Department of Public Health Sciences

Master of Science Program in Prevention Science and Community Health

Program Info Book 2019
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INTRODUCTION

Welcome to the Master of Science (MS) program in Prevention Science and Community Health! As a student in prevention science and community health, you will need to familiarize yourself with procedures and requirements that are set forth by both our Department, the Miller School of Medicine’s Office of Graduate Studies, and the University of Miami’s Graduate School. This student handbook is meant to serve as an introduction and basic overview of these requirements as well as provide information on communications and logistics to assure your success as a student. It is important to note that, although this info book is meant to provide you with basic information and general requirements of the Master’s program, it is not intended to be used in isolation. Rather, this info book should be used in conjunction with the UM Graduate School bulletin. In this regard, it is also highly recommended that you become familiar with the information that is on our Departmental website (www.publichealth.med.miami.edu), as well as the UM Gradual School’s website (https://www.grad.miami.edu/).

RATIONALE OF THE PROGRAM

The purpose of the Master of Science (MS) program in Prevention Science and Community Health (PSCH) is to train the next generation of researchers and practitioners who are committed to reducing the mortality and morbidity attributable to behaviorally-based, preventable causes of illness, disorder, and death; and promoting health and well-being, in the United States and internationally. Our focus is on the community as the primary domain for intervention development, implementation, and evaluation; however, our research spans multiple contexts such as families, peer groups, schools, the workplace, and clinics. We train students whose expressed objectives are to join the prevention workforce. As part of the program, professionals in the field as guest lecturers and field mentors in order to expose students in the program with “real world” issues and professional responsibilities, which we believe will enhance students’ marketability.

There is a great deal of prevention-related expertise in the Department of Public Health Sciences, where the existing PhD program in Prevention Science and Community Health is housed, as well as in other schools and departments around the University of Miami. MS-PSCH students will have ready access to experienced faculty who can train students in cutting-edge prevention science, as well as to PhD earning students who can mentor MS students throughout the program. The program is designed to reach out to a broad array of students from Public Health, Education, Psychology, Nursing, and Social Work backgrounds (among others), who would be interested specifically in Prevention Science.

The importance of Prevention Science is underscored by the leading causes of death and disability. Of the top nine causes of death, seven are behaviorally based and preventable: tobacco use, poor diet and physical inactivity, alcohol consumption, motor vehicle crashes, firearm use, unsafe/unprotected sexual behavior, and illicit drug use. Additionally, the National Prevention Strategy (https://www.aafp.org/advocacy/informed/pubhealth/prevstrategy.html) prioritizes prevention by “integrating recommendations and actions across multiple setting to improve health and save lives.” Strategic directions of the National Prevention Strategy include creating healthy and safe communities, eliminating health disparities, providing clinical and community
preventive services, and empowering people. The seven priority areas for these strategies include: tobacco free living, preventing drug abuse and excessive alcohol use, healthy eating, active living, injury and violence free living, reproductive and sexual health, and mental and emotional well-being—all of which are areas of focus within the Department’s Division of Prevention Science and Community Health. Moreover, the mission of the University of Miami’s Miller School of Medicine includes personalized preventive care and health promotion, integration of prevention and wellness principles into medical practice, emphasizing a scholarly approach to wellness and health, and promoting health equity across various segments of the population. These principles dovetail nicely with the field of prevention science and community health, and with the expertise among the faculty within our Division.

Prevention Science is an interdisciplinary field and draws on disciplines as diverse as psychology, education, medicine, epidemiology, biostatistics, environmental health, geography, nursing, economics, and others. Currently, prevention science-based research is conducted in these various departments, with only some overlap or collaboration between and among them. We bring together this interdisciplinary expertise, with the Department of Public Health Sciences faculty, and particularly those in the Division of Prevention Science and Community Health, in a lead role. Further, prevention science research involves collaborating with communities—relying on a bottom-up approach rather than the traditional top-down approach that has dominated much of academic research. Development of an MS program in Prevention Science and Community Health allows for a further extension of our expertise in this area to the various streams of prevention work currently underway in other departments and schools at the University of Miami.

Preventive interventions are built on etiologic work done by scholars in basic-science fields such as epidemiology, population-health sciences, and developmental psychology; are designed by clinicians and practitioners in a broad array of fields; and are disseminated and implemented by community-based scholars in the aforementioned fields. The MS-PSCH program allows students to formalize interdisciplinary training in prevention science and community health while interacting with faculty who specialize in all stages of the process—etiologic work, intervention design, community empowerment, intervention evaluation, and implementation and dissemination—as well as in various prevention methodologies such as community-based participatory research and mixed-methods research.

Prevention science is a new and emerging field that began to coalesce in the late 1990s and early 2000s, and it has grown exponentially. The field emerged as a response to the difficulties involved in treating problems after they had already appeared. As opposed to treatment approaches, which are targeted toward individuals with specific presenting symptoms, prevention approaches can be targeted toward those with varying levels of risk (including those for whom no risks have yet appeared, in the case of universal preventive interventions). Prevention science provides a flexible, cost-effective set of models through which personally and socially harmful or destructive outcomes can be avoided or ameliorated.

Prevention science interfaces with general public health and biostatistics in many important ways. Broadly, public health focuses on the etiology of disease risk factors, markers, processes, and outcomes. Public health is the science of protecting and improving the health of populations.
Biostatistics is the science of developing and refining statistical tools to analyze biomedical and health-related data. Prevention science overlaps with these disciplines in that etiological findings are used to design, adapt, and target interventions to inhibit the development or exacerbation of illness, disorder, and disease; and uses advanced biostatistical methods to design and analyze data on intervention development, implementation, and effectiveness. The MS-PSCH program complements the Department of Public Health’s existing MPH and MS programs in public health and in biostatistics, and provides a natural fit to house these programs within the Department of Public Health Sciences.

By investing in the growth of prevention science and community health through training the next generation of prevention researchers, evaluators, and practitioners, the University of Miami stands to make a major contribution to addressing and reducing the prevalence and incidence of preventable causes of disease, disorder, and death in the United States and internationally. Through cutting-edge research and community engagement, our faculty equip students in the program to step to the forefront of prevention efforts, from local initiatives such as the Live Healthy Little Havana Initiative (https://www.livehealthylittlehavana.com/) to large-scale initiatives such as the U.S. National Prevention Strategy, the Pan American Health Organization’s CARMEN initiative (http://www.paho.org/carmen/), and the United Nations Office of Drug Control’s Global Initiative on Primary Prevention of Substance Abuse (http://www.who.int/substance_abuse/activities/global_initiative/en/). The program solidifies the University’s position as an essential partner in local, national, and international health communities.

Our MS-PSCH program emphasizes practical, as well as scholarly, benefits to the University of Miami. An increasing number of organizations and governmental agencies are interested in professionals with formal training in prevention science. Internationally, we are at a watershed with regard to prevention science as a global phenomenon with need for formal training in countries that are experiencing a growing need for effective preventive interventions. Domestically, most granting agencies within the National Institutes of Health have branches dedicated to prevention, including the National Institute of Mental Health (NIMH), the National Heart, Lung, and Blood Institute (NHLBI), the National Institute of Drug Abuse (NIDA), the National Cancer Institute (NCI), and the National Institute on Alcohol Abuse and Alcoholism (NIAAA). Having an MS program dedicated to prevention science and community health will increase and broaden evidence-based practice and scientific scholarship, including grant funding and high-impact scholarly publications for the University.
There are three specific goals of the proposed MS program in prevention science and community health:

(1) Train Masters-level students in the fundamentals of prevention science, which includes (a) the assessment of risk and protective factors that predict and modify health and behavior outcomes; (b) the development of preventive interventions that target these risk and protective factors; (c) the implementation these interventions with individuals, families, and peer groups, and in schools and workplaces that make up our communities; and (d) the evaluation of these interventions to determine the evidence for their effectiveness.

(2) Develop students’ skills in translating prevention research into demonstrable preventive action, including the dissemination of advancements in the field to constituencies in local, national, and international contexts; and the ability to use this technology for science-based decision making by service providers (community health coalitions, service organizations, and governmental agencies).

(3) Develop students’ skills to successfully partner with community, county, state, national, and international entities to disseminate evidence-based programs and incorporate them with fidelity into service delivery settings with sensitivity to the unique strengths and diversity of culture of communities and their constituencies.

The overarching goal of the program is to develop professionals specialized in prevention science who will have a thorough understanding of the science as well as a focus on the application prevention services to those in need. This goal is in line with the mission of the Society for Prevention Research, which is focused on “advancing scientific investigation on the etiology and prevention of social, physical and mental health, and academic problems and on the translation of that information to promote health and well-being.” The goal also is in line with the missions of the University of Miami’s Department of Public Health Sciences, the Graduate Programs in Public Health, and the Division of Prevention Science and Community Health. These revolve around the improvement of the health of the public, the reduction in burden of disease, and the establishment of health equity among various segments of the population. The proposed program also aligns with the University of Miami’s mission to “educate and nurture students, to create knowledge, and to provide service to our community and beyond” and to “develop future leaders of our nation and the world.” Prevention science and community health, by definition, involve leadership, investigation, and service. Accordingly, our courses help develop the next generation of prevention leaders and prepare them to discover and apply the tools necessary to achieve these goals.

**CURRICULUM**

There are a number of content areas within prevention science and community health. These areas parallel the phases or steps of prevention research. Roughly, the phases are etiology, intervention design, implementation/dissemination science, and community engagement. These phases represent the process through which basic research can be translated into community practice, but they also represent the broad-level content areas and skill sets that are essential to master.
There are also a number of methodological areas in prevention science and community health that should be included in a MS program. Among these are intervention design and evaluation, structural (population-level) prevention interventions, community-based participatory research, statistical methods in prevention research, using technology in prevention science, managing large-scale research studies, and cultural adaptation of prevention programs. We have decided to focus on general principles, and theoretical/methodological approaches to learning rather than on specific content areas (e.g., substance abuse, HIV, obesity), because there is an extremely broad range of areas to which prevention science can be applied, but the principles, theories, and methods themselves are consistent across these areas.

Students will be trained in three interrelated domains: theory, methods/analysis, and practice. Preventive interventions are based on theories of individual, peers, family, workplace, and community development, etiology, and change -- and in turn, the results of etiological and intervention studies can be used to inform and revise theory. Methods used to analyze data from etiological and intervention studies are continuously evolving, and students should be trained in the latest state-of-the-art analytic techniques. Expertise in theory, research methods, and analytic techniques is needed for professionals to effectively apply the science of prevention. Best practice--based on the scientific method and established evidence--is the process by which prevention theories, methods, and analysis are ultimately realized.

Curricular Structure

We take an approach to the program curriculum where all students from each cohort take the same core courses at the same time (with the exception of electives). Specific courses will be offered in the fall, spring, or summer as appropriate. The suggested sequence of courses is as follows:

REQUIRED CORE COURSES (24 credit hours):

1. EPH 600 Introduction of Public Health (Schultz, 3 credits)
2. EPH 617 Introduction to Disease Prevention and Health Promotion (Brown, 3 credits)
3. EPH 623 Determinants of Health and Health Disparities Across the Life Course (Perrino, 3 credits)
4. EPH 717 Integrating Behavioral Health Theories and Models into Prevention Science (Carrico/Schwartz, 3 credits)
5. EPH 731 Designing and Adapting Preventive Interventions (Harkness, 3 credits)
6. EPH 732 Implementation and Dissemination Science (Brown, 3 credits)
7. EPH 698 Thesis Proposal (3 credits)
8. EPH 699 Thesis (3 credits)

REQUIRED STATISTICS / RESEARCH METHODS COURSES (3 credit hours).
Students must select at least 1 course from the following):

1. EPH 601 Medical Biostatistics I (Koru-Sengul, 3 credits)
2. EPH 602 Medical Biostatistics II (Kwon, 3 credits)
3. EPH 604 Clinical Trials (Horigian, 3 credits, Summer intersession)
4. EPH 656 Qualitative Methods (St. George, 3 credits, Spring)
5. EPH 651 Research Methods (Carrico/Prado, 3 credits, Fall)
6. EPH 752 Advanced Research Methods (Brown, 3 credits)
7. EPH 647 Community Based Participatory Research (Kanamori, 3 credits, Spring)
8. EPH 650 Health Economics for Evaluation and Policy (McCollister, 3 credits, Fall)
9. BST 625 Statistical Computing (Odom/Pan, 3 credits, Fall)

**ELECTIVE COURSES (6 credit hours).** Students must select at least 2 additional courses from either the list of methods courses above or from the following list of elective courses:

1. EPH 607 Interdisciplinary Health Communication (Lee, 3 credits, Fall and Spring)
2. EPH 621 Fundamentals of Epidemiology (Hlaing, 3 credits, Fall and Spring)
3. EPH 640 Urban Environment and Public Health (S. Brown, 3 credits, Fall)
4. EPH 616 Global Health and Global Justice (Gelpi, 3 credits, Fall and Spring)
5. EPH 641 Environmental Health (Kumar, 3 credits, Fall and Spring)
6. EPH 643 Introduction to Occupational Health (Caban-Martinez, 3 credits, Winter Intersession)
7. EPH 646 Climate and Health (Beier, 3 credits, Fall)
8. EPH 631 Public Health Administration (Florez, 3 credits, Fall)
9. EPH 653 Leading Change in Public Health (King, 3 credits, Fall)
10. EPH 632 U.S. Health Systems (King, 3 credits, Spring)
11. EPH Emerging Challenges in Global Health Systems (Krenk, Knaul, Rodriguez; 2 to 3 credits; Spring)
12. EPH 671 Maternal and Child Health (Potter, 3 credits, Spring)
13. EPH 663 Hospitals, Health Care Services and Access (Palacio, 3 credits, Spring)
14. EPH 723 Epidemiology and Public Health Aspects of Diabetes (Florez, 3 credits, Spring)
15. EPH 626 Climate, Environment and Health: Data Integration and Management (Kumar, 3 credits, Spring)
16. Other courses as determined by advisor*

*Note: We recommend taking a look at courses offered in the UM’s School of Education and Human Development, Community and Social Change MS Ed. program (see: https://sites.education.miami.edu/community-and-social-change-m-s-ed/) for other courses that may be selected as electives.

**Classroom Learning**

The primary teaching style in most courses in the MS-PSCH program will be a combination of lectures, seminar discussions, and problem-based learning (i.e., applying the skills and knowledge covered in class). Students will be expected to complete a set of readings for each week of class, and these readings will be discussed in class. Each student will be expected to contribute to class discussion.

Each course will be taught by 1-2 primary faculty member, although guest lectures by other faculty members and outside colleagues will be encouraged. Each course will have at least one
exam and several courses will require a class project. *Exams* can be in any format or combination of formats (e.g., multiple choice, essay, short answer). *Projects* will require students to apply their knowledge, either alone or in groups. Examples of major projects include in-class poster sessions, writing grant applications, designing new intervention programs or adapting existing programs, or developing manuscripts for publication. Other details of each course are at the discretion of the instructor.

**Faculty**

All faculty members within the Department of Public Health Sciences will be eligible to participate in the MS-PSCH program. However, primary faculty will be those in the Division of Prevention Science and Community Health. The Department of Public Health Sciences has 35 full-time faculty members, including eight within the Division of Prevention Science and Community Health. Currently, all faculty members in the Division teach at least one course.

**Thesis**

For your thesis, you will be required to conduct an individual investigation of a current public health problem and demonstrate competency in the development and implementation of a research question related to that problem. Students will work closely with a faculty project advisor and thesis project committee during their investigation. Consistent with UM guidelines, the thesis committee will consist of at least two members: 1st Reader (an expert in the content area) and 2nd Reader (your faculty advisor in the program). At least one person on your committee must be from the Division of Division of Prevention Science and Community Health. The thesis proposal must be approved by the committee before starting data collection and analysis. All committee members must sign off on the thesis proposal before the student’s final defense date will be scheduled, and all committee members must approve the written thesis before the MS degree will be awarded. Students are expected to produce a written thesis of format and length to be determined by the faculty advisor, and will deliver an oral presentation of the thesis to committee members.

Students in the MS-PSCH program will utilize the EPH 698 and EPH 699 handbook/forms provided on the Graduate Programs website. Individual links per form are provided below.


**CITI Instructions**

https://graduatestudies.publichealth.med.miami.edu/_assets/pdf/current-students/citi-certification-instructions.pdf

**EPH 698 and 699: Thesis Course Overview**

The written proposal should include the following elements and should be between 5-10 pages using standard font and format:

1) Summary Abstract (1 page)
2) General Literature Review
3) Overall Research Questions and Hypotheses
4) Research Methods (including source of data for secondary analyses)
5) Data Analytic Plan for each manuscript

Although every proposal should contain all the required elements, the particular emphasis, subject matter and page lengths will depend upon the nature of the proposed research and should be developed in consultation with your thesis committee.

In addition to the written requirements for the thesis, the oral presentation of the completed thesis (usually 1 hour, but can be longer or shorter at the discretion of the thesis committee) should include:

1) The results for each of the research questions or aims, including a description of the research methods used
2) A discussion of the study findings
3) Conclusions
4) Limitations of the study
5) Recommendations for future research

Following the presentation, the Committee will ask everyone except the members of the Committee and the student to leave the room. At this time, the Committee will have an opportunity to ask questions about the thesis, its presentation, and other related issues. Following the questions, the student will be asked to leave the room to allow the members of the Thesis Committee to discuss his or her performance. The Committee will decide whether the student has passed (graded “satisfactory”) or failed (graded “unsatisfactory”) the thesis defense. Following this decision, the Committee will invite the student to return and inform her/him of the
Committee’s decision. If the student is not successful in defending the thesis, the Committee members will inform the student as to what the next steps are in his/her program of study.
INTRODUCTORY PUBLIC HEALTH LEARNING OBJECTIVES
AND MSCH PROGRAM COMPETENCIES

Table of Introductory Public Health Learning Objectives for Academic Public Health Master’s Degrees (per Council on Education in Public Health (CEPH))

<table>
<thead>
<tr>
<th>Content</th>
<th>Course number(s) and name(s)^</th>
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<tbody>
<tr>
<td>1. Explain public health history, philosophy and values</td>
<td>EPH 600 Introduction to Public Health</td>
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<td></td>
<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<tr>
<td>2. Identify the core functions of public health and the 10 Essential Services*</td>
<td>EPH 600 Introduction to Public Health</td>
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<tr>
<td></td>
<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<tr>
<td>3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population’s health</td>
<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<td></td>
<td>EPH 623 Determinants of Health and Health Disparities across the Life Course</td>
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<td>EPH 732 Implementation and Dissemination Science</td>
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<td>4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<tr>
<td>5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<td></td>
<td>EPH 732 Implementation and Dissemination Science</td>
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<tr>
<td>6. Explain the critical importance of evidence in advancing public health knowledge</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<td>EPH 731 Designing and Adapting Preventive Interventions</td>
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<td>EPH 732 Implementation and Dissemination Science</td>
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<td>7. Explain effects of environmental factors on a population’s health</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>8. Explain biological and genetic factors that affect a population’s health</td>
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<td>EPH 623 Determinants of Health and Health Disparities across the Life Course</td>
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<tr>
<td>9. Explain behavioral and psychological factors that affect a population’s health</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<td>EPH 731 Designing and Adapting Preventive Interventions</td>
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<td>10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 623 Determinants of Health and Health Disparities across the Life Course</td>
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<td>EPH 731 Designing and Adapting Preventive Interventions</td>
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<tr>
<td>11. Explain how globalization affects global burdens of disease</td>
<td>EPH 600 Introduction to Public Health</td>
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<td>EPH 617 Introduction to Disease Prevention and Health Promotion</td>
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<td>EPH 717 Integrating Behavioral Health Theories and Models</td>
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Last update: August 3, 2019
Table of MS-PSCH Program Specific Learning Objectives

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<thead>
<tr>
<th>Competency</th>
<th>Course number(s) and name(s)</th>
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| 1. Describe the core disciplines of public health and how they apply to improving population health. | EPH 600 Introduction to Public Health  
EPH 617 Introduction to Disease Prevention and Health Promotion |
| 2. Apply epidemiologic methods to the measurement and study of prevention science. | EPH 600 Introduction to Public Health  
EPH 617 Introduction to Disease Prevention and Health Promotion  
EPH 623 Determinants of Health and Health Disparities across the Life Course |
| 3. Describe the origins, foundations, and standards of prevention science. | EPH 617 Introduction to Disease Prevention and Health Promotion |
| 4. Design and carry out theoretically-grounded research studies that contribute to the literature on risk and protective factors, and identify their mechanisms of influence associated with health and behavior outcomes across the lifespan. | EPH 617 Introduction to Disease Prevention and Health Promotion  
EPH 717 Integrating Behavioral Health Theories and Models  
EPH 623 Determinants of Health and Health Disparities across the Life Course |
| 5. Demonstrate knowledge of evidence-based preventive interventions and understand how to apply prevention science theories to the design, implementation, adaptation, and evaluation of preventive interventions. | EPH 617 Introduction to Disease Prevention and Health Promotion  
EPH 717 Integrating Behavioral Health Theories and Models  
EPH 732 Implementation and Dissemination Science  
EPH 731 Designing and Adapting Preventive Interventions |
| 6. Integrate knowledge of research design, quantitative and qualitative methods, data analysis, and multi-method, multi-agent assessment methods commonly used in prevention science into their research activities. | EPH 617 Introduction to Disease Prevention and Health Promotion  
EPH 623 Determinants of Health and Health Disparities across the Life Course  
EPH 732 Implementation and Dissemination Science  
EPH 731 Designing and Adapting Preventive Interventions |
| 7. Demonstrate skill in disseminating their work to diverse audiences via formal academic presentations, instructional activities, and professional/academic writing. | EPH 600 Introduction to Public Health  
EPH 617 Introduction to Disease Prevention and Health Promotion  
EPH 623 Determinants of Health and Health Disparities across the Life Course  
EPH 717 Integrating Behavioral Health Theories and Models  
EPH 732 Implementation and Dissemination Science  
EPH 731 Designing and Adapting Preventive Interventions |
| 8. Demonstrate awareness and understanding of diversity and contextual issues such as culture, identity, ethnicity, gender, sexual orientation, disability, marginalization, poverty, inequality, and religion in their research, applied activities, and professional behavior. | EPH 600 Introduction to Public Health  
EPH 623 Determinants of Health and Health Disparities across the Life Course |
PROGRAM ADMINISTRATION

The administration and direction of the program is under the leadership of the MS-PSCH Program Director, Dr. Eric C. Brown, and supported by the Division of Prevention Science and Community Health Division Director (Dr. Prado) and the PhD Program Director (Dr. Schwartz). The MS-PSCH Program Director reports to the Director of the Division of Prevention Science and Community Health (Dr. Prado) and to the Director of Graduate Programs in Public Health (Dr. David Lee). The MS-PSCH Program Director serves as a member of the Department of Public Health Sciences Graduate Executive Policy Committee (GEPC), and the Public Health Graduate Programs Curriculum Committee. The MS-PSCH Program Director will meet with both Drs. Prado and Lee at least once per month.

In collaboration with the Department of Public Health Sciences student admiration office, the Division of Prevention Science and Community Health will be responsible for recruitment, admission, and initial academic advising of admitted students. This initial advising is to orient incoming students to the program structure, appropriate course selection, and familiarize them with the computing environment. The MS-PSCH Program Director will report on the performance of all students in the program at the end of each semester and will oversee the preparation and administration of degree requirements, including establishing committees for the student theses.

The MS-PSCH Program Director will review any complaints from students about the conduct of teaching or other aspects of the graduate program that cannot be resolved satisfactorily between the immediate disputants. If the disputants are not satisfied by the within-Division process, the next step for either will be to make their case to the Director of Graduate Programs in Public Health (Dr. Lee), the Department of Public Health Sciences Graduate Executive Policy Committee (GEPC), then to the Senior Associate Dean for Graduate Studies, and then to the Dean of the Graduate School if the Associate Dean’s decision is appealed.

A full cadre of administrative support staff is already in place within the Department of Public Health Sciences. These individuals have been supporting the Department’s other Master’s level programs and will be available to support the MS program in Prevention Science and Community Health.

WEBSITE QUICK REFERENCE GUIDE

There are many helpful websites that you can visit, not the least of which is our own Department of Public Health Sciences homepage (http://publichealth.med.miami.edu). Below are also links to other useful websites that has pertinent information for Master’s students:

University of Miami homepage: www.miami.edu
Graduate School website: http://www.grad.miami.edu/
Miller School of Medicine’s Office of Graduate Studies: http://www.biomed.med.miami.edu
U Miami Graduate Bulletin: https://www.bulletin.miami.edu