Outcomes Assessment Plan:

Name of Program: Ph.D. in Health and Behavioral Science  
Program Director: Debbi Main  
Person Completing Assessment Plan: Debbi Main  
Date: August 11, 2010

1. Programs’ educational goals or objectives:

Health and Behavioral Science offers the Doctor of Philosophy degree (Ph.D.) This degree is designed to give candidates a contemporary, integrated, interdisciplinary education in aspects of health, disease, health promotion, and disease prevention which emphasize the interplay between environment, biology, and culture. The program is designed to prepare students for careers in research, teaching, program evaluation, program delivery, and planned social change relating to behavioral, social, and cultural impacts on health.

2. Student learning objectives:

Knowledge Areas

Students must acquire a thorough theoretical/conceptual, methodologically-based, and practical or operational understanding of at least one of the following four areas:

(1) human ecology and disease causation;
(2) health promotion and disease prevention;
(3) health services research and evaluation; and
(4) global health studies.

In relation to the human ecology and disease causation, Health and Behavioral Science utilizes an integrating perspective in which interest is directed toward: the distribution and determinants of disease; the evolutionary sources of specific diseases; the linkages between organic processes of disease, the behavior of individuals, and communities in which the disease is manifest; the impact of environmental stress or change on health and disease; and the epidemiology of infectious and chronic disease.

Concerning health promotion and disease prevention, the program seeks to assess the influence of social, cultural/ethnic, economic, political, ecological, and cognitive factors in health and disease, at individual, community, and society-wide levels. This requires advanced understanding of theories of illness and help-seeking behavior, health promotion and disease prevention, risk perception, behavior change, social change, community development, health education, and communications research.

Health services research and evaluation is an essential adjunct to the above areas. This aspect of the program emphasizes the sociology of health care institutions, the relationship between culture, access and responses to health care services; health care decision-making and its impact on care, cost and financing; ethical considerations in health care; and the provision of health care to underserved areas and populations. This dimension of the program also examines the scientific rationale for different health care methods and health promotion programs, as well as the analytic methods and research models to assess the process and impact of programs and services. As such, our students gain a solid understanding of both quantitative and qualitative methodologies.

Global health studies applies the above areas of research and theory to understanding and addressing the impact of global interdependence on the determinants of health, the transfer of health risks and the policy response of countries, international organizations and the many other actors in the global health arena. Its goal is the equitable access to health in all regions of the globe. The term International Health has mainly been used to encompass approaches to health problems in developing countries and the flow of resources and knowledge from the developed to the developing world. Global Health in contrast focuses on relationships of interdependence that transcend this division as well as national frontiers and
policy sectors, in particular: the global distribution of health and disease and their determinants; the impact of globalization on health; and the changing nature of global health governance.

**Skills:**

Students must acquire the following skills at a professional level

- An ability to integrate and apply multiple social and behavioral science theoretical perspectives to particular health and health care problems.
- A basic understanding of the broad range of methods and research designs employed in the application the health and behavioral sciences.
- Advanced proficiency in a particular method or set of methods.
- Precision and clarity in the oral and written communication of ideas.

**3. Assessment methods or techniques:** Put a check mark next to the measurement methods that will be used.

**Summary:**

We propose to measure the attainment of program goals by assessing student achievement and success at three points during the graduate program

- At the time of their oral comprehensive examination, when a formal research prospectus is presented to an examination committee; and
- At the time of their dissertation defense
- Annually at a graduate student forum.

- Capstone courses
- Common multisectional course exams and/or specific questions
- Course-based exams or other assessment measures developed by faculty and/or specific questions
- Non-course-based exams developed by faculty and/or specific questions (e.g., exit exams, comprehensive exams)
- External reviewers
- Focus groups
- Internships -- evaluations by supervisors
- Interviews with individual students
- Knowledge surveys
- National licensing exams
- Oral presentations
- Panel discussions
- Performances (e.g., in fine arts)
- Performance assessments
- Portfolios (paper)
- Portfolios (electronic)
- Poster presentations
- Projects
- Students’ self-assessments
- Standardized exams
- Student advisory councils
- Surveys for seniors, graduates, employers
- Videotapes of student presentations
- Written papers or reports
- Other—explain: evaluation of theses/dissertations and periodic surveys of alumni
4. **Sampling**: Describe the sampling methods to be used – i.e., from whom will the assessment data be collected?

Assessment data will be collected for each term from a) all students taking the comprehensive exam; and b) all students submitting and defending a dissertation. Once per year the Program Director will convene a group of graduate students (all will be invited) who have completed the core curriculum (4th semester and above) to discuss the core curriculum.

5. **Data collection methods**: Describe how data will be collected, by whom, and when:

<table>
<thead>
<tr>
<th>Type of Data</th>
<th>To Be Collected By</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Survey questions</td>
<td>Comprehensive Exam Committee</td>
<td>At time of exam</td>
</tr>
<tr>
<td>b) Survey questions</td>
<td>Dissertation Committee</td>
<td>At time of defense</td>
</tr>
<tr>
<td>c) Survey questions</td>
<td>Program Assistant from dept. alumni</td>
<td>This Fall</td>
</tr>
<tr>
<td>d) Open-ended questions</td>
<td>Dissertation/exam committees</td>
<td>At time of exam/defense</td>
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<tr>
<td>e) Narrative, opinions</td>
<td>Program Director and Assistant</td>
<td>Meeting with students</td>
</tr>
</tbody>
</table>

6. **Assessment scoring methods**: Describe how the assessments will be scored (e.g., calculations of total scores on objective tests; determination of categorical scores via the use of a scoring rubric on open-ended tasks, etc.), by whom, and when:

<table>
<thead>
<tr>
<th>Type of ScoringTo Be Scored By</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Calculations of total scores from assessment instruments</td>
<td>Program Assistant</td>
</tr>
<tr>
<td>b) Summary of comments provided by exam committees</td>
<td>Program Assistant</td>
</tr>
<tr>
<td>c) Analysis of opinions, experiences of students (qualitative)</td>
<td>Program Director</td>
</tr>
</tbody>
</table>

7. **Data interpretation plans**: Describe what types of criteria will be used to interpret the data, and how data will be aggregated:

a) **Relative criteria?** (pre-post comparisons, analysis of growth or change, comparisons across groups)

Qualitative information (narratives, opinions, experiences) shared by the students, including their reports of growth and/or change, will be compared with the four main program criteria articulated above under “skills”.

b) **Absolute criteria?** (comparison of results with an arbitrarily-set cut-off, e.g., 80% accuracy)

The data collected will be compared to the four criteria set forth above under “skills”. Scores are assigned by the examination committees on a 5-pt. Likert scale. Mean scores of 4 and above are considered to indicate that the objectives of the program were met. Scores below 4 will be considered to indicate that review/improvement of the curriculum/instruction are in order.

These data will be supplemented with a summary of written comments provided to open-ended questions on the survey form.

c) **How will the data be aggregated across students so that the program-level results are presented clearly?**
All data are aggregated across students. Assessment of individual students will not be presented in the outcome’s assessment exercise. We will only provide quantitative outcomes data if we have three or more students completing comprehensive exams and/or dissertations. This means that for some terms we will report no quantitative data at all.

8. **Use of information (the "feedback loop"):** Describe how the information will be summarized and reported; to whom it will be reported; and how it will be used to make programmatic recommendations and decisions.

Outcomes assessment reports will be prepared by the Chair at the conclusion of each academic year, if there are sufficient data available.

The outcomes assessment results for the entire year will be discussed by faculty during their final meeting of the term, and any plans for curricular modifications will be devised and voted on at that meeting.

The faculty of the Health and Behavioral Sciences program hold a day-long retreat on the average of once every two years. It is during this retreat that significant critical attention is devoted to the curriculum, course requirements, and student achievement. The Chair shall prepare a formal report summarizing outcomes assessment data for the period since the last retreat, and this shall be considered prior to discussion of curriculum, and be used to design and/or alter program requirements, the outline of curriculum, admissions standards, and/or instructional techniques.

9. **Major responsibility for tasks:** For steps 5-8, indicate who will take major responsibility for ensuring that the tasks are completed:

- **Data Collection:** Program Assistant
- **Assessment Scoring:** Program Assistant and Chair
- **Data Interpretation:** Chair
- **Reporting and “closing the feedback loop”** Chair

10. **Assessment evaluation:** Indicate how the assessment plan will be periodically reviewed by program faculty and, if necessary, revised.

The assessment plan will be reviewed by faculty during its penultimate Spring meeting (first Wednesday in April).

Enc. Survey instrument.