August 28, 2007

MEMORANDUM

TO:  Robert Gold  
      Dean, School of Public Health

FROM:  Phyllis Peres  
        Associate Provost for Academic Planning and Programs

SUBJECT:  Proposal to add a Ph.D. in Maternal & Child Health (PCC log no. 06028)

On June 22, the Board of Regents approved your proposal to create a Ph.D. in Maternal and Child Health. The Maryland Higher Education Commission gave their approval on July 3. Attached please find the approved proposal and copies of the approval letters from the Chancellor and MHEC.

The Ph.D. in Maternal and Child Health is effective Fall 2007. The School of Public Health should ensure that the program is fully described in the Graduate Catalog and in all relevant descriptive materials, and that all advisors are informed.

CWR/

Enclosure

cc: Carmen Balthrop, Chair, Senate PCC Committee
    Sarah Bauder, Office of Student Financial Aid
    Mary Giles, University Senate
    Barbara Hope, Data Administration
    Anne Turkos, Archives
    Linda Yokoi, Office of the Registrar
    Mary Ann Ottinger, Graduate School
    Blakely Pomietto, School of Public Health
July 3, 2007

Dr. C. D. Mote, Jr.
President
University of Maryland, College Park
1101 Main Administration Building
College Park MD 20742

Dear Dr. Mote:

The Maryland Higher Education Commission has reviewed a request from University of Maryland, College Park to offer a new Doctor of Philosophy (Ph.D.) in Maternal and Child Health. I am pleased to inform you that the new program has been approved. This decision was based on an analysis of the program in conjunction with the Maryland Higher Education Commission's Policies and Procedures for Academic Program Proposals and the Maryland State Plan for Postsecondary Education. The program demonstrates potential for success, an essential factor in making this decision.

For purposes of providing enrollment and degree data to the Commission, please use the following HEGIS and CIP codes:

<table>
<thead>
<tr>
<th>Program Title</th>
<th>Degree Level</th>
<th>HEGIS</th>
<th>CIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal and Child Health</td>
<td>Ph.D.</td>
<td>1214-03</td>
<td>51.2209</td>
</tr>
</tbody>
</table>

Should the program require any substantial changes in the future, please keep the Commission apprised. I wish you continued success.

Sincerely,

James E. Lyons, Sr.
Secretary of Higher Education

JEL:DES:ggs

cc: Ms. Theresa Hollander, USM
June 26, 2007

Dr. C.D. Mote, Jr.
University of Maryland, College Park
1101 Main Administration Building
College Park, MD 20742

Dear Dan:

This is to officially inform you that the Board of Regents, meeting in executive session on Friday, June 22, 2007 at University of Maryland, College Park, approved the following new academic program proposals for UMCP:

- Master of Health Administration
- Ph.D. in Health Services
- Ph.D. in Epidemiology
- Ph.D. in Maternal and Child Health

The Education Policy Committee, meeting on June 5, 2007, recommended approval.

Sincerely,

William E. Kirwan
Chancellor

WEK/tm

cc: Irwin Goldstein
    Janice Doyle
THE UNIVERSITY OF MARYLAND, COLLEGE PARK
PROGRAM/CURRICULUM PROPOSAL

DIRECTIONS:
- Provide one form with original approval signatures in lines 1 - 4 for each proposed action. Keep this form to one page in length.
- Early consultation with the Office of the Associate Provost for Academic Planning & Programs is strongly recommended if there are questions or concerns, particularly with new programs.
- Please submit the signed form to Claudia Rector, Office of the Associate Provost for Academic Planning and Programs, 1119 Main Administration Building, Campus.
- Please email the rest of the proposal as an MSWord attachment to pcc-submissions@umd.edu.

DATE SUBMITTED: 1/19/07

COLLEGE/SCHOOL: Health and Human Performance

DEPARTMENT/PROGRAM: Department of Family Studies

PROPOSED ACTION (A separate form for each) ADD__X__DELETE_____ CHANGE____

DESCRIPTION (Provide a succinct account of the proposed action. Details should be provided in an attachment. Provide old and new sample programs for curriculum changes.)

Create a new Ph.D. program in Maternal and Child Health.

JUSTIFICATION/REASONS/RESOURCES (Briefly explain the reason for the proposed action. Identify the source of new resources that may be required. Details should be provided in an attachment.)

See attached.

=================================================================================================
APPROVAL SIGNATURES

1. Department Committee Chair
   <Signature>
   1/19/07

2. Department Chair
   <Signature>
   1/19/07

3. College/School PCC Chair
   <Signature>
   1/22/07

4. Dean
   <Signature>
   1/22/07

5. Dean of the Graduate School (if required)
   <Signature>
   1/25/07

6. Chair, Senate PCC
   <Signature>
   3/2/07

7. Chair of Senate
   <Signature>
   3/2/07

8. Vice President for Academic Affairs & Provost
   <Signature>
   3/28/07
PROPOSAL FOR

A NEW PROGRAM SUBMITTED BY A UNIVERSITY SYSTEM OF MARYLAND INSTITUTION IN ACCORD WITH SECTION 11-206.1 OF THE ANNOTATED CODE OF MARYLAND

University of Maryland, College Park

Doctor of Philosophy (Ph.D.) in Maternal and Child Health

HEGIS: CIP:

Department of Family Studies
Unit Offering the Program

Sally A. Koblinsky, Ph.D., Chair
Contact Person

Doctor of Philosophy (Ph.D.) in Maternal and Child Health
Degree to be Awarded

Spring 2007
Proposed Initiation Date
I. OVERVIEW and RATIONALE

A. Briefly describe the nature of the proposed program and explain why the institution should offer it. [You may want to refer to student demand, market demand for graduates, institutional strengths, disciplinary trends, synergy with existing programs, and/or institutional strategic priorities.]

Goal and Contribution to UMCP Strategic Priorities

The Department of Family Studies (FMST) is proposing to offer a Ph.D. program in Maternal and Child Health (MCH). The goal of the MCH doctoral program is to provide interdisciplinary training in research, practice, and policy relevant to health problems and services for women, infants, children, adolescents, and their families. The program will prepare students to advance research, policy, and practice to improve the health, safety, and well-being of these groups, with a particular emphasis on low income and ethnic minority populations.

The proposed MCH Ph.D. program supports a UMCP strategic initiative “to build a strong, university-wide culture of graduate and professional education, research, (and) scholarship.” The program will directly benefit residents of the state, region, and nation through its emphasis on social, cultural, and behavioral determinants of maternal and child health, including health disparities over the life course. It also supports UMCP’s priority of leadership in public policy through its focus on the analysis of federal and state health policies impacting maternal, child, and family health. The study of access to health services for MCH populations, including strategies to eliminate health disparities, further strengthens the university’s commitment to diversity and appreciation for other cultures.

The proposed MCH program will be the third graduate program offered by the Department of Family Studies (FMST). The Department currently has an accredited Master of Science program in Marriage and Family Therapy and a Ph.D. program in Family Studies with an emphasis on family policy. The proposed MCH program will draw on current coursework, research, and service initiatives associated with the two existing FMST graduate programs, as well as add new courses and research expertise from present and new departments in the College of Health and Human Performance (slated to become the School of Public Health). Specifically, the proposed MCH program will adopt appropriate coursework from the core areas of public health (e.g., biostatistics, epidemiology) to prepare students to address MCH issues at both the family and population levels.

Accredited Schools of Public Health must have at least three doctoral degree programs in core disciplines of public health. Maternal and Child Health is recognized as a core area of public health practice that draws heavily from the disciplines of social and behavioral sciences and epidemiology. The MCH program will complement the existing doctoral program in Public and Community Health (also in the social and behavioral sciences category) and the proposed new Ph.D. programs in Epidemiology and Health Services.

Market Demand for Graduates

The Institute of Medicine (IOM) estimates that there are approximately 450,000 people employed in salaried public health positions in the United States, and reports that there is an urgent need for qualified, graduate level public health professionals to tackle growing public health problems (IOM, 2003). It has been estimated that 80% of public health workers across the nation lack specific public health training, and only 22% of chief executives of public health departments hold graduate degrees in public health (IOM, 2003). Data from the American Public Health Association (APHA) further indicate that 50% of the federal public health workforce and 25% of state public health employees will retire within the next
The APHA concludes that “this massive attrition in personnel will create a critical shortage of workers that clearly cannot be remedied through existing training programs and recruitment efforts.”

The shortage of well-trained personnel in the broader field of public health is mirrored in the area of maternal and child health. In 2001, the Maternal and Child Health Bureau, Health Resources and Services Administration conducted a national needs assessment of Graduate and Continuing Education Needs in Maternal and Child Health (Alexander, Petersen, Pass, Slay, & Chadwick, 2001). This assessment collected data from state Maternal and Child Health (MCH) and Children with Special Health Care Needs (CSHCN) offices of state public health departments, from state Medicaid agencies, and from a random sample of local health departments. More than 50% of the MCH, CSHCN, and local agencies reported that they had a difficult time or were unable to find applicants who had the critical graduate-level MCH skills they needed. Respondents indicated a need for professionals with greater expertise in MCH epidemiology, data analysis, policy, advocacy, and program planning and evaluation, among other areas. A significant unmet need for continuing education for current MCH personnel was also identified, with respondents requesting coursework in family centered-care, cultural competency, program evaluation, policy development, and direct service topics.

Taken together, these national studies indicate that there is a strong market demand for doctoral students who can combine their knowledge of maternal, child, and family health problems with skills in research, policy analysis, and program development, implementation, and evaluation. MCH doctoral graduates will be prepared for academic and research positions in colleges/universities; high level administrative or research positions in city/county/state/national health and human service agencies; and leadership positions in nongovernmental and advocacy organizations. MCH graduates are also increasingly hired by private health care organizations such as hospitals, HMOs, and health insurers.

Student Demand

Data from the Association of Schools of Public Health (ASPH) reveal significant growth in applications for doctoral degrees in public health between 1994 and 2004 (ASPH, 2005). Moreover, admissions data from the two nearest private accredited schools indicate that George Washington University accepted less than 40% of graduate applicants to public health programs and Johns Hopkins University accepted less than 25% of all applicants (no data are available specifically for MCH applicants). Nationally, there were 1,140 applications to MCH graduate programs in 2004 (ASPH, 2005).

Currently 14 universities offer the Ph.D. or DrPH in Maternal and Child Health, including UCLA, University of Michigan, University of North Carolina at Chapel Hill, University of Illinois at Chicago, and The Johns Hopkins University. Several of these institutions have announced their intent to enhance their focus on the role of families in health promotion, prevention, and intervention. Thus, our current Family Studies faculty, in collaboration with more traditional public health colleagues, will be in a unique position to offer state-of-the-art education and research training in maternal and child health. The Johns Hopkins Ph.D. in Reproductive, Perinatal and Women’s Health focuses on the health of mothers, children, and families worldwide, while the proposed UMCP Ph.D. in MCH will center on the health and behavior of these populations in Maryland and the U.S. The George Washington University offers a MPH in Maternal and Child Health but no Ph.D.; GW’s MPH graduates will thus have an opportunity to obtain the Ph.D. degree in MCH at UMCP. The many geographic advantages of UMCP, including the opportunity to research diverse families and to work in national, state and local public health agencies, promise to attract excellent graduate students to the proposed MCH doctoral program.
B. How big is the program expected to be? From what other programs serving current students, or from what new populations of potential students, onsite or offsite, are you expecting to draw?

The Department of Family Studies projects that a significant number of applicants to the Ph.D. program in Maternal and Child Health will come from the Master of Public Health (MPH) program at UMCP. Some graduates of the Department’s accredited Marriage and Family Therapy master’s program are also prospective students for the program. We also anticipate receiving MCH applications from students enrolled in MPH programs at Johns Hopkins University, George Washington University, Morgan State University, and other Schools of Public Health in the U.S. Our program will be especially attractive to students who wish to pursue high-quality training at a public research university, and to those who wish to come to the Washington, DC area to study maternal and child health policy. The program may also receive applications from mid-level health professionals with MPH degrees who wish to advance in their careers (although it should be noted that our program is limited to full-time students). The Family Studies Department’s diverse faculty and its focus on racial/ethnic minority research can be expected to attract both minority and female graduate students.

We anticipate admitting approximately 5-6 full-time doctoral students each year (2 in 2007), all who have already completed the MPH or a related social/behavioral science degree. Assuming that it will take approximately 4 years to complete the Ph.D. degree (post-master’s degree) and that we will experience a 10% attrition rate, we predict a cohort of approximately 20 students in the program when it reaches maximum capacity.

II. CURRICULUM

A. Provide a full catalog description of the proposed program, including educational objectives and any areas of concentration.

Maternal and child health is an interdisciplinary field in which empirical research, epidemiological data, and policy analyses are used to understand individual, family, community, and sociocultural factors that influence health behaviors, health outcomes, and use of health services by mothers, children, adolescents, and their families (including fathers).

The proposed Ph.D. program in MCH will provide students with:

a) An integrated knowledge of the major theoretical, historical, demographic, comparative, cross-cultural, and multi-generational approaches to studying maternal and child health.

b) Comprehensive knowledge of the biological, behavioral, psychological, social, cultural, economic, and political determinants of maternal and child health, with a particular emphasis on factors affecting the health of low income and ethnic minority families.

c) In-depth understanding of the growth, development, health, and well-being of mothers and children across the lifespan within an ecological framework that considers individual, family, and community influences.

d) Expertise in the design and execution of scholarly research on maternal and child health issues.

e) A high level of skill in the development, implementation, and evaluation of culturally-sensitive health promotion and disease prevention programs for maternal, child, and adolescent populations.

f) Expertise in formulating, analyzing, and advocating for public policies in areas such as reproductive and perinatal health, and the health of children, adolescents, mothers, and families.

g) Preparation for MCH careers in the public, nonprofit, and private sectors, including university teaching, research, health policy analysis, consulting, and leadership positions in MCH programs.
B. List the courses (number, title, semester credit hours) that would constitute the requirements and other components of the proposed program. Provide a catalog description for any courses that will be newly developed or substantially modified for the program.

Students will enter the MCH Ph.D. program with an MPH degree or a social/behavioral science master’s degree that focuses on family, maternal, and/or child health issues (including mental health). Prior to entry, students must also have completed at least one semester of a university-supervised, graduate level professional experience in a public health or mental health setting. Students without the MPH degree must complete the required 5 public health core courses (biostatistics, epidemiology, environmental health sciences, health services administration, and social and behavioral sciences) within one academic year of their entry into the program.

The proposed Ph.D. program requires 48 graduate credit hours beyond the master’s degree, including a maternal and child health core (24 credits), a research methods core (12 credits), and the dissertation (12 credits). Students in the Ph.D. program advance to candidacy after completing required coursework and passing a written comprehensive examination. After advancement to candidacy, students must complete a dissertation proposal and oral defense, followed by the doctoral dissertation and oral dissertation defense.

<table>
<thead>
<tr>
<th>Table 1: Proposed Ph.D. Program in Maternal and Child Health</th>
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<tbody>
<tr>
<td><strong>Course Title</strong></td>
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<tr>
<td><strong>Public Health Core (required Master's coursework)</strong></td>
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<tr>
<td>EPIB 650 Biostatistics I</td>
</tr>
<tr>
<td>EPIB 610 Foundations of Epidemiology</td>
</tr>
<tr>
<td>HLSA 601 Introduction to Health Systems</td>
</tr>
<tr>
<td>HLTH 665 Health Behavior I</td>
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<tr>
<td>MIEH 600 Foundations of Environmental Health</td>
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<tr>
<td><strong>MCH Core Courses (24 credits)</strong></td>
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<tr>
<td>FMST 710 Foundations in Maternal &amp; Child Health</td>
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<tr>
<td>FMST 720 Perinatal, Child and Adolescent Health</td>
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<tr>
<td>FMST 730 Maternal and Family Health in Adulthood and Aging</td>
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<tr>
<td>FMST 606 Ethnic Families and Health Disparities</td>
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<tr>
<td>FMST 810 Theory in Family Systems and Family Health (currently FMST 698S)</td>
</tr>
<tr>
<td>FMST 750 Family and Health Policy</td>
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<tr>
<td>FMST 660 Program Planning and Evaluation</td>
</tr>
<tr>
<td>Elective: Public Health course related to MCH, selected with advisor</td>
</tr>
<tr>
<td><strong>Research Methods (12 credits)</strong></td>
</tr>
<tr>
<td>EPIB 611 Intermediate Epidemiology</td>
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<tr>
<td>EPIB 651 Biostatistics II</td>
</tr>
<tr>
<td>FMST 780 Qualitative Research Methods in Family and Health Research (currently FMST 698Q)</td>
</tr>
<tr>
<td>FMST 850 Maternal and Child Health Epidemiology (currently FMST 698P)</td>
</tr>
<tr>
<td><strong>Dissertation (12 credits)</strong></td>
</tr>
<tr>
<td>FMST 899 Doctoral Dissertation Research</td>
</tr>
<tr>
<td><strong>Total Credits for Proposed MCH Ph.D. Program</strong></td>
</tr>
</tbody>
</table>
Courses for MCH Ph.D. Program
All courses in the MCH program are described below; new courses in FMST are noted with an asterisk.

**EPIB 611 Intermediate Epidemiology**: Analysis of epidemiologic methods as applied to epidemiologic research, analysis of bias, confounding, effect modification issues, overview of design, implementation, and analysis of epidemiologic studies. Prerequisite: EPIB610, EPIB650

**EPIB 651 Biostatistics II**: Introduction to a variety of statistical tools with applications in public health, including simple and multiple regression, experimental design, categorical data analysis, logistic regression, and survival analysis. Prerequisite: EPIB650

**FMST 606 Ethnic Families and Health Disparities**: Historical, psychosocial, economic, and political factors influencing the structure and functioning of ethnic families. Overview of racial/ethnic health disparities over the life course and ways in which they are influenced by multi-level contextual factors. Cultural competency in research, service delivery, and development of family/health policy initiatives for ethnic families.

**FMST 660 Program Planning and Evaluation**: Program planning and evaluation for family services and maternal and child health programs, including assessment, consumer/community participation, capacity building, evaluation methods, and ethical issues; emphasis on both process and impact analysis. Development of proposals for evaluating impact of health interventions.

**FMST 710 Foundations in Maternal and Child Health***: Overview of key health issues for various maternal and child health populations, especially those within the US. Review of maternal and child health databases and major programs and public policies aimed at improving the health of mothers, children, adolescents, and their families.

**FMST 720 Perinatal, Child, and Adolescent Health***: Examination of major problems and issues associated with the health status of women of reproductive age, infants, toddlers, children, and adolescents. Analysis of biological, environmental, psychosocial, and cultural determinants of health for the target populations. Overview of prevention and intervention programs for children and youth.

**FMST 730 Maternal and Family Health in Adulthood and Aging***: Overview of major public health problems during the adult and elderly years, including cigarette smoking, obesity, physical inactivity, substance abuse, risky sexual behavior, cardiovascular disease, cancer, diabetes, osteoporosis, and HIV/AIDS. Examination of life course research, prevention and intervention programs, and public information campaigns.

**FMST 750 Family and Health Policy**: Development and analysis of public policies affecting the health and well-being of children, youth, and families, with an emphasis on low income and ethnic minority populations. Examination of social, economic, and political dynamics that influence family and health policies and the delivery of health care. Introduction to health advocacy within the US public health system.

**FMST 780 Qualitative Methods in Family and Health Research**: Theoretical perspectives and methodological tools to conduct research with individuals and families across the life span. Review of research designs, participant fieldwork, observation and interview projects, data collection, computer-assisted data analysis, and development of grounded theory.

**FMST 810 Theory in Family Systems and Family Health**: Theory and research on family interaction and family coping with normative health and mental health transitions and non-normative crises across
the family life cycle. Micro-analysis of family process in communication, decision-making, problem-solving, and compliance to health regimens. Examination of dysfunctional patterns and effective coping strategies.

**FMST 850 Maternal and Child Health Epidemiology**: Determinants and trends in maternal and child health, including analysis of the role of economic inequalities, race/ethnicity, community contexts, and psychosocial factors across the life course. Overview of methods and data systems used to monitor maternal and child health. Development of a complete population health study.

Sample Student Schedule
Below is a table showing how a typical Ph.D. student can complete the required coursework over a three-year period (including one year of dissertation). All FMST MCH courses are taught on a two-year cycle, insuring an adequate seminar size and reducing resource demands of the proposed program.

<table>
<thead>
<tr>
<th>Schedule for Full-Time Ph.D. Student in Maternal and Child Health</th>
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<tbody>
<tr>
<td>Fall 1 (9)</td>
</tr>
<tr>
<td>FMST 660</td>
</tr>
<tr>
<td>FMST 710</td>
</tr>
<tr>
<td>Elective</td>
</tr>
</tbody>
</table>

C. Describe any selective admissions policy or special criteria for students selecting this field of study.

As noted earlier, applicants to the MCH Ph.D. program must have completed all of the requirements for a Master of Public Health (MPH) degree or a social/behavioral science master’s degree that focuses on family, maternal and/or child health issues (including mental health) prior to their acceptance into the program. Prior to entry, students must also have completed at least one semester of a university-supervised, graduate level professional experience in a public health or mental health setting. Students without the MPH degree must complete the required 5 public health core courses (biostatistics, epidemiology, environmental health sciences, health services administration, and social and behavioral sciences) within one academic year of their entry into the program. Entering master’s students who have not completed a thesis using empirical data must complete an empirical research project during their first year of the doctoral program.

All applicants must submit: Undergraduate and Graduate transcripts, Graduate Record Examination (GRE) scores, letters of recommendation from 3 persons competent to judge the applicant’s probability of success in graduate school, and the graduate school essay describing professional goals and relevant work and research experience.

In addition to Graduate School requirements, admission decisions for the MCH program will be based on the quality of previous undergraduate and graduate course work, the strength of GRE scores, the relevance of prior work and research experience, and the congruence of professional goals with those of the program. Students should submit application materials for the fall semester by January 15th. This program does not accept applications for Spring semester admission.

D. How will the program increase students’ technology fluency?

Students entering the MCH Ph.D. program will hold a MPH degree or a master’s degree in social/behavioral science. These students will already have acquired significant knowledge and competence relating to a wide range of technology skills, including retrieving, storing, and presenting health information and data for research and practice. The MCH doctoral program will build on these skills by
presenting advanced training in the use of health technologies and statistical software for research, program evaluation, and policy analysis. For example, students will be introduced to geographic information systems used in public health surveillance, environmental health tracking systems, and “smart home” technologies and mobile devices for the continuous monitoring of chronic health problems. Students will also become familiar with innovative learning and information technologies (e.g., podcasting, weblogs) for disseminating health information to MCH populations.

III. STUDENT LEARNING OUTCOMES AND ASSESSMENT

List the program's learning outcomes and explain how they will be measured and assessed.

**Outcome 1:** Demonstrate competence in MCH research.
**Measure:** Number of Ph.D. students presenting their MCH research at professional meetings.
**Criterion:** Prior to graduation, at least 90% of doctoral students will make at least one MCH research presentation at a professional meeting.
**Assessment:** Number/percentage of student presenters are recorded every year beginning in Spring 2008.

**Outcome 2:** Demonstrate specific content knowledge of MCH and family science, including theories, research design and methodology, policy analysis and advocacy, and program development and evaluation.
**Measure:** Students’ comprehensive exams, which ask students to apply their acquired knowledge in the fields of maternal and child health and family science in areas of theory, research methods, and programs/policies; rubrics are available for each exam section.
**Criterion:** At least 80% of MCH doctoral students will pass all 3 sections of their comprehensive exams, and 100% will pass 2 out of 3 sections.
**Assessment:** Outcomes will be assessed every year beginning in Fall 2009.

**Outcome 3:** Make significant scholarly contributions to the disciplines of MCH and family science.
**Measure:** Number of students who submit articles with MCH focus to refereed journals.
**Criterion:** Prior to graduating from the program, 100% of doctoral students will submit at least one article with a MCH focus to a refereed journal.
**Assessment:** Number/percentage of article submissions are recorded every year beginning in Fall 2008.

**Outcome 4:** Demonstrate evidence of commitment to and competence in multicultural diversity in maternal and child health research and programs.
**Measure:** A final project focusing on race/ethnicity/gender or racial/ethnic/gender disparities in health services in FMST 606, Ethnic Families and Health Disparities. The project will demonstrate the student’s ability to critically evaluate issues of race, gender, and/or ethnicity in the provision of MCH services and evaluation of MCH service programs.
**Criterion:** At least 90% of MCH doctoral students will receive a satisfactory or better evaluation on this project; projects will be evaluated with a diversity rubric.
**Assessment:** Rubric will be developed in early Fall 2007. Projects will be evaluated every two years beginning in Fall 2007.

IV. FACULTY AND ORGANIZATION

A. Who will provide academic direction and oversight for the program? [This might be a department, a departmental subgroup, a list of faculty members, or some other defined group.]
The proposed Ph.D. program in Maternal and Child Health will be administered by the Department of Family Studies (FMST). There are presently 13 tenured/tenure track faculty in Family Studies and the Department is currently searching for at least one tenured/tenure track faculty member with degrees in epidemiology and/or maternal and child health from an accredited School of Public Health. The Department also has an actively engaged, distinguished College Park Professor with a background in demography/sociology.

Existing FMST faculty members hold doctoral degrees in family science, human development, child development, demography, sociology, developmental psychology, clinical psychology, social work, economics, family finance, and related social and behavioral science disciplines. Two required courses in the MCH program will be taught by faculty in the Department of Epidemiology and Biostatistics who hold doctoral degrees in epidemiology and biostatistics. In addition, Family Studies has two adjunct faculty members with Ph.D. degrees in the behavioral sciences, as well as several clinical adjunct faculty members with master’s degrees in Marriage and Family therapy who have professional experience with MCH populations. Family Studies has a diverse tenured/tenure track and adjunct faculty, including African American, Asian, Latino, and Middle Eastern faculty members. Ten of the 13 tenured/tenure track faculty are women.

Family Studies Faculty Scheduled to Teach in the Proposed MCH Ph.D. Program

Elaine Anderson, Ph.D., Professor, FMST
Teaching/research focus: family policy, health policy, fathering, at-risk families, work and family issues
Course: FMST 750 Family and Health Policy

Norman Epstein, Ph.D., Professor, FMST
Teaching/research focus: family systems, mental health issues and families, marriage and family therapy, family stress and coping, domestic violence, cross-cultural (Chinese) family research
Course: FMST 810 Theory in Family Systems and Family Health

Sandra Hofferth, Ph.D., Professor, FMST
Teaching/research focus: demography, maternal and child epidemiology, research methods, childhood obesity, fathers and fathering, immigrant families, adolescent pregnancy and parenthood
Course: FMST 850 Maternal and Child Health Epidemiology

Suzanne Randolph, Ph.D., Associate Professor, FMST
Teaching/research focus: developmental psychology, racial/ethnic health disparities, African American family research, maternal and child health, intervention research
Course: FMST 606 Ethnic Families and Health Disparities

Kevin Roy, Ph.D., Assistant Professor, FMST
Teaching/research focus: human development and social policy, fathers and fathering, men in low income families, qualitative research methods
Course: FMST 780 Qualitative Research Methods in Family and Health Research

Jacqueline Wallen, Ph.D., Associate Professor, FMST
Teaching/research focus: substance use and abuse, adoption, diversity issues in human services, Latino families, evaluation research
Course: FMST 660 Program Planning and Evaluation
TBN, New Faculty Member(s) in Family Studies
  Teaching/research focus: maternal and child health, epidemiology
  Courses: FMST 710 Foundations in Maternal and Child Health
           FMST 720 Perinatal, Child and Adolescent Health
           FMST 730 Maternal and Family Health in Adulthood and Aging

College of Health and Human Performance Faculty Scheduled to Teach in the Proposed MCH Program

TBN, New Faculty Member in Department of Epidemiology and Biostatistics
  Teaching/research focus: epidemiology, research methods
  Course: EPIB 611 Intermediate Epidemiology

TBN, New Faculty Member in Department of Epidemiology and Biostatistics
  Teaching/research focus: biostatistics, epidemiology
  Course: EPIB 651 Biostatistics II

B. If the program is not to be housed and administered within a single academic unit, provide details of its administrative structure.

Not applicable. All classes will be housed and administered within the Family Studies Department.

V. OFF CAMPUS PROGRAMS

A. If the program is to be offered to students at an off-campus location, with instructors in classrooms and/or via distance education modalities, indicate how student access to the full range of services (including advising, financial aid, and career services) and facilities (including library and information facilities, and computer and laboratory facilities if needed) will be assured.

Not applicable. All classes will be offered on the UMCP campus.

B. If the program is to be offered mostly or completely via distance education, you must describe in detail how the concerns in Principles and Guidelines for Online Programs are to be addressed.

Not applicable. No part of the program will be offered via distance education.

VI. OTHER ISSUES

A. Describe any cooperative arrangements with other institutions or organizations that will be important for the success of this program.

The College of Health and Human Performance at UMCP has established a Memorandum of Understanding to share resources with the School of Public Health at the University of Maryland at Baltimore (UMB). UMCP and UMB will share academic resources, fund seed grants to support inter-institutional research, and make courses available to graduate students from both campuses. HLHP is currently creating a Memorandum of Understanding with Prince George’s County Health Department to develop graduate student internships and to collaborate on health research and demonstration projects that will benefit county residents.

The Department of Family Studies also has a history of placing its Ph.D. students at government agencies and non-profit organizations that seek to improve the quality of maternal and child health. Within the last
five years, doctoral students have held fellowships and paid internships at numerous national agencies, including the National Cancer Institute, the National Institute for Disability and Rehabilitation Research, the Substance Abuse and Mental Health Services Administration, the Eating Disorders Coalition for Research, Policy and Action, the Children’s Bureau (U.S. Administration for Children and Families), the Children’s Defense Fund, and the Child Welfare League of America, among others. Doctoral students in the proposed MCH program will be encouraged to seek fellowships/placements in these agencies and similar health organizations, and these opportunities should contribute to the success of the program.

B. Will the program require or seek accreditation? Is it intended to provide certification or licensure for its graduates? Are there academic or administrative constraints as a consequence?

The proposed School of Public Health will seek accreditation from the Council on Education for Public Health (CEPH), which will review all academic programs and accredit the School. CEPH is an independent agency, recognized by the U.S. Department of Education, which accredits schools and programs of public health. CEPH accreditation will ensure students, employers, and the general public that UMCP’s new graduate programs meet the highest standards for education in public health.

VII. COMMITMENT TO DIVERSITY

Identify specific actions and strategies that will be utilized to recruit and retain a diverse student body.

The Family Studies Department has long been recognized on campus and nationwide for its commitment to diversity, and was named the Outstanding Academic Unit by the UMCP President’s Commission on Ethnic Minority Issues in 2004, 1997 and 1992. The Department has a diverse faculty, which includes African American, Asian, and Middle-Eastern tenured faculty members and a Latina adjunct professor. The chair and two thirds of current faculty members are women. In Fall 2006, 50% of the Department’s undergraduate student body and 27% of the graduate student body were students of color. The majority of Family Studies courses address diversity within their curricula, and faculty frequently focus on diversity issues in their research. Current research projects address ethnic families, low income families, gender issues, interracial couples, gay and lesbian families, mental illness and families, and other aspects of family diversity. The Department is strongly committed to improving understanding of human diversity and health disparities, as well as addressing the needs of traditionally under-represented families and communities.

The reputations of ethnic minority and women faculty members in FMST will help us to recruit and retain a diverse student body for the proposed MCH Ph.D. program. Faculty members will work vigorously to secure support for a diverse student body; currently all FMST Ph.D. students have financial support for 3-4 years. FMST faculty members frequently recommend graduate students for national, state, and campus fellowships. The Department annually co-sponsors a Latino Mental Health Conference which raises scholarship funds for Latino students, and conducts fund-raising for the Andrew Billingsley Scholarship for graduate student research on African American families.

The FMST faculty will actively recruit a diverse student population for the proposed MCH Ph.D. program. The Department will work closely with the HLHP Associate Dean for Diversity and the Director of the UMCP Graduate Office of Recruitment, Retention, and Diversity, to attract students from underrepresented groups to the new doctoral program. As with our other doctoral program, FMST faculty will recruit prospective students at national and regional professional conferences, including annual meetings of the American Public Health Association and the Association of Maternal and Child Health Programs. The Department will host campus visits of prospective students from targeted minority institutions, including the historically black colleges in Maryland and the surrounding region. Faculty
will also seek help from colleagues on other campuses in identifying minority graduate students who may be interested in the Maryland program and its research foci.

FMST faculty will also commit major resources to retaining and graduating a diverse student body. The Department’s Preparing Future Faculty program provides mentoring for teaching and research, workshops and support groups for dissertation completion, and extensive assistance with the job search. These retention initiatives have contributed to an attrition rate of less than 5% between 2000 and 2006. Such retention efforts will help the Department, the proposed School of Public Health, and the University of Maryland to achieve its diversity goals.

VIII. REQUIRED PHYSICAL RESOURCES

A. Additional library and other information resources required to support the proposed program.

The attached memorandum from the Library’s Collection Management Team describes existing library holdings and new library resources needed for the Maternal and Child Health Ph.D. program. The Provost will provide funding to meet library needs for this doctoral program.

B. Additional facilities, facility modifications, and equipment that will be required. This is to include faculty and staff office space, laboratories, special classrooms, computers, etc.

The Department has adequate space in Marie Mount Hall to house new faculty and doctoral students in the MCH doctoral program. However, our graduate student offices will be cramped so FMST will request space for three additional graduate student offices if space is available in Marie Mount Hall. The Department’s seminar classroom will be used to teach the three new MCH doctoral courses; other required Epidemiology and Biostatistics courses will be taught in the HLHP Building. No laboratories or computer labs are needed to operate the program.

C. Impact, if any, on the use of existing facilities and equipment. Examples are laboratories, computer labs, specially equipped classrooms, and access to computer servers.

See response to VIII.B above.

IX. RESOURCE NEEDS and SOURCES

Describe the resources that are required to offer this program, and the source of these resources. Project this for five years. In particular:

A. List new courses to be taught, and needed additional sections of existing courses. Describe the anticipated advising and administrative loads. Indicate the personnel resources (faculty, staff, and teaching assistants) that will be needed to cover all these responsibilities.

The proposed MCH Ph.D. program was designed to build on FMST’s existing Family Studies Ph.D. program and coursework offered in the proposed School of Public Health so few new resources are required. The MCH program will require only three new FMST courses: FMST 710 Foundations in Maternal and Child Health; FMST 720 Perinatal, Child, and Adolescent Health; and FMST 730 Maternal and Family Health in Adulthood and Aging. A fourth course, FMST 850 Maternal and Child Health Epidemiology, is already being taught in the Department under the number, FMST 688P. FMST is in the process of searching for one new MCH faculty member who will teach these three courses on a two year cycle (two courses in the first year and the third course in the second year, with the same cycle continuing
The new faculty member will also share responsibilities for advising and mentoring MCH doctoral students with existing FMST faculty members.

The Department’s Graduate Director will oversee this new program in addition to the Family Studies Ph.D. Program. (The Director of our Marriage and Family Therapy program administers most aspects of our clinical professional master’s program.) The Department’s existing Graduate Secretary will handle administrative aspects of this small program, including admissions. The proposed program will bring in 2 students in Year 1 and 5-6 students in the following years (with an estimated attrition rate of 10% or less).

B. List new faculty, staff, and teaching assistants needed for the responsibilities in A, and indicate the source of the resources for hiring them.

Reallocated funds from the Department of Family Studies and the College of Health and Human Performance will provide the financial support for an MCH faculty member (shown in MHEC Table 1, Resources). The Department of Family Studies has a current search open for a new faculty member in Maternal and Child Health. This new hire will hold a doctoral degree in epidemiology and/or maternal and child health from an accredited School of Public Health. We estimate that the new faculty member will spend .5 FTE teaching and advising students in the MCH Ph.D. program in years when s/he is teaching two courses and advising students, and .4 FTE effort in the years in which s/he is teaching one course. Funds from a recent FMST retirement and the Dean’s Office will support the new hire.

The MCH program will be supported, in part, by tuition revenue from new Ph.D. students. FMST has also requested funds for 8 2-year Graduate Assistantships from the Dean of HLHP over the 5-year period between 2007-08 and 2011-2012. These Graduate Assistantships will come from funds provided to the College/School by the Provost when specific milestones are met in new graduate student enrollments. Soft money support will be provided in the initial years of the program, to be incrementally replaced by hard money allocations when program milestones are met (see page 19, School of Public Health proposal). Graduate Fellowships for the MCH Ph.D. program will be sought from the Dean of the Graduate School. We also anticipate that this new Ph.D. program will increase our ability to attract MCH research funding and an MCH training grant.

FMST’s most important need associated with implementation of the MCH Ph.D. program is for additional Graduate Assistantships. These GA positions are entered on MHEC Table 2, Expenditures, as “Support Staff” expenses. These positions will enable the Department to be competitive in recruiting the most outstanding students. Moreover, Graduate Assistants play an important role in providing instruction in FMST’s growing undergraduate program. FMST currently funds Assistantships for most students in its Family Studies Ph.D. program. During the last 5 years, state-budgeted funds for doctoral GAs have averaged $65,000 annually; research grant funds for GAs have averaged $72,000 annually; and summer school/winterterm revenues allocated to GAs have averaged $122,000 annually.

The proposed Ph.D. program will have no detrimental impact on the Department’s undergraduate program. FMST will continue to offer the same number of undergraduate courses in its current schedule and plans to add a new undergraduate course in Maternal and Child Health. It is anticipated that this new course will stimulate some undergraduates’ interest in pursuing MPH and Ph.D. degrees in the proposed School of Public Health.

C. Some of these teaching, advising, and administrative duties may be covered by existing faculty and staff. Describe your expectations for this, and indicate how the current duties of these individuals will be covered, and the source of any needed resources.
As described above, teaching, advising, and administrative duties will be handled by existing faculty members (who are already teaching and conducting research on MCH topics), a new faculty member, and existing administrative staff. FMST faculty members are already teaching many of the MCH doctoral courses in our existing Family Studies Ph.D. program; these faculty can accommodate 2-5 additional students in their courses. College faculty teaching in our program (particularly those in the new Department of Epidemiology and Biostatistics) can also accommodate MCH students in their courses. With the new faculty member, we will be able to redistribute doctoral student advising loads so that individual faculty are not overburdened. We will closely monitor the size of the MCH program, including graduation rates, to insure that we do not admit more students than our tenured/tenure track faculty can reasonably advise/mentor. As noted above, our Graduate Secretary will handle administrative tasks for the MCH program.

D. Identify the source to pay for the required physical resources identified in Section XII above.

FMST will request three doctoral student offices in Marie Mount Hall (assuming space is available). If minor renovations are required (e.g., carpeting), the Department will cover this expense. The Department will draw on DRIF and summer school/winterterm revenues to provide telephones and office furniture for these offices. If this office space is not available, the new doctoral program can still operate adequately.

E. List any other required resources and the anticipated source for them.

As with our Family Studies Ph.D. program, the Department will annually provide some financial support to MCH doctoral students who present their work at professional conferences. The Department will also commit some funds to advertising the new program, especially in the first two years. This support, projected at $10,000 to $12,000 annually (see Table 2), will come from FMST DRIF funds and summer school/winterterm revenue.

F. Provide the information requested in Table 1 and Table 2 (for Academic Affairs to include in the external proposal submitted to USM and MHEC).
### MHEC Table 1: Resources MCH PhD Program

<table>
<thead>
<tr>
<th>Resource Categories</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Reallocated Funds</strong></td>
<td>$122,520</td>
<td>$156,821</td>
<td>$176,294</td>
<td>$210,945</td>
<td>$230,783</td>
</tr>
<tr>
<td>a. Department</td>
<td>$29,000</td>
<td>$30,160</td>
<td>$31,366</td>
<td>$32,621</td>
<td>$33,926</td>
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<tr>
<td>b. HLHP</td>
<td>$55,000</td>
<td>$57,200</td>
<td>$59,488</td>
<td>$61,868</td>
<td>$64,342</td>
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<td>c. Total Benefits*</td>
<td>$23,520</td>
<td>$24,461</td>
<td>$25,439</td>
<td>$26,457</td>
<td>$27,515</td>
</tr>
<tr>
<td>c. UMCP Graduate School / Provost</td>
<td>$15,000</td>
<td>$45,000</td>
<td>$60,000</td>
<td>$90,000</td>
<td>$105,000</td>
</tr>
<tr>
<td><strong>2. Tuition/Fee Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c+g below)</td>
<td>$18,180</td>
<td>$63,630</td>
<td>$93,620</td>
<td>$100,420</td>
<td>$104,500</td>
</tr>
<tr>
<td>a. # Full Time Students</td>
<td>2</td>
<td>7</td>
<td>12</td>
<td>17</td>
<td>20</td>
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<tr>
<td>b. Annual Tuition/Fee Rate*</td>
<td>$9,090</td>
<td>$9,090</td>
<td>$9,090</td>
<td>$9,090</td>
<td>$9,090</td>
</tr>
<tr>
<td>c. Total Full Time Revenue (a x b)</td>
<td>$18,180</td>
<td>$63,630</td>
<td>$93,620</td>
<td>$100,420</td>
<td>$104,500</td>
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<tr>
<td>d. # Part Time Students</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>e. Credit Hour Rate</td>
<td>$505</td>
<td>$505</td>
<td>$505</td>
<td>$505</td>
<td>$505</td>
</tr>
<tr>
<td>f. Annual Credit Hours</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>g. Total Part Time Revenue (d x e x f)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<tr>
<td><strong>3. Grants, Contracts, and Other External Sources</strong></td>
<td>$0</td>
<td>$0</td>
<td>$15,000</td>
<td>$15,600</td>
<td>$16,224</td>
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<tr>
<td><strong>4. Other Sources: UMCP Provost - Library</strong></td>
<td>$16,223</td>
<td>$17,521</td>
<td>$18,923</td>
<td>$20,436</td>
<td>$22,071</td>
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<tr>
<td><strong>TOTAL (Add 1 - 4)</strong></td>
<td>$156,923</td>
<td>$237,972</td>
<td>$303,836</td>
<td>$347,402</td>
<td>$373,578</td>
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</table>

* Annual tuition based on 80% in-state plus 20% out-of-state rates for an average of $505/credit x 18 credit hours per student in first two years; tuition candidacy for two years at resident rate of $1,360/year ($680/semester)
<table>
<thead>
<tr>
<th>Expenditure Categories</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Faculty (b+c below)</td>
<td>$107,520</td>
<td>$111,821</td>
<td>$145,367</td>
<td>$151,182</td>
<td>$157,229</td>
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<tr>
<td>a. FTE</td>
<td>0.5</td>
<td>0.4</td>
<td>0.625</td>
<td>0.5</td>
<td>0.625</td>
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<tr>
<td>b. Total Salary</td>
<td>$84,000</td>
<td>$87,360</td>
<td>$113,568</td>
<td>$118,111</td>
<td>$122,835</td>
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<tr>
<td>c. Total Benefits*</td>
<td>$23,520</td>
<td>$24,461</td>
<td>$31,799</td>
<td>$33,071</td>
<td>$34,394</td>
</tr>
<tr>
<td>2. Admin Staff (b+c below)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>a. FTE</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>b. Total Salary</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>c. Total Benefits</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>3. Support Staff (b+c below)</td>
<td>$24,090</td>
<td>$72,270</td>
<td>$96,360</td>
<td>$144,540</td>
<td>$168,630</td>
</tr>
<tr>
<td>a. FTE</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>b. Total Salary**</td>
<td>$15,000</td>
<td>$45,000</td>
<td>$60,000</td>
<td>$90,000</td>
<td>$105,000</td>
</tr>
<tr>
<td>c. Total Benefits***</td>
<td>$9,090</td>
<td>$27,270</td>
<td>$36,360</td>
<td>$54,540</td>
<td>$63,630</td>
</tr>
<tr>
<td>4. Equipment</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>6. New or Renovated Space</td>
<td>$2,500</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<tr>
<td>7. Other Expenses</td>
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<td>$10,000</td>
<td>$10,000</td>
<td>$12,000</td>
<td>$12,000</td>
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<td>TOTAL (Add 1 - 7)</td>
<td>$157,833</td>
<td>$210,314</td>
<td>$267,950</td>
<td>$323,945</td>
<td>$354,082</td>
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</table>

* Fringes calculated at 28% for Faculty
** This figure includes Graduate Assistantship stipends only
*** This figure includes tuition remission only and is calculated at $#FTE x $505/credit x 18 credits/year
References


