



Columbia University  
**MAILMAN SCHOOL  
OF PUBLIC HEALTH**

Department of Sociomedical Sciences  
**MPH Student Handbook**  
**2005 – 2006**

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Department of Sociomedical Sciences  
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## Overview

In 1968 the Columbia University School of Public Health became the first institution in the country to offer a graduate degree in Sociomedical Sciences (SMS).

What began as a collaborative research project on rural health care in 1956, spearheaded by a physician, an epidemiologist, and a sociologist, evolved over a decade's time into a formal doctoral program. Dr. Jack Elinson, first head of SMS, coined the term "sociomedical sciences" to incorporate the social sciences of sociology, anthropology, economics, history, political science, and social psychology into a multidisciplinary study of health and medicine. The most recent addition to this academic framework is philosophy, especially relevant with the ever-increasing focus on ethics in medicine and public health. In 1991, in response to a growing interest in health promotion and disease prevention, the Department added a track specializing in this area of study to its Master of Public Health (MPH) Research Program. In 1998, a third MPH track, specializing in the History and Ethics of Public Health and Medicine, was added. A fourth track, focusing on Aging and Public Health, was created in 1999; and in Fall 2002, a fifth track, in Urbanism and the Built Environment, was introduced. The sixth track added the Sexuality and Health track was introduced in Fall 2003. It is a joint program of SMS and the Department of Population and Family Health. In fall 2005 a school-wide program in Global Health was added.

Today the SMS faculty is broadly involved in both research and teaching, with the goal of applying social science theory and methodology to health and medical issues. Research projects are focused on such contemporary health topics as sociocultural aspects of drug use behavior and alcoholism, adolescent health, the role of social supports and social networks, health, well-being and disability in older people, social aspects of disability, the organization of health care and health care program evaluation, the health professions, stress and coping, prejudice and discrimination, health disparities, and social factors in pain, the social and ethical impact of AIDS, preventive health behavior, chronic illness and caregiving, end-of-life and bereavement, sexuality and sexual orientation, gender and health, and response of the medical profession to major issues in the organization and delivery of health care to special populations including older adults.

Within SMS, three degrees can be pursued: the Master of Public Health (MPH), the Doctor of Public Health (DrPH), both conferred by the Mailman School of Public Health, and the Doctor of Philosophy (PhD) conferred by the Graduate School of Arts and Sciences. Doctoral graduates may expect to do research, teach, and/or assume advanced administrative positions. MPH graduates often work in public health agencies, service delivery systems, participate as members of research and health promotion teams, or use the degree to complement such professional careers as nursing, law, medicine, social work, urban planning, occupational therapy, or international affairs.

## General Information and Resources

### *MPH Programs Offered by the Department*

Dr. Richard Parker is the Chair of the Department of Sociomedical Sciences and Dr. Ilan Meyer is the Deputy Chair for the Masters Programs. The Department offers seven tracks in the MPH Program, each is directed by a member of the faculty, as follows: Aging and Public Health, Dr. Victoria Raveis; Global Health, Dr. Mark Padilla; Health Promotion (Day and Evening programs), Dr. Miguel Muñoz-Laboy; History and Ethics of Public Health and Medicine and Medicine, Dr. Amy Fairchild; Sexuality and Health, Dr. Theo Sandfort; Social Sciences Research in Public Health,

Dr. Randall Sell; and Urbanism and the Built Environment, Drs. Mindy Fullilove and Lourdes J Hernandez Cordero. Dr. Marita Murrman is the Practicum Director and is the principle person responsible for the practica of all the MPH students. Andrea Constancio MSW is the Coordinator for the MPH Program. She is responsible for all academic affairs related to the MPH program including admissions, academic progress, practicum, and graduation.

### *Department of Sociomedical Sciences Central Office*

The SMS Central Office, located at 722 West 168th Street on the ninth floor (212-305-5656), serves as a center of information for students and faculty. Housed at the SMS Office are the Department Chair and Deputy Chairs, many full-time faculty members, the Doctoral and MPH Program Coordinators, and administrative staff. Many resources are available at the SMS Office for student perusal, including a library of doctoral theses, and master's integrative projects (MIPs), bulletins of various schools of the University, Directories of Classes, qualifying exam reading lists, and course syllabi. Although students are encouraged to e-mail or phone ahead if they wish to consult with their faculty advisors, they are always welcome to drop in at the SMS Office if they have questions or wish to look through any materials. Ms. Andrea Constancio's door is always open, so feel free to come by at any time, if you have questions about SMS programs, for help getting through the Columbia bureaucracy, or just to say hello. Her phone number is 212-342-0287, and her e-mail address is ac995@columbia.edu. Student files and progress sheets are kept in the office of the Program Coordinator. Remember to let the SMS Office know if you have a change of status, address, phone number, or e-mail address (work and home) so that we can keep our files and databases current.

### *Advisement*

Upon admission to SMS, each student is assigned a faculty academic advisor. The advisor is responsible for guiding the student's progress through the program. The faculty advisor assists the student in planning a program to meet their needs and professional interests.

Students should meet with their advisors at least once a semester, before registration, to plan for the semester, discuss general progress, and update plans for the future. During the first semester, students should meet with their faculty advisors to begin planning for the Practicum and Master's Integrative Project (see relevant sections of this Handbook for more information about advisement, practicum, and the Master's Integrative Project).

There are some areas in which Ms. Constancio, the MPH Program Coordinator, is the most appropriate person to consult with. For example, she is knowledgeable about the rules and facilities of the University and serves as a resource person to both students and faculty.

### *Financial Aid*

Students who need financial aid should first contact the Financial Aid Office in the Mailman School of Public Health (212-305-4113, sphfinaid@columbia.edu). The types of student aid available, including loans, awards, and work-study employment, are outlined in the school Bulletins.

Fellowships and grants from government agencies and private foundations are available for graduate students. The amounts awarded, eligibility for the awards, and the basis for selecting recipients, vary. Students interested in exploring these funding possibilities should consult with Lara Manjares (212-342-0286, lm454@columbia.edu). The publication *A Selected List of Fellowships* is available through the GSAS Office of Financial Aid (212-854-3809). This information is also available

through ColumbiaNet (CNET).

### *Accessing Information*

The following is a brief overview of how students may access information through computers at Columbia. Because this is a rapidly expanding information system, the students are advised to become familiar with resources and assistance available at the Health Sciences Library.

Students should open a Columbia University e-mail account as soon as possible. The Department sends important information including program announcements and job postings for students via email. E-mail accounts are free to all Columbia University faculty, staff and students. The Columbia University (Cunix) ID is issued by Columbia's Academic Information Systems group (AcIS). To activate e-mail, and for other computing information, at the main Columbia web page ([www.columbia.edu](http://www.columbia.edu)) click on "E-mail and computing."

Also available on Columbia's home page, under "Students," are schedules of classes, schedules of finals, grades, registration holds and bulletins, which can be accessed with a Columbia UNI.

Grades may also be accessed using a touch-tone telephone through the Grade Inquiry System (212-854-7373). Entrance into the system is gained by using a social security number and a Personal Identification Number, issued by the Registrar and sent to students by mail.

The Mailman School of Public Health has a home page on the Web at [www.mailman.hs.columbia.edu](http://www.mailman.hs.columbia.edu). SMS has its own departmental page within the School's home page.

### *Campus Shuttle Service*

A free campus shuttle bus service is available between the Medical Center campus (in front of Neurological Institute on Fort Washington Ave.), the Morningside campus (in front of the main gates on Broadway and 116th Street) and Harlem Hospital (on Lenox Avenue and 136th Street). A valid Columbia University identification card is required. The shuttle runs between 6:45 AM and 11:55 PM except in the summer when there is no evening service between the Medical Center and Morningside campuses. For further information please call the security office at 212-305-8100.

### *Campus Escort Service*

Students may call the security office (212-305-8100) for escort service among all Medical Center facilities or to their cars.

## Academic Affairs

### *Registration Process*

Registration for classes is held at the beginning of each semester and at the beginning of each Summer school session. All students will receive information about these registration periods from the Mailman School of Public Health. We will keep you informed of changes in registration procedures. If you have any questions, please call the MPH Program Coordinator.

Each semester, course schedules for the entire University are published in the Directory of Classes as well as online. You may hear both students and faculty refer to this directory as the Pencil Book

(folklore has it that the original directory had a picture of a pencil on the front cover). The Pencil Book can be obtained from various offices throughout the University, including the Office of the Program Coordinator, a few days before the start of registration each session. The Mailman School of Public Health publishes a separate schedule of all of its courses that is mailed to students with registration information. This schedule is also available in the Office of Student Affairs of the Mailman School of Public Health, located on the 10<sup>th</sup> floor of 722 West 168<sup>th</sup> Street, as well as in the reception area at Department of Sociomedical Sciences. In addition, course listings are available through the ColumbiaNet system, through the Columbia University home page on the Web and on the Mailman School of Public Health web page.

Although students may take courses offered in any school in the University, their registration must be processed through the school in which they are enrolled. All students should register through the Medical Center campus registrar. Students should note that semester start and end dates, as well as holiday schedules, may not be the same for all schools in the University.

The Department of Sociomedical Sciences holds pre-registration advisement for new students at the beginning of the fall semester. At pre-registration advisement, new students will plan and receive approval for their fall program. It is recommended that new students make an appointment to meet with their advisor during the first week of the semester to outline their entire MPH program. Continuing students should get in touch with their academic advisor either in person or via e-mail before registration to obtain approval for their fall program. Continuing students must obtain approval from their academic advisors before they can register.

Many courses require the instructor's approval (SMS students do not need approval for most SMS classes). If approval is required it will be noted in the Pencil Book and in the Mailman School of Public Health web site course listing. Approval is obtained by contacting the professor who teaches the course or the department coordinator. **If permission is not given in advance students may be closed out of the class even after they had registered for it.**

### *Holds*

All holds on registration must be cleared before you will be allowed to register. Examples of holds include academic holds for incomplete courses, library holds for outstanding materials and/or fees, Bursar's Office holds for any money owed, or Health Services holds for failure to comply with immunization requirements. If you have a hold, you should receive a notice from the Registrar's office some time before registration, letting you know that you are on hold and why. To clear the hold, go to the office that has placed you on hold and settle any outstanding obligations you may have.

### *Add/Drop*

Changes in class schedule may be made during the Add/Drop period, usually occurring during the first week of classes. There are no extra charges for adding and/or dropping courses during this period. If you were unable to see your assigned academic advisors before registration, the add/drop period gives you a grace period to see them after the academic year begins, in time to make any necessary changes to your program after consulting with them.

### *Full- and Part-Time Programs*

Students may enroll as full- or part-time students. Full-time study is encouraged wherever possible. With the exception of the Health Promotion evening program students, part-time students must be

able to take classes during the day time in order to complete required courses. Health Promotion evening program students will be able to complete the program requirements by taking evening classes only, but they may be limited in selection of some classes.

### *Procedures for Changing Tracks within SMS*

A request to change tracks must be filed by the beginning of the student's second semester in the School. A student who wants to change tracks must first meet with the MPH Program Coordinator to discuss the requested change and file an application for admission to the requested track. The admission application should include a personal statement explaining the reason for the requested change. The MPH Program Coordinator will forward to a faculty reviewer the student's application and the original MSPH application file along with a review form. Admissions criteria for a change of track are the same as those for accepting new students. Applications for a change of track and the reviewer's recommendation must be approved by the Deputy Chair for Masters Programs. The MPH Program Coordinator will inform the student of the Department's decision and, if the change is approved, assign a new faculty advisor to the student.

### *Course Waivers*

Students may seek a waiver of any core course by taking a waiver exam. Successful completion of a core waiver exam exempts students from the course requirement but does not carry course credit or reduce the number of credits needed for the degree. These examinations are scheduled during the registration period. There is no penalty for failed waiver attempts.

Students may request a waiver or exemption from a specific course requirement if they believe that they have satisfactorily completed a graduate-level course that is of comparable rigor and scope to that of the required SMS course. Students initiate this process by preparing a written request that identifies the SMS course to be waived and brief description of prior course work that is the basis for the waive. Attach to the statement a syllabus for the prior course and transcript indicating the final grade for this course. Submit a signed and dated written request along with the supporting material to the MPH Program Coordinator.

#### *What Happens Once the Waiver Request is Received?*

When a request for a waiver is received, the MPH Coordinator will designate an SMS faculty member who is familiar with the course content subject to the waiver to review the request. The faculty member will usually be the current or past instructor of the course for which the waiver is requested. The faculty member should base the decision whether to waive the course on his or her judgment that the prior course work is comparable in rigor and coverage to the course being waived. The student must have earned a grade of B+ or better for the course. (Faculty discretion may be required when there is no letter grade). The faculty member's recommendation is returned with the student's request and supporting material to the MPH Program Coordinator who forwards the material to the Deputy Chair for Masters Programs. Once the Deputy Chair has approved the recommendation, the Department notifies the student via e-mail. The Department Chair and appropriate faculty are cc'd about the decision.

### *Transfer of Credits*

Up to 15 transfer credits may be granted to MPH degree candidates for appropriate graduate level courses. The courses must have been completed within the preceding five years at an accredited

institution and not have been counted toward another degree.

### *Incomplete Grades*

The Department does not grant automatic incompletes. Students who request an incomplete for a course must get the instructor's approval. The instructor determines whether to permit a student to receive a grade of INC in his/her course. Students with formal approval will have one month to fulfill the course requirements. If, because of extraordinary circumstances, they need more time, approval for an extension must be obtained from the instructor. Any student who does not receive permission for an extension will receive a grade of UW. Any student who has three or more incompletes will not be allowed to register for the next semester of classes. Their registration will be held until they clear their records of the incompletes.

### *Inactive Status*

Leave of absence or medical leave must be approved by the MPH Program Coordinator and by Lillian Morales (212-305-8690, lm31@columbia.edu), Coordinator of Academic Standards and Academic Record in the Office of Student Affairs (OSA). A student who takes a leave that extends beyond 2 years would be required to re-apply for admission through the OSA. Re-application materials and instructions are available to download at the OSA website. The re-application materials include a letter of readmission, an updated personal statement, and a resume /CV. Re-admission is reviewed by the School admissions committee and is not guaranteed. If re-admission is approved, the student may be bound by degree requirements that are in effect at the time of re-admission.

### *Filing for Graduation*

Degrees are granted three times a year by the University: October, February and May. The precise dates vary from year to year and students should check the schedule on the calendar sent to them and in the school bulletins.

A student may file an application for graduation when they anticipate that they would fulfill all degree requirements by the graduation date. Sometimes this happens before all work for fulfillment of the degree requirements has been completed (for example, a student may be working on finishing touches of their MIP).

Applications for graduation must be filed with the Mailman School of Public Health's Office of Student Affairs. The filing deadlines are absolute. They are published each year in the academic calendar. It is the student's responsibility to file for graduation on time.

Students who filed for graduation but failed to complete required work will not graduate. The next time they file for graduation they will have to complete all degree requirements before re-application for graduation will be accepted.

## Learning Objectives for the Master of Public Health

The MPH degree in Sociomedical Sciences (SMS) is designed to train health care professionals in the application of theories and methods of social and behavioral sciences to address public health issues. Students are provided with the knowledge to understand the importance of social and behavioral sciences for the health of individuals and communities and the skills to apply this

knowledge in the analysis and formulation of public health programs and policies. These general goals are reflected in specific learning objectives for MPH students developed at the school, department, and track levels. The learning objectives identify the various concepts and skills students are expected to master through the course of the MPH program in Sociomedical Sciences.

*Learning Objectives: Mailman School of Public Health*

Upon satisfactory completion of the MPH degree, all graduates will be able to demonstrate a broad knowledge and skills base in the core areas of public health, with particular emphasis in a selected field of public health, and will be able to:

- Apply epidemiologic methods to the measurement of disease rates, prevention of infectious diseases, and the development and evaluation of health programs and policies;
- Apply statistical methods of estimation and hypothesis testing and explain the basics of correlation and regression for the purpose of analyzing the health of populations;
- Analyze how environmental contaminants (chemical, physical and other exposures) interact with biological systems and their effect on human populations for the purpose of evaluating risk reduction strategies;
- Assess the impact on health policy options of social, political, technological, economic and cultural forces, and apply basic management techniques to address organizational challenges to providing health care;
- Examine public health issues and responses from a social and behavioral sciences perspective and explain social, cultural, political, economic, and behavioral determinants of disparities in health status among population sub-groups; and
- Demonstrate knowledge and skills for effective practice in their selected field of study.

*Learning Objectives: Department of Sociomedical Sciences*

The MPH degree in Sociomedical Sciences (SMS) is designed to train health care professionals in the application of theories and methods of social and behavioral sciences to address public health issues. Students are provided with the knowledge to understand the importance of social and behavioral sciences for the health of individuals and communities and the skills to apply this knowledge in the analysis and formulation of public health programs and policies. Students in this program select one of seven tracks: Aging and Public Health, Health Promotion (Day and Evening programs), History and Ethics of Public Health and Medicine, Sexuality and Health, Social Sciences Research in Public Health, Urbanism and the Built Environment, and Global Health. Graduates of SMS complete 45 credit hours, the Good Clinical Practices Certification examination, a practicum, and a Master's Integrative Project. Upon satisfactory completion of the MPH program in SMS, graduates will be able to:

- Describe how major theories and methods from the fields of medical sociology, medical anthropology, history, and health psychology can be used to address a variety of public health issues;
- Examine public health issues from a social and behavioral sciences perspective:

- Discuss the relationships of social, cultural, political, economic, and behavioral factors to health and disease outcomes
- Explain social, cultural, political, economic, and behavioral determinants of disparities in health status among population sub-groups and related public health responses
- Distinguish a population-wide public health perspective from individual and clinical perspectives regarding determinants of health status and related responses;
- Analyze public health issues from the perspective of at least one of the following fields of study:
  - Explain how medical sociology examines the multiple paths by which social class (SES), ethnicity/race, gender, and organizational structure leads to states of good and poor health
  - Explain how medical anthropology examines the relationship between culture and health as well as the cultural constructions of health and illness
  - Explain how history examines the relationship among biological, social, political, and economic factors in the creation of health and the political response to health issues
  - Explain how health psychology examines behavioral, cognitive and emotional factors and their relationship to health;
- Analyze public health problems by selecting and employing appropriate research methodology from the social and behavioral sciences:
  - Collect appropriate data to understand determinants of health and disease
  - Apply appropriate social indicators to describe population health
  - Assess strengths and limitations of various sources of data
  - Assess strengths and limitations of various approaches to research and evaluation;
- Discuss public health research and practice issues from an ethical perspective:
  - Discuss historical and emerging ethical issues
  - Identify appropriate stakeholders whose perspectives should be considered in public health endeavors
  - Discuss principles and requirements for the protection of human subjects in public health research; and
- Demonstrate proficiency in written, oral and visual communication skills for the purpose of:
  - Communicating research and program findings into action oriented recommendations
  - Reporting findings in a manner useful for informing the public about health issues.

## Degree Requirements for SMS MPH Students

### *Credits*

MPH students complete 45 credits.

Up to 12 credits of course work may be taken for Pass/Fail with the approval of the instructor and the advisor. No core courses or required courses may be taken for Pass/Fail.

No more than 3 credits may be taken in tutorials.

### *Course Requirements*

#### *School-wide Core Courses*

Students are required to take the 5 School of Public Health core courses: Biostatistics (6103 or 6104), Principles of Epidemiology I (6400), Environmental Health Sciences (P6300), Issues and Approaches in Health Policy and Management (P6530), and Introduction to Sociomedical Sciences (P6700).

***Biostatistics Placement Examination:*** Biostatistics P6103 and P6104 are parallel introductory courses in the Department of Biostatistics. A placement examination is given by the Department to all students wishing to take P6104. Performance in the placement examination determines whether the student enrolls in P6103 or P6104. An intermediate performance results in placement in P6103, and a poor performance results in a recommendation that remedial work be taken to improve basic quantitative skills before taking either course.

#### *SMS Core Courses*

Students are also required to take one of the Departmental core social science courses: Health Psychology and Public Health (P8767), Introduction to Medical Anthropology (P8755), and Introduction to Medical Sociology, P8704. Students who are *not* in the History Track may also choose Social History of American Public Health (P8773).

#### *SMS Track-Specific Courses*

SMS tracks have specific course requirements described in the sections below.

#### *SMS Elective Course*

Students are required to take at least one elective course in the Department of Sociomedical Sciences. This is limited to non-tutorial 3 credit courses offered in SMS or cross listed between SMS and other departments/schools.

#### *Tutorials*

Tutorials afford students a chance to learn from the expertise of faculty members by concentrating on specific areas of interest in a less structured setting than the usual classroom course. One-to-one student/faculty tutorials may include, for example, participation in major research or other projects, small individual projects, pilot projects, literature review, and field experience. No more than 3 credits of tutorials may be taken.

## *Master's Integrative Project*

Students are required to register for a one-year 3-credit Master's Integrative Project (MIP). The Graduate Schools of Public Health's Council on Education for Public Health describes the MIP as "an important culminating experience that requires students to synthesize and integrate knowledge acquired in coursework and other learning experiences and to apply theory and principles in a situation that approximates some aspect of professional practice."<sup>\*</sup> The Department of Sociomedical Sciences has developed an elaborate MIP guide to help students in planning and executing the MIP (see MIP section of this Handbook).

MPH students are required to register for their MIP project. Full-time students who plan to complete the degree in 2 years will register for the year-long, 2-part course (MIP-I and MIP-II) with a faculty member of their choice who will serve as their MIP sponsor. Dual degree students and students who complete the degree requirements in 3 semesters and plan to graduate in February will register to a 3-credit, one-semester MIP (P8719) class with the MIP sponsor of their choice. In this case, students should have an approved MIP proposal before registering to the class.

Students who complete the degree in 2 years need to begin exploring ideas for an MIP no later than after their 2<sup>nd</sup> semester. Ideally, students should use the practicum experience as a basis for the MIP. It is the student's responsibility to approach the faculty member and get her/his agreement to serve as an MIP sponsor (a list of eligible faculty members and their research topics is printed in Appendix B). In rare cases the student may wish to consult and otherwise involve other faculty or nonfaculty individuals as advisers for his/her project. Including other advisers in the MIP process should be done with the permission of the MIP sponsor. However, only the faculty designated as MIP sponsor is responsible for approving the proposal and grading the final project.

### *Purpose*

The MIP course aims to help lead students through the process of writing the MIP from developing ideas and writing the MIP proposal to completing the MIP. The course comprises 3 elements: Independent work by the student, meetings between the student and her/his MIP sponsor, and participation in MIP seminars together with other students.

### *MIP-I: Fall Semester (P8707)*

In the Fall of their second year of matriculation, students will register for MIP-I, a 1-credit course entitled *Masters Essay - Masters Integrative Project in Sociomedical Sciences* (P8707). The aim of the work in this semester is to complete an MIP proposal. At the end of the semester the student should submit the proposal, approved and signed by the MIP sponsor, to the MPH Program Coordinator. The MPH Program Coordinator will submit a Pass grades for students who have fulfilled this requirement. If a proposal has not been approved by the end of the semester, the student will receive a Fail grade. Students may get an INC (incomplete) grade only with written permission of the MIP sponsor. Permission must be sent to the MPH Program Coordinator by the last day of classes. If the student has not completed the work, and the INC grade has not been changed to a Pass grade by the beginning of the Spring semester, the students will not be eligible to register for MIP-II in the Spring semester and her/his graduation will be delayed.

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<sup>\*</sup> Accreditation Criteria, Graduate Schools of Public Health, Council on Education for Public Health amended January 2002, pg. 9-10.

*MIP-II: Spring Semester (P8708)*

In the Spring, students will register for MIP-II, a 2-credit course (P8708). Successful completion of MIP-I is a pre-requisite for registering for MIP-II. The aim of the work in this semester is to complete the MIP. Upon completion, at the end of the Spring semester, the student will receive a letter grade (A – F) for MIP-II.

*MIP (P8719)*

Dual Degree students and students who expect to complete their degree requirements in three semesters may enroll in this one-semester 3-credit course. Students may enroll in the fall or spring semesters, however students must have an approved MIP proposal before registering for the class.

*Depositing the Complete MIP*

After the MIP sponsor has approved the final version of the manuscript, the student will deposit a copy of the MIP with her/his MIP sponsor and with the MPH Program Coordinator by the last day of classes of the semester in which he or she registered for the course. If the approved MIP is not submitted by the last day of classes, the students will receive an incomplete and his/her graduation will be delayed.

*Grading of the MIP Project*

The final version of the MIP will be graded by the MIP sponsor and a faculty reviewer. The MPH Program Coordinator will assign the MIP to a reviewer from among the SMS faculty and request an independent review and grade for the MIP. At the same time the MIP sponsor will read and grade the final version of the MIP. Both the MIP sponsor and the reviewer will grade the MIP based on the criteria published in the Guidelines for Preparing a Master's Integrative Project (MIP) in this handbook.

If there is a discrepancy between the grades, the final grade will be agreed upon by consensus of both faculty members. The MPH Coordinator is responsible for entering the students' final grades in the students' academic record.

*Postponement of Graduation*

A student who did not complete the MIP proposal by the end of MIP-I, or who did not submit her/his final MIP by the last day of classes, will have her/his graduation postponed. The Office of Students Affairs (OSA) requires that a student who did not graduate as planned will re-apply for a new graduation date. Please consult the OSA for application deadline.

*Required Examinations and Certifications*

The following examinations and certifications are required of all students. Students must submit certification and/or proof of compliance to the MPH Program Coordinator.

*Medical Background Examination*

Students are required to pass a Medical Background Examination. Students who have had prior clinical experience or health professional training may be able to waive the exam. The examination is administered by the Mailman School of Public Health and we recommend that it be taken in the first term of study. Students will receive information about this exam from the Office of Student

Affairs when they register.

*Good Clinical Practice: Protection of Human Subjects in Biomedical and Behavioral Research*

All SMS students are required to pass a certification exam in Protection of Human Subjects in Biomedical and Behavioral Research. Study materials and the certification exam are available online at <https://www.rascal.columbia.edu/>. Go to “Compliance/Testing Center,” “Course TC 0006,” “Health Sciences: Protection of Human Research Participants (GCP) - for Investigators in Epidemiology and the Social and Behavioral Sciences.” A free 3-hour course is also available. For schedules and more information go to the IRB website (<http://cpmcnet.columbia.edu/dept/irb>) under “Related Links.”

Students should obtain certification in their first or second semester as this is required for work on Mailman School of Public Health projects. GCP certification is a prerequisite for the Practicum and Master’s Integrative Project.

*Health Insurance Portability and Accountability Act (HIPAA)*

SMS students are required to pass the HIPAA certification exam. To take the HIPAA training course and certification, log on to <http://www.rascal.columbia.edu> then login to the “Testing Center” (under "Compliance") and select training module “TC0019 (HIPAA: Health Insurance Portability and Accountability Act Training Course).”

*Practicum Requirement*

MPH students are required to complete a 280-hour Practicum (see details in the *Practicum* section of this Handbook).

*Are You Ready to Graduate?*

The following is a checklist to help guide you through completing requirements for the MPH degree.

<b>Task</b>	<b>February Graduation</b>	<b>May Graduation</b>	<b>October Graduation</b>
All course work completed	Completion of all course requirements for a total of 45 credits		
Medical Background	First or second semester		
Good Clinical Practices & HIPAA Certification Examination	First or second semester		
Identifying an MIP sponsor	End of first year		
Practicum Agreement	Signed Practicum agreement filed prior to starting practicum		
Practicum Evaluation Forms	Submitted online within one week of the end of practicum		
MIP Proposal to Sponsor and MPH Program Coordinator	Prior to registration to P8719	Last day of Fall semester	N/A
Final MIP to Sponsor and MPH Program Coordinator	Last day of Fall semester	Last day of Spring semester	August 1
Filing for Graduation	December 1	February 1	August 1

## Track-Specific Degree Requirements

### *Health Promotion Track*

The Health Promotion Track is designed for students who are interested in developing, implementing and evaluating strategies that address health promotion issues at multiple levels. Drawing on the strengths of the Department of Sociomedical Sciences in the study of social determinants of disease and health, health behavior is conceptualized as an interactive product of the social environment and thus health promotion requires strategies that extend beyond the level of the individual to target interpersonal, organizational, community, economic, political, and cultural factors. Consequently, health promotion theories and practices such as the Stages of Change model are moderated by social, cultural, and environmental interpretations that attend to the situational and historical factors that construct health crises and public health interventions. The Health Promotion Track is in a unique position to draw on the multidisciplinary resources of the Department of Sociomedical Sciences in order to apply approaches that range from the history and ethics of public health to the study of health in the era of globalization to the process of developing, implementing and evaluating public health interventions.

### *Mission and Learning Objectives*

This track is designed for students who are interested in concentrated study in health promotion and disease prevention issues and who are interested in an applied-programmatic rather than a research approach to public health issues. The track prepares students to plan, implement, and evaluate health promotion programs in government health agencies, community-based organizations and the private sector.

Graduates of this track will be able to:

- Assess individual and community needs and priorities for health promotion:
  - Obtain health data about behavioral, social and cultural environments
  - Identify behaviors that tend to promote or compromise health
  - Infer needs for health promotion programs on the basis of obtained data;
- Explain leading theories of individual, interpersonal and community-wide health behavior change and discuss their relevance to health promotion and disease prevention;
- Plan evidence-based health promotion interventions utilizing the appropriate theoretical framework:
  - Identify community organizations, resources, and potential participants for support and assistance in health promotion intervention planning
  - Develop a logical scope and sequence plan for a health promotion intervention
  - Formulate appropriate and measurable intervention objectives;
- Implement health promotion interventions employing appropriate methods and strategies:
  - Identify evidence-based and theoretically-grounded methods and strategies best suited to implement the intervention for a specific population
  - Determine the availability of sources needed to implement the intervention for a given population
  - Monitor intervention implementation; and

- Develop an evaluation plan to assess health promotion interventions:
  - Describe methods for evaluating intervention effectiveness
  - Identify potential performance standards
  - Identify existing valid and reliable measures and instruments.

*Administration*

The Health Promotion track is administered at the Departmental level by Dr. Miguel Muñoz-Laboy (mam172@columbia.edu).

*Health Promotion Track Course Requirements*

The Health Promotion track offers two types of program: the full- or part-time Day Program and the Evening Program. Students in the day program usually complete it in four semesters. Students in the evening program usually complete it in six semesters (plus summer sessions). Full-time day program students take 4 courses (12 credits) per semester. Evening program students take 2 courses (6 credits) per semester. Note that the same faculty members in the track teach evening and day courses.

Health Promotion track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*Health Promotion Track  
Program Requirements Checklist*

Course (credits given)	Semester planned	Semester taken	Grade	Credits earned
<b>SPH Requirements</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues & Approaches in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences P6700 (3) (Spring)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Social History of American Public Health P8773 (3)				
<b>Health Promotion Track Requirements</b>				
Preventive Health Behavior P6727 (3)				
Introduction to SMS Research Methods P8774 (3)				
Planning and Implementing Health Programs P8772 (3)				
Evaluation of Health Programs P8705 (3)				
Health Promotion Elective 1* (3)				
Health Promotion Elective 2* (3)				
<b>General Requirements</b>				
SMS Elective (3)				
General Elective (2 or 3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED (45 needed)</b>				

**\* Health Promotion Electives (Choose two of the following):**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Community Based Participatory Research P8771 (F)</li> <li>• Introduction to Health Advocacy P6712 (F)</li> <li>• Public Health Informatics P8779 (F)</li> <li>• Health Communications, Social Marketing and the Media P8735 (F)</li> <li>• Health Promotion, Disease Prevention and the State P8747 (F)</li> <li>• Public Health and Aging P8714 (F)</li> <li>• Promoting Sexual Health P8721 (F)</li> <li>• Intro Clinical Medicine and Public Health P6713 (F)</li> <li>• Race and Health P8750 (F)</li> </ul> | <ul style="list-style-type: none"> <li>• Preventive Medicine and Public Health P6729 (S)</li> <li>• Tobacco and Public Health P8752 (S)</li> <li>• Drugs and Society P8724 (S)</li> <li>• Coping with Chronic Illness P8743 (S)</li> <li>• Chronic Disease &amp; Community Health P8762 (S)</li> <li>• Global AIDS Policy P8725 (S)</li> <li>• Women, Children and AIDS P8727 (S)</li> <li>• Race, Culture and Genetics P8728 (S)</li> <li>• Public Health and Disability P6726 (S)</li> <li>• Children and Family Policy P8702 I &amp; II (F/S)</li> <li>• Stigma, Prejudice and Discrimination in Social Stressors P8763 (S)</li> </ul> |
|---|---|

*Health Promotion Track  
Sample Full-time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400) Introduction to Biostatistical Methods (P6103 or P6104)* Preventive Health Behavior (P6727) Health Promotion Elective 1	Introduction to Sociomedical Sciences (P6700) Planning and Implementing Health Promotion Programs (P8772) Introduction to SMS Research Methods (P8774) Issues and Approaches in Health Policy and Management (P6530)
<b>Summer Semester Practicum**</b>	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
Evaluation of Health Programs (P8705) Environmental Sciences (P6300) SMS Social Science Course <b>or</b> SMS Elective General Elective Master's Integrative Project I (P8707)	Health Promotion Elective 2 SMS Social Science Course <b>or</b> SMS Elective Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

*Health Promotion Track  
Sample Evening Program Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400) Preventive Health Behavior (P6727)	Introduction to Sociomedical Sciences (P6700) Planning and Implementing Health Promotion Programs (P8772)
<b>Summer Semester</b> SMS Elective General Elective	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
Introduction to Biostatistical Methods (P6103 or P6104)* Health Promotion Elective 1	Introduction to SMS Research Methods (P8774) Issues and Approaches in Health Policy and Management (P6530)
<b>Summer Semester</b> Practicum	
<b>Semester 5 (Fall)</b>	<b>Semester 6 (Spring)</b>
Evaluation of Health Programs (P8705) Environmental Sciences P6300 Master's Integrative Project I (P8707)	SMS Social Science Course Health Promotion Elective 2 Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. For students who are working full-time in the field of public health, in an area related to their program track, the practicum time requirement is decreased to 140 hours. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *Social Science Research in Public Health Track*

The Social Science Research in Public Health track provides graduate education in public health research with a strong social science orientation. Training is provided in social science theory and methods and the application of social science research to public health issues and public health evaluation.

For some students, the MPH will be their first professional degree and they will continue on for their DrPH or PhD degree. Other students may enter the program with previous master's, doctoral, or professional degrees (e.g., medicine, nursing, social work) and with varying years of practical experience in fields related to public health.

### *Mission and Learning Objectives*

The Social Science Research in Public Health track provides a strong foundation in the social sciences and trains students to use the theories and methods of these disciplines in the critical evaluation of public health issues. The program builds upon a strong departmental interest in the social, cultural, behavioral and ethical factors affecting health and health care. Students in the program are trained to treat these as important factors in the collection and evaluation of research data. Graduates of the program participate as members of research teams where they contribute to research review, design and analysis.

Graduates of this track will be able to:

- Review and critique social and behavioral science research literature in at least one substantive area of public health with respect to gender, ethnicity, life course, sexuality, social and economic inequality, violence, and prevention interventions;
- Discuss and explain public health phenomena using concepts and theories from the social and behavioral sciences;
- Compare and contrast social and behavioral science research methodologies relevant to the study of public health questions;
- Develop testable public health research hypotheses using concepts and theories from the social and behavioral sciences:
  - Translate research hypotheses into statistically testable statements
  - Choose study designs that can test the research hypotheses;
- Design data collection tools and materials to gather formative data relevant to public health problems using at least one of the following methodologies: survey research, qualitative interviews, focus groups or qualitative observations;
- Analyze data using appropriate statistical methods for the study of the impact of multiple variables on continuous and discrete outcomes:
  - Select statistical tests appropriate for the study design and research hypotheses
  - Test research hypotheses using basic statistical techniques
  - Recognize and explain the effects of confounding and bias
  - Demonstrate familiarity with at least one statistical software program for the analysis of data (e.g., SAS, STATA, SPSS); and

- Identify ethical principles in conducting and disseminating social and behavioral science research in public health.

*Administration*

The MPH Social Science Research in Public Health track is administered at the Departmental level by Dr. Randall Sell ([rls39@columbia.edu](mailto:rls39@columbia.edu)).

*Research Course Requirements*

Social Science Research in Public Health track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*Social Science Research in Public Health Track  
Program Requirements Checklist*

Course (credits given)	Semester Planned	Semester Taken	Grade	Credits Earned
<b>SPH Requirements (4 courses):</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology I P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues & Approaches in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences P6700 (3) (Spring)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Social History of American Public Health P8773 (3)				
<b>Social Science Research in Public Health Requirements</b>				
Introduction to Sociomedical Research Methods P8774 (3)				
Design and Conduct of Observational Epi. P8438 (3)				
Applied Regression Analysis P8100 (or equivalent) (3)				
Social Science Research in Public Health Track Elective 1*				
Social Science Research in Public Health Track Elective 2*				
<b>General Requirements</b>				
SMS elective (3)				
General Elective 1 (2 or 3)				
General Elective 2 (3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED</b> (45 needed)				

**\* Social Science Research in Public Health Track Electives**

*Choose two of the following (you can choose from qualitative list, quantitative list, or both):*

<p><b>Qualitative</b></p> <ul style="list-style-type: none"> <li>• Qualitative Research Design in Public Health P8785 (3)</li> <li>• Ethnographic Methods in Health Research P8786 (3)</li> <li>• Qualitative Research Methods P9775 (3)</li> </ul> <p><b>Quantitative</b></p> <ul style="list-style-type: none"> <li>• Seminar in Evaluation of Health Programs P8705 (3)</li> <li>• Quantitative Methods in Program Evaluation (Pop/Fam) P8640 (3)</li> </ul>	<ul style="list-style-type: none"> <li>• Survey Research Methods P8777 (3)</li> <li>• Decision Analysis P8765 (3)</li> <li>• Use of Large Scale National Data Sets P6781 (3)</li> <li>• Selected Problems of Measurement (Epi) P8417 (3)</li> <li>• Analysis of Categorical Data P8120 (or equivalent) (3)</li> </ul>
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*Social Science Research in Public Health Track  
Sample Full-Time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400) Introduction to Biostatistical Methods (P6103 or P6104)* SMS Social Science Course or General Elective 2 SMS Elective	Introduction to SMS (P6700) Design and Conduct of Epidemiological Studies (Epi II) (P8438) Issues & Approaches in Health Policy (P6530) Intro to SMS Research Methods (P8774)
<b>Summer Semester Practicum**</b>	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
Environmental Sciences (P6300) Applied Regression Analysis (P8100 or equivalent) Methods/Statistics 1 General Elective 1 Master's Integrative Project I (P8707)	Methods/Statistics 2 SMS Social Science Course or General Elective 2 Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *History and Ethics of Public Health and Medicine Track*

The History and Ethics of Public Health and Medicine MPH track brings together the faculties of the Department of Sociomedical Sciences at the Mailman School of Public Health, the Center for the Study of Society and Medicine at Columbia College of Physicians and Surgeons, and the Department of History at the Graduate School of Arts and Sciences. The goal of the program is to equip its graduates with the knowledge and skills necessary to work in academic, policy, and administrative positions.

### *Mission and Learning Objectives*

The MPH offered in the Program in the History and Ethics of Public Health and Medicine track is the only one of its kind in the nation. It emphasizes training health professionals in historical methods and provides a unique opportunity to develop an understanding of the context in which ethical considerations have emerged in public health and medicine. The program provides opportunities to study with public health experts, ethicists, and historians from the Mailman School of Public Health, the History Department of Columbia University, and other experts in the field from affiliated centers. In addition to the required School and Department courses, students take a sequence of public health history, policy, and ethics courses to develop proficiency in different areas of social, political, and intellectual history, public health policy and law, or ethics.

Graduates of this track will be able to:

- Explain the general chronology of major events and innovations, significant individuals, significant documents, and significant institutions in the history of medicine and public health as well as general social history in the 19<sup>th</sup> and 20<sup>th</sup> centuries;
- Explain critical interpretive challenges that emerge at the intersection of history and policy:
  - Explain terms and concepts including but not limited to: presentism, historicism, Whig history, counterfactual condition, positivism, historical determinism, usable past, teleology, revisionism, social constructionism, deconstructionism, and post-modernism
  - Apply terms and concepts to the explanation of how the present may shape our understanding of the past and how the past may frame an understanding of the present;
- Explain the major theoretical shifts in the literature in the history of public health and medicine and their relation to the social and political context in which they emerged in the following areas: the social construction of race, urban and occupational history, social reform and social welfare policy, hospitals and institutions, epidemics and the social construction of disease, and medical or public health ethics;
- Analyze and evaluate the strengths and weaknesses of the different uses of history in the policy arena such as history as lessons from the past, history as advocacy, history as social criticism or social indictment, history as analogy or metaphor;
- Analyze historical and contemporary policy problems:
  - Frame an analysis of historical or public health issues in terms of the major literature in the history of public health and medicine

- Apply appropriate concepts (e.g. social construction, representation, etc.)
- Identify, evaluate, collect, and interpret appropriate primary data (including archival data and manuscripts, oral histories, published records or sources, and legislative records or cases); and
- Analyze and evaluate public health issues from an ethical perspective:
  - Describe the medical, social, economic, political, and cultural factors that shape the responses and interests of public health and medical professionals
  - Describe the responsibilities of public health and medical professionals to the community, institutions, and society
  - Apply key ethical concepts (e.g. justice, beneficence, nonmalficence, harm, wrong, respect for persons) to the analysis of specific public health problems or policy responses
  - Describe the inherent ethical tension between civil liberties and public health necessity
  - Describe the duties of the state when compromising individual rights in the name of public health necessity
  - Distinguish between the ethical principles at issue in public health and those of clinical bioethics
  - Recognize the similarities and differences between the ethics of public health research and the ethics of public health practice.

#### *Administration*

The History and Ethics of Public Health and Medicine MPH track is administered at the SMS Departmental level by Dr. Amy Fairchild [alf4@columbia.edu](mailto:alf4@columbia.edu).

#### *History Course Requirements*

In addition to core School and Department courses Students are required to take three of the following five courses: Social History of American Public Health, Social History of American Medicine, Historiography of Public Health and Medicine, Health Promotion, Disease Prevention, and the State: Ethical and Political Controversies in Public Health, or History and Policy. Students will have 15 elective credits remaining. At least two of these must be courses in history or ethics and if a student wishes to fulfill these requirements with courses offered outside of the history track or history department they must be pre-approved by the student's advisor. Students may satisfy the remaining credits with electives in public health, law, policy, or history.

History and ethnic of public health and medicine track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*History and Ethics of Public Health and Medicine Track  
Program Requirements Checklist*

<b>Course (credits given)</b>	<b>Semester Planned</b>	<b>Semester Taken</b>	<b>Grade</b>	<b>Credits Earned</b>
<b>SPH Requirements</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues & Approaches in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences (P6700) (3)				
<b>SMS Social Science (choose 1 of 3)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
<b>History, Policy, and Ethics Requirements (choose 3 of 5):</b>				
Historiography of Public Health & Medicine P8716 (3)				
Health Promotion, Disease Prevention & the State P8747 (3)				
Social History of American Medicine G8732 (3 or 4)				
Social History of American Public Health P8773 (3)				
History and Policy P9740 (3)				
History of Ethics Elective 1 (3 or)				
History of Ethics Elective 2 (3)				
<b>General Requirements</b>				
SMS Elective (3)				
General Elective 1 (3)				
General Elective 2 (3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical Background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED</b> (45 needed)				

*History and Ethics of Public Health and Medicine Track  
Sample Full-Time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400)  Introduction to Biostatistical Methods (P6103 or P6104)*  History 1: (Social History of American Medicine or Historiography of American Public Health or Health Promotion Disease Prevention and the State)  SMS Elective	Introduction to SMS (P6700)  History 2: Social History of American Public Health or History and Policy  Issues & Approaches in Health Policy and Management (P6530)  SMS Social Science Course <b>or</b> General Elective 1
<b>Summer Semester Practicum**</b>	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
SMS Social Science Course <b>or</b> General Elective 1 Environmental Health Sciences (P6300)  History 3: (Health Promotion, Disease Prevention, and the State or another History and Ethics required class)  Master's Integrative Project I (P8707)	General Elective 2  History or Ethics Elective 1  History or Ethics Elective 2  Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *Aging and Public Health Track*

The Aging and Public Health MPH track is designed for students who are interested in understanding the public health challenges associated with aging and the increasingly older American, and world, populations. Students completing the MPH in Aging and Public Health will be well qualified to address the new challenges and opportunities posed by increasing longevity, as well as related changes in the delivery and financing of health care for this population. Upon completing the program, students may go on to doctoral research or enter the growing fields of service delivery, policy, and/or research in long-term care.

### *Mission and Learning Objectives*

This track provides public health students, who have an interest in aging, with a comprehensive understanding of the special public health challenges of an aging population. The program offers a public health perspective on aging that encompasses both applied and policy dimensions. This program is also relevant to a broad array of public health professionals including those who are providing clinical services, managers and administrators of aging-related institutions, community-based social service and health care agencies, geriatric clinicians, and health services researchers. Students take courses designed to address: aging-related quality of life issues, successful aging, life course transitions, elder-based health promotion and disease prevention efforts, chronic disease and disability, technology and health, bioethical issues related to healthcare and the elderly, and public health issues in special aging populations. Students in this program are expected to develop proficiency in public health-related aging concerns and issues.

Graduates of this track will be able to:

- Identify major public health issues relevant to aging;
- Define the major social, cultural, developmental and economic factors contributing to health and illness in aging populations;
- Discuss the major societal forces impacting health services and aging resources;
- Explain the social, cultural and economic consequences of an aging population;
- Apply relevant behavioral and social science research approaches to understanding major public health issues relevant to aging; and
- Design services and interventions to promote healthy aging using relevant behavioral and social science theoretical approaches.

### *Administration*

The Aging and Public Health MPH program is administered on the Departmental level by Dr. Victoria Raveis, [vhr1@columbia.edu](mailto:vhr1@columbia.edu).

### *Aging and Public Health Required Courses*

Aging and Public Health track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*Aging and Public Health Track  
Program Requirements Checklist*

<b>Course (credits given)</b>	<b>Semester planned</b>	<b>Semester taken</b>	<b>Grade</b>	<b>Credits earned</b>
<b>SPH Requirements</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences P6700 (3) (Spring)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Social History of American Public Health P8773 (3)				
<b>Aging and Public Health Courses (choose 5 of 8)</b>				
Public Health and Aging P8714 (3) (Fall)				
Social Dimensions of Aging P8701 (3) (Spring)				
Population Aging and Public Policy in Developing Countries P8751 (3) (Fall)				
Use of Large-Scale Data Sets P6781 (3) (Fall/Spring/Summer)				
Caregiving in Chronic Illness P8744 (3) (Spring)				
Overview of Long Term Care P6741 (3) (Spring)				
Promoting Teamwork through Interdisciplinary Collaboration HP8500 (3) (fall)				
Public Health and Disability P6726 (3) (Spring)				
<b>General Requirements</b>				
SMS Elective (3)				
General Elective 1 (3)				
General Elective 2 (2 or 3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED (45 needed)</b>				

*Aging and Public Health Track*  
*Sample Full-Time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Epidemiology I (P6400) Biostatistics (P6103 or P6104)* Public Health & Aging (P8714) Population Aging and Public Policy in Developing Countries (P8751)	Introduction to SMS (P6700) Overview of LTC (P6741) Issues & Approaches in Health Policy (P6530) Social Dimensions of Aging (P8701) or Caregiving in Chronic Illness (P8744)
<b>Summer Semester</b> Practicum**	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
SMS Social Science course or SMS Elective General Elective 1 Environmental Health Sciences (P6300) Master's Integrative Project I (P807)	Social Dimensions of Aging (P8701) or Caregiving in Chronic Illness (P8744) SMS Social Science course or SMS Elective General Elective 2 Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *Urbanism and the Built Environment Track*

The Urbanism and the Built Environment MPH track offers a public health perspective on cities that encompasses both applied and policy dimensions, and provides students with a comprehensive understanding of the special public health challenges of an urbanized population. An important feature of this program is its location within the Department of Sociomedical Sciences, which emphasizes the social and behavioral aspects of health. Sociomedical components of urbanism include: placing cities in the context of globalization; understanding the intersections of cultures that occur in cities; integrating concepts of space, place and history into the patterns of health and disease; and conceptualizing the effects of spatial interventions for health and disease.

The track is designed for students who have an interest in city life and are seeking a public health perspective. This program is also relevant to a broad array of public health professionals, including those who lead community agencies, provide community-level needs assessment, or work in conjunction with city agencies to plan for any and all aspects of the city's future.

### *Mission and Learning Objectives*

The Mailman School of Public Health is geographically situated at a juncture among a variety of ethnic minority communities in New York City, and thus provides an ideal setting for understanding the relationship between the city and health. We define urbanism as “the ecology of cities” and place a particular emphasis on the nested relationships that embed minorities within the city and the city within the global network of cities. Students prepared in this track will bring an awareness of the dynamics of urbanism to positions of leadership as researchers, planners, administrators or policy makers in public health in urban settings.

Graduates of this track will be able to:

- Assess the association between patterns of health and disease and the urban environment, in the United States and globally:
  - Analyze the impact of market forces on urban development and the health of urban populations
  - Analyze how population movements, both forced and voluntary, contribute to these patterns
  - Analyze how transportation systems and transportation links affect population migration and patterns of morbidity and mortality
  - Analyze the political and social organization of urban areas and their association with patterns of health and disease;
- Conduct needs assessments and asset mappings to:
  - Determine the psychological, social, and cultural factors that influence community health in urban settings
  - Identify and locate the members of cultural, social and political groups who function as stakeholders and gatekeepers in urban community settings and community social networks
  - Identify behavioral, cultural, social, economic, and environmental factors that affect morbidity and mortality in urban communities;

- Use the tools of spatial analysis and spatial mapping [Geographic Information Systems (GIS)] to conduct studies linking health survey data and/or surveillance data to maps of neighborhoods, community settings, urban areas and districts;
- Participate with professionals from other disciplines in the development of policies that promote health and contribute to the elimination of disease in urban settings;
- Contribute to urban and environmental planning initiatives:
  - Explain the range of methods used in urban and environmental planning
  - Explain current and past theories and concepts of urban planning and design
  - Assess and evaluate using current methods the appropriateness and effectiveness of urban planning and design initiatives for improving community health;
- Apply effective and efficient electronic search strategies to the collection and organizing of information relevant to past, current and future developments in urbanism and urban health:
  - Identify appropriate electronic information retrieval sources
  - Develop and refine electronic search strategies
  - Identify changes in research and planning literature in urbanism and health; and
- Communicate effectively in Standard English and at least one non-English language for the purposes of discussing and presenting relevant research and policies affecting health and disease in urban settings with both professionals and members of the general public.

#### *Administration*

The Urbanism and the Built Environment MPH track is administered on the Departmental level by Dr. Mindy Fullilove, [mf29@columbia.edu](mailto:mf29@columbia.edu) and Dr. Lourdes Hernández-Cordero, [ljh19@columbia.edu](mailto:ljh19@columbia.edu).

#### *Urbanism and the Built Environment Course Requirements*

Students are required to take a track core course, P8717 Urban Space and Health, and 3 semesters of the program's 1-credit seminar, Emerging Topics in Urbanism and the Built Environment. They must also complete four other courses relevant to urbanism selected from a list of offerings in the Public Health and Urban Planning programs (see checklist). These courses are designed to provide the student with fundamental knowledge of the basic concepts of urbanism, as well as key skills for urban analysis, such as use of geographical information systems (GIS) for the analysis of health problems. Substitutions are possible at the advisor's discretion. Students complete at least 15 credits of Urbanism and the Built Environment coursework.

Urbanism and the Built Environment track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework..

*Urbanism and the Built Environment MPH Program  
Program Requirements Checklist*

Course (credits given)	Semester planned	Semester taken	Grade	Credits earned
<b>SPH Requirements:</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues & Approaches in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences P6700 (3) (Spring)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Social History of Public Health P8773 (3)				
<b>Urbanism Track Requirements</b>				
Urban Space and Health (P8717) (3)				
Emerging Topics in Urbanism and the Built Environment Seminar -- 3 semesters 1 credit each (3)				
Urbanism and the Built Environment Elective 1*				
Urbanism and the Built Environment Elective 2*				
Urbanism and the Built Environment Elective 3*				
Urbanism and the Built Environment Elective 4*				
<b>General Requirements</b>				
SMS Elective (3)				
General Elective (3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED</b> (45 needed)				
<b>* Urbanism and the Built Environment Electives (Choose 4 of 8 courses):</b>				
<ul style="list-style-type: none"> <li>• Ethnicity and Health (P8750)</li> <li>• Globalization, Social Movements, and Health (P8741)</li> <li>• Public Health Decline in Harlem (P8754)</li> <li>• Ethnographic Methods in Health Research (P8786)</li> </ul>		<ul style="list-style-type: none"> <li>• Introduction to Environmental Planning (PLA4319)</li> <li>• Urban Environmental Planning (PLA 4540)</li> <li>• Planning History and the Physical History of Cities (PLA4112)</li> <li>• Introduction to Geographical Information Systems for Planners (PLA4577)</li> </ul>		

*Urbanism and the Built Environment MPH Program  
Sample Full-Time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400)  Introduction to Biostatistical Methods (P6103 or P6104)*  Emerging Topics in Urbanism and Community Health Seminar I (1 credit)  Urbanism Elective 1	Introduction to SMS (P6700)  SMS Social Science Course or SMS Elective  Issues & Approaches in Health Policy (P6530)  Urban Space and Health (P8717)  Emerging Topics in Urbanism and the Built Environment Seminar II (1 credit)
<b>Summer Semester Practicum**</b>	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
Environmental Health Sciences (P6300)  Emerging Topics in Urbanism and the Built Environment Seminar III (1 credit)  Urbanism Elective 2  SMS Social Science Course or SMS Elective  Master's Integrative Project I (P8707)	Urbanism Elective 3  Urbanism Elective 4  General Elective  Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *Sexuality and Health Track*

The Sexuality and Health (S&H) track is designed for public health students who are interested in a career as a health professional working in the field of sexuality, in agencies and organizations involved in programmatic work or direct service delivery, either with regard to general health issues or specifically focused on sexual health.

### *Mission and Learning Objectives*

The Sexuality and Health Program provides public health students with the conceptual and practical skills necessary to identify, analyze and address health issues connected to sexuality within a global context. The program is guided by the following assumptions:

- Sexuality encompasses a complex of behaviors and meanings that are shaped by individual, social and cultural factors;
- Sexual health encompasses more than the absence of disease and includes sexual well-being;
- The dynamic relationship between sexuality and gender impacts the sexual health and well-being of individuals and communities;
- Age, race/ethnicity, class, sexual orientation and historical context all have profound effects on the linkages between sexuality, gender and health;
- Sexual health can be promoted via a variety of strategies including policy development, health education programs and interventions, and advocacy.

All educational, research, and service activities in this track are based on fundamental respect for the dignity, equality and full rights of all persons. As a program within a School of Public Health, we understand that the work to create the conditions by which the greatest diversity of persons can be healthy and participate as equal members of their local, national, and global communities requires a commitment to justice and tolerance.

Graduates of this program will be able to:

- Differentiate and assess key frameworks for understanding sexuality, sexual health and sexual health promotion:
  - Explain the strengths and limitations of relevant social and behavioral scientific theories of sexuality and sexual health promotion;
  - Analyze major sexual health issues including: HIV and other STI's, sexual violence, unwanted pregnancies, stigmatization and discrimination based on sexual behavior/identity, reproductive autonomy;
  - Explain the linkages between sexuality, gender and health, both across populations and in minority and stigmatized communities;
  - Apply ethical and human rights perspectives to understanding sexuality and health.
- Design, implement and evaluate strategies to promote sexual health on individual and community levels:

- Apply the principals from relevant theories of behavioral and structural change to the development of strategies for sexual health promotion;
- Apply insights gained from an understanding of the history and organization of programs and policies in this field to the development of strategies for sexual health promotion;
- Apply ethical and human rights perspectives in designing and critiquing sexual health promotion strategies.

### *Administration*

The Master of Public Health (MPH) is jointly offered by the Departments of Sociomedical Sciences and Population and Family Health. The track is administered at the SMS Departmental level by Dr. Theo Sandfort ([tgs2001@columbia.edu](mailto:tgs2001@columbia.edu)).

### *Sexuality and Health Course Requirements*

In addition to the general MSPH and SMS requirements, Sexuality and Health students are required to participate in a three-day Values Clarification Workshop and the Sexuality and Health Seminar.

The Values Clarification Workshop will provide participants with an opportunity to gain insight to their personal and professional attitudes, values and beliefs regarding sexuality and to become more aware of the cultural contexts for addressing sexuality issues with different populations. Dates for this Workshop will be set in early September, in consultation with students.

The aim of the Sexuality and Health Seminar is to give students an opportunity to discuss various things about the program and their future work field, and to learn from the other students' prior work experiences in the field of sexuality and health. All Sexuality and Health Track students will be consulted in the beginning of the academic year to find a time for this seminar that is most suitable for everybody.

Sexuality and Health track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*Sexuality and Health Track  
Program Requirements Checklist*

Course (credits given)	Semester planned	Semester taken	Grade	Credits earned
<b>SPH Requirements</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences P6700 (3) (Spring)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Social History of Public Health P8773 (3)				
<b>Sexuality and Health Track Requirements</b>				
Theories & Perspectives on Sexuality and Health P8736 (3)				
Current Issues in Sexual Health P8615 (3)				
Promoting Sexual Health: Theories & Strategies P8721 (3)				
Ethics and Human Rights Perspectives on Sexuality and Sexual Health P8606 (1)				
History of Sexual Health Promotion P8720 (2)				
Research Design and Data Collection: Service Based Research I P8619 (3)				
Program Design in Sexual & Reproductive Health P9601 (3)				
<b>Sexuality and Health Electives (choose 1 of 2)</b>				
Quantitative Data Analysis: Service Based Research II P8623 (3)				
Qualitative Data Analysis: Service Based Research II P8637 (3)				
<b>General Requirements</b>				
SMS Elective (3)				
Master's Integrative Project (3)				
Practicum (0)				0
Medical background exam (0)				0
Good Clinical Practices certification exam (0)				0
Values Clarification Workshop (0)				0
S&H Seminar (0)				0
TOTAL CREDITS EARNED (45 needed)				

*Sexuality and Health Track  
Sample Full-Time Schedule 2005-2006*

(Note: Courses are not offered in the same semester each year)

<b>Semester 1 (Fall)</b>	<b>Semester 2 (Spring)</b>
Principles of Epidemiology (P6400)  Introduction to Biostatistical Methods (P6103 or P6104)*  Theories and Perspectives on Sexuality, and Health (P8736)  Research Design and Data Collection: Service Based Research (P8619)	Introduction to SMS (P6700)  Current Issues in Sexual Health (P8615)  Program Design for Sexual Health Promotion (P8601) or Policy Analysis and Advocacy Skills in Sexual Health Promotion (TBA)  SMS Social Science Course or SMS Elective
<b>Summer Semester Practicum**</b>	
<b>Semester 3 (Fall)</b>	<b>Semester 4 (Spring)</b>
Promoting Sexual Health: Theories and Strategies (P8721)  Issues & Approaches in Health Policy and Management (P6530)  Quantitative <i>or</i> Qualitative Data Analysis: Service Based Research (P8623 or P8637)  History of Sexual Health Promotion (P8720)  Ethics and Human Rights Perspectives (P8606)  Master's Integrative Project I (P807)	Environmental Health Sciences (P6300)  SMS Social Science Course or SMS Elective  Master's Integrative Project II (P8708)

\* Students take P6103 or P6104 depending on placement exam results.

\*\* Practicum: Practicum: All students are required to complete a 280 hour clinical or research apprenticeship planned in consultation with the student's advisor, Practicum Director, and proposed Preceptor. See the Practicum section of this Handbook for more information and additional ways to time the practicum experience.

## *Global Health Track*

The Global Health Track in Sociomedical Sciences provides students who have some level of prior experience in global health with additional theoretical and methodological tools from a variety of the social sciences in order to understand the ways that health problems in a variety of global settings are influenced by psychological, social, cultural or structural contexts. The track aims to increase the skills among health researchers and health program personnel to incorporate systematic and scientific approaches to understanding the social roots of health problems and including this knowledge in the design of more successful and culturally appropriate health interventions. The track is particularly appropriate for individuals who are interested in developing and evaluating population-based, scientifically sound public health programs, particularly in resource-poor settings.

### *Mission and Learning Objectives*

The Global Health Track provides public health students with the conceptual and practical skills necessary to identify, analyze and address health issues within a global context. The program is guided by the following objectives:

- Understand the various ways that specific global health problems are shaped by individual, social, cultural, and structural factors;
- Learn the theories and methodologies necessary to examine health in the context of both local settings and geographies as well as the interconnected global processes that shape health and disease in a variety of settings;
- Develop expertise in the use of public health strategies such as policy development, health education programs, and health interventions to appropriately address health problems in a global context.

Graduates of this program will be able to:

- Conduct international health work in resource-poor settings, or within global health initiatives, incorporating expertise in the application of social, behavioral, and cultural approaches to health and disease;
- Apply formal behavioral and social scientific theories and methodologies to global health policies and programs;
- Explain how local health problems are linked to larger global systems, processes, and inequalities, and apply this knowledge to the goals of global health policy, advocacy, intervention, and health equity;
- Understand the relevance of social, cultural, and historical diversity for the conduct of global health, and develop programs and policies that account for this diversity;
- Design, implement and evaluate strategies to promote global health in a variety of cultural and geographical settings.

*Administration*

The Global Health Track is a cross-departmental program that is tailored to the specializations and requirements of each participating department. Students must choose within which department they will pursue their MPH in Global Health, depending on their interests and career goals. In the Department of Sociomedical Sciences, the GHT representative is Dr. Mark Padilla (mbp2106@columbia.edu). At the school level, the larger program is coordinated by Dr. Pamela Collins (pyc1@columbia.edu).

*Global Health Course Requirements*

In addition to the general MSPH and SMS requirements, Global Health Track students in Sociomedical Sciences are required to take a year-long Global Health core course sequence in two parts during their first year in the track, while simultaneously taking a no-credit Global Health Issues seminar sequence. The first year of the track is designed to provide a context in which GHT students can share experiences together in seminar format as well as prepare for the unique practicum experience to occur following the first year of the program. Beginning in June of the summer after completing the first year of the program, students will embark on an extended six-month practicum in one of the GHT's pre-established field sites, where they will engage in an extensive and mentored practicum experience in a global health setting. Because of the particular cultural, logistical, and resource concerns which global health practitioners must face, as well as the desire to prepare students through hands-on work that contributes to local needs, the Global Health practicum facilitates a deep and valuable real-world experience while maintaining the supervision and support that is necessary for such work to be successful.

The Global Health track required courses are indicated in the following form. This form should be used as an aid in planning your studies. You should consult with your academic advisor before scheduling your coursework.

*Global Health Track  
Program Requirements Checklist*

<b>Course (credits given)</b>	<b>Semester Planned</b>	<b>Semester Taken</b>	<b>Grade</b>	<b>Credits Earned</b>
<b>SPH Requirements</b>				
Biostatistics P6103 (3) or P6104 (4) (Fall, Spring & Summer)				
Epidemiology P6400 (3) (Fall & Summer)				
Environmental Sciences P6300 (3) (Fall)				
Issues & Approaches in Health Policy & Mgt. P6530 (3) (Spring)				
<b>Core SMS Requirements</b>				
Introduction to Sociomedical Sciences (P6700) (3)				
<b>SMS Social Science (choose 1 of 4)</b>				
Medical Sociology P8704 (3)				
Medical Anthropology P8755 (3)				
Health Psychology P8767 (3)				
Health Economics P6503 (3)				
<b>Global Health Courses</b>				
Introduction to Global Health 1 (3)				
Introduction to Global Health 2 (3)				
Global Health Issues Seminar-I (Pass/Fail)				0
Global Health Issues Seminar-II (Pass/Fail)				0
Global Health Practicum Seminar (Pass/Fail)				0
Advanced Topics in Global Health (2)				
<b>SMS Global Health Substantive Courses</b>				
Intro to SMS Methods P8744 (3)				
Global Health Elective 1 (3)				
Global Health Elective 2 (3)				
Global Health Elective 3 (3)				
<b>General Requirements</b>				
SMS Elective 1 (3)				
Master's Integrative Project (3)				
Practicum (1)				
Medical Background exam (0)				0
Good Clinical Practices certification exam (0)				0
<b>TOTAL CREDITS EARNED (45 needed)</b>				
<b>SMS Global Health Electives</b>				
<ul style="list-style-type: none"> <li>• P6723 Women and AIDS (3)</li> <li>• P8709 Seminar in Sexuality, Gender, Health and Human Rights (3)</li> <li>• P8721 Promoting Sexual Health (3)</li> <li>• P8723 Culture, Sexuality and HIV/AIDS (3)</li> <li>• P8725 Global AIDS Policy (3)</li> <li>• P8741 Globalization, Social Movements and Community Health (3)</li> <li>• P8751 Population Aging and Public Policy in Developing Countries (3)</li> <li>• P8752 Tobacco, Public Health, and the global epidemic (3)</li> <li>• P8760 Medical Anthropology: Advanced Seminar (3)</li> </ul>				

## *Masters Dual Degree Programs*

The Mailman School of Public Health offers a variety of formal and informal cooperative educational programs with other units and Departments of the University. Students wishing to enter dual degree programs are advised to submit separate applications to each school. These applications should indicate that the student wishes to be a dual degree candidate. The total number of credits required for the dual degree programs varies. Listed below are the schools participating in the dual degree program. Please check the bulletins and Student Services offices of the individual schools for more information.

- Business School (MBA/MPH)
- Graduate School of Architecture, Planning and Preservation (MS/MPH)
- School of Dental and Oral Surgery (DDS/MPH)
- College of Physicians and Surgeons (MD/MPH)
- School of Social Work (MSW/MPH)
- School of Nursing (MS/MPH)
- Program in Occupational Therapy (MS/MPH)
- Master of International Affairs Program (MIA/MPH)
- Graduate Program in Public Policy and Administration (MA/MPH)

Unfortunately, there is little written information to guide students enrolled in dual or double master's programs. Therefore, it is extremely important that these students seek guidance from the program coordinators and academic advisors in both programs and the Director of Student Services in the Mailman School of Public Health. Students must be careful to both register for the correct number of credits in each school and to complete all program requirements for each school. Sometimes this is tricky because most courses are not offered every semester and because some courses must be taken in sequence.

Master's Integrative Projects (MIP) and Practicum experiences usually can be coordinated between the two programs so that they may be used to satisfy requirements for both programs. Students must obtain prior approval for the MIP and Practicum from both schools in order to assure fulfillment of the requirements.

Finally, although the above stresses the difficulties in participating in a dual master's program, students in these programs usually find great fulfillment in pursuing both interests concurrently and are well-prepared to seek professional positions after graduation.

Program planning information, dual degree guidelines, and sample schedules for MPH/MSW students are also included on the following pages.

## *Dual Degree Programs Plan*

Instructions for Completion:

- 1) Fill in all courses to be used toward dual degrees.
- 2) List courses planned for future terms using the attached Sample Schedules and Department requirements as guides.
- 3) Review this plan with your academic advisor in each department to make certain that you are meeting program requirements.

Student: \_\_\_\_\_ Dual Degree: \_\_\_\_\_ Date: \_\_\_\_\_

IST TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_ Term Cr Cum Cr

20__	Fall	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	Cr _____

2<sup>ND</sup> TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_

20__	Fall	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	

3<sup>RD</sup> TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_

20__	Fal	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	Cr _____

4<sup>TH</sup> TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_

20__	Fall	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	Cr _____

5<sup>TH</sup> TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_

20__	Fall	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	Cr _____

6<sup>TH</sup> TERM – SCHOOL OF REGISTRATION: \_\_\_\_\_

20__	Fall	#/Title		Cr	
20__	Spr			Cr	
20__	Sum			Cr	
				Cr	
				Cr	Cr _____

Continue on back? Y N Program: \_\_\_\_\_ Cr.

Practicum Plan \_\_\_\_\_

Comments (optional) \_\_\_\_\_

## *Dual Degree Guidelines*

<p><b><u>MPH/MD and MPH/DDS</u></b>          As of Fall 1999- 35 points Public Health courses required;          pay for 30 through Public Health, balance through P&amp;S.          Concurrent or earlier MD or DDS.</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- Exempt from Medical Background exam.</li> </ul>
<p><b><u>MPH/MSN</u></b>          30 points Public Health = 2 terms minimum          30 points School of Nursing = 2 terms minimum          15 points either school - 1 term          Total 75 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- Practicum required.</li> <li>- Exempt from Medical Background exam.</li> <li>- EPI and SMS require Masters Essay.</li> </ul>
<p><b><u>MPH/MSOT - Professional</u></b>          38 points Public Health          52 points Occupational Therapy          Total 90 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- Practicum required.</li> <li>- Exempt from Medical Background exam.</li> <li>- EPI and SMS require Masters Essay.</li> </ul>
<p><b><u>MPH/MSOT - Post-Professional</u></b>          40 points Public Health          32 points Occupational Therapy          Total 72 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- Practicum required.</li> <li>- Exempt from Medical Background exam.</li> <li>- EPI and SMS require Masters Essay</li> </ul>
<p><b><u>MPH/MSW</u></b>          45 points Public Health          45 points Social Work          Total 90 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>SW 2<sup>nd</sup> year field placement can be integrated with PH practicum with advance planning and approval by SW and SMS field/practicum coordinators.</li> <li>- Medical Background exam required.</li> <li>- EPI and SMS require Masters Essay or Project.</li> </ul>
<p><b><u>MPH/MSUP</u></b>          35 points Public Health          45 points Urban Planning          Total 80 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- UP studio may replace PH practicum.</li> <li>- Up thesis may replace PH essay for SMS and EPI.</li> <li>- Medical Background exam required.</li> </ul>
<p><b><u>MPH/MIA</u></b>          45 points Public Health          30 points International Affairs          Total 75 points required</p>	<ul style="list-style-type: none"> <li>- Core courses required.</li> <li>- Practicum requirement can be met through either school.</li> <li>- EPI and SMS require Masters Essay.</li> </ul>
<p><b><u>MPH/MPA</u></b>          30 points Public Health          45 points Public Administration          Total 75 points required</p>	<ul style="list-style-type: none"> <li>- 15 points of core courses required.</li> <li>- MPA internship may meet PH practicum requirement.</li> <li>- EPI and SMS require Masters Essay.</li> <li>- Medical Background exam required.</li> </ul>

*Sample Schedules for MPH/MSW Students*  
*Dual Degree Public Health and Social Work Program - Sample 1*

Fall 1<sup>st</sup> Year, (Registered at **Social Work**, 13.5 Credits)

Direct Practice – 3 credits  
 Human Behavior and Social Environment I – 3 credits  
 Social Welfare Policy – 3 credits  
 Professional Seminar – 1.5 credits  
 Field Placement – 3.0 credits

Spring 1<sup>st</sup> Year, (Registered at **Social Work**, 16.5 Credits)\*

Direct Practice 2 – 3 credits  
 Human Behavior and Social Environment II – 3 credits  
 Advocacy – 3 credits  
 SW Elective (in place of Research course others take) – 3 credits  
 Field Placement – 4 credits

Summer (Registered at **Public Health**, 3 Credits)

Biostatistics (core course) – 3 credits

Fall, 2<sup>nd</sup> Year (Registered at **Public Health**, 15 Credits)

Epidemiology (core course) – 3 credits  
 Environmental Health (core course) – 3 credits  
 Preventive Health Behavior – 3 credits  
 Health Promotion Elective 1 – 3 credits  
 Medical Anthropology, or Medical Sociology, or Social History of  
 American Public Health – 3 credits

Spring, 2<sup>nd</sup> Year (Registered at **Public Health**, 15 Credits)\*

Introduction to Sociomedical Sciences (core course) – 3 credits\*\*\*  
 Health Policy (core course) – 3 credits  
 Planning and Implementation – 3 credits  
 Evaluation of Health Programs – 3 credits  
 Introduction to SMS Research Methods – 3 credits

Summer (Registered at **Social Work**, 3 Credits)

General Elective 1 – 3 credits

Fall, 3<sup>rd</sup> Year (Registered at **Social Work**, 13.5 Credits)

Advanced Clinical Practice – 3 credits  
 Field Placement – 4 credits  
 Health Promotion Elective 2 – 3 credits  
 General Elective 2 – 3 credits  
 Master's Integrative Project (1<sup>st</sup> semester of a 2 semester course) – 0 credits\*\*

Spring, 3<sup>rd</sup> Year (Registered at **Public Health**, 10.5 Credits)

Advanced Clinical Practice – 3 credits  
 Field Placement – 4 credits  
 Master's Integrative Project (2nd semester of a 2 semester course) - 3 credits\*\*

\*\*Effective Fall 2004 , MIP is now a two semester course.

\*\*\*Effective Fall 2004, Introduction to Sociomedical Sciences is only offered in the Spring.

*Dual Degree Public Health and Social Work Program – Sample 2***Fall 1<sup>st</sup> Year, (Registered at Social Work, 13.5 Credits)**

Direct Practice – 3 credits  
 Human Behavior and Social Environment I – 3 credits  
 Social Welfare Policy – 3 credits  
 Professional Seminar – 1.5 credits  
 Field Placement – 3.0 credits

**Spring 1<sup>st</sup> Year, (Registered at Social Work, 16.5 Credits)**

Direct Practice 2 – 3 credits  
 Human Behavior and Social Environment II – 3 credits  
 Advocacy – 3 credits  
 SW Elective (in place of Research course others take) – 3 credits  
 Field Placement – 4 credits

**Fall, 2<sup>nd</sup> Year (Registered at Public Health, 15 Credits)\***

Biostatistics (core course) – 3 credits  
 Epidemiology (core course) – 3 credits  
 Environmental Health (core course) – 3 credits  
 Preventive Health Behavior – 3 credits  
 Health Promotion Elective 1 – 3 credits

**Spring, 2<sup>nd</sup> Year (Registered at Public Health, 15 Credits)**

Introduction to Sociomedical Sciences (core course) – 3 credits  
 Health Policy (core course) – 3 credits  
 Planning and Implementation – 3 credits  
 Evaluation of Health Programs – 3 credits  
 Introduction to SMS Research Methods – 3 credits

**Fall, 3<sup>rd</sup> Year (Registered at Social Work, 16.5 Credits)**

Advanced Clinical Practice – 3 credits  
 Master's Integrative Project (P8707, 1<sup>st</sup> semester of a 2-semester course, 1 credit, or P8719, 3 credits)  
 SW Tutorial (as one of the general electives) – 3 credits  
 Field Placement – 4 credits  
 Health Promotion Elective 2 – 3 credits  
 General Elective – 3 credits

**Spring, 3<sup>rd</sup> Year (Registered at Public Health, 13.5 Credits)**

Advanced Clinical Practice – 3 credits  
 Field Placement – 4 credits  
 Health Psychology (or Medical Anthropology, Medical Sociology, or Social History of American Public Health. SMS required course) – 3 credits  
 Master's Integrative Project (P8708, 2nd semester of a 2-semester course, 2 credits, or P8719, 3 credits)

## The Practicum

### *Practicum Requirement*

All Master's of Public Health (MPH) students in accredited schools of public health throughout the United States must complete "a planned, supervised and evaluated practice experience (as part of their) public health professional degree program."<sup>\*</sup> For the Mailman School of Public Health at Columbia University, the length of time for this practice experience, or practicum, is required to be equivalent to one full term semester. Within the Department of Sociomedical Sciences (SMS), this means an MPH student must devote no less than 280 hours in a planned, supervised, and evaluated practicum. For students who are working full-time in the field of public health, in an area related to their program track, the practicum time requirement is decreased to 140 hours. The practicum should provide the student the opportunity to apply the concepts and methods of social science and public health learned in the classroom to actual public health problems. During the practicum, a student works under the guidance of a supervisor (Practicum Preceptor) who agrees to orient, supervise, and evaluate the work of the student. In general, stipends or pay for work done during the student practicum are unusual. However, the Department of SMS encourages students to seek sources of funding through work-study, grants, and other venues.

The settings of student practica varies by track. The content of the practica within each track is flexible to meet each student's interests, educational needs, professional objectives, and career goals. However, in all cases the practicum experience must be consistent with the academic goals and objectives of the Department of SMS in general and the academic program for each track in particular. Marita Murrman, Ed.D. (mkm27@columbia.edu) is the Practicum Director.

### *General Objectives*

Establishment of the practicum as a requirement for the MPH degree is based on the assumption that it provides special opportunities for learning which are supportive and supplementary to the in-class aspects of the student's academic program. Thus, the practicum enhances and enriches the student's overall educational experience. The practicum should be designed to promote professional development and should allow the student to:

- apply classroom knowledge to problems where public health is practiced;
- experience the nature of work in his/her specialized area of training;
- carry out a project useful to an organization or group that provides the opportunity to develop/refine professional public health skills;
- gain confidence, competence, and satisfaction in completing individual projects and developing insight into personal skills and attributes;
- learn additional skills to be obtained or strengthened;
- meet regularly with a qualified Practicum Preceptor who can both guide the student's

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<sup>\*</sup> Accreditation Criteria, Graduate Schools of Public Health, Council on Education for Public Health amended January 2002, pg. 9.

experience in a specific area of interest and serve as a role model and/or mentor;

- attend appropriate meetings and seminars to learn about the work of other relevant organizational/project personnel;
- explore opportunities for Master's Integrative Project (MIP) topics based upon the needs of the organization or project and individual interests (Note: It is encouraged, but not mandatory that the practicum serve as the basis of the MIP);
- obtain job references from public health professionals who can speak to his/her abilities in an applied context; and
- obtain a position with the organization or group when relevant openings are available upon graduation.

### *Preliminary Planning*

There are many factors that the student needs to consider when planning his/her practicum. These include: whether the student is part-time or full-time, when the student wants to graduate, what track the student is in, the number and timing of courses that the student is taking, whether the student is working or has to get paid during the practicum, the nature of the proposed practicum, and other personal factors.

There are also many ways students can plan to accumulate the minimum number of hours required to fulfill the Department's practicum experience. For example, some students completing the full-time, 280 hour, requirement may prefer or need to work one day per week, starting their experience at the beginning of their first spring semester, working through the summer and finishing at the end of the fall semester (7 hours/week x 40 weeks = 280 hours). Others may prefer or need to work in a concentrated block of time and therefore may choose to work full-time throughout the summer (35 hours/week x 8 = 280 hours).

A successful practicum depends upon the consultation and mutual cooperation between the student, the Faculty Advisor, the Practicum Coordinator and Director, and the Practicum Preceptor. Each student should begin discussing the timing and general goals and objectives for his/her practicum with his/her Faculty Advisor during their first semester. Thereafter, the student is responsible for contacting the MPH Program Coordinator to schedule an appointment to meet with her and the Practicum Director, to plan and locate a practicum experience.

The agency, program, project or individual that ultimately agrees to accept a student for a practicum experience also assumes an educational role. One person, a Practicum Preceptor, must agree to help arrange the student's experience and define activities that will help meet the objectives of both the student and of the agency/project. The Practicum Preceptor coordinates and supervises the student's work and takes responsibility for seeing that the specific objectives and activities agreed upon in the Practicum Agreement are being carried out according to schedule. The Preceptor agrees to orient the student to the agency and project and to meet with the student on a weekly basis to monitor progress. At the end of the student's practicum, the Practicum Preceptor must also complete an online Preceptor Evaluation Form. A sample Practicum Agreement form, and Preceptor and Student evaluation criteria and questions are provided on the following pages. Electronic copies of the Practicum Agreement form and links to the Practicum Evaluation may also be found on the department website ([www.sms.mailman.columbia.edu](http://www.sms.mailman.columbia.edu)) under "Public Health Practice." Students are

encouraged to provide their Preceptor with copies of the track-specific evaluation criteria when planning the practicum to ensure that the Preceptor understands his or her responsibilities.

The specific educational objectives and activities of the practicum should reflect the core competencies listed in Section 1 of each track's Preceptor and Student Evaluation Forms. These objectives should be initially outlined by the student with input from the Practicum Preceptor in the Practicum Agreement Form. Once selected, **the student must obtain a written approval on the nature, location, specific objectives and activities of the practicum from his/her Preceptor, Faculty Advisor, and the Practicum Director.** Thereafter, the student delivers the original signed Practicum Agreement form to the MPH Program Coordinator for processing, which includes making copies of the Agreement for the student, the Faculty Advisor and the Practicum Director.

### *Implementing*

As soon as the Practicum Agreement form is processed, the Practicum Director writes the Preceptor a thank you letter confirming the placement and includes a copy of the signed Practicum Agreement.

She also reiterates the Preceptor's responsibilities related to orienting, monitoring and evaluating the student. During the practicum, the student is responsible for performing according to the finalized, approved Practicum Agreement and for fulfilling the usual responsibilities of punctuality, accountability, and appropriate deportment and initiative expected of all public health professionals.

### *Monitoring*

The first couple of weeks of the student's practicum should be considered a probationary period. During this time, the Practicum Director will e-mail the student and the student's Preceptor to inquire about how things are progressing. If there are any problems or concerns the Practicum Director will offer to meet with the student and/or the student's Preceptor. If for any reason the student or Preceptor is unable to fulfill his or her responsibilities according to the finalized, approved Practicum Agreement, plans and activities for the practicum may be changed or modified with the approval of the Faculty Advisor, the Practicum Director, and the Practicum Preceptor.

### *Evaluation*

Towards the end of the practicum, the Practicum Director sends the Practicum Preceptor a second letter with the web address and instructions for completing the online evaluation form. The student will also be contacted by email and sent the web link and instructions for the online Student Evaluation Form. Using these forms, the Preceptor and the student are asked to describe and evaluate the practicum with respect to the following: the nature of work and activities, its relationship to prior didactic course work; the knowledge gained and skills developed, the dynamics of the student/preceptor relationship and supervision process, whether expectations were met, potential mechanisms to improve the practicum experience; and, the suitability of the practicum site for other student placements. The evaluations must be completed by both the Preceptor and the students within one week of the end of the practicum. Once the Practicum Director receives both evaluations, she will sign the Practicum Agreement form to affirm that student has fulfilled the Practicum Agreement.

*Practicum Agreement*

Note: This form is to be filled out by the Practicum Preceptor and student together. It must be completed, appropriately signed and hand delivered to the Practicum Coordinator prior to the start of the practicum. Once the practicum is completed and the Student and Preceptor Evaluation Forms have been completed and submitted electronically, the Practicum Director will sign and submit this Agreement to the Office of Student Services to document that the student has fulfilled the practicum requirement for the Department of Sociomedical Sciences.

**Student's Name:** \_\_\_\_\_

**Student's Email:** \_\_\_\_\_

**Preceptor's Name & Title:**  
**Dr./Mr./Ms.** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Preceptor's Phone Number:** \_\_\_\_\_

**Practicum Start Date:** \_\_\_\_\_

**Practicum Finish Date:** \_\_\_\_\_

**How will the Preceptor orient, monitor, and evaluate the student?**

**What, specifically, does the Preceptor expect the student to do during his/her practicum?**

**What does the Preceptor expect the student to accomplish by the end of his/her practicum?**

**What does the Preceptor understand the student's time commitment to be during the practicum?**

**What meetings, conferences, and/or seminars (if appropriate) does the Preceptor anticipate the student will attend?**

Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Practicum Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The student has fulfilled the practicum requirement for the Department of Sociomedical Sciences. Online evaluations have been submitted by the Preceptor and the student.

Practicum Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Marita K. Murrman, Ed.D., Practicum Director  
Columbia University, Mailman School of Public Health  
Department of Sociomedical Sciences  
722 W. 168<sup>th</sup> St., 9<sup>th</sup> Floor  
New York, NY 10032  
Phone: (212) 305-0096

*Thank You Letter to Preceptor*

Date

Dear Ms. Smith,

Thank you for the Practicum opportunity which you are providing for John Doe, and for your timely and thoughtful completion of the Practicum Agreement form. Enclosed is a copy of the agreement for your files.

I would like to remind you that the first few weeks of the practicum are always a trial. If you or Mr. Doe feel that the practicum experience is not proceeding in the way it was originally planned, please do not hesitate to let me know.

If you have any other questions or concerns, please feel free to contact me.

Thank you for your time.

Sincerely,

Marita K. Murrman, Ed.D.  
Practicum Director  
Columbia University  
Mailman School of Public Health  
Department of Sociomedical Sciences  
722 W. 168<sup>th</sup> St., 9<sup>th</sup> Floor  
New York, NY 10032  
mkm27@columbia.edu  
(212) 305-0096

*Preceptor Letter to Accompany Practicum Evaluation Form*

Date

Dear Ms. Smith,

We are attempting to learn about the quality of our many and diverse Public Health Practica, and the extent to which each one provides students with opportunities to participate in Public Health-related activities. From your perspective as Practicum Preceptor to John Doe, who is the the [Specific Track], we request you to complete our online Practicum Evaluation Form, which you will find at this site: <http://www.mailman.hs.columbia.edu/sms/preceptorform>. Please keep in mind John Doe's academic program to guide you to the appropriate page.

There are three sections to the evaluation form described below. Thank you in advance for your time and thoughtful completion of this form; your input is critical in our efforts to continually strengthen and improve our program.

Section 1: [Specific Track Name] Competencies: Please carefully consider John's experience in relation to each statement on the attached Form. We realize that each practical experience is different and we expect that each one will cover only a subset of the total set of competencies. Indicate whether John's practicum provided opportunities to effectively support practice and learning in each area.

Section 2: Practicum Quality: Indicate the extent to which you agree or disagree with each statement about issues related to John's learning, instruction and supervision in his practicum.

Section 3: Open-Ended Questions: Please provide brief answers to each question concerning the practicum, including suggestions for how the experience and process could have been improved.

Please know that your responses will be completely confidential. Thank you again for your assistance. I look forward to reviewing your responses.

Sincerely,

Marita K. Murrman, Ed.D.  
Practicum Director  
Columbia University  
Mailman School of Public Health  
Department of Sociomedical Sciences  
722 W. 168<sup>th</sup> St., 9<sup>th</sup> Floor  
New York, NY 10032  
mkm27@columbia.edu  
Phone: (212) 305-0096  
Fax: (212) 342-9004

## *Preceptor Practicum Evaluation Form*

The Preceptor Evaluation is to be completed online. Preceptors will receive information on accessing the online form along with instructions for completing the evaluation. Below is a sample of common questions for all practicum sites. Track specific questions and criteria for evaluation are on the following pages.

### **Section 2: Practicum Quality**

Please indicate the extent to which you agree or disagree with each statement below.

My student had the opportunity to:

- Practice communication skills
- Interact with people from different cultural backgrounds
- Take initiative in his/her own learning
- Practice leadership skills
- Learn from experience and feedback
- Reflect on his/her professional capacities and limitations
- Explore career/specialization choices
- Develop community collaborations/partnerships

Overall, I would say that my:

- Student's experience was well supervised
- Student had access to me at least once per week
- Student's roles and responsibilities were clear
- Student's practicum site within was a well-run organization
- Student felt integrated into the atmosphere of the work environment
- Student will continue a mentoring relationship with me after his/her practicum concludes
- Student met his/her educational goals and expectations
- Student had a practicum that was a worthwhile learning experience

### **Section 3: Open-ended Questions**

What skills did you find necessary for your student to have to complete the practicum that he/she did NOT have?

On a scale from 1 to 5 (with 1 being the worst and 5 being the best), how would you rate your student overall

How can the Department of Sociomedical Sciences improve the practicum process for Practicum Preceptors?

## *Student Practicum Evaluation Form*

The Student Practicum Evaluation is to be completed online. Students will receive information on accessing the online form along with instructions for completing the evaluation. Below is a sample of common questions for all practicum sites. Track specific questions and criteria for evaluation are on the following pages.

Please describe in about 250 words the project you worked on during your practicum experience.

Was your practicum a paid experience: \_\_\_\_\_ Yes \_\_\_\_\_ No

### **Section 2: Practicum Quality**

Please indicate the extent to which you agree or disagree with each statement below.

My practicum allowed me to:

- Practice my communication skills
- Interact with people from different cultural backgrounds
- Take initiative in my own learning
- Practice leadership skills
- Learn from experience and feedback
- Reflect on my professional capacities and limitations
- Explore career/specialization choices
- Develop community collaborations/partnerships

Overall, I would say that:

- My experience was well supervised
- I had access to my preceptor at least once per week
- My roles and responsibilities were clear
- The practicum site was within a well-run organization
- I felt integrated into the atmosphere of the work environment
- I will continue a mentoring relationship with my preceptor after my practicum concludes
- My educational goals and expectations were met
- The practicum was a worthwhile learning experience

### **Section 3: Open-Ended Questions**

How did you locate your practicum position?

What resources did you find *most* helpful in planning and obtaining your practicum placement?

What did you find *least* helpful in planning and obtaining your practicum placement?

What skills were most applicable to your practicum?

In which courses did you learn the skills that YOU listed in the previous question?

What skills did you find necessary to have during your practicum that you did not have?

In what ways can the practicum experience be improved?

Will your practicum in any way relate to your Master's Integrative Project?

If your practicum will relate to your Master's Integrative Project, please describe.

On a scale from 1 to 5 (5 being the highest), please rate the value of the practicum for finding a job after graduation?

How can the Department of Sociomedical Sciences improve the practicum process for students?

*Health Promotion Track  
Practicum Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the Health Promotion track.

**Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Please indicate with a "yes" or "no" whether your student's practicum provided experiences and opportunities in the following areas.

Student was involved in:

- Designing a community needs (broadly defined) and assets assessment
- Implementing a community needs and assets assessment
- Designing a community-based health promotion or disease prevention program
- Implementing a community-based health promotion or disease prevention program
- Identifying cultural factors effecting health promoting & disease preventing behavior
- Educating people, one-on-one, about health issues
- Linking people to needed personal health services
- Convening and/or facilitating groups to promote health
- Informing people using the media about health issues
- Mobilizing partnerships to identify and solve health problems
- Empowering people about health issues
- Evaluating accessibility of individual and/or population-based health services
- Evaluating effectiveness of individual health services
- Evaluating effectiveness of population-based health services
- Student was involved in other activities (please specify):

I believe that my (student's) practicum experience:

- Helped him/her become more aware of the needs of the community
- Benefited the community
- Modified in a positive way his/her attitudes about the community

*Research/General Social Sciences Track  
Practicum Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the Research track.

**Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Please indicate with a "yes" or "no" whether your student's practicum provided experiences and opportunities in the following areas.

Student was involved in:

- Designing a research or an evaluation project
- Applying for a research or an evaluation grant
- Designing an informed consent form for a research or an evaluation project
- Applying for IRB approval for a research or an evaluation project
- Constructing and testing a research or an evaluation instrument
- Implementing a research or an evaluation project
- Monitoring progress of a research or evaluation project
- Evaluating a research project
- Utilizing quantitative data collection techniques for a research or an evaluation project
- Utilizing qualitative data collection techniques for a research or an evaluation project
- Designing a database
- Monitoring and assuring quality of research data
- Reviewing research literature
- Selecting techniques for analyzing quantitative and/or qualitative information
- Analyzing and interpreting data from a research or an evaluation project
- Preparing reports
- Preparing manuscripts
- Participating in community-based participatory research
- Student was involved in other activities (please specify):

I believe that my( student's) practicum experience:

- Helped him/her become more aware of the steps involved in a research or evaluation project
- Benefited the research or evaluation team
- Helped advance public health research and knowledge
- Helped develop the skills necessary to conduct research

*History and Ethics of Public Health and Medicine Track  
Practicum Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the History & Ethics track.

**Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Please indicate with a “” or “no” whether your student's practicum provided experiences and opportunities in the following areas.

My student was involved in:

- Archival research or research using primary sources
- Analytic historical research of secondary literature related to history
- Policy related research
- Policy analysis
- Policy development
- Ethical discussions or evaluations
- My student was involved in other activities (please specify):

I believe that my student's practicum experience:

- Helped him/her integrate history and policy
- Helped him/her integrate history and ethics
- Helped him/her integrate history, ethics and policy with the other Public Health core disciplines (epidemiology, biostatistics and health policy)
- Gave him/her a new perspective on history, policy or ethics
- Made a unique contribution

*Aging and Public Health Track  
Practicum Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the Aging track.

**Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Please indicate with a "yes" or "no" whether the student's practicum provided experiences and opportunities in the following areas.

Student was involved in:

- Designing a needs and assets assessment of older adults or their communities
- Implementing a needs and assets assessment of older adults
- Designing a health related program for older adults
- Providing health services for older adults in an institutional setting
- Providing health services for older adults in a community- based setting
- Evaluating health services for older adults
- Providing older adults with health information, health systems advocacy, or support in obtaining appropriate services
- Conducting research on the health of older adults
- Constructing and testing research or evaluation instruments specific to aging and health
- Utilizing quantitative data collection techniques for research with older adults
- Utilizing qualitative information collection techniques for research with older adults
- Analyzing and interpreting data and information from research with older adults
- Developing health policy for the aging population
- Changing health policy for older adults
- Student was involved in other activities (please specify):

I believe that my( student's) practicum experience:

- Helped him/her become more aware of the health needs of older adults
- Modified in a positive way his/her attitudes about older adults
- Benefited older adults

## *Urbanism and the Built Environment Track Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the Urbanism & Community Health track.

### **Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Please indicate with a "yes" or "no" whether your student's practicum provided experiences and opportunities in the following areas..

Student was involved in:

- Designing a community (broadly defined) needs assessment and/or asset map
- Implementing a community needs assessment and/or asset map
- Utilizing GIS to conduct studies linking health data to maps
- Analyzing GIS data from studies linking health data to maps
- Identifying cultural, behavioral, social, economic and environmental factors affecting health in cities
- Identifying and locating stakeholders and gatekeepers in urban communities and social networks
- Determining psychological, social and cultural factors that influence health in urban settings
- Analyzing the impact of market forces on urban development and health of urban populations
- Analyzing population movements that contribute to patterns of development and health
- Analyzing the effect of transportation systems and links on population migration and health patterns
- Analyzing the political and social organization of urban areas and their association with health patterns
- Developing policies that promote health and contribute to the elimination of disease in urban areas
- Utilizing a range of urban and environmental planning methods
- Integrating current and past theories and concepts of urban planning and design
- Collecting and organization information on urbanism using electronic retrieval sources
- Identifying changes in research and planning literature in urbanism and health
- Mobilizing partnerships to identify and solve urban health problems
- Student was involved in other activities (please specify):

I believe that my (student's) practicum experience:

- Helped him/her become more aware of the needs and assets of urban communities
- Helped him/her understand the association between patterns of health & disease and the urban environment
- Contributed to urban and environmental planning initiatives
- Helped him/her develop skills necessary to conduct spatial analysis and mapping
- Benefited urban communities

*Sexuality and Health Track  
Practicum Evaluation Form*

The Practicum Evaluation is to be completed online by both the student and the preceptor. Each will receive information on accessing the online form along with instructions for completing the evaluation. Most importantly, preceptors and students must indicate the student's track when submitting the online evaluation. Below is a sample of questions pertaining to students in the Sexuality & Health track.

**Section 1: Track Specific Competencies**

Each practical experience is different and we expect that each one will cover only a subset of the total set of competencies listed below. Indicate with a "yes" or "no" whether your student's practicum provided experiences and opportunities in the following areas.

Student was involved in:

- Applying basic health sciences, social sciences, ethics and human rights to define public health problems in the field of sexuality
- Identifying and retrieving current relevant scientific evidence regarding sexuality-related public health issues
- Collecting, summarizing and interpreting information relevant to a sexual health issue
- Identifying and applying basic research methods used in the field of sexuality and health
- Designing strategies to promote sexual health on individual or community levels
- Implementing strategies to promote sexual health on individual or community levels
- Evaluating strategies to promote sexual health on individual or community levels
- Advocating for programs and resources for sexual health promotion
- Student was involved in other activities (please specify):

I believe that my (student's) practicum experience:

- Helped him/her become more aware of the sexual health needs of the community
- Benefited the sexual health status of the community
- Helped advance research on or knowledge of sexual health issues

## The Masters Integrative Project\*

The Masters Integrative Project (MIP) is a capstone requirement of all students in all tracks of the program of the Department. Ideally, students should use the practicum experience as a basis for the MIP project. The MIP is intended to reflect the training you have received in the MPH program, as well as demonstrate your ability to design, implement, and present professional work appropriate to your major field of interest.

Writing the MIP is considered an essential MPH student experience that could further your career development. Employers seek in potential employees with a MPH degree the ability to write articles, reports, and monographs, and want to see evidence that you can design studies, write a needs-assessment, design a health program, and/or develop a strategic plan. If you plan to continue your academic studies, developing expertise and demonstrating your ability as a writer are two important skills required of all doctoral candidates. A well-written paper is a great asset that you can bring with you to a job interview or include in an application for further study. The MIP ought to demonstrate your ability to think clearly and convey your thoughts effectively and thereby provide an example of your understanding and insight into a substantive area in which you have developed expertise.

These guidelines are intended to help you in the process of writing your MIP. They are presented as a directed series of concrete steps that will hopefully help lead you through the writing process.

### *Selection and Roles of the MIP Sponsor*

If you plan to complete the MPH degree in 2 years, by the beginning of the Fall semester of your 2<sup>nd</sup> year you should identify a general MIP topic and an MIP sponsor. It is your responsibility to approach a faculty member and get her/his agreement to serve as an MIP sponsor (a list of eligible faculty members and their research topics is printed in Appendix B).

In rare cases a student may wish to consult and otherwise involve other faculty or nonfaculty individuals as advisers for his/her project. Including other advisers in the MIP process should be done with the permission of the MIP sponsor. However, only the faculty designated as MIP sponsor is responsible for approving the MIP proposal and grading the final project.

The role of the MIP sponsor is to provide close guidance and feedback to you throughout the writing of your MIP. Below is a proposed syllabus for your work with the MIP sponsor. By scheduling ongoing meetings with your MIP Sponsor, you can obtain regular feedback during the process of preparing your MIP.

### *The MIP Course*

All MPH students are required to register for their MIP project as a year-long, 2-part course, MIP-I (P8707) and MIP-II (P8708), with a faculty member of their choice who will serve as their MIP sponsor. Students completing their degree in 3 semesters and dual degree students may take the MIP course in one semester (P8719).

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\* Contributors: Miguel Muñoz-Laboy jointly conceived of the MIP Guidelines, conducted the research and networking required to compile this document. Victoria Raveis wrote the section on Institutional Review Board Approval. Cheryl Merzel wrote the evaluation plan for the section on the Health Initiative. Mary Northridge provided final review and editing of the guidelines, and evaluation advice. Ilan Meyer consulted on tips for writing essays, the evaluation criteria, and provided overall guidance, supervision, and inspiration to the assembled team towards the successful completion of this document.

The course aims to help lead students through the process of writing the MIP: from developing ideas and writing the MIP proposal (due by the end of MIP-I or before taking P8719) to completing the MIP (due at the end of MIP-II or P8719). The course is comprised of 3 elements: Independent work by the student, meetings between the student and her/his MIP Sponsor, and participation in MIP seminars together with other students.

The following is a general description of the course content and timeline; it should serve as a basis for the student and her/his MIP sponsor but they will tailor this plan to the specific needs and constraints of the proposed MIP. *Note:* This sample syllabus is designed for students who complete the MPH degree in 2 years. Students who take P8719 should discuss with their MIP sponsor how to adjust this protocol.

### 1. Fall semester (P8707)

Week	Forum	Topic
1	Seminar 9/7/05	Topics to be covered include how to choose an MIP topic, how to think about specific aims, how to organize time and plan for the MIP, how to work with the MIP sponsor, library resources. Form student working groups. (Meyer and Faculty)
2	Sponsor/Student Meeting	Meet with MIP sponsor to discuss the topic of choice and begin focusing the topic toward clear specific aims for the project; begin thinking about the type of MIP that best fits the student and the topic, the methodology to be used, and review this timeline.
3	Student Working Group	Student works on reviewing relevant literature. Student working group meets to discuss topic for the MIP and define the specific areas of problems to be addressed in the MIP.
4	Independent Work	Student works on reviewing and summarizing relevant literature and developing the <i>statement of problem</i> for the proposal.
5	Seminar 10/5/05	The importance of the statement of problem and specific aims (class exercise). Discuss how to plan an effective MIP (Meyer and Faculty).
6	Student Working Group	Student works on <i>specific aims</i> . Student Working Group members review and critique one another's draft of the <i>statement of problem</i> and <i>specific aims</i> .
7	Independent Work	Student submits to MIP Sponsor a draft of the <i>statement of problem, background and significance, and specific aims</i> .
8	Sponsor/Student Meeting	Student meets with MIP sponsor to discuss draft and discuss <i>project plan</i> .
9	Student Working Group	Student works on developing project plan. Student Working Group members discuss and review one another's draft of the <i>project plan</i> .
10	Independent Work	Student submits draft of <i>project plan</i> .
11	Seminar 11/16/05	Seminar –scientific writing workshop. (Meyer and Faculty)
12	Sponsor/Student Meeting	Student meets with MIP Sponsor to discuss full draft of the proposal and begin outline for MIP.
13	Independent Work	Revisions to the proposal.
14	Independent	Student submits the final proposal to MIP Sponsor and MPH

Work	Coordinator who will distribute to the student's Track Coordinator.
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## 2. Spring Semester (P8708)

Week	Format/Topic
1	Student meets with the MIP Sponsor to plan timetable and work schedule for semester. Review MIP outline.
2	Seminar – Working on the MIP Project, the importance of outline, time management, TBA (Meyer and Faculty)
3	Student works on first draft
4	Student submits first draft to MIP Sponsor. The first draft should include, at a minimum, a full draft of background and significance and specific aims.
5	Student meets with the MIP Sponsor to discuss comments on first draft
6	Student independent work
7	Student independent work
8	Student submits second draft
9	Student meets with the MIP Sponsor to discuss second draft
10	Student independent work
11	Student submits final draft (Note: if major revisions are still required the student may not graduate on time)
12	Student receives feedback on the final draft/ student independent work
13	Student independent work
14	Student submits the final project by last day of – no revisions accepted after this day. <i>Note: If the MIP has not been submitted to the MIP Sponsor and the MPH coordinator by this date, the student's graduation will be delayed.</i>

### *Developing the Master's Integrative Project (MIP) Proposal*

During the first semester (or before enrolling in P8719) you will work toward preparing a written MIP proposal. Your MIP proposal should consist of the following:

1. **Cover page.** The title of your MIP, your name, your SMS track, your expected date of graduation, and the names and signature of your MIP sponsor.
2. **Description of project.** Limited to 2 pages. Incorporates the following elements:
  - a. **Statement of the problem** - Issue to be addressed.
  - b. **Background and significance** - Briefly sketch the basis for the proposal, the existing knowledge on the topic, the theoretical framework, and the importance of the project for public health in general and your area of specialization in particular.
  - c. **Specific aims** - State concisely and realistically what the proposed project is intended to accomplish.
  - d. **Project plan** - Provide a brief description of the proposed project, target population(s) or sample(s) to be used, specific theory(s) to be applied, program components (if applicable), proposed methods, and data analysis plan (if you plan on using data).

You must submit a copy of your approved and signed MIP proposal to the MPH Program Coordinator by the last day of class P8707 (or before taking P8719).

## *Institutional Review Board Approval*

Not all MIPs will require Institutional Review Board (IRB) review and approval. Approval may involve a full review or an exemption. An exemption can only be granted by the IRB. That is, neither the faculty member with whom you are working nor you can make the determination that your project is exempt.

The following types of MIPs will need approval by the IRB:

- MIPs that involve the collection and analysis of data from human subjects need to be submitted for review to the IRB before any data are collected.
- MIPs that involve the secondary analysis of previously collected data may require IRB approval, and need to be submitted to the IRB so that the IRB can determine if your project is exempt from IRB review or needs approval.
- MIPs that involve the collection or analysis of data from human subjects as part of an already approved IRB study may require submission to the IRB of a modification or amendment to the IRB protocol and/or the addition of you to the personnel listed on the IRB protocol.

The IRB review process can be complex and lengthy, so any MIPs that may require IRB approval should be started as soon as possible. You should consult with your MIP sponsor about this process when developing your MIP proposal.

The Columbia University Medical Center +Institutional Review Board (IRB) IRB does not permit students to be listed as the Principal Investigator on an IRB protocol. MIPs that are submitted to the IRB need to be submitted with the Columbia University faculty member who is the MIP sponsor listed as the Principal Investigator (PI) on the IRB protocol. Students can be listed as Investigators. In the protocol, the project can be identified as MIP research that you are conducting under faculty mentorship.

If you seek to work on an MIP project that may require an application to the IRB, you should discuss your project with your MIP sponsor before beginning the process, and obtain her/his agreement to serve as the PI on your project.

All personnel listed on the protocol (including students) need to have passed the Good Clinical Practices (GPC) exam and the Health Insurance Portability Accountability Act (HIPAA) training exam.

Submission of IRB protocols and correspondence with the IRB is conducted on-line using RASCAL (see <https://www.rascal.columbia.edu/>). At the RASCAL website, click on “Compliance” and then click on “Human Subjects Protocols” or “Consent Forms” as applicable. Under “Human Subjects Protocols” you can also click on “Helpful Information,” a comprehensive archive of information and commonly asked questions.

## Writing and Styles

In writing, think about your audience. An effective essay is one that argues a point. Imagine that you are arguing your point to a class, to me, or to friends. Write in a formal (social science) style, but write clearly. Use simple language. Avoid jargon, fancy words, and florid styles. Use terms consistently. Try to be very economical. Even if you have many interesting ideas, concentrate on one or two major themes. Introduce the theme or themes early on, preferably in the first paragraph (e.g., “In this essay I will argue that...”). Use a title and headings to help your reader move along through your essay. These will make it clearer when you move to the next step of your argument, or from one topic to another.

Often, the most important part of the writing process is in the editing stage. You are unlikely to come up with a clear structure on your first draft. Allow yourself the freedom to write unreservedly, but then edit your work closely. Even if you didn’t start out with a clear structure, outline your essay after it is written. This also provides an opportunity for you to add headings if you didn’t start out with them! Make sure your arguments are built logically and coherently. Careful editing will help you to see where you drift from a main argument, or where a second argument needs an introduction. Don’t hesitate to remove passages if they distract from the main theme(s) of your essay. Even if these extrinsic arguments are interesting, it is better to be coherent and stay on topic. You may expand on such passages in another essay or place them in a footnote.

Provide proof to your statements and arguments. Imagine your readers are a jury in a court of law. You have to convince us! Why should we agree with what you say? What is your reasoning? Where is your evidence? In the social sciences, we use and cite sources of both ideas and facts. But remember, evidence may be of mixed validity – use it critically! Don’t just say, for example, “youths have unsafe sex because of low self-esteem.” Be clear when you are mentioning this as a fact based upon research evidence by citing the source of the information. If instead you are proposing this as a hypothesis, let your readers know. If the hypothesis is someone else’s, cite the source. Furthermore, you will help the reader assess the evidence you provide by qualifying it. Is there overwhelming evidence for this assertion, or is it merely suggested by one research project? Is the evidence convincing to you? It is more than all right if you don’t know the answer to everything. Raise questions. Discuss problems.

Draw conclusions and take sides. Your review article should reflect your own thinking. Take care not to be simplistic or overzealous. Complex problems often have complex, somewhat conflicting, or even bewildering conclusions. This makes them interesting.

### *Citations*

Use a consistent scientific style of citation. We recommend the *Publication Manual of the American Psychological Association* (5th ed.) that you may wish to follow in preparing this section. For certain disciplines (history, anthropology, sociology), the endnote conventions of the Chicago Manual of Style (14th ed. 1993:487-635) may prove more apt.

Make sure that you properly cite the sources of information that you use throughout your proposal. When citing in the text, use the last name of the author or authors and the year of publication (e.g., Markel, 1995). The following are examples of APA reference citation styles.

#### Journal Article:

Drucker, E. (1986). AIDS and Addiction in New York City. *American Journal of Drug and Alcohol Abuse* 12:165-81.

Book:

Gartner, A. & Riessman, F. (1979). *Selfhelp in the Human Services*. San Francisco: Jossey Bass.

Newspaper article:

Lambert, B. (1989). In Spite of Crisis, New York Lacks Basic Services for AIDS Patients. *New York Times*, January 3, pp. A1, B2.

Book chapter:

Weissman, H. (1983). The Social Welfare System. In: S. Richard Sauber, (Ed.), *The Human Services Delivery System* (pp.184-222). New York: Columbia University Press.

*Figures and Tables*

If you have figures and tables, include them together after the references section, but refer to them in the text, e.g., “see Figure 3”.

*Appendices*

Appendices are not required. Questionnaires, scales, interview schedules, maps, photographs, and so on, can be included in an *Appendices* section, after the *References* section. There is no limit on the number of appendices or the number of pages in the appendices.

*Additional Help on Writing*

For a general writing manual see, for example, Lunsford, A. & Connors, R. (1989). *The St. Martin’s Handbook*. NY: St. Martin’s Press, or any of many other guides.

For writing research papers see Booth, W.C., Colomb, G.G., & Williams, J.M. (1995). *The Craft of Research*. Chicago: The University of Chicago Press.

An excellent resource for review articles is the *Handbook of Research Synthesis* by H. Cooper & L. Hedges (eds.), (1994). New York: Russell Sage Foundation.

**NOTE:** All written submissions should follow this format:

- Use white paper and black ink only.
- Double space.
- 1" margins all around text on each page.
- Include page numbers.
- Do not use tiny fonts! (Use 12 pt Times New Roman or 11 pt Arial.)

## I. Writing a Review Article

*Overview*

A review article consists of selecting a problem, reviewing what is currently known in the scientific literature about it, and building an argument that will lead to a new insight into the problem and set

of suggestions and recommendations. Review articles typically fall into one of the following categories:

- Theoretical reviews focus on the theoretical underpinnings and frameworks around a particular issue, develop an argument that constructively critiques current thinking, and propose alternative ways or frameworks for analyzing the issue.
- Methodological reviews focus on a particular method or methodology for research, evaluation, or intervention on a specific research problem, discuss the strengths and limitations of the method, and offer a critique and suggestions for future work.
- Research reviews focus on scanning findings from research on a particular issue, summarizing findings (for example, using meta-analysis), analyzing trends discovered in the summary, and suggesting new research directions in the field.
- Policy reviews focus on analyzing the impact of a specific policy or set of policies in certain populations, and suggesting arenas for advocacy and points of intervention.

### *Preparing a Review Article*

The structure of a review article will depend in part upon the content of the material that you collected for it. In other words, its organization depends on the ways that you want to build your argument. In general, however, your review article should contain at least the following components:

#### **Introduction** (Approximate length: 2-3 pages)

Introduce the central issue or topic of your argument, state the significance of the issue or topic, and present an overview of the overall manuscript.

#### **Argument/Subtopics** (Approximate length: 20-25 pages)

Divide the second part of your essay into the different subtopics that will allow you to build the argument that you are trying to articulate in your paper. Here you need to be strategic and creative in efficiently conveying the elements of your argument. Subheadings are very useful in delineating the different subtopics. You may want to elaborate a progression in your argument that starts from the basic points and moves through to the more elaborated ones.

#### **Conclusions** (Approximate length: 4-6 pages)

In the concluding part of your argument, you ought to summarize the primary points of your general thesis, advance any new directions, and provide recommendations or suggest approaches you have come up with after analyzing this body of information.

## II. Writing a Research Proposal

### *Overview*

Writing a research proposal consists of developing a set of arguments that illustrate the public health relevance at the theoretical and/or programmatic level of the specific topic of investigation, and

presenting a convincing methodology to efficiently investigate the research problem. This type of research proposal may be designed from multiple methodological perspectives, including but not limited to quantitative studies, such as surveys and secondary data analysis; historical studies, such as those using archival data; and qualitative studies, such as ethnographic studies.

### *Tips on Writing a Research Proposal*

“Nothing can substitute for  
significant research, innovative ideas, and sound methodology.”  
*Demographic and Behavioral Sciences Branch*  
*National Institute for Child Health and Development*

There is no single formula for writing a proposal that will assure approval and subsequent funding. Nonetheless, there are general tips that may assist you and targeted resources that are available to guide you in writing proposals. The *Social Science Research Council* has an online publication entitled, “Art of Writing Proposals” by Adam Przeworski and Frank Salomon, which is available electronically at [http://www.ssrc.org/fellowships/art\\_of\\_writing\\_proposals.page](http://www.ssrc.org/fellowships/art_of_writing_proposals.page). The “Quick Guide for Grant Applications” by the National Institutes of Health also offers specific tips on writing the different sections of a research proposal for funding at this government agency (see <http://deainfo.nci.nih.gov/extra/extdocs/gntapp.htm#6>).

### *The Structure of a Research Proposal*

Research proposals for the MIP are divided into three main components, namely: the abstract, the research protocol, and the references.

*Abstract* (Approximate length: half a page).

The abstract of your proposal is a concise summary of your research problem, objectives, and research design. It is the last thing that you should write and the first thing that you should present.

### *Research Protocol*

#### **Section 1: Specific Aims** (Approximate length: 1 page)

In this section, you should describe: the research problem, the overall purpose of the study, the specific objectives of the study (i.e., what you explicitly want to investigate), the hypotheses (if applicable), and the implications of the study (see Figure 1 for an example).

**Figure 1: An excerpt from a study at the National Institute for Child Health and Development**

Research Problem	Understanding the impact of social inequalities on health has become a public health priority in the new millennium. Social, political, and economic factors now are acknowledged to be “fundamental causes” of disease that affect behaviors, beliefs, and biology. Throughout industrialized countries, lower socioeconomic status (SES) has been clearly linked to poorer health. Additionally, SES gradients in adolescent health have been documented in both the United States and Europe.
Overall Purpose	The goal of the study is to investigate the population-level impact of SES on adolescent health in the United States. That is, we seek to determine the population attributable risk (PAR) for lower education and lower household income on adolescents’ physical and mental health.
Specific Objective	We hypothesize that lower household income will have substantial population-level effects on two major public health problems of youth: depression and obesity.
Hypothesis	
<p>Source: Goodman, E., Slap, G. &amp; Huang, B. (2003). The public health impact of socioeconomic status on adolescent depression and obesity. <i>American Journal of Public Health</i>, 93 (11): 1844-1850.</p>	

## **Section 2: Background and Significance** (Approximate length: 6 pages)

This section provides a literature review. Here the goal is to present:

- a) a detailed description of the research problem, including the magnitude, scope, and significance of the research problem that you have elected to address;
- b) the key findings in the scientific literature regarding your research problem;
- c) how your study will contribute to the existing knowledge gained from prior findings; and
- d) the theoretical perspective that your study is guided by (e.g., social learning theory, social constructionism) and your reason for selecting it. Remember to be concise.

## **Section 3: Preliminary Work (optional)** (Approximate length: 1 page)

In this section, you should describe the findings from prior studies that you have conducted or have been involved with. Do not repeat findings mentioned in the prior section. This section allows you to argue why you and/or your team will be capable of conducting the proposed study. Since your research experience may be limited, we suggest keeping this section particularly short, or do not include it at all if it does not make sense to do so.

## **Section 4: Research Design** (Approximate length: 18–21 pages)

This is the part of the proposal where you need to be the most creative. After you select a specific research problem, you need to decide upon the most effective design for investigating it. Therefore, you need to determine which of the following sub-sections to include and the approximate length of each:

**Overview of Research Design:** Briefly describe the overall approach of your study. If it has phases, describe these, too (e.g., household survey of clients of the Visiting Nurse Services of New York).

**Source(s) of Data:** Depending upon the type of study that you are designing, you should include as many of the following sub-sections as necessary:

**Sample:** In writing this sub-section, try to answer the following questions: What is the general study population from which you are planning to draw your sample? Who are you selecting to participate in your study? Who is not eligible? In other words, what are the inclusion and exclusion criteria for your study? What are the reasons for your selection criteria? How many people do you plan to include in the study? What are the reasons for your sample size? How much power does your study have to detect an effect? What are your estimates of participant attrition? How do you plan to recruit research participants? Be very specific. For example, Latina women between the ages of 60 and 75 who reside in upper Manhattan, New York City will be recruited.

**Archival Materials:** In writing this sub-section, try to answer the following questions: Which archives do plan to visit? What are your reasons for selecting these archives? What type of materials will be included as part of the study? Which materials will be excluded?

**Secondary Data Sets:** In writing this sub-section, try to answer the following questions: What is the data set that you have selected for your research? How were the data collected for the selected data set? What are the benefits and limitations of the data set?

**Research Setting:** Describe in detail the geographical and/or social community that you have selected for your study, and the reasons for your selection.

**Data Collection Method(s):** Present a general overview of the method(s) you selected, your reasons for selecting it, and how this is going to be implemented in your data collection. If your research proposal only concentrates on secondary data analysis, you should focus this section on the types of measures that you are going to use in your analysis.

**Measures:** Describe what measures will be used, what is the reliability of each measure, and address how suitable the measure for the study population.

**Analytical Methods:** Specify the types of methods that you are going to use to analyze your data (e.g., logistic regression, historical trends, content analysis) and the reasons for your selection. Describe how these methods address specific aims.

**Data Management:** How are you going to organize the collection and storage of data? You should include a timeline or timetable for the 12 months of the project period. Describe how these methods address specific.

**Ethical Concerns and Protection of Human Subjects:** Discuss the most salient ethical concerns related to your research proposal, whether or not these relate to human subject research or broader ethical implications of your research study, and what mechanisms you propose to use to address them. While you are not expected to write a Protection of Human Subjects Protocol for an Institutional Review Board for every MIP, you must write at least one Informed Consent Form.

## **Section 5: Feasibility** (Approximate length: 1-2 pages)

In this section, you ought to consider the feasibility of the proposed study. Discuss the resources that will be needed to implement the research project. It is very important that is possible and practical to conduct the study. Take into consideration the resources needed to complete the study. If these exceed the benefits of the study, it is unlikely that it will be funded. As part of the feasibility section, include a timetable to show when and how the different components of the research study are going

to be implemented.

### III. Writing an Evaluation Proposal

#### *Overview*

Writing an evaluation proposal is very similar to writing a research proposal. An evaluation proposal typically focuses on assessing the effects of an initiative, event, program, or intervention. Thus, for example, if you are interested in conducting a needs assessment, pre-post assessment project, non-randomized clinical trial, randomized clinical trial, or a policy impact analysis, you may want to write an evaluation proposal.

#### *The Structure of an Evaluation Proposal*

Evaluation proposals for the MIP are divided into three main components, namely: the abstract, the evaluation protocol, and the references.

*Abstract* (Approximate length: Half a page).

The abstract of your proposal is a concise summary of your evaluation problem, objectives, and evaluation design. It is the last thing that you should write and the first thing that you should present.

#### *Evaluation Protocol*

##### **Section 1: Specific Aims** (Approximate length: 1 page)

In this section, you ought to describe the overall purpose, specific objective(s), and implications of the evaluation (see Figure 2 for an example).

**Figure 2: An excerpt from a study at the National Institute for Child Health and Development**

Evaluation Problem	<p>Unintentional injuries are the leading cause of death among U.S. children and a major cause of childhood morbidity. Most injury morbidity and mortality occur in the home or automobile, and may be decreased through the use of preventive safety practices. The purpose of this evaluation is to determine the effectiveness of tailored injury prevention information provided in the primary care setting on parent adoption of injury prevention practices. Initial investigation demonstrated the potential feasibility and effectiveness of a computer-tailored information approach to the provision of injury prevention education during well-child visits. The objective of this evaluation is to test the impact of the delivery of concurrent tailored parent and physician information on (1) physician-parent communication during the well-child visit regarding injury prevention behaviors and (2) subsequent parent adoption of new safety practices. This evaluation will inform the potential development and use of strategies employing tailored communications for pediatric injury prevention in the primary care setting.</p>
Overall Purpose	
Specific Objective	
Implications	
<p>Source: <i>Research Study: Pediatric Injury Prevention Health Communications Study</i> (Principal Investigator: Dr. Nansel) at the Prevention Research Branch from the National Institute for Child Health and Human Development (<a href="http://www.nichd.nih.gov/about/despr/prbrsh.htm">http://www.nichd.nih.gov/about/despr/prbrsh.htm</a>).</p>	

## **Section 2: Background and Significance** (Approximate length: 6-8 page)

This section is dedicated to your literature review. Here the goal is to present:

- a) a detailed description of the evaluation problem and the significance of conducting a rigorous evaluation of the problem that you have selected;
- b) the key findings in the scientific/evaluation literature regarding ways to evaluate your selected problem;
- c) a discussion of how your study will contribute to the already existing knowledge base from prior findings;
- d) the theoretical perspective from which your evaluation design emerged; and
- e) any conceptual innovations in the approach of your evaluation. Remember to be concise.

## **Section 3: Evaluation Design** (Approximate length: 8-21 pages)

This is the part of the proposal where you need to be the most creative. After you select a specific evaluation problem, you need to decide upon the most effective design for investigating it. Therefore, you need to determine which of the following sub-sections to include and the approximate length of each:

- Overview of evaluation design - Briefly describe the overall design/approach of your evaluation (outcome evaluation, process evaluation, structural evaluation, etc.) and your reasons for selecting it. (Approximate length: 1-2 pages)
- Target Program/Initiative - Describe the program/initiative that you plan to evaluate, its components, its target population (e.g., urban youths), and its expected goals. (Approximate length: 2-3 pages)
- Indicators - Identify and define the specific indicators that you are going to use in your evaluation, and your reasons for selecting these indicators. (Approximate length: 2-3 pages)
- Data collection methods - Describe the methods and strategies that you are going to use to assess the indicators of the proposed evaluation. For each data collection method/strategy, present a general overview, your reasons for selecting it, and how it is going to be implemented in your data collection. (Approximate length: 3-5 pages)
- Validity - In this part of your proposal, you ought to identify the issues of internal validity, construct validity, and external validity of your evaluation design, and discuss the ways that you are going to address them in your evaluation. (Approximate length: 1-2 pages)
- Analytical methods - Specify the methods that you are going to use to analyze your data (e.g., logistic regression, historical trends, content analysis) and the reasons for your selection. (Approximate length: 2-3 pages)
- Data management - Describe how are you planning to organize the collection and storage of your data. You need to include a timeline or timetable for the 12 months of the project. (Approximate length: 1-2 pages)

- Ethical concerns and protection of human subjects - Discuss the most salient ethical concerns related to your evaluation proposal, whether or not these relate to human subjects research or broader ethical implications of your evaluation, and the mechanisms you propose to use to address them. You are not expected to write a Protection of Human Subjects Protocol for an Institutional Review Board.

#### **Section 4: Feasibility** (Approximate length: 1-2 pages)

In this section, you ought to discuss the feasibility of conducting the evaluation design that you propose. The viability of the evaluation is a very important component of your proposal. Take into consideration that if the resources necessary to complete the evaluation exceed the actual benefits, it is unlikely that such an evaluation will be funded. As part of the feasibility section, include a timetable to show when and how the different components of the evaluation are going to be implemented.

### IV. Writing a Health Initiative

#### *Overview*

A health initiative (or program) may consist of developing: (a) a curriculum for an individually-based, community-based, institutional, or policy-level intervention; (b) health promotion materials; (c) a social marketing campaign; (d) a media or web-based campaign; or (e) strategic planning for implementation of an intervention. Building health initiatives within the disciplines related to sociomedical sciences involves the following key elements: creativity in the design of the initiative; critical thinking necessary to identify the theoretical foundations for analyzing the focal problem and guiding the development of the intervention; and rigor in developing measurable goals and feasible activities that will have a meaningful impact at the desired level(s).

#### *Preparing the Health Initiative*

There are multiple ways to writing a health initiative. The guidelines presented below have been adapted from the basic principles proposed by McKenzie and Smeltzer in their book, *Planning, Implementing and Evaluating Health Promotion Programs* (3rd edition), Boston-London-Toronto-Sydney: Allyn and Bacon, 2001.

#### **Executive Summary** (Approximate length: 1-2 pages)

In this section, you ought to present a summary of the overall initiative, its importance, and the key aspects of its structure. Typically, this is the last part that you write, but is the first part of most health initiatives.

#### **Scope of the Problem** (Approximate length: 2-4 pages)

Briefly describe the problem that you want to address in this health initiative. You may want to include key research findings that help you describe the magnitude and significance of the problem.

#### **Mission Statement** (Approximate length: 1 sentence)

Describe the general focus of the initiative and the philosophy behind it. This will help you in

writing the program goals of the initiative. Examples of mission statements:

“This program is aimed at helping patients and their families to understand and cope with physical and emotional changes associated with recovery following cancer surgery.”

“The mission of the Walkup Health Promotion Program is to provide a wide variety of primary prevention activities for residents in the community.”

### **Program Goals** (Approximate length: Half a page)

List the specific goals of the initiative. Goals and objectives are not synonymous. A goal is defined as “a future event toward which a committed endeavor is directed.” Objectives are defined as “the steps to be taken in pursuit of a goal” (Deeds, 1992: pp. 36). Goals are long-term expectations that state what will change as a result of the program and who will be affected (e.g., “To stop the spread of tuberculosis among homeless elderly in New York City.”)

**Specific Objectives** (Approximate length: Each specific objective is one sentence long. The number of specific objectives and the levels of those objectives will depend upon the scope of the initiative that you design.)

Describe the specific objectives of your program, i.e., the precise steps that your initiative will take in order to accomplish the larger program goals. An initiative might have specific objectives at multiple levels; in this case, it is important to acknowledge the levels that you want to impact. Types of specific objectives include process administrative objectives, learning objectives, action/behavioral objectives, social environment objectives, and programmatic and policy-oriented objectives (see McKenzie & Smeltzer, 2001: pp.125-127). Regardless of the level and type, each of your objectives must contain the following elements:

- The outcome to be achieved, or what will change;
- The conditions under which the outcome will be observed, or when the change will occur;
- The criterion for deciding whether the outcome has been achieved, or how much change is sufficient;
- The target population, or who will change.

Below are examples of specific objectives to support the program goal, “To reduce the amount of heart disease in the residents of Franklin County” (adapted from Box 6.1, McKenzie & Smeltzer, 2001: pp.131-132).

Administrative Objective No. 1: During the next six months, 300 community residents will participate in one of the health department’s health promotion activities on heart disease prevention.

Learning Objective No. 4: When asked over the telephone, one of every three viewers of the heart special television show will be able to explain with 100% accuracy the four principles of cardiovascular conditioning.

Programmatic Objective No. 1: By the year 2010, heart disease deaths will be reduced to no more than 100 per 100,000 in the residents of Franklin County.

## **Theoretical Model (foundations) of Health Initiative** (Approximate length: 4-6 pages)

Before describing the activities that you have designed to address the specific objectives of the program, it is essential to discuss the theoretical model from which the intervention activities are going to be drawn from. Examples of theories include but are not limited to: social cognitive theory, theory of planned behavior, health belief model, trans-theoretical model, PRECEDE-PROCEED model, community organization and mobilization model, theory of reasoned action, emancipation theory, and so on. Make sure that you discuss: (1) the theory relevant to your health initiative; (2) how the theory relates to the program goals and objectives; (3) the limitations and advantages of employing the selected theoretical framework; and 4) how the theory is going to influence the development of intervention activities.

## **Activities of the Health Initiative**

The intervention activities of your initiative will largely depend upon the types of objectives in your initiative. McKenzie & Smeltzer (2001) identified 11 types of intervention activities, namely:

1. Communication activities
2. Educational activities
3. Behavior modification activities
4. Environmental change activities
5. Regulatory activities
6. Advocacy activities
7. Organizational culture activities
8. Incentives and disincentives
9. Health status evaluation activities
10. Social activities
11. Technology-delivered activities

Two other intervention activities not included in McKenzie & Smeltzer (2001) are:

1. Social/community mobilization activities
2. Structural intervention activities

Depending upon your objectives, you may choose to develop one or more types of intervention activities. For each developed activity, you must describe the following:

- **Type:** What type (kind) of activity is it?
- **Relationship to objective(s):** Which objective is this activity intended to contribute to? How is this activity contributing to the specific objective?
- **Concept:** What is the general concept (idea) of the activity?
- **Steps:** What are the specific steps (stages, parts) for the activity?
- **Resources:** What materials, human resources, and time allotments are necessary to develop this activity?
- **Indicators:** What are the specific indicators (monitors) that will be used to measure the effectiveness of the activity?

Finally, as part of the activities, you ought to include a timeline or timetable that outlines how the activities are going to take place throughout the period of the health initiative.

**Optional** (Approximate length: ½ page per activity, but feel free to expand as many pages as necessary)

In the “real world,” proposals for health initiatives will require the following two sections, but for your MIP, these are considered optional.

1. If you want to go a step further, you can develop a budget for the overall initiative and include this as a section of your document.
2. You may also want to develop a brief section indicating the overall indicators for assessing the impact of your initiative in the target population.

## Evaluation Plan

Your proposal for a health initiative should include a plan for evaluating the program. Depending on the program and your interests, the evaluation could be an outcome and/or process evaluation and quantitative and/or qualitative in nature.

Your evaluation design should be guided by a concern for maximum rigor under feasible and realistic conditions. The viability of the evaluation is a very important component of your proposal. Take into consideration that most program grant requests for proposals (RFPs) do not set aside separate funds for evaluation. Therefore, the resources needed to conduct the evaluation should be realistic and your design should reflect these resources.

The evaluation plan should include the following components:

- **Purpose of the evaluation** (needs assessment; formative evaluation/feasibility assessment; process evaluation; impact/outcome evaluation; cost-benefit/effectiveness evaluation). (Approximate length: ½ page)
- **Specific questions to be addressed by the evaluation** (e.g., questions related to measuring attainment of program objectives; examining program impact). Developing a program logic model is a useful summary depiction of your evaluation purpose and questions. (Approximate length: ½ - 1 page)
- **Evaluation design** – briefly describe the overall design/approach of your evaluation (formative evaluation; process evaluation; outcome evaluation—randomized or quasi-experimental design) and your reasons for selecting it. If you are going to conduct an outcome evaluation, you should discuss plausible threats to internal validity and how you are going to address them. (Approximate length: 1 ½ -2 pages)
- **Timeline** – you should incorporate your timeline for evaluation activities into your overall timeline for the program.
- **Optional components** to consider including:
- **Data** – Describe the data sources and data collection methods that you are going to use to obtain the information needed to answer your evaluation questions. (Approximate length: ½ page)
- **Measures** – briefly identify the specific measures you plan to use and methods for enhancing their reliability and validity. (Approximate length: 1 page)
- **Data analysis** – describe the quantitative or qualitative methods you will use to analyze your findings. (Approximate length: ½ page)

**Implications and recommendations** (Approximate length: ½ page)

Finally, you ought to discuss the implications and contributions of your health initiative to the target population, public health, social policy, and/or sociomedical sciences.

## Academic Advising FAQ

### *Introduction*

Academic advising is an important part of your education at the Department of Sociomedical Sciences. Your advisor should guide you in planning your academic program in view of your academic and career plans. The following are answers to some common questions students have regarding the role of the academic advisor and the kind of issues to discuss with him/her. You should also remember that Andrea Constancio, the MPH Program Coordinator, is available to discuss with you any additional questions you may have about academic advising, and she can address any problems that may arise.

### *First Meeting with Your Academic Advisor*

*Q. What is the purpose of the first meeting?*

The purpose of the first meeting is for you and your advisor to plan out your academic program. The length of your program will depend upon the number of courses you plan to take each semester (Fall and Spring), including Summer Sessions (A and B).

*Q. What do I need to do to prepare for the first meeting?*

First, make sure you have activated your Columbia University e-mail account so that the SMS Department and the School can notify you of important information and reminders such as registration information, cancellation of classes, addition of new courses, etc. E-mail your advisor during the first 2 weeks of your first Fall Semester and request a time to meet for 30 to 45 minutes.

Before the meeting, read this Handbook, especially the Program Requirements Checklist (checklists are different for each of the 7 Tracks; the Handbook contains a sample copy of each). You should also have a copy of the current Fall Mailman School of Public Health (MSPH) course schedule. Bring a copy of the Handbook. The Handbook is very helpful; it describes all SMS policies and procedures including course requirements, deadlines, practicum procedures, and the Master's Integrative Project (MIP).

*Q. How do I begin the first meeting?*

Be prepared to discuss the following items:

- The track you are in and why you selected this track.
- When you plan to graduate
- How many courses per semester you are planning to take. In general, first semester, full-time students are advised to take no more than 4 courses; part-time students are advised to take no more than 2 courses per semester.
- Whether you plan to take any summer courses – If yes, how many? Summer course offerings are extremely limited at the MSPH. Therefore, you should investigate appropriate elective course offerings at other schools within the University.

Your advisor will begin the meeting by asking you about your background, interests and future career goals. Next, you and your advisor should start to review the pertinent Program Requirements Checklist in the following order:

1. MSPH Core Courses. At the time of the first meeting (first Fall semester), all students should be taking Principles of Epidemiology (P6400) and all full-time students should be taking Introduction to Biostatistical Methods (either P6103 or P6104) (evening/part-time Health Promotion students will take this course during their second Fall semester). This means you and your advisor only have to plan for scheduling the 2 remaining MSPH core courses, Environmental Health Sciences (P6300) and Issues and Approaches in Health Policy and Management (P6530). Please note: the schedule for the 4 MSPH core courses outlined in the Handbook does not change from year to year.
2. SMS Core Courses. You should take Introduction to Sociomedical Sciences (P6700) during your first Spring semester (this course is only offered once a year). See the Handbook for the current schedule of other SMS core courses and discuss with your advisor which of the courses you can choose that best suits your interest and schedule.
3. MPH Track Required Courses. Refer to the Track-specific Program Requirements Checklists and sample schedules in the Handbook. If there are elective courses within the track requirements, discuss with your advisor which would best fit your interests and schedule.
4. Elective Courses. The number of elective courses available to you depends on your track. Please note that one elective course must be taken within the Department of Sociomedical Sciences. Other elective courses may be taken in other MSPH Departments and Columbia University graduate programs. In order to choose appropriate elective courses, think about your current interests and future career plans, and ask your advisor for his/her recommendations.
5. Certification. All SMS students are required to pass the certification exams. Certification exams must be completed during the student's first year. For more information refer to the course requirements in this Handbook. Discuss with your advisor the timetable for completing the certifications.
6. Practicum. Start to think about the skills that will be needed for your future career. Some of these skills cannot be developed through course work alone. The practicum should be an opportunity to develop such skills. Ideally, the practicum project should form the basis for the required Master's Integrative Project (see the Guidelines for Preparing a Master's Integrative Project in this Handbook).

*Q. How should I end the first meeting?*

Before leaving your advisor's office:

- Make a copy of the completed Program Requirements Checklist for yourself and date it. Give the original to your advisor.

- Stay in contact with your advisor throughout the semester and email or call him/her with any questions, concerns, or changes in your agreed upon Program Requirements Checklist (i.e. dropping/adding of a course).
- Remember that you will need your advisor's approval to register for courses. You can email him/her the list of courses you plan to take each semester; your advisor can approve the list via email. If you are not following the plan you and your advisor agreed upon, you need to email your advisor and explain the reasons for the requested changes.
- Schedule a second advisement meeting. At this next meeting you and your advisor should discuss practicum possibilities and ways in which you should begin thinking about your MIP.

### *In Between Meetings with Your Academic Advisor*

*Q. Is it important for me to keep in contact with my advisor in between formal meetings?*

Yes, and the best way to do this is to email your advisor at regularly scheduled times: at a minimum 2 weeks before each of the three registration periods and graduation filing dates.

### *Second Meeting with Your Academic Advisor*

*Q. What is the purpose of the second meeting?*

The purpose of the second meeting is to follow up with your advisor to discuss your academic program and future plans, as well as to help with any problems or concerns you may have. It is also important to begin to discuss the Practicum and the Master's Integrative Project at that time. Before the meeting, make sure you re-review the Practicum requirements and guidelines, and the track-specific practicum information in the Practicum section of this Handbook to get an idea of the types of skills that are important for you to develop through your Practicum experience.

*Q. How can I figure out what type of practicum to do?*

Start by asking yourself the following questions:

- What do I want to do when I graduate?
- What skills am I going to need that I am not likely to obtain through classroom work alone?
- Do I know of any possible practicum opportunities that could help me develop needed skills?

Make sure to:

- Focus on the Track-specific and other professional skills that you need to develop.
- Discuss ideas or practicum possibilities. If you and your advisor have no ideas or practicum possibilities, don't worry; the MPH Program Coordinator and Practicum Director and will work with you to find a suitable practicum experience.

- Remember to schedule a meeting with the MPH Program Coordinator and the Practicum Director to discuss plans for your practicum.

### *Other meetings with your academic advisor*

*Q. When should I meet with my advisor again?*

Keep a regular contact with your advisor, especially before each semester and any time you want to make program changes or discuss your future plans. Also be prepared to have your advisor review and approve the Practicum Agreement form, a sample copy of which is provided in the Handbook. Discuss with your advisor your MIP plans. Ideally the MIP should relate to your Practicum experience.

*Q. When should I meet with my advisor to discuss the Master's Integrative Project (MIP)?*

One month before you plan to register for your MIP course (P8708 or P8719) (before the end of your first year for full time students), you should meet with your advisor to discuss your MIP plan. Your advisor should be prepared to recommend one or more possible MIP sponsors at this time.

## Appendix A

### Methods Courses and Research Training in SMS

Developing methodological skills and research training is a primary component of the MPH degree in Sociomedical Sciences. In fact, a defining characteristic of SMS – and of the larger Mailman School of Public Health - is the diverse methodological training and approaches to research questions taken by faculty members and students. In particular, SMS offers methods courses utilizing quantitative, qualitative, and historical approaches to public health questions. Students should take advantage of these resources within the MSPH by carefully planning methods courses during their first or second semester in the program.

Methods courses offer students specific skills to effectively collect and analyze data on their substantive topic of interest. Regarding degree requirements, methods courses are important because they provide research skills that can be applied during the Practicum and towards the Master's Integrative Project (MIP). Additionally, research skills learned during methods courses are of great interest to potential employers who may seek to hire an MPH. to develop an intervention, evaluate a program, or create a survey, for instance.

Each track within the SMS MPH program – Health Promotion, Social Science Research, History, Aging, Urbanism and the Built Environment, and Sexuality and Health – offers students a number of electives depending upon the track. With the exception of the Social Science Research track – which specifically focuses on methods training as a substantive focus – students in each track should consider taking at least one of their electives as a methods course.

Currently, SMS offers an introductory research methods course each spring semester entitled **Introduction to SMS Research Methods (P8774)**. While a required course for the Social Science Research track, students in other tracks should consider taking this course in the Spring semester of their 1<sup>st</sup> year to develop an understanding of quantitative and qualitative approaches to public health research. Following this course, students may wish to take additional methods courses in the areas of **research design, quantitative methods, qualitative methods, or historical methods**.

Students interested in **research design** should consider the following courses:

- SMS Research Methods (P8774)
- Seminar in Program Evaluation (P8705)
- Qualitative Research Design in Public Health (P8785)
- Design and Conduct of Observational Epidemiology (Epi) (P8438)
- Statistical Computing with SAS (P6110s)

Students interested in **quantitative methods** should consider the following methods courses:

- Use of Large Scale National Data Sets (P6781)
- Applied Regression Analysis (P8100)
- Survey Research Methods (P8777)
- Selected Problems of Measurement in Epidemiology (Epi) (P8417)

Students interested in **qualitative methods** should consider the following methods courses:

- Qualitative Research Methods (P9775)
- Qualitative Research Design in Public Health (P8785)
- Ethnographic Methods in Health Research (P8786)

Students interested in **historical methods** should consider the following courses:

Quantitative:

- Theory and Methodology in Quantitative Social Sciences (W4010)

Qualitative:

- Oral History Method and Theory (G9920)

Archival:

- A Social History of American Public Health (P8773)
- Race and Public Health in the United States (G8572)
- Historiography: history of medicine and public health (P8716)

As indicated above, students should begin thinking about potential methods courses during their first year in the program. Courses are not always offered each semester or every year so students should also consider taking alternative methods courses if a specific course is not offered during a particular semester. Also, students should ask their academic advisor for assistance in finding or selecting appropriate methods courses.

Below is a description of many of the courses referred to above:

**P6110 Statistical Computing with SAS (3 points)**

Uses of the computer in cleaning, summarizing, and cross-classifying data. Expansion of the material covered in Public Health P6103 - regression, correlation and contingency table analysis, and the analysis of variance - with data analysis carried out using standard statistical packages.

**P6781 The use of large-scale national health care data sets (3 points)**

An overview of research methodology utilizing major publicly accessible large scale health care and social demographic data sets, including federal, state, and local level resources. Covered are (1) variable identifications and definitions; (2) record layouts; (3) data set size and analysis restrictions; (4) variable strengths and weaknesses; (5) research protocol submissions required by agencies for access to confidential data; and (6) data handling methods. These data permit a wide range of research questions to be addressed. This is demonstrated through the presentation of current and recently completed research activities and projects under development. The ability to analyze data at levels ranging from the individual patient to the national population could prove to be a valuable skill as students pursue their public health careers and advanced studies.

**P8705 Seminar in evaluation of health programs (3 points)**

Prerequisite: Public Health P6104 or the equivalent. Overview of basic principles and methods of program evaluation in public health. Students are introduced to essentials of quasi-experimental design and analysis. The course includes examination of both process and outcome evaluation and emphasizes a practical understanding of program evaluation.

**P8716 Historiography: history of medicine and public health (3 points)**

Introduces students to the classic texts and concepts in the field of history of public health and medicine and explores how these texts have structured specific areas of research. Particular attention to (1) changing historical interpretations; (2) historical methods, quantitative and qualitative; and (3) the use of history in the formation and analysis of public policy. Team taught by faculty members in

the program. Each section is led by two faculty members whose scholarship and current research relate to the historical concepts and methodologies that are the focus of the session.

**P8773 A Social History of American Public Health (3 points)**

(Offered on the Morningside Campus at 116<sup>th</sup> Street, History Department)

Provides students with a historical understanding of the role public health practice has played in American history during the 19th and 20th centuries. First, focus is on the social and biological environment and the creation of conditions for 19th-century epidemics of cholera, typhoid, yellow fever, and other epidemic diseases. Second, the course traces the changing urban and industrial infrastructure and their relationship to late 19th- and 20th-century concerns about tuberculosis, industrial illness, and infection. Third, public health practice and public health campaigns are traced, looking at the ways in which social attitudes toward the industrial worker, the immigrant, and the urban environment shaped the field. The class then looks at the boundaries between public health and medical practice and raises questions about their shifting definitions. As lecture topics indicate, the course emphasizes that public health is intimately related to broader social, political, as well as scientific changes overtaking the country and incorporates a very broad range of subjects from changes in urban living and culture through the transformation of the industrial workplace.

**P8774 Introduction to sociomedical sciences research methods (3 points)**

This course provides an overview of the fundamental concepts and components of research methodology as used for social science investigation of public health issues. The focus of the course will be to acquaint students with quantitative and qualitative research methods. It will cover when each method is appropriate, different types of research designs, development of data collection instruments, data collection techniques and the statistical analysis of data. By practicing various parts of the research process, students will gain an appreciation from this course of all components involved in sound public health research.

**P8777 Survey research methods (3 points)**

Overview of methods in survey research. Includes defining the aims of a survey, sampling, question-wording and designing the survey instrument, methods of data collection (including face-to-face and telephone interviewing and mail questionnaire), entry of data, elementary data analysis, and writing the report. The organization of survey research, its uses, and ethical issues are also discussed. Student exercises emphasize learning of practical skills.

**P8785 Qualitative research design in public health (3 points)**

Focuses on the principles and practices of designing social science research in public health, particularly using qualitative methodology. Developing research agendas and undertaking research proposal assessment is becoming an important aspect of many health professionals' work. Principal research design concerns included in the course are: selecting a research topic; developing and clarifying specific research aims and purposes; selecting populations or target groups to be involved in the research; identifying audiences; assessing resources; nominating research outcomes and applications; project planning and data management; dissemination of findings. Key issues discussed include: capacities and objectives of qualitative social research; multi-method research; and the relationship between difficult health problems and feasible research projects, including collaboration with affected communities. Students will begin to develop their own research proposals during the course in preparation for subsequent intensive methods training in the second course in the sequence - P8786 'Ethnographic methods in health research.' The course utilizes case studies in qualitative research, particularly from the HIV/AIDS, sexual health and related fields.

**P8786 Ethnographic methods in health research (3 points)**

Offers advanced training in the use of ethnographic methods in health research. Explores a range of different qualitative research methods, including participant observation, in-depth interviewing, oral histories, life histories, and case studies, and examines the ways in which these methods can be employed in developing ethnographic studies. Readings draw on different methodological texts and guidelines, as well as a range of published ethnographic studies of different health issues in order to illustrate the use of different approaches. Students are also expected to carry out hands-on observation and interviewing on a regular basis, and receive feedback from the instructor and other class participants on field notes, analysis, and interpretation of ethnographic data.

**P9775 Qualitative research methods** (3 points)

Survey of methods employed in qualitative research. For each of the methods of interest, examines the technical problems of data collection, the kinds of data that are collected, and the strategies for data analysis. Major emphasis is on understanding the rationale for selecting a particular method of qualitative research to answer a specific research question. Methods discussed include: direct observation in field settings, focus groups, individual life story interviews, family and group interviews, historical analysis, and literary analysis.

**W4010 Theory and Methodology in Quantitative Social Sciences** (4points)

(Offered on the Morningside Campus at 116<sup>th</sup> Street, History Department)

This course exposes students to the basic quantitative and mathematical methods used in the social sciences and describes how quantitative methodology is applied to solve problems in the social sciences. The economics material normally covers empirical applications of micro-and macro-economic theories or introduce game theory (for example, for setting of prices or labor patterns); and experimental economics. The historical material normally compares the more traditional historiography with contemporary theories and methodologies since the turn of the century; explore the history and modes of analysis relevant to demographic history; and examine the specific analytical tools used in this and other fields. The political science material might include topics such as the normative methods and the spatial (Downsian) model of voting; game theory as applied to international relations; the use of opinion polls by political scientists and politicians, and the question of when it is appropriate to use available data and when it is appropriate to use available data and when it is necessary to gather additional data (for example, a focus group). The psychology material usually covers the psychological principles of approach/avoidance that underlie judgment and decision making; cognitive and motivational variables underlying preferences and attitude change; social psychological determinants of social influence and persuasion. The sociological material usually covers Markov and semi-Markov models of occupational change; strategies in the analysis of personnel data from large corporations: the determinants of promotion and departure from different grade levels; or formulations of attitude change that have been used in the analysis of advertising data as well as demographic models.

**G8572 Race and Public Health in the United States** (4 points)

(Offered on the Morningside Campus at 116<sup>th</sup> Street, History Department)

This course will offer varying interpretations of the history of race and public health in the United States. Students will examine issues dealing with epidemic and chronic disease, substance abuse, public health policy, and urban politics, among others. The texts elected in no way represent the full spectrum of this history - the field has grown rapidly in the past decade. Rather than a "comprehensive knowledge" of race and public health in the United States, a grasp of historical methods will be gained through the readings. In this sense, students will end the semester well prepared to tackle problems pertaining not only to public health, but to larger policy issues as well.

**G9920 Oral History Method and Theory** (4 points)

(Offered on the Morningside Campus at 116<sup>th</sup> Street, History Department)

Each fall the Columbia University Department of History offers a graduate level multidisciplinary methods seminar in Oral History Method and Theory. The seminar is a four credit research seminar organized as a combination of research and fieldwork. The seminar is open to graduate students across the disciplines who are interested in the historical uses of oral history testimony and literature for the purposes of fieldwork and interpretation. Discussions will include topics on ethics, the relationship between memory and history, and the multidisciplinary uses of oral history.

## Appendix B

### Department of Sociomedical Sciences

#### MIP Faculty Sponsors

Abraido-Lanza, Ana (af17), Associate Professor of Sociomedical Sciences (Ph.D. - Psychology). The health of Latino populations in the United States; socioeconomic status and health; breast and cervical cancer screening; acculturation theory; psychological adjustment to chronic illness, especially arthritis; psychological thriving; social support and coping with illness; social roles and identity theory; health disparities between Latinos and non-Latino whites.

Aidala, Angela (aaa1), Associate Research Scientist (Ph.D. - Sociology). Micro (individual dispositions, beliefs, choices) and macro (cultural systems, economic structures) interlinkages in the etiology and impact of drug use, health, and illness behaviors; the family and intergenerational relations; research methodology.

Arons, Raymond R. (rra1), Associate Clinical Professor of Sociomedical Sciences (Dr.P.H.; M.P.H. Health Policy). Teach the use of large-scale health care data sets to analyze current state hospital discharge abstracts and NCHS/CDC survey data to measure the mortality, morbidity, and wellness of our nation; provide tutorials in SAS and SUDDAN so that students can study multi-stage complex survey design.

Bayer, Ronald (rb8), Professor of Sociomedical Sciences (Ph.D. - Political Science). Ethical and social policy issues in health; AIDS and screening for AIDS.

Berkman, Alan (ab376), Assistant Professor of Clinical Epidemiology and Clinical Sociomedical Sciences (MD). Global AIDS epidemic; integration of HIV prevention and treatment in poorly resourced settings; social mobilization for community health, HIV and the mentally ill.

Boccher-Lattimore, Daria (dmb82), Assistant Professor of Clinical Sociomedical Sciences (Dr.P.H. - Sociomedical Sciences). Adolescent health; health services for underserved populations; ethics in primary care; and primary care practice based research.

Boden-Albala, Bernadette (bb87), Assistant Professor of Sociomedical Sciences (in Neurology) (Dr.P.H - Sociomedical Sciences). Social epidemiology of stroke and cardiovascular disease; preventive and compliant health behavior; the urban social environment and health; community-based participatory research.

Bylund, Carma (clb2111), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. – Communication Studies). Physician-patient communication; evaluation of graduate medical education; family communication and health.

Caton, Carol (clc3), Professor of Clinical Sociomedical Sciences (in Psychiatry) (Ph.D. - Sociology). Epidemiology of homelessness, drug use, and severe mental illness, psychosocial and family studies of people with severe mental illness; evaluation of community mental health and substance abuse treatment programs.

Colgrove, James (jc988), Associate Research Scientist (Ph.D. – Sociomedical Sciences), History of vaccination; history of government responsibility for public health; the relationship between individual rights and communal responsibilities from the 19th century to the present; the role of the law and other forms of coercion in public health; ethical issues in public health; harm reduction and substance use policy.

Covey, Lirio S. (lsc3), Associate Professor of Clinical Psychology (in Psychiatry and Sociomedical Sciences) (Ph.D. - Psychology). Epidemiology of tobacco use, nicotine dependence, and psychiatric co-morbidity; nicotine dependence treatment research; tobacco use and treatment among racial/ethnic minority smokers; harm reduction approaches for smokers; genetic factors in nicotine dependence; international tobacco research.

di Mauro, Diane (dd2041), Assistant Professor of Clinical Sociomedical Sciences (PhD. - Social Psychology). Social policy and sexuality; sexuality and reproductive health; sexuality research; gender and sexuality; adolescent sexuality; developmental issues of sexuality; cross-cultural issues and sexuality;

Durrah, Tracy (tld5), Assistant Professor of Clinical Sociomedical Sciences (Dr.P.H. - Sociomedical Sciences; M.P.H. - Health Policy & Management). Social and behavioral aspects; gender and ethnic differences of drug use, HIV/AIDS risk, sexual victimization, and mental illness in underserved communities; women's health issues; survey research methodology.

Evans, David (de8), Professor of Clinical Sociomedical Sciences (in Pediatrics) (Ph.D. - Sociology). Health behavior change interventions; health education for family management of childhood asthma; teaching communication and health behavior intervention skills to physicians and nurses; risk factors for developing asthma.

Fagan, Jeffrey (jaf45), Professor of Sociomedical Sciences (also Epidemiology) (also Law) (Ph.D. - Policy Science). Antecedents, consequences and social control of violence; drugs, alcohol and violence; adolescent violence and youth gangs; gun use by adolescents; neighborhood effects on violence; treatment of adolescent violence; women and drug selling; waiver of adolescents to adult court; family violence interventions.

Fairchild, Amy (alf4), Assistant Professor of Sociomedical Sciences (Ph.D., MPH). Program in the History of Public Health & Medicine: history and ethics of public health policy (AIDS, TB, immigration, surveillance, harm reduction); history of race and disease.

Fullilove, Mindy (mf29), Professor of Clinical Psychiatry and Clinical Sociomedical Sciences (M.D.). Relationship between the structure of cities and the health of populations.

Fullilove, Robert (ref5), Professor of Clinical Sociomedical Sciences (Ed.D. - Teachers College). AIDS epidemiology effects of racism on health; educational achievement; drug abuse and AIDS risk behaviors.

Gemson, Donald (dhg1), Associate Clinical Professor of Sociomedical Sciences (M.D. - Preventive Medicine; M.P.H. - Sociomedical Sciences). Clinical preventive services; tobacco countermarketing; tobacco control programs; worksite health promotion; preventive health behavior.

Gershon, Robyn (rg405), Associate Professor of Sociomedical Sciences (Dr.P.H.). Occupational and environmental health and safety issues focused on high risk, high stress occupations including health care workers, first responders, law enforcement, and aging workers; hospital safety, including patient safety; emergency preparedness, bioterrorism, weapons of mass destruction.

Hirsch, Jennifer S. (jsh2124), Associate Professor of Sociomedical Sciences (Ph.D. - Anthropology and Population Dynamics). Gender, sexuality, and reproductive health; U.S.-Mexico migration and transnational communities; HIV/AIDS (heterosexual transmission, cultural and political-economic approaches); the application of anthropological theory and methods in public health; faith-based approaches to public health.

Hopper, Kim (hopper@nki.rfmh.org), Professor of Clinical Sociomedical Sciences (Ph.D. - Sociomedical Sciences/Medical Anthropology). Homelessness; the "de facto" public mental health system; recovery from severe psychiatric disorders; ethnographic methods; ethics and research.

Indyk, Debbie (d\_indyk@hotmail.com), Lecturer (Ph.D.). Development and evaluation of systems of care and prevention; grass roots knowledge production; service driven research on prevention.

Kandel, Denise (dbk2), Professor of Sociomedical Sciences (in Psychiatry) (Ph.D. - Sociology). Epidemiology, antecedents and consequences of drug use and dependence, in particular tobacco; ethnic differences in smoking; effects of prenatal tobacco exposure on offspring conduct problems and substance use; adolescent problem behaviors and psychosocial development; depression in adolescence and early adulthood; interpersonal influences on behavior; cross-cultural studies.

Kirchner, Corinne (c k12), Lecturer (Ph.D. - Sociology). Disability and rehabilitation; health professions; health services delivery.

Klitzman, Robert (rlk2), Associate Professor of Clinical Psychiatry (in Sociomedical Sciences) (M.D.). Disclosure of HIV status; disclosure and privacy of genetic and other health information; physician-patient communication and relationships; bioethics; cultural and policy responses to epidemics; communication of gay men and lesbians with health professionals; use of club drugs among gay men.

Kukafka Rita (rk326), Assistant Professor of Sociomedical Sciences and Medical Informatics (DrPH - Sociomedical Sciences). Hhealth behavior; public health informatics; health communication campaigns; computer mediated and tailored health communication; end user and organizational acceptance of information technology; representation of public health concepts for computer information systems; consumer health informatics.

Kunzel, Carol (ck60), Associate Professor of Clinical Sociomedical Sciences and Dentistry (Ph.D. - Sociology). Clinician behavior; social-behavioral models of clinical decision-making; diffusion of innovation; adherence to clinical guidelines; early oral cancer detection; access of HIV+ patients to dental care; sociology of the professions.

Kwate, Naa Oyo A. (nak2106), Associate Research Scientist (Ph.D. - Clinical Psychology). African American health; multiple levels of racism as health determinant; racial/cultural identity; dietary behavior; intersection of individual and macro-level variables in health; sociocultural construction of illness and health

Lapp, Ian (il2011), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology). Dynamics of social inequality in terms of gender, race, class and sexuality; organization theory; health communications; qualitative methods; innovations in teaching and learning; curriculum development for public health

Lekas, Helen-Maria (hl11), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology). The impact of class, race and gender on health issues; vulnerable populations, such as, the poor, homeless persons, substance users and those with a mental illness; living with chronic illness with a focus on HIV, cancer and mental illness; ethnography and other qualitative methods.

Lennon, Mary Clare (mcl3), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology; M.S. - Biostatistics). Socioeconomic status and health; social and health policy; child well-being; gender; work and mental health; evaluation research.

Lerner, Barron (bhl5), Associate Professor of Medicine and Sociomedical Sciences (M.D., Ph.D. - History). Historical and ethical issues in breast cancer screening and treatment; history of tuberculosis and noncompliance; history of informed consent; biomedical ethics.

Lewis, Linwood J. (lj170), Adjunct Assistant Professor of Clinical Psychology (in Psychiatry and Sociomedical Sciences) (Ph.D. - Developmental Psychology). Developmental aspects of gender, sexuality and sexual health; HIV/AIDS; multicultural issues in provision of genetic services.

Link, Bruce (bgl1), Professor of Epidemiology (in Psychiatry) (also Sociomedical Sciences) (Ph.D.). Socioeconomic status and health, the stigma of mental illness, violence and mental disorders; homelessness and health, public conceptions of mental illness.

Litwak, Eugene (el12), Professor of Sociology and Sociomedical Sciences (Ph.D. - Sociology). Informal social supports, formal organizations, social gerontology; health promotion and disease prevention.

Mellins, Claude Ann (cam14), Associate Professor of Clinical Psychology (in Psychiatry and Sociomedical Sciences) (Ph.D. - Psychology). Child and family mental health; maternal and pediatric HIV; psychosocial predictors of adherence to treatment.

Merritt, Brenda (bjmerritt@optonline.net), Assistant Clinical Professor of Medicine and Sociomedical Sciences (M.D.). Homelessness; medical care for the homeless; AIDS; mental illness; substance abuse.

Merzel, Cheryl (cm449), Assistant Professor of Sociomedical Sciences (Dr.P.H. - Sociomedical Sciences). Access to health care; community-based health promotion; community-based research; maternal and child health; urban health care policy.

Messeri, Peter (pam9), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology). Relationship between health promotion and primary group structure; etiology of drug use; evaluation of HIV/AIDS service delivery program; interorganizational theory; evaluation of community level health and disease prevention interventions; health services research; tobacco control.

Meyer, Ilan (im15), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - Sociomedical Sciences, Social Psychology). Minority health issues; health psychology; stress, identity and illness; identity structures, prejudice and discrimination; the impact of minority stress related to prejudice on mental health; methodological issues in the study of lesbian, gay, and bisexual populations.

Miller, Patricia (pam11), Assistant Professor of Clinical Occupational Therapy (Ed.D., OTR, FAOTA). Fall prevention of older adults, with emphasis on mitigating/eliminating fear of falling; primary and secondary prevention for community dwelling elders; program development in community agencies serving elders.

Millery, Mari (mm994), Associate Research Scientist (Ph.D. - Psychology). Applied social science research; program evaluation; drug use and abuse; AIDS; adult development and adult education; social informatics; capacity building; integration of quantitative and qualitative methods.

Moon Howard, Joyce (jmh7), Assistant Professor of Sociomedical Sciences (Dr.P.H. - Sociomedical Sciences). Preventive health behavior; housing and health and the impact of community environment on health, especially in minority communities; delivery of health services and evaluation of health programs.

Munoz-Laboy, Miguel (mam172), Associate Research Scientist (Dr.P.H. - Sociomedical Sciences). Gender, sexuality and sexual health; urban youth; health promotion and disease prevention; research methods; Latino populations.

Murrman, Marita (mkm27), Assistant Professor of Clinical Sociomedical Sciences (Ed.D. - Health Education). Multi-level program/intervention design; competency-based curriculum design and evaluation (for programs in the U.S., South Africa and Kenya); health promotion and disease prevention; TB and HIV/AIDS; public health workforce development.

Nathanson, Constance (can2002), Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology). Comparative cross-national politics and sociology of public health; health-related social movements; gender and sexuality; gender and health outcomes; reproductive health; sociology of health and medicine.

Nizamuddin, M. (mn2068), Clinical Professor of Sociomedical Sciences (Ph.D. - Population Studies/Demography). The demographics of aging: the impact of rapid shifts in the age structures on health, poverty, gender and public policy in developing countries; field studies on ADL and related issues; concerns of aging populations in developing countries.

Northridge, Mary (men11), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - Epidemiology; M.P.H. - Environmental Health). Environmental and social epidemiology; joint urban planning and public health research and practice; community-based participatory research; environmental racism; women's health.

Oppenheimer, Gerald (go10), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - History; M.P.H. - Epidemiology). History of HIV/AIDS; history of public health; history of epidemiology, particularly heart disease epidemiology; history of social medicine; history of race and research.

Padilla, Mark (mbp2106), Assistant Professor of Sociomedical Sciences (Ph.D. - Anthropology; M.P.H. - International Health). Medical anthropology; international health; HIV/AIDS; Latin America and the Caribbean; globalization/transnationalism; Latino health issues; international sex work and sex tourism; tourism and development studies; political economy of health; the relationship between anthropology and behavioral interventions; and applied anthropology in public health.

Parker, Richard (rgp11), Professor of Sociomedical Sciences (Ph.D. - Anthropology). Medical anthropology; international health; gender and sexuality; HIV/AIDS; reproductive health and reproductive rights; social movements and community health; Brazil, Latin America and the Caribbean, South Africa, United States.

Phelan, Jo (jcp13), Associate Professor of Sociomedical Sciences (Ph.D. - Sociology). Social and economic inequalities in health and mortality; public attitudes and conceptions about mental illness and homelessness; stigma; social impact of the genetics revolution.

Pretter, Sheindy (sp431), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. - Psychology). Health psychology; stress and coping; aging and public health; familial caregiving in chronic illness; grief and bereavement; post-traumatic growth; women's health issues.

Raveis, Victoria (vhr1), Associate Professor of Clinical Sociomedical Sciences (Ph.D. - Sociology). Psychosocial and behavioral aspects of health; informal and familial caregiving in chronic illness; health-related quality of life; end-of-life issues; palliative care; grief and bereavement; life-course issues; midlife transitions, aging and public health.

Rosner, David (dr289), Professor of Sociomedical Sciences (also History) (Ph.D. - History). History of public health; history of urban health; race and mental health; occupational and environmental disease; health in New York City; history of hospitals and medical care.

Rothman, Sheila (smr4), Professor of Sociomedical Sciences (in the Center for the Study of Society and Medicine) (Ph.D. - History). Public health genetics; use of race and ethnicity in population genetics; risks and benefits of genetic enhancement; decision-making in organ transplantation; history of tuberculosis and confinement; history of death.

Samples, Faith (fls13), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. - Program Evaluation and Planning). Social and behavioral development of children and youth at-risk for maltreatment and exposure to familial and community violence; program evaluation; adolescents substance abuse; conceptual models for the relationship between risk and protective factors; and developmental outcomes among adolescent mothers and their children.

Sandfort, Theodoros (tgs2001), Associate Professor of Clinical Sociomedical Sciences (in Psychiatry; Ph.D. - Social Psychology). Sexuality, gay and lesbian issues; sexual risk behavior; sexual health and sexual health promotion.

Schluter, Daniel (dps2), Associate Research Scientist (Ph.D.-Sociology). Behavioral aspects of HIV/AIDS; program evaluation; clinical healthcare treatment guidelines; health services research methods; sexuality.

Sell, Randall (rls39), Assistant Professor of Clinical Sociomedical Sciences (Sc.D. - Health Policy - Behavioral Sciences). Lesbian, gay, bisexual and transgender health; health measurement; economic evaluations of health interventions including cost-effectiveness, cost-utility, and cost-benefit analysis.

Shelley, Donna (drs26), Assistant Professor of Clinical Sociomedical Sciences (MD, MPH). Community based tobacco control interventions; tobacco control policy; cessation in disparate populations.

Siegel, Karolynn (ks420), Professor of Sociomedical Sciences (also Social Work) (Ph.D. - Sociology). Psychosocial oncology; psychological adjustment to chronic or life threatening illness; AIDS; childhood bereavement; stress and coping; illness and mental health; aging.

Tepper, Lynn (lmt1), Associate Clinical Professor of Behavioral Sciences, and Director of Behavioral Sciences Program at SDOS (Ed.D. - Developmental Psychology/Gerontology). NIH grantee: Minority elderly; tobacco cessation interventions; multidisciplinary collaboration in health promotion for the elderly; geriatric dentistry; caregiving stress.

Turner, J. Blake (jbt12), Associate Research Scientist (Ph.D. - Sociology). Social factors in mental health and illness; social inequality and mortality/morbidity; measurement issues in stress research; combat exposure and PTSD in Vietnam veterans; economic stress (macro-economic change, occupational trajectories, financial events) and public health.

Vance, Carole S. (csv1), Associate Clinical Professor of Sociomedical Sciences (Ph.D. - Anthropology; M.P.H. - Epidemiology); Director, Program for the Study of Sexuality, Gender, Health, and Human Rights. Also appointed in Department of Anthropology and Columbia Law School. Sexuality and human rights; medical anthropology; sexuality and policy; sex and representation; sexuality and globalization; ethnographic methods; gender and health; United States; India.

VanDevanter, Nancy (nlv1), Associate Professor of Clinical Sociomedical Sciences (Dr.P.H.). Community based participatory research; community, provider, individual, media and policy interventions for health promotion; general health promotion; adolescent health; women's health; tobacco control; medication adherence; qualitative methods.

Watkins, Beverly (bxw1), Assistant Professor of Clinical Sociomedical Sciences (Ph.D. - History). Urban/ethnic social and cultural history; social, cultural and environmental determinants of health; racial/ethnic health disparities; neighborhood effects; minority aging; historical and qualitative research methods.

Weisman, Jeb (jw2199), Assistant Clinical Professor of Sociomedical Sciences (Ph.D. – Anthropology). Electronic health record representations of the body; disaster preparedness and vulnerable communities; novel hybrid organic-inorganic information networks; new media and health promotion; consumer health information systems.

## Appendix C Frequently Used Contacts

<b>Sociomedical Sciences, Administration</b>		
Richard Parker, Ph.D., Department Chair	305-3616	rpg11@columbia.edu
Ilan Meyer, Ph.D., Associate Professor of Clinical Sociomedical Sciences and Deputy Chair for MPH Program	305-1952	im15@columbia.edu
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Andrea Constancio, MPH Program Coordinator	342-0287	ac995@columbia.edu
<b>SMS Track Directors</b>		
Miguel Munoz-Laboy, Health Promotion	342-0285	mam172@columbia.edu
Randy Sell, Social Science Research	305-3457	rls39@columbia.edu
Amy Fairchild, History & Ethics	305-1724	alf4@columbia.edu
Vicki Raveis, Aging & Public Health	304-5563	vhr1@columbia.edu
Lourdes J. Hernandez-Cordero, Urbanism	740-7292	ljh19@columbia.edu
Mindy Fullilove, Urbanism	740-7292	mf29@columbia.edu
Theo Sandfort, Sexuality & Health	543-5925	tgs2001@columbia.edu
Mark Padilla, Global Health	305-1077	mhb2106@columbia.edu
<b>Office of Student Affairs, Administration</b>		
Dr. Ngina Lythcott, Vice Dean and Dean of Students	305-3852	n1227@columbia.edu
Wendy Vidal, Assistant to the Dean	305-7376	wt2008@columbia.edu
<b>Office of Student Academics Affairs / Student Life</b>		
Brian Paquette, Assistant Dean & Director	305-4071	bp29@columbia.edu
Moira Walter, Associate Director	305-0541	mdw2@columbia.edu
Marlyn Delva, Assistant Director	305-3067	mmt22@columbia.edu
Lillian Morales, Coordinator, Records and Standards	305-8690	lm31@columbia.edu
<b>Office of Student Financial Services: Financial Services</b>		
Urbano Graza, Assistant Dean and Director	305-4113	utg1@columbia.edu
Tarin Almanzar, Assistant Director	305-4113	ta169@columbia.edu
Charles Liriano, Administrative Clerk	305-4113	cl2281@columbia.edu
<b>Office of Career Services</b>		
Tanya Cobbs Leslie, Assistant Dean and Director	305-1548	tccl@columbia.edu
Phyllis E. Hulen, Assistant Director	305-3803	peh2@columbia.edu
<b>Office of Alumni Affairs</b>		
Ginny Carolan, Director	305-6083	vc7@columbia.edu
<b>Office of Student Administrative Services: 650 West 168th Street, Room 141</b>		
Registrar Services (Transcripts)	305-3992	
Student Account Services (Billing)	305-3633	
<b>Telephone Registration Services</b>		
Registration (use your CUID/SS# & PIN)	854-8282	
Registration Appointments (use your CUID/SS#)	854-4488	
Course/ Grade Inquiries (use your CUID/SS# & PIN)	854-7373	
Hold Inquiry (use your CUID/SS#)	854-6464	
Other Registration Questions	854-4400	