

**CALIFORNIA STATE UNIVERSITY, LONG BEACH**  
**Health Science Department**  
**Graduate Program in Health Education**

Welcome to the Graduate Program in Health Education. The faculty members look forward to working with you as you progress toward your graduate degree. In order to assist you in this process, this brief guide to graduate study in the department is designed to provide you with basic information which may be useful to you. The guide is intended as a general resource to help you negotiate the myriad of detail and information you will need to successfully complete your degree.

In addition to this document, you should also possess a current copy of the CSULB Catalog and the Schedule of Classes which give you substantially more information about the university calendar, policies governing academic programs including graduation requirements, degree requirements, faculty, support services available to students including library services, and brief descriptions of the curriculum. The Schedule of Classes is particularly useful for planning each semester's schedule and for making sure that specific university deadlines are met.

The guide is divided into a number of sections that attempt to logically take you through your career as a graduate student in the program.

**Mission Statement of the Health Science Graduate Program**

The mission of the Health Science Graduate Program is to educate and develop public health professionals to be leaders in serving the health promotion and disease prevention needs of diverse local, regional, national, and international populations. The Health Science Graduate Program emphasizes the acquisition of public health skills, which are experience-based and multidisciplinary in nature, and built on a solid foundation of health education. Health Science faculty members, acting as collaborative partners in all program endeavors, instruct and mentor graduate students in a wide variety of academic, research, and community service activities and settings.

**Major Goals of the Health Science Graduate Program are to ensure that Health Science graduates:**

1. Develop a mastery of public health and health education knowledge and skills.
2. Are prepared to practice public health with a clear vision of values and ethics that will define their practice.
3. Are prepared to assume leadership roles in a wide variety of public health and health care settings.
4. Develop research skills.
5. Through their collaborative experiences within the graduate program, learn the skills to adopt a collaborative model for use in their public health practice.

**Objectives for both the MPH and MS Degrees are:**

**Graduates will demonstrate:**

1. A mastery of public health knowledge and skills, including community organization, community assessment, program planning, implementation/service delivery, and evaluation; theories of health behavior change; and the concepts and interventions for health promotion/disease prevention.
2. A mastery of competencies relevant to quantitative disciplines such as biostatistics and epidemiology.
3. A mastery of skills that are required to use electronic media as currently employed in the public health field.
4. Knowledge of the values and ethics that guide decision making in the practice of public health, and implications of these for public health policies.
5. A knowledge of multicultural influences on health and health behavior change.
6. A mastery of fundamental research skills through involvement in research activities, including research design, implementation, analysis and reporting.
7. Completion of a community-based internship in which Health Science students will gain an understanding of public health service and the role of the health educator.
8. Collaboration skills through their involvement in the Graduate Student Association, graduate committees, interactions with faculty and the internship experience.

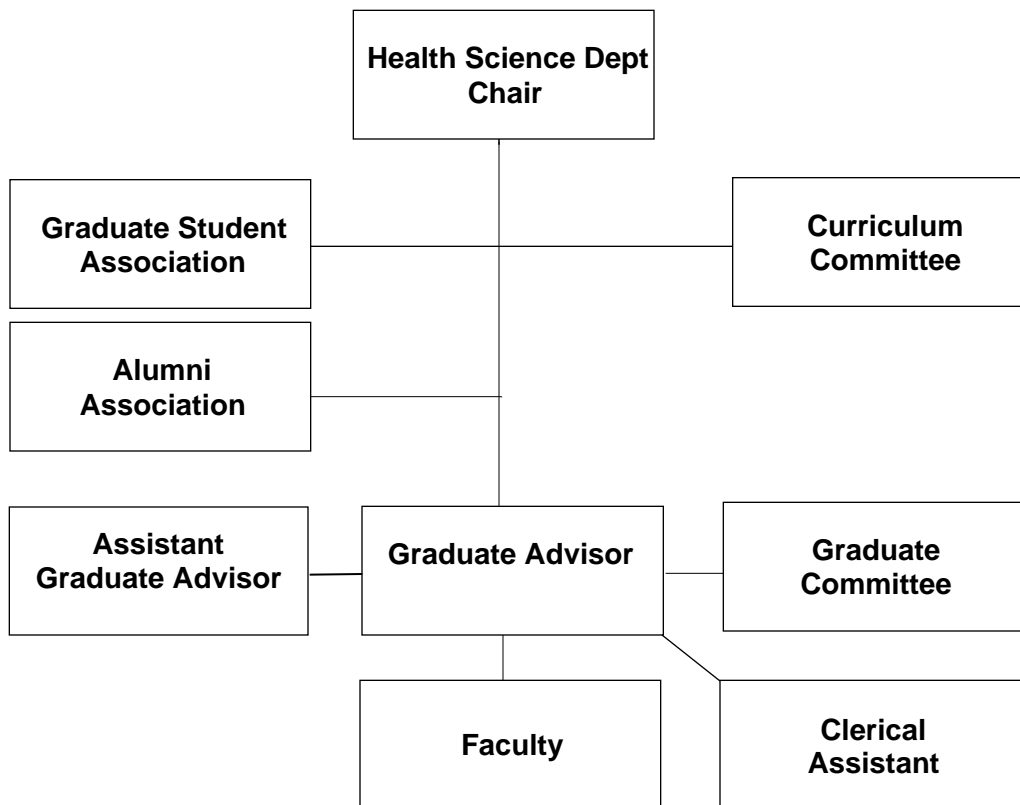
**Objectives for the MPH degree:**

Graduates will demonstrate practical knowledge for careers in an applied health education setting, in academics or for the pursuit of further education.

**Objectives for the MS degree:**

Graduates will demonstrate advanced quantitative skills.

## Graduate Program Organization



The chair—the elected academic leader of the department faculty—maintains executive responsibility for developing, planning, and administering all of the department’s academic programs. The chair delegates administrative authority for departmental programs. For example, the department chair appoints the graduate advisor who is administratively responsible to the chair. The graduate advisor maintains program oversight, as well as primary responsibility for advising graduate students. Some other coordinating functions include graduate student recruitment, reviewing, evaluating and deciding on applications for admission, advancing students to candidacy, and conducting the MPH comprehensive examination.

Since spring 1998, the program has added a position of assistant graduate advisor. This position was added in order to cope more effectively with the administrative functions of the program. In addition, the position provides greater responsiveness to the advising needs of the program’s graduate students.

A departmental graduate committee and all graduate faculty members assist the advisor in the program’s operation. The graduate committee, which is comprised of three or more graduate faculty, provides input to the graduate advisor regarding such matters as admission policies, curriculum design, and conduct of the MPH comprehensive examination.

## **Relationship between Graduate Program and Other Departmental Units**

The Community Health Education Graduate Program, housed within the Department of Health Science, offers both the MPH and MS degrees. The departments of Health Science and Nursing sponsor a joint MSN/MPH program. The department also confers a BS degree in Health Education, with specializations in Community Health Education, School Health Education, the Health Care Option and Teacher Credentialing Program. There is also a BS degree program in Radiation Therapy.

## **Interdisciplinary Coordination and Collaboration**

### 1. MSN/MPH Program

The MSN/MPH program maintains a joint Health Science and Nursing Department advisory committee, which is responsible for decision making regarding admissions, advancement of students to candidacy, and curriculum matters.

### 2. The Center for Health Care Innovation

The center provides a forum for faculty members from CSULB and other institutions to conduct and share their research activities. The interdisciplinary center draws upon the expertise of faculty from various departments in the College of Health and Human Service, e.g., Family and Consumer Sciences, Criminal Justice, and Recreation and Leisure Studies. The center involves program graduate students in research, internship projects, and presentations at conferences. Each year, several graduate students participate as center staff and thereby receive vital job experience. For example, program graduates and students are currently collaborating on a research project with the City of Long Beach to prevent teenage pregnancy.

### 3. CSULB-VAMC Joint Studies Institute

The campus-wide CSULB-VAMC Joint Studies Institute promotes collaboration between the university and the Long Beach Veteran's Affairs Medical, which has a major hospital and medical center on property adjoining the university. The CSULB-LBVAMC Joint Studies Institute (Robert Friis, current director) is a unique venture between a federally funded medical center and a state university. Its mission is to explore and promote mutually beneficial activities that improve the quality of instruction at CSULB and cost sharing and cost effectiveness for both institutions. One of its primary goals, most relevant to the graduate program, includes providing educational opportunities for members of both institutions as well as identifying and developing new research opportunities.

The relationship has resulted in numerous research and service opportunities, such as an annual research symposium, patient education, employment, internship, and joint service and activities. Graduate students, along with faculty in the department, have presented joint research projects at the VA/CSULB Research Symposium during the past nine years.

### 4. Community Health and Social Epidemiology (CHASE) Programs

The programs were established in 1999. Dr. Kevin Malotte (new faculty hire) is director and Dr. Robert Friis is co-director. The CHASE conducts health education research programs related to prevention of communicable and sexually transmitted diseases and tobacco usage. The program has several grants that will provide educational and employment opportunities for graduate students. There are approximately ten full time equivalent staff in addition to department faculty members. Two of these staff members are doctorally trained.

5. Faculty textbook on teenage health

The faculty wrote a book on adolescent health entitled Promoting Teen Health, published by Sage Publishing, Inc., 1998. The work presents a compendium of chapters authored by departmental faculty on topics that represent their respective areas of expertise.

6. Radiation Therapy Option

The department collaborates with the Radiation Therapy Option in offering a BS degree. Students who are enrolled in the option take several core courses in the Health Science Department.

### **Community Collaboration**

The graduate program has forged strong relationships with community agencies for internship placement, special projects, and research. Our utilization of the community as a learning laboratory provides an opportunity for the students to serve the community and provides needed services in planning, intervention, and evaluation. Informal relationships exist among the graduate program and the Healthy Kids Coalition of Long Beach, the Metropolitan State Hospital, and other community learning projects. Ongoing research projects exist in collaboration with the Long Beach City Health Department, the Orange County Department of Education, and the San Bernardino Health Department.

### **Definition and Operationalization of Professional Public Health Values, Concepts and Ethics**

The department and program are deeply committed to the transmission of public health values and ethics. This commitment emerges from the program's mission statement as well as from the organization of the curriculum. The full time faculty members of the department reviewed the following statement of values during its fall 1999 strategic planning meeting.

Values are expressed in the learning objectives stated for program courses and are also nurtured through research projects and the internship. The program strives to develop leaders who serve the community with respect to health promotion and disease prevention. The program emphasizes collaborative, multidisciplinary learning among students and faculty. It has a unique focus upon diverse, multicultural populations. Examples of program values (as expressed in learning objectives) include:

1. The observation that disease, disability, and death in communities have social distributions. For example, due to the influence of socioeconomic factors, some groups may be at lower and higher risk of morbidity and mortality. A host of influences including culture, economics, political organization, social inequality and other factors play a role in health status, and these must be considered when designing health promotion and disease prevention programs.
2. The model of primary prevention of disease suggests that primary prevention may be more efficacious and economically beneficial than secondary or tertiary prevention. Enlightened public health leaders who design preventive programs should engender social action to effect primary prevention efforts.
3. A rational and cost-effective basis for public health planning requires the development of surveillance systems. Examples are vital statistics and disease registries. The data can then be related back to high risk groups and high prevalence areas in order to target interventions most effectively.

4. Effective interface among constituencies interested in health at various levels is necessary to control health problems and bring about optimal health. Some of the levels include various divisions of government such as local, state, and national. Officials and public health experts at all levels need to work together cooperatively in order to achieve maximum gains.
5. Attempts to modify risk behaviors can take place as a result of community health interventions. Examples include California's smoking cessation efforts (through Proposition 99), which have used media strategies effectively. Informatics technologies will play an increasing role in community health interventions.
6. Lack of adequate and equitable access to preventive and primary health care (and to cost-effective secondary and tertiary medical interventions) often represents a threat to the health and well-being of the entire community and not simply to the persons denied health services.
7. Changes in support for the health care system, including the growing impact of managed care organizations (such as the CalOptima program) which will have impacts on the role of the public health worker.
8. Public health research and intervention programs must take care to follow the principles of ethical conduct. This consideration involves maximizing the benefits of research to the individual and society.
9. Good public health practice and research emphasizes the involvement of community members throughout the process. Community practitioner partnerships have benefits for both the practitioner and the community. For example, partnerships between researchers and community members can facilitate the definition of important health issues and concerns, the development of measurement instruments that are culturally appropriate, and the establishment of trust that will enrich the value of the data collected.

### **Policies Illustrative of the Program's Commitment to Fair and Ethical Dealings**

The Graduate Health Education Program's admission policies and practices strictly adhere to affirmative action and non-discrimination policies developed by the university. The CSU system mandates equitable and objective treatment of program applicants as well as admitted students. The department, program, college, and university are committed to fostering success and diversity among graduate students. Admissions policies are developed by the faculty as a whole and are published in the Graduate Handbook and disseminated in the Graduate Brochure and Admissions Packet, which is mailed to all persons who inquire about the program.

The department and the program strongly promote an environment of respect for others. These values are announced to students upon admission and reinforced through published materials and public statements. The department seeks to promote and maintain an opportunity structure that fosters ethnic, cultural, and socio-economic diversity among the students and to maintain a faculty that reflects and supports this diversity.

The department and program also strongly promote an environment of academic integrity. The department adheres strictly to the university's code on academic integrity, which specifies procedures when an instructor assigns a failing grade in response to a violation of academic integrity. These violations are usually addressed at the university level (Division of Judicial Affairs).

## **DEGREE PROGRAMS**

The Graduate Program in Health Education at CSULB is probationally accredited by the Council on Education for Public Health (CEPH). CEPH, a recognized accrediting agency, accredits schools of public health, graduate programs in health education, and graduate programs in community health and preventive medicine. CSULB is one of nine programs in community health education accredited by CEPH.

You have been admitted to the Master of Science (MS) in Health Science degree, the Master of Public Health (MPH) Community Health Education, or the Master of Science in Nursing /Master of Public Health (MSN/MPH). Degree codes are attached to these degrees by the University in order to make sure you are properly tracked. The **MS code is 6-1211**, the **MPH code is 7-1213**, and the **MSN/MPH code is 7-1074**. Please check the official grade sheet you receive or any other University correspondence to make sure that you are properly assigned to the correct major.

The Health Science Department and the Nursing Department worked together to develop the MSN/MPH degree program. This joint degree program requires admission to both the Health Science and Nursing Departments.

## **ADMISSION**

The brochure and related information about the program and faculty are available on the departmental website (<http://www.csulb.edu/depts/hs/htdocs/>).

You have either been admitted as a graduate student in "classified" or "conditionally classified" standing. Classified means that you have met all of the requirements for admission as stated in the University Catalog. Conditionally classified means that you have met most of the requirements of admission, but may need to meet conditions for your continuing status as a graduate student, or, there may be a documentation requirement that must be met in order to become a classified student. Aside from documentation requirements, conditions tend to fall into two categories:

- Conditionally admitted graduate students must maintain at least a 3.0 grade point average in each of their enrolled courses.

**and/or**

- Conditionally admitted graduate students must take certain pre-requisite courses to graduate study.

While the grade point average requirement is relatively self-explanatory, the pre-requisite course requirement is not. Here are some things to remember:

1. There is no set number of pre-requisite courses you must take. That is, the number of courses and which courses are individually determined with the advice of the Graduate Program Director.
2. You do not have to take your pre-requisites before taking any other courses. You may take them concurrently, although it may be best to take a certain pre-requisite course before a certain graduate course.
3. Pre-requisite courses are listed below:
  - CST 200 Introduction to Data Analysis
  - SOC 335 Social Psychology
  - HSC 401 Community Health Education
  - HSC 403 Community Health Statistics
  - HSC 421 Health Behavior

***To maintain your admission status and to graduate, you must maintain a 3.0 grade point average in all courses attempted as a graduate student at CSULB.***

## **ENROLLMENT**

It is always advisable to enroll each semester while pursuing your degree. This allows you to maintain residency at the University. Residency means that your program of study, once specified on the Advancement to Candidacy, remains valid regardless of changes in department or university requirements. Furthermore, continuous enrollment makes it feasible to complete your degree within the seven-year period from the date of admission.

It is possible to take an Educational Leave if needed. Educational Leave forms must be obtained from Enrollment Services and signed by all relevant parties. Leave may be granted for up to one year at a time. A leave extension beyond this limit is possible, but must be requested in writing in advance. Residency is maintained while on Educational Leave. The seven-year time limit to complete your degree continues to run. Students on leave longer than one semester must apply for readmission to the university.

Students who do not enroll for a semester must reapply for admission and pay a reapplication fee. In addition, should degree requirements have changed, it is possible that the student's educational program may be changed. However, residency is maintained if a student enrolls at least once in a twelve (12) month period.

## **CURRICULUM**

The following represent specific learning objectives for each of the graduate degree programs in the program.

### **Master of Science in Health Science**

By the end of the degree program, the successful Master of Science student will be able to:

1. Analyze theories and models from the behavioral and public health sciences for their contributions to health education research and evaluation;
2. Demonstrate competence in research and evaluation through designing an acceptable research project;
3. Explain the public health implications of one area of significance to health education where research would contribute to substantial progress;
4. Explain the relationships among epidemiology, biostatistics, research methods, and the development of and problems with the concept of risk factors;
5. Analyze the differences between entry level competencies for health education and those needed at an advanced level, with particular attention to research and evaluation;
6. Evaluate the need for hypothesis generating research and gaps in health education theories and models;
7. Discuss the implications of one topic, theme, problem, or concept for research and health education program development;
8. Organize relevant behavioral models into a matrix of factors that attempt to explain influences on behavior for a significant public health problem;
9. Describe how the scientific method is employed in applied research typical of public health and health education; and
10. Conduct a thesis to answer an acceptable research question.

## **Master of Public Health in Community Health Education**

By the end of the degree program, the successful Master of Public Health student will be able to:

1. Analyze issues affecting the health education profession and discipline;
2. Develop administrative policies and procedures to insure that health education programs are implemented in a consistent manner and capable of being evaluated;
3. Communicate health education theories, models and concepts to target audiences including policy makers, employers, and the public;
4. Evaluate the efficacy of different health education interventions and methodologies to assure achievement of stated program objectives;
5. Analyze research literature from health education, public health, and other related disciplines for use in advancing health education.
6. Explain the difference between entry-level health education skills and knowledge and those needed at an advanced level;
7. Integrate the scientific foundations of public health in health education programs in a variety of practice settings;
8. Demonstrate competency in applying principles of health education practice to specific target groups;
9. Evaluate gaps in health education theory and practice as they relate to identified public health problems; and
10. Synthesize core public health knowledge and skills with health education competencies to identify areas of needed research and evaluation.

Now that you have been admitted, your most important task is to complete the required and elective courses necessary to be eligible to graduate. The MS degree requires forty-three (43) units, including eighteen (18) units of electives and four (4) units of thesis. The MPH requires forty-two (42) units, including three (3) units of electives and up to six (6) units of internship. The MSN/MPH requires fifty-seven (57) units, with a number of course options aside from required courses. The degree requirements are listed in the University Catalog and will not be delineated here.

There are some important considerations as you select required and elective courses, and as you plan for the number of courses you will take each semester. Most students have significant obligations off campus so they pursue their degrees on a part-time basis. The program attempts to accommodate these realities by typically scheduling classes from 4-6:45PM and 7-9:45PM Monday through Thursday. It may be that a pre-requisite course you need to take will be scheduled during the day. While the program will do what it can to meet your needs, you should plan your obligations with the days and times our courses meet, including pre-requisites.

Note that the program recommends a course of study that involves a minimum of six units per semester. Our recommendation is based upon the timeliness for completion of the MS, MPH or MSN/MPH degrees. Taking fewer than six units each semester will make it difficult to complete the degree within the seven-year time limit. Successful completion of the comprehensive examination for the MPH or the thesis for the MS will also be more difficult.

Full-time graduate study, defined by the University as at least nine (9) units, may be pursued by increasing the number of units each semester. It is possible to complete your degree in as little as two years. To finish your degree in this period, it will be necessary to devote full-time to the internship for the MPH and the thesis for the MS.

## **Electives**

Elective courses may be taken at CSULB or other institutions, with approval. For CSULB courses, any course numbered at the 500 or 600 level are eligible for graduate credit. Courses at the 400 level must have an asterisk (\*) next to the course number to be eligible for graduate credit. Careful selection of electives enhances the MPH or MS experience.

## **Graduate Division Course Descriptions**

### 500./400. Principles of Epidemiology (3)

Prerequisites: H SC 301 And H SC 403. Application of epidemiologic procedures to the understanding of the occurrence and control of infectious and chronic diseases, mental illness, environmental health hazards, accidents, and geriatric problems. (Lecture 3 hours.)

### 503. Advanced Community Health Statistics (3)

Prerequisites: H SC 403 or equivalent. Analysis and interpretation of quantitative health education/public health data. Topics include expanded discussion of parametric techniques (e.g., hypothesis testing, confidence interval estimation, power functions, small sample sizes). Other topics include multivariate analyses, non-parametric tests, regression analysis. Use of computers required. Traditional grading only. (Discussion, 3 hours.)

### 508. Administrative Relationships in Health Education Programs (3)

Prerequisite: Undergraduate major in Health Science or related field. Introduction to administrative theory; investigation of administrative responsibilities and functions implicit in school health or other health education programs.

### 516. Health Promotion in Organizational Settings (3)

Prerequisite: H SC 570. Exploration of health promotion programs in worksite settings, health services, business and industry. Assessment of the organizational climate for health promotion and principles for maintaining program viability and vitality. Strategies for developing and conducting health promotion programs in these settings. Traditional grading only. (Discussion, 3 hours.)

### 524./424. Principles of Asian Health Sciences (3)

Prerequisite: Upper division standing. Presents the philosophical, historical, clinical and scholarly qualities of Asian health sciences to promote health, prevent disease and treat illness. Comparisons are made with selected Asian and western health care systems and individual health practices. Traditional grading only. Same course as A/ST 524./424. (Discussion, 3 hours.)

### 528. Advanced Environmental Health (3)

Prerequisite: H SC 422 or consent of instructor. Organization and methods for promoting human health by controlling environmental factors.

### 535./435. Health Promotion and Risk Reduction (3)

Prerequisites: H SC 421 or consent of instructor. Health promotion/risk reduction program content, development and implementation for use in corporate, hospital and public settings. Intended primarily for Health Science majors. (Discussion, 3 hours.)

### 570. Theoretical Concepts and Issues in Health Science (3)

Identification and analysis of current trends, philosophies, and issues in health science.

581. Curriculum Development in Health Education (3)

Prerequisites: H SC 430, 440. Principles of curriculum development; selection and evaluation of resource materials; theory and practice in measurement in health education.

585. Health Education Internship (1-6)

Prerequisite: Consent of the instructor. Extended applied experience under guidance of faculty and preceptors in an approved health education practice setting. Traditional grading only. (480 hours of field placement or the equivalent experience.)

590. Independent Study (1-3)

Independent research conducted under the supervision of a full-time faculty member resulting in a written report of the investigation. Traditional grading only. Repeatable to a maximum of 6 units with different topics.

624. Seminar in Community Analysis and Program Planning (3)

Prerequisites: H SC 625 or consent of instructor. Process and techniques of community analysis and program planning.

625. Advanced Community Health Education (3)

Prerequisites: H SC 401 or 485; or consent of instructor. Advanced study of educational and related theory applicable to the conduct of health education program in community and other settings. Methods of promoting change; role as program and staff director and evaluation techniques.

626. Integrative Seminar in Public Health (3)

Prerequisites: H SC 570, advancement to candidacy. Summative critical analysis of current methodologies, research, and practices in public health and health education in particular. Synthesis of coursework, internship, and other relevant experiences in the graduate program. Traditional grading only.

696. Research Methods (3)

Prerequisites: Undergraduate major in Health Science or related field; undergraduate course in statistics. Introduction to research methodology in the area of Health Science.

697. Directed Studies (1-3)

Prerequisite: Advancement to candidacy. Independent investigation of research problems in health science.

698. Thesis (1-3)

Prerequisites: H SC 696, advancement to candidacy. Planning, preparation and completion of an approved thesis.

## **ADVANCEMENT TO CANDIDACY**

Advancement to Candidacy is essential to completion of your degree. Advancement is a pre-requisite to enrolling in internship, thesis units, and taking the comprehensive examination. You cannot graduate in the same semester in which you are advanced. In order to Advance to Candidacy, the following must be completed:

1. A minimum of six (6) units of graduate level work with at least a 3.0 GPA
2. Evidence of successfully completing the Writing Proficiency Examination (WPE). University policy now requires graduate students to attempt the WPE in their first semester of graduate work.

Advancement to Candidacy forms are completed by the Graduate Advisor and student. In this process, courses necessary for you to complete the degree are delineated. Depending on the student's career goals, prior professional and academic experiences, and availability of relevant educational opportunities, the program specified may diverge somewhat from that published in the University Catalog.

Once the form has been completed, it must be reviewed and approved by the Associate Dean of the College of Health and Human Services. It is then made part of the student's College and University record. You will receive a copy of the approved Advancement to Candidacy from the Associate Dean.

The program of study specified in the completed Advancement to Candidacy is used by the University to perform a graduation check to determine student eligibility for graduation. Once the Advancement to Candidacy has been completed, it is possible to revise the program of study. Program changes can be made for good reason with the advice and consent of the Graduate Advisor.

## **INTERNSHIP**

The purpose of the internship is to create opportunities for students to apply their knowledge and skills in a practice environment: community agencies, schools, public health departments, medical care organizations, business and industry, and the like. Your internship placement will be dependent upon your prior educational and experiential background in health education. Accordingly, some students will have minimal internship required while others will need to complete 480 hours. Regardless of internship variations, all MPH and MSN/MPH students must complete an equivalent of six units of internship.

Students are eligible to enroll in internship with approval of the Graduate Advisor. Eligibility includes, at a minimum, Advancement to Candidacy, 3.0 grade point average for all courses attempted, and completion of at least half of the required units for the degree.

The graduate program provides students with a variety of opportunities for practice experiences in public health education and promotion. The following is a selected list of agencies and preceptors in southern California used by the program in the last three years. A more extensive list is available in the internship syllabus.

Kaiser Permanente  
PacifiCare  
CSULB Student Health Service  
University of California-Irvine Student Health  
American Cancer Society  
American Lung Association  
American Heart Association  
Arthritis Foundation  
Planned Parenthood, Orange-Riverside Counties  
Southeast Asian Health Project  
Los Angeles County Department of Health Services  
Orange County Health Care Agency  
Riverside County Health Department

## **Other Community Resources for the Graduate Program**

Various community agencies and organizations have been sites for instruction, research and service. The following is a selected list of agencies and preceptors with formal agreements in Southern California with the graduate program in the last three years. A more extensive list is available in the internship syllabus found in the attachments to this self-study. A more extensive list, which continues to grow, is kept in the department.

### **Agencies with Formal Agreements**

United Cambodian Community  
2338 E. Anaheim St. Ste 200  
Long Beach, CA 90804

American Lung Association  
2750 Forth Avenue  
San Diego, CA 92103

American National Red Cross  
3650 Fifth Ave.  
San Diego, CA 92103

Arthritis Foundation  
7675 Dagget St. Ste 330  
San Diego, CA 92111  
Environmental Health Coalition  
1844 third Ave.  
San Diego, CA 92101

March of Dimes  
8133 Clairmont Mesa Blvd., Ste. 101  
San Diego, CA 92111

San Diego State University Center on Aging  
6505 Alvarado Court  
San Diego, CA 92120

Scripps Clinic Health Resource Center  
10666 N. Torrey Pines Rd.  
La Jolla, CA 92037

L.A. County Department of Health Services  
Health Ed./Promotion Program  
550 S. Vermont Ave. 3rd Flr.  
L.A., CA 90020

University of California-Irvine  
Pediatric Injury Prevention and Research  
Irvine, CA 92717

## **Alternative Placement:**

The program has developed alternative placements for students who have considerable health education program experience, defined as ten or more years of professional health education experience. These students may undertake a directed or independent research project with one or more department faculty. Some experienced internship students elect to participate in a teaching experience wherein they assist a faculty member as a teaching assistant in a health education course. As necessary, the program will continue to find acceptable alternatives to the internship for extremely experienced individuals. However, in practice the program uses these alternative placements infrequently.

## **ADVISING**

Matters of application, admission, course selection, advancement to candidacy, theses, and comprehensive examination, among others, are the responsibility of the graduate adviser or assistant graduate advisor. Because of the nature of graduate education and the extensive involvement of our graduate students, it is beneficial for graduate students to routinely consult with the graduate adviser, even when pressing matters are not imminent. This helps in developing internship and thesis research opportunities.

To facilitate advising of incoming students, a new student orientation occurs each semester. The agenda for the orientation includes information available in the Graduate Student Handbook. The handbook was developed to give students sufficient information to help select classes, take care of advancement to candidacy, and to plan for internships as well as the thesis or comprehensive examination. For university and college related information, students can consult the University Catalog. Each semester, the department provides a listing of courses and important deadline dates for the next semester to bring attention to important information. Each semester, students also purchase a class schedule, which goes beyond summary information provided by the department.

Office hours for the graduate advisor and assistant graduate advisor are held during times that are most convenient to the graduate students, many who work during the day. The graduate advisor holds scheduled office hours two nights per week; the assistant graduate advisor has scheduled office hours on alternate evenings. Thus graduate students are able to consult with an advisor on Monday through Thursday during the semester. Since it is not always possible for students to meet during established office hours, telephone consultations or arrangements outside of normal office hours can also be arranged.

The program's faculty members play a significant role in graduate advising. The full-time and part-time faculty have extensive academic and professional experiences in the many facets of public health and health education. Students are encouraged to seek out program faculty members for advise about courses, but also for career, research, and community service opportunities.

Once each academic year, the program sponsors a career and professional forum. Alumni and key individuals from employing organizations are invited to campus to discuss current developments in the field, their careers, and opportunities for employment, professional advancement, and other opportunities. Students are also encouraged to join the local chapter of the Society for Public Health Education (SOPHE). Southern California SOPHE sponsors professional conferences on a regular basis and maintains an active job bank. SOPHE also provides students with an opportunity to network, which may lead to job opportunities. For the past several years, the

president of Southern California SOPHE has been an alumnus of this program. For those with an interest in school health, the program has been consistently involved with the California Association of School Health Educators (CASHE) whose founder is an alumnus of the graduate program. Several past presidents of CASHE have either been alumni of the program or are current part time faculty.

The department maintains an updated job folder for students to review. During the orientation, new students are encouraged to familiarize themselves with current and past positions. In addition, the university provides a career planning and placement services through the Career Development services, for undergraduate and graduate students alike.

## **SUMMATIVE EXPERIENCES**

Each degree has its own summative experiences: A thesis for the MS, a comprehensive examination for the MPH, and a combination for the MPH/MSN. Each has its own guidelines. The following is a brief description of what is involved in each experience.

### **Thesis**

The thesis is a summative scholarly work that gives emphasis to the graduate student's area of specialization in his/her graduate studies. It often relates to the elective courses chosen by the student as part of the Master of Science program of study.

The thesis is intended to allow the student to demonstrate the capacity to identify and define a researchable health education problem, to design a study to address the problem, to carry out the study, and to be able to write up the completed research. Inherently, this is a student driven process undertaken with the assistance of a faculty committee.

MS students select a committee that guides thesis research, with the committee chair a faculty member from the department. Students choose thesis chairs based on the faculty member's research and scholarly activity in an area of interest to the student. Other factors in selection of a thesis advisor include interpersonal compatibility and ability to communicate. Two additional faculty members round out the thesis committee, one from on campus and the other from either on or off campus.

The student needs to prepare a brief synopsis of the proposed research after completing the Advancement to Candidacy and after completing most of the required 43 units for the degree. The University Thesis Manual guides students toward an acceptable format. The university's Human Subjects Review Board must review protocols that involve human subjects. The thesis committee is convened by the student to review the proposed study. If approved, the student has authorization to proceed. The thesis chair serves as the initial reviewer of all student work. Other committee members review preliminary work on an as needed basis.

When the chair and the student come to the conclusion that a workable final draft of the thesis has been completed, a final meeting of the thesis committee is arranged. At that time, the student is carefully and thoroughly examined about the topic, research design, conduct, and results of the thesis. If successful, the student may make recommendations and revisions as determined by the committee, and then submit the completed work in form and format acceptable to the University through the Associate Dean of the College of Health and Human Services. As a student-driven experience, completion by the student is determined by the interest, clarity, manageability, and careful definition and planning by the

student. Above all else, successful completion of the thesis relies upon student determination and persistence.

When the student has met the requirements set forth by the committee chair and committee members, along with university requirements, the completed thesis is forwarded to the Associate Dean of the CHHS for review. The university archivist also reviews the thesis to make corrections in format and grammar. Degrees are not awarded until all parties, including the archivist, have accepted the thesis student's work.

### **Comprehensive Examination**

The comprehensive examination is the culminating experience for MPH and/or MSN/MPH students. It is taken in the last semester of the student's career in the graduate program. This examination requires broad preparation in public health core content areas as well as content specific to health education. Examination questions stress integration of knowledge and skills acquired in individual classes over an extended period.

In anticipation of the examination each semester, the graduate advisor solicits potential questions from faculty members. Editing of selected questions for the examination assures balance and consistency. Faculty members review a draft of the examination and provide input for revision. Faculty members who submitted the relevant question generally grade student responses. Respondent's anonymity is preserved by using the student's social security number as the only identification on the examination. In addition, to standardize examination responses, examinees complete their responses on a computer located in a computer laboratory. Faculty members grading the examination record their evaluation on a scoring form and return the form to the graduate advisor. The grade options for each question are high pass, pass, low pass, or fail. Students must pass a majority of questions to pass the examination. For example, if the examination contains four questions, a student needs to pass at least three questions with a minimum of a low pass on each question. Students who pass two or fewer questions receive a failing score. After the scores have been recorded, students are notified in writing through the university if they passed or failed. If they fail, they have one other opportunity to pass the examination.

It is important for students to know that passing the comprehensive examination is required to earn the MPH degree. Students have two opportunities to pass the exam. Failure on the second attempt precludes awarding the degree. There is no preparation course or sessions. Typically, students retain their course notes, texts, and related materials. They form study groups to review in preparation for the exam, including inviting faculty to discuss specific areas. Examinations used in the past are available for students to review in the office of the Graduate Program Director. These exams cannot be removed or copied.

### **CALENDAR**

It is imperative that graduate students pay close attention to the published calendar that appears in the Schedule of Classes. Each semester, the university identifies dates for items such as registration, beginning of instruction, adding classes deadline, course withdrawal deadlines, filing Request to Graduate, and final examinations. The Testing Office has established dates for the Writing Proficiency Examination, published in the Schedule of Classes.

Additionally, the Department periodically publishes dates for events relevant to graduate students. These include internship meetings, student organization meetings, and career and professional opportunities.

## **ACCREDITATION**

As stated above, the Graduate Program in Health Education is probationally accredited by the Council on Education for Public Health. To maintain accreditation and to serve students better, the program regularly involves graduate students in activities in support of accreditation activities.

### **Student Roles in Program Evaluation**

Graduate students participate in program evaluation in several ways. These methods include student evaluation of instruction, student surveys, and participation in the graduate student organization and graduate program meetings and committees, policy setting and decision making.

One part of the program evaluation involves the university mandate that students rate instructional quality. These student evaluations play a role in faculty retention, tenure, and promotion (RTP) decisions. The university recently enacted a performance salary incentive program, which uses student course evaluations as a component of merit salary increases. Student evaluations of instruction are intended primarily for self-improvement, as they are not shown to others in the department with the exception of the chair and RTP review committees.

Second, the program surveys students about their experiences in the graduate program yearly. Under faculty supervision, students have developed an analytical report from the survey. These data are used to make program modifications.

Finally, student representatives attend departmental faculty meetings and hold Graduate Student Association meetings in order to provide input into the program. While students do not have formal voting privileges, their input is considered essential for program evaluation.

### **Student Participation in Policy-Setting and Decision-Making**

A graduate student representative is encouraged to participate in regularly scheduled faculty meetings. The only exceptions are when personnel matters and matters directly dealing with individual students and student evaluations, such as the comprehensive examination are on the agenda. Students are encouraged and expected to choose a representative. In turn, the representative is encouraged to address student interests to the faculty, as well as participate in the business of the department as it affects students. Student representatives may provide input on topical matters and provide a report from the students at each faculty meeting.

Additionally, graduate students have representation on the department's Graduate Committee. Chaired by the graduate advisor, the Graduate Committee considers items relevant to graduate education and student life and makes recommendations to the faculty for consideration at departmental faculty meetings.

### **Student Organization**

Graduate students in the program have their own student organization, the Health Science Graduate Student Association. The organization is supported by the program and faculty members encourage students to participate. Faculty members participate in student meetings where appropriate. Graduate students meet periodically during the academic year to consider items of interest to students' such as guest speaks, curriculum, advising, listening to presentations by faculty

candidates, and organizing career and professional opportunity forums. On occasion, graduate students collaborate with the undergraduate student organization-the Health Science Student Association. Information is also available via e-mail at [mphgrads@hotmail.com](mailto:mphgrads@hotmail.com) or on the e-bulletin board at [http://on.starblvd.net/meet/csulbMPHstudents\\_care](http://on.starblvd.net/meet/csulbMPHstudents_care).

## **FINANCIAL AID**

Financial assistance is available from the University. Students are referred to the Office of Financial Aid to explore opportunities for support of graduate education. Among the listed opportunities are the following:

- Perkins Federal Loans
- Graduate Equity Fellowship
- University Scholarships
- State Graduate Fellowships
- Federal Staff Loan (GSL)
- Student Part-time Employment

In addition, there are several scholarships and employment opportunities within the Health Science Department. These include:

Gaines Award—provides scholarships to women health science majors, undergraduate or graduate, who are of Native American heritage.

Marion Pollock Scholarship Award—provides scholarships to enrolled students who are advanced to candidacy for the Master of Science degree in health education and are actively engaged in thesis development.

Employment on faculty research projects.

Graduate assistant positions.

## **DEPARTMENT ORGANIZATION**

The following represents the current organization of the department including faculty assigned to various positions:

Department Office: AS2-115  
Telephone: (562) 985-4057  
FAX: (562) 985-2384

Department Chair: Dr. Robert Friis  
Telephone: (562) 985-1537

Director, Graduate Program in Health Education:

Dr. Mohammed Forouzesh (562) 985-4014  
Ms. Toni Espinoza-Ferrel, Assistant Advisor (562) 985-4014

**Program Faculty:**

Dr. Veronica Acosta-Deprez

Dr. Hamid Arabzadeh

Dr. James Ashurst

Dr. Gail Farmer

Dr. Mohammed Forouzes

Dr. Robert Friis

Dr. Sarath Gunatilake

Dr. Alan Henderson

Dr. Julia Lee

Dr. Kevin Malotte

Dr. Britt-Rios-Ellis