.: Psychometric Psychology, Informed Consent and Bio-Ethics in Context
1997	Margaret Frances Muldoon Rodan	Food Frequency Questionnaires and Nutritional Risk Assessment in Low-Income Populations
1998	Deborah Allen	Factors Associated with HIV Identification and Care During Pregnancy

1998	Katharine Atwood	The Social, Behavioral & Network Features of First Injection
1998	Richard Bell	The Impact of Foods Eaten Repeatedly on Rheumatic Disease Activity
1998	Deanna Byck	The Media's Role in Shaping Public Health Policy
1998	Carolyn Cannuscio	Is Care-giving Hazardous to Women's Health? Associations Between Informal Care Provisions and Mental Health in the Nurses' Health Study
1998	Lisa Waslenko Deal	Early Postpartum Hospital Discharge Among Low-Income Women in the United States
1998	Jennifer Fine	Weight change & Obesity: Implications for the Individual & Society
1998	Katherine Flaherty	Access to Tertiary Care Maternity Hospitals and Neonatal Mortality among High-Risk Infants in Massachusetts
1998	Bernardo Hernandez	Diet, Physical Activity & Obesity in Mexican Children
1998	Lois Chandler Howland	Quality of life, Stress and Immune Function in Children with HIV-1 Infection
1998	Linda Langford	Homicides Related to Intimate Partner Violence in Massachusetts, 1991 – 1995
1998	Ana Cristina Terra de Souza	Determinants of Infant Mortality and Inadequate Weight Gain in Children Among Municipalities in the State of Ceara, Northeast Brazil
1999	Sydney Austin	Dieting in Adolescents: Smoking, Disordered Eating, and Strategies for Prevention
1999	Gillian Barclay	Factors Influencing Preventative Care Counseling By Physicians in Urban Clinical Settings
1999	Blythe Ann Berger	Residential Mobility: Implications for Cognition, Behavior, and Health in Young Children
1999	Hideki Hashimoto	Communication Between Patients with Chronic Illness & Their Physicians: Quantitative & Qualitative Analysis of What Shared Conversation Can Do
1999	Laura Linnan	Applied Worksite Health Promotion Research: Addressing Gaps in Knowledge, Theory and Practice.
1999	Kimberly Lochner	Income Inequality, Residential Segregation & Mortality Differentials By SES & Race
1999	Beth Molnar	Child Sexual Abuse: Links to Subsequent Psychopathology and High Risk Behavior
1999	Julie Pulerwitz	Effects of Gender and Power Dynamics on Sexual Decision-making and HIV/STD Risk
1999	John Paul SanGiovanni	Visual Resolution Acuity in Infancy

1999	Elissa Weitzman	Risk and Resistance: Family Vulnerabilities and Community Strengths in a National Survey of College Alcohol use
2000	Constance Bacon	Quality of Life for Localized Prostate Cancer Patients: The Role of Symptoms, Treatments and Networks
2000	Mary Jean Brown	Long Term Implications of Lead Exposure and Evaluation of Strategies to Reduce Risk
2000	Urmi Bhaumik	Changes in Sex Difference in Infant Mortality in Massachusetts
2000	Edmond D. Shenassa	Individual and social-level determinants of health: A model and its application to adolescent smoking
2001	Marla Eisenberg	Social Influences on Health Behaviors of College Students with Same-Sex Experience
2001	Emily Feinberg	Enrollment, Crowd Out and Unmet Health Need Among Children in Publicly Funded Health Insurance Programs
2001	Stephen Gilman	Socioeconomic Disparities in Depression Throughout the Life Course
2001	Sunmin Lee	Prospective Studies of Work and Caregiving Stress and Coronary Heart Disease
2001	Cary Perry	Depressive Symptoms in Postpartum Women: Theories Psychosocial Correlates and Measurement in Multi-Ethnic Populations
2002	Lorien Abrams	Social Ties and Health in Adolescence and Young Adulthood
2002	Jarvis Chen	Socioeconomic Position, Allergic Disease and Cancer Risk: A Prospective Study
2002	Laurie Thayer Martin	Disparities in Cognitive Performance on Health: the Influence of Childhood IQ and Stressful Life on Adult Illness
2002	Jocelyn Pan	Smoking in Adolescence: An Exploration of Social and Contextual Risk Factors
2003	Theresa Stichick Betancourt	Social Supports, Exposure to Violence and the Mental Health of Adolescents: Findings from War-Affected and Urban Populations
2003	Cheryl Clark	Community Violence as a Determinant of Health
2003	Lisa Conboy	The Use of Complementary and Alternative Medicine in the United States
2003	Hannah Cooper	Police Drug Crackdowns and Illicit-Drug Injectors' Health
2003	Angela Cradock	Youth Physical Activity: Measurement and Social and Physical Contexts
2003	Maleeka Glover	Race/Ethnicity, Social Factors and Health

2003	Linda Hudson	Factors Associated with Chronic Disease Prevention Behaviors among Women
2003	Hee-Jin Jun	Gender Inequality and Health
2003	Deborah Kacanek	Physical and Sexual Victimization and HIV Risk Among Young Incarcerated Women and Men
2003	Kimberly Kaphingst	Examining the Educational Potential of Direct-to-Consumer Prescription Drug Advertising
2003	Mei Wong	Colorectal Cancer Risk Communication and Prevention
2003	Charlene Worley	Cigarette Smoking Patterns and Behaviors of American Indians in Boston, Massachusetts
11/03	Ying-Yeh Chen	Contextual and Individual Determinants of Mental Health
11/03	Jiun-Hau Huang	College Student Drinking: Measurement, Reasons Not to Drink and Alcohol Abstinence
2004	Reneé Boynton-Jarrett	Abiding Risk: Early Life Exposure to Violence and Health
2004	Medellena Glymour	Identifying Social Determinants of Old-Age Cognitive Function
2004	Juhee Kim	Longitudinal Monitoring Overweight and Physical Fitness among Children Using Health Surveillance Systems
2004	Chia-Ling Liu	Access, Quality and Expenditures of Health Care for Children with Special Health Care Needs in the United States
2004	Maria Melchior	Health Inequalities in France: Findings from the Gazel Cohort Study
2004	Emily Rothman	Intimate Partner Violence Perpetration: Correlates and Consequences
2004	Joseph West	Concrete Ecology and Adolescent Development: Neighborhood Poverty, Composition and Experience Sampling
2004	Jennifer Yu	The Influence of Learning Disabilities on Psychosocial Functioning across the Lifespan

SHDH Masters Final Papers

<u>Grad. Year</u>	<u>Student's Name</u>	<u>Title</u>
2001	Ying-Yeh Chen	A Review of Teen Health Websites
2001	Jennifer Huang	Health Resources and Services Administration HIV/AIDS Bureau: HIV/AIDS Bureau: Analysis of Title I Funding and Unmet Needs
2001	Zainab Magdon-Ismail	The Medicalization of Premenstrual Syndrome
2002	Julie Ahn	Is There a Place for Race, Public Health and Policy?
2002	Katherine Bauer	School Environments, Student's Food Choices, and Obesity among America's Youth: Implications for Policy Development and Implementation
2002	Reneé Boynton-Jarett	The Impact of Social Inequalities on the Transition to Adulthood: Predictors of Self-Rated Health and it's Decline in Adolescence
2002	Cheryl Fogerty	Ecosocial Theory & Policy: A New Approach and Solution to Obesity & Rising Prevalence Among Black Urban Poor
2002	Morgan Ford	Perceived Race-Based Discrimination in Health Care: A Research Proposal
2002	Adepeju Gbadebo	Towards an Inclusive and Workable Definition of "Minority Health": Health Issues Applied to Consideration of Data Collection, Analysis and Use
2002	Brian Grossman	Child Sexual Abuse in Residential Institutions for the Deaf: Creating a Plan for Prevention
2002	Andrew Lee	Oral Health Among American Youths: Passport Policy for Change
2002	Theresa Osypuk	Social Policy, Race & Space: Does Housing Policy Influence Health?
2002	Varouj Symonette	Lead Poisoning Prevention Strategies
2002	Jennifer Ward	Neutral Zone Intervention Affecting Computer Workers
2002	Rebecca Werbel	Ending Domestic Violence: A Community Based Approach
2003	Kate Bancroft	Domestic Violence: A Barrier to Human, Social, and Economic Development in Latin America
2003	Vigetta Charles	Black Women who have sex with Women (WSW) and Cervical Cancer Screening: Designing a Theory-Based Intervention
2003	Justin Cohen	Friendly Fire: The Domestic Violence Epidemic in the Military
2003	Casey Emmer	Climate Change, Social Forces, and Dengue Fever at the U.S. Mexican Border
2003	Allison Friedman	Evaluation of a CDC-Developed Syphilis Elimination Campaign
2003	Laura Friedman	Using Television Programs to Disseminate Health Information
2003	Linda Foss	The Role of Social Discrimination in HIV/AIDS among Black Men who have sex with Men (BMSM)

2003	Paul Gilbert	Do Domestic Partnerships and Civil Unions Convey the same Health Benefits as Heterosexual Marriage
2003	Hilary Goldhammer	Racism and Racial/Ethnic Disparities in Childhood Asthma: Using an Ecosocial Framework to Help guide Community Research in Boston
2003	Lydia Issac	The Bronx LGBT Health Experience: A Community Based Example
2003	Divya Kumar	Abortion Access in Massachusetts: The Hospital Nurses Project
2003	Alice Kuo	Media Interpretation of Health and Medical Information
2003	Kaja LeWinn	The Role of Social Support in Buffering Stressful Experiences
2003	Rebecca Orfaly	The Intersection of Psychosocial Occupational Factors, Socioeconomic Status, and Risk of Coronary Heart Disease
2003	Esmerelda Pereira	Tobacco Industry Sponsorship of Autoracing: The Case of NASCAR's Winston Cup
2003	Swati Rawani	HIV/AIDS in India: School Based Education as a Method of HIV Prevention
2003	Diane Snyder	Surveillance of Sexual Behavior in the United States: Overcoming Silence and Intolerance
2003	Emily String	Contextual Factors and Persistent Racial Disparity in pre-term birth rates in the United States
2003	Monifa Watson	School Based Health Care: Lessons for Child Advocates
2003	Kathy Wong	Strategies for Diabetes Prevention in the Chinese American population of Massachusetts
2004	Jeffrey Blander	Deploying Information (IT) to Support the Rollout of Anti-Retroviral Therapy (ART) and Remote Diagnostics in Developing Health Care Settings
2004	Megan Gerson	Religion and Public Health: A Call for Dialogue, Training and Partnership
2004	Jenny Hapgood	A Tailored Computerized Nutrition Intervention for Supermarket Shoppers
2004	Taran Jefferies	Planning for a Healthy Massachusetts: Affordable Housing as Social Determinants of Health
2004	Katherine Lee	Computer and Internet Use as a Psychosocial Resource for the Elderly
2004	Jessica Mah	Cultural Competency in Community-Based Programs: A Model for Mentoring in Chinatown
2004	Lindsay Rosenfeld	Possibilities for Health Impact Assessment
2004	Reginald Tucker	Political Economy of Socio-Spatial Disparities: A Theoretical Framework to Investigate Racial/Ethnic Disparities in Prostate Cancer and Fiscal Disparities across Metropolitan Areas.
2004	Emily Zobel	The Case for Cause Marketing in the Public Health Sector

SHDH Practicums/Internships

<u>Grad. Year</u>	<u>Agency</u>	<u>Project</u>
2001	Genzyme Corporation	Standardization of Amniocentesis Screening Tests
2001	University of Geneva; Saltonstall Population Innovation Fund: Assoc de Soutien au Developpement des Activities de Population	Explore interplay between poverty and reproductive health, as well as the impact of health sector reform on women's access to reproductive health services.
2001	Children's Projects Health Care for All	Children's Mental Health Intern: Provided background information and analyses on the organization and delivery of services, financing of services and need of community.
2001	Health Resources and Services Administration HIV/AIDS Bureau: HIV/AIDS Bureau	Analysis of Title I Funding and Unmet Needs
2001	Peace Games, Inc.	Worked as member of in-house evaluation department to code, analyze and report results from 99-2000 year-end assessment. Developed staff and corps training and future evaluations tools for 2000-01.
2001	Save the Children, USA, Bangladesh Field Office	Disability Programming in Nasirnagar, Bangladesh
2002	The Hole in the Wall Gang Camp	Unit Leader: The Hole in the Wall Gang Camp
2003	Harvard Children's Initiative and Cambridge Health Alliance	Implemented recommendations from a 2002 Report on Child Mental Health in Cambridge.
2003	Massachusetts Department of Public Health	Mammography Access for Women with Mobility Impairments
2003	Anne E. Dyson Community Pediatrics Training Initiative, Children's Hospital	Project Manager on Dyson Community Initiative
2003	Massachusetts Department of Public Health	Massachusetts Emergency Medical Services for Children Needs Assessment
2003	The Pediatric Psychosomatic Dept, The Chqaim Sheb Medical Center	Retrospective Study on Final Height of Patients with Anorexia Nervosa
2003	Office of Women, Family and Community Programs, Brigham and Women's Hospital	Car Seat Program
2003	Lucille Packard Foundation for Children's Health, Community Grantmaking Dept.	Assessment of Area 1: Prevention of Child Abuse and Neglect for Children 0-5 years
2004	Project Bread	Links Between Obesity and Food Insecurity

2004	MA Dept. of Public Health, Bureau of Family & Community Health, Div. Of Violence & Injury Prevention	Train DPH Funded MCH Providers to Respond to Violence Against Women and Children
2004	CO Dept. of Health & Human Services, Office of Population Affairs	Assess the Integration of the Title X Family Planning Program into Community Health Centers

E. CAREERS

Please be sure to check the most up-to-date materials available from the Career Services Office

And/or make an appointment with:

Peter Crudele, Director

Betsy Weisell, Recruiting Coordinator

Maria Ramos, Staff Assistant

(617) 432-1034

Kresge Building, Room G29

E-mail: careers@hsph.harvard.edu

Web site: www.hsph.harvard.edu/careers/



E. AVAILABLE RESOURCES

A) Getting Started

You are encouraged to begin conducting informational interviews and collecting data in anticipation of a job search as soon as possible. For example, a very well organized 1-year masters student began this process the summer before entering the program. Most 2-year masters students begin this process in the fall before graduation. The masters seminar is designed to facilitate this process.

All faculty will be able to tap into existing networks to suggest names of helpful people.

Members of the faculty have served as informal job counselors, have written job recommendations for graduates, and have been helpful in identifying individuals within agencies who might have jobs/leads. Students (most especially those in the 1-year masters program) are encouraged to get to know faculty in the Department and begin in-depth dialogue with those faculty members who work in areas of interest to the students. In addition, you are encouraged to conduct information interviews with people working in areas of interest.

To further prepare for your job application process, you should maintain a "portfolio" and ask appropriate faculty to write letters of recommendation for you before they leave the school. Clearly these letters should be relatively general and addressed to "whom it may concern". These letters, however, are written at a time when knowledge of your work is fresh. They can be used to refresh the memory of faculty later on when a specific position is sought. You should request letters from those members of the faculty with whom you have indeed worked closely. A letter from a faculty member who only knows of your work in one course does not serve as a strong recommendation.

The HSPH Career Services Office schedules on-campus recruiting sessions and company presentations in the fall and "Career Days" in the spring. Other career-related events are also scheduled throughout the academic year to help you find out about possible career paths and job opportunities.

Faculty and students have invited representatives from local organizations to discuss job options at their institutions (including some previous MCH and HSB students to discuss their own experiences). We hope to have similar presentations this year. If you have specific interests for these presentations, please let the Academic Coordinator or an SHDH Student Association member know about these interests early in the year. Do not wait until the department or the school provides information to begin job hunting, though. You are encouraged to begin the career planning process early by gathering marketplace information, identifying resources and evaluating career options.

B) Career Services Office

The Career Services Office (CSO) welcomes students and alumni/ae to utilize the resources and services of the office. Learning to develop the necessary professional and networking skills to manage your career effectively will be an important part of your experience at HSPH. The CSO encourages students to begin their job-related research and resume/CV preparation in early fall of the year before their graduation.

The CSO serves as a resource for job listings, fellowships, internships and the Alumni Career Advisory Network (ACAN). The office focuses its efforts on the development of career management skills and resources, so that students and alumni/ae can conduct a successful job search. The CSO offers individual career counseling sessions and workshops in resume/CV writing; interviewing skills, job search strategies and other related career issues. All job postings, internships, fellowships and a complete calendar of events are maintained on eRecruiting.com. For further information on eRecruiting or the CSO services please log onto: www.hsph.harvard.edu/careers.

You are also welcome to stop by the office and use the Career Resource Room which contains hard copies of position listings and fellowship materials as well as reference books and manuals. The CSO is located in Kresge G-29, M-F/9-5. To schedule an appointment to discuss your job search, resume/CV, interviewing skills or other career-related issues, call: 617-432-1034.

Please stop by to meet the CSO staff:

Peter Crudele, Director – peterc@hsph.harvard.edu

Betsy Weissel, Recruiting Coordinator – bweissel@hsph.harvard.edu

Maria Ramos, Staff Assistant – mramos@hsph.harvard.edu

C) Alumni/ae Mentoring Program

The Office of Alumni Programs has identified a large group of HSPH alumni in various fields of public health who have agreed to meet with or talk to current HSPH students. The alumni/ae mentoring program is designed to give students the opportunity to talk with alumni/ae at different stages of their careers about how they can maximize their professional potential and enhance the personal skills needed in their future careers.

This is an opportunity to take advantage of from the beginning of your academic program, so that you can get advice about required knowledge and skills, which will help in the selection of your courses. During your final year, they will be able to assist in thinking about the approach to job-hunting.

If you are interested in receiving advice and support from alumni/ae, please complete the application form and return it to the Office of Alumni Programs (617-432-2401), Kresge G-18, by September 30, 2003.

D) Suggested Job Websites

The following are websites that may be helpful when looking for a job. Some of the sites are government-sponsored, the rest describe various public health-related organizations. Additionally, other useful non-web resources are listed.

Websites

Government

State and federal employment sites such as:

www.nyjobsources.com

www.govtjobs.com

www.governmentjobs.com

www.hhs.gov/jobs/hhsjobs.html

www.pse-net.com: Public Service Employees Network

www.usajobs.opm.org: Federal job opportunity

Organizations

www.apointnl.org: Association of Public-Safety Communications International

www.apha.org: American Public Health Association

www.care.org: International Relief and Development

www.cedpa.org: Center for Development and Population Activities

www.cste.org: The Council of State and Territorial Epidemiologists

www.engenderhealth.org: EngenderHealth: an international reproductive health services organization

www.gawh.org: Global Alliance for Women's Health

www.HEDIR.org: The Health Education Directory website, whose purpose is twofold: it provides three electronic directories of health educators throughout the world, and listservs for news of interest to professionals and students in the field of health education.

www.idealists.org: Has a nonprofit career center on-line.

www.ippf.org: International Planned Parenthood Federation

www.iwhc.org: International Women's Health Coalition

www.nchec.org: National Commission for Health Education Credentialing

www.plannedparenthood.org

www.popcouncil.org: The Population Council

www.populationinstitute.org

www.uli.org: Urban Land Institute

www.worldwatch.org

www.zpg.org: Population Connection (formerly Zero Population Growth)

www.opnocsne.org: New England source for non-profit jobs

Nonprofit jobs

www.nonprofit.com

www.nonprofitemployment.com

www.nonprofit-jobs.org

General Public Health career sites

www.hpcareer.net: Health Promotion Career Network

www.healthcarejobstore.com: Has links to many different sites

www.healthjobsite.com

www.publichealthjobs.com

www.publichealthjobs.net: ASPH site

Other resources

Join a relevant listserv

APHA job bank

SOPHE job bank (Society for Public Health Education; mentioned by four respondents)

In the Pacific Northwest: Pacific Northwest health Educators listserv

The Chronicle of Higher Ed for teaching positions

www.monster.com: major general search engine

II. JOBS TAKEN BY DEPARTMENTAL ALUMNI/AE*

Policy

- White House Initiative on Asian Americans and Pacific Islanders, Rockville, MD
- HRSA Policy Intern, Health Resources and Services Admin, Washington, DC
- Policy Analyst/Senior Staff Editor, "Future of Children", David & Lucille Packard Foundation, Los Altos, CA

Public Health Departments

- Epidemiologist, Dept. of Health & Environment, Division of Disease Control, KS
- Director for Marketing & Training, MA Department of Public Health/WIC Program
- Epidemiologist, State Lab Institute, Jamaica Plain, MA
- Maternal & Child Health Planning Specialist, Tobacco Control Programs, Vermont Dept. of Health, Burlington, VT
- Head of Research & Academics, AATM Dept. of Health, Barcelona
- Assistant Medical Director, Division of Disease Prevention & Control, Rhode Island Dept. of Health, Providence, RI
- Director, Maternal Child Health, Metropolitan Health Department, Nashville, TN
- Dept. of Prevention & Community Health, School of Public Health & Health Services, George Washington University, Washington, D.C.

Specialized Programs

- Program Evaluator, Casa Myrna, Jamaica Plain, MA
- Project Bread – the Walk for Hunger, Boston, MA
- Boston Women’s Health Book Collective, Somerville, MA
- AIDS Action Committee, Boston, MA
- Planned Parenthood, San Mateo, CA

Health Education

- Center for Health Communication, Harvard School of Public Health
- Coordinator, Injury Prevention Center, Emergency Dept of Medicine, RI Hospital, Providence, RI

* These include jobs taken by both masters and doctoral graduates of the MCH and HSB departments.

- Director of Health Services, Head Start, Minneapolis, MN
- Project Coordinator, Child Nutrition Outreach Program

Research

- Manager, Dept. of Outcomes Research & Management at Merck & Co., Inc., Philadelphia, PA
- Behavioral Scientist, Population Council – Global HIV-STD Prevention Project, Washington, D.C.
- Research Psychologist, Natick RD&E Center, Natick, MA
- Research Coordinator, Harvard School of Public Health, HSB Dept.
- Senior Clinical Data Analyst, Kaiser Permanente, Rockville, MD
- Division of Adolescent & School Health, CDC, Atlanta, GA
- Project Leader, Dept. of Clinical Quality Measurement, Tufts Health Plan, Waltham, MA

Academics

- Department of Hygiene & Public Health, Dept. of Medicine, Teikyo University School of Medicine, Tokyo, Japan
- Assistant Professor of Health Behavior, University of Alabama School of Public Health, Birmingham, Alabama
- Chair, Dept. of Health Behavior, Rollins School of Public Health, Atlanta,
- Biology Professor, Navajo Community College, Shiprock, NM
- Assistant Professor, Dept of MCH, BU School of Public Health and Nurse Practitioner, Dept of Pediatrics, Boston Medical Center
- Post-doctoral Fellow, Dept. of Nutrition, Harvard School of Public Health