

Interpretation Guide

MPH.1. Foundational Knowledge

Line #	Criterion Document Language	Interpretation	Tips
3	All MPH students complete coursework that specifically addresses each of the following concepts.	No matter how many curricular variations or choices are available to MPH students, all curricula must specifically address each of the 16 concepts.	<p>No concepts may be mapped to elective courses.</p> <p>To show compliance</p> <ul style="list-style-type: none"> • Identify the one course that presents the strongest or clearest coverage, except in the specific cases outlined below. • Identify and document the specific course element(s) that demonstrate coverage. This is not required when the full course is dedicated to the topic area (e.g., a course in environmental health to address FK10, a course in biological bases of health to address FK11). • Acceptable documentation of course elements includes excerpts from lecture slides, lists of assigned readings, instructions or prompts provided to students for an activity or assignment, etc. <p>Each row of the template should only include one class and corresponding element(s) when required, except in the following scenarios:</p> <ol style="list-style-type: none"> 1) No single course fully addresses the concept, but different courses each address a facet of the concept so that, together, they demonstrate coverage. In this case, the template must use parenthetical notation to specifically indicate <i>which</i> piece of the concept area each course corresponds to. 2) In each of the following situations, the unit will need to list <i>multiple</i> courses in one or more rows of the template: <ul style="list-style-type: none"> • units with multiple concentrations that choose to address one or more concepts in concentration courses rather than in courses that are required of all MPH students

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			<ul style="list-style-type: none"> • units that have different sets of required courses across different formats (e.g., a different set of foundational courses for online students, one or more differences in foundational courses for joint degree students) • units that include choices or options within the required curriculum <p>Even when the circumstances above exist, the unit should present a single template with multiple entries per row, not multiple templates.</p> <p>Samples will be available in the Accreditation Data Templates.</p>
5	<p>Students with verified completion of a previous degree from a CEPH-accredited unit, including a bachelor's degree, can be considered to have prior coverage of these concepts, if the unit desires.</p>	<p>Units are permitted, but not required, to exempt students who have already completed a degree from a CEPH-accredited unit from courses listed in this criterion, provided the courses are not listed anywhere in MPH.2 or [<i>other not-yet-developed criteria</i>].</p> <p>This exemption does not reduce the total credit requirements for the MPH degree. If students are exempted from a course listed here, the unit must require them to choose additional credits to ensure a 42 semester-credit program of study.</p>	<p>The goal is to permit students to avoid duplicative content, but units may justifiably determine that duplication is acceptable to ensure that students receive reinforcement or gain additional knowledge and skills in a course delivered at a more advanced level.</p> <p>The details of each unit's curriculum make this a highly individualized determination that should be carefully considered by faculty.</p> <p>Before crafting an exemption policy for students with prior CEPH-accredited degrees, units should carefully consider whether there is any valuable auxiliary content contained in the courses that would be subject to exemption and whether the course is mapped to other requirements.</p> <p>Introduction to Public Health or similar courses are likely to be most amenable to an exemption policy.</p>
11	<p>1. Public health definition: orientation toward prevention, promotion, and well-being through societal efforts</p>	<p>The curriculum explicitly addresses the fundamental definitional focus of public health so that students may understand public health values and the field's identity distinct from health care.</p>	<p>Factual and definitional concepts are amenable to coverage through required readings and/or lectures.</p> <p>Units may consider Winslow's definition: "the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society."</p>
13	<p>2. Public health history</p>	<p>The curriculum addresses major milestones in the field's professional definition and identity.</p>	

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14	3. Public health ethics	<p>This concept refers to the Public Health Code of Ethics (PHCOE), including application of ethics in various settings.</p> <p>Coverage of medical ethics alone is not sufficient.</p>	Addressing this concept can include addressing how public health ethics do or do not align with ethical codes and principles of other professions with which public health professionals interact. It could also include case studies using the PHCOE.
15	4. 10 Essential Public Health Services	<p>The curriculum addresses the most current version of the 10 Essential Public Health Services.</p> <p>Units outside the United States may substitute an appropriate equivalent framework if desired.</p>	
16	5. Comparison of U.S. public health systems to other nations' systems	<p>The curriculum addresses the structure and financing of public health systems in the United States and at least one other country.</p> <p>Content must extend beyond addressing U.S. and other nations' health care systems.</p> <p>Units outside the United States are not required to cover the U.S. system and may substitute as appropriate.</p>	Units may also consider covering regional differences, in addition to nation-level differences.
17	6. Major causes of morbidity and mortality locally, nationally, regionally, or globally	<p>Instructional activities should focus on a specific nation, state, region, or city and its major causes of morbidity and mortality (e.g., heart disease, cancer, injuries, stroke).</p> <p>Covering <i>definitions</i> of the terms morbidity and mortality is not sufficient, nor are exercises working with morbidity and mortality data unless they are accompanied by activities that ensure that students understand current or prevailing facts and trends about the major causes in the designated locale.</p>	
18	7. Primary, secondary, and tertiary prevention definitions	The curriculum must explicitly address these terms' definitions. Providing content about types of prevention without	

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		explicitly addressing the terms themselves is not sufficient.	
19	8. Cross-sectoral collaborations to address population health	The curriculum must address the roles of multiple sectors and the importance of working across sectors on population health issues.	Units may consider addressing collaborations with entities such as school systems, transportation agencies, housing authorities, engineering professionals, the technology sector, hospitals and healthcare, etc.
20	9. Legislative and other processes for advancing or changing laws that affect public health	<p>The curriculum must address local, state, federal, and/or tribal processes for advancing or changing laws relevant to public health, as well as related processes including administrative law, regulatory power, and/or case law.</p> <p>These processes include</p> <ol style="list-style-type: none"> 1) the role of the legislative branch in writing bills and passing laws; 2) the role of the executive branch and administrative agencies in drafting regulations, implementing related programs and policies, and enforcing laws; and 3) the role of the judicial branch in interpreting laws, deciding constitutionality, and applying laws to cases. <p>Units outside the United States should teach this content as appropriate, addressing how public health laws are made or changed.</p>	
25	10. Environmental factors	<p>This concept refers to the physical, chemical, and/or built environment, including occupational factors as appropriate.</p> <p>This factor is not intended to address social environments, e.g., interpersonal and political environments, which are addressed in FK 14 and 15.</p>	
26	11. Biological factors	This concept refers to biological factors including genetics, epigenomics, physiology, and/or changes across the lifespan.	

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27	12. Ecological factors, including climate factors	This concept refers to the interconnectedness of the living and physical worlds and their impact on health.	One Health is a common framework for addressing these concepts.
28	13. Behavioral factors	This concept refers to actions and habits that influence health and well-being, including personal and contextual factors. Learning the major health behavior theories (e.g., health belief model) alone is not sufficient.	Learning theoretical models may be a component of coursework for this domain (e.g., students might learn about significant behavioral factors while learning how to apply health behavior theories to these factors).
29	14. Cultural factors	This concept includes how shared values, beliefs, and practices influence health, as well as understanding cultural humility.	
30	15. Structural factors	This concept refers to systemic factors including political influence; economic stability; education; healthcare access; neighborhood; and/or social/ community context.	
31	16. Global interdependence	This concept refers to the interconnectedness of the world's economies, cultures, political systems, and/or populations. It includes the movement of goods, services, people, information, technological innovation, and/or ideas across national borders.	Concepts that may be helpful to consider include global burden of disease; global commercial and environmental determinants; pathogen and data flows; and global health security and diplomacy.

MPH.2. Foundational Competencies

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65	<p>The MPH curriculum provides instruction in and assessment of each of the following competencies through didactic coursework.</p>	<p>No matter how many curricular variations or choices are available to MPH students, all curricula must specifically address each of the listed competencies.</p> <p>“Instruction” refers to teaching students about the underlying content and skills before asking students to attempt to perform a competency.</p> <p>“Assessment” refers to a structured assignment, written or oral, that allows a faculty member or similarly qualified individual to determine whether the student could reasonably be expected to perform the competency.</p> <p>“Didactic coursework” refers to structured, standardized classroom experiences led by a faculty member or similarly qualified individual.</p> <ul style="list-style-type: none"> • For this criterion’s purposes, internships or similar experiences may not be listed as the means of providing instruction and assessment. • For this criterion’s purposes, any activity or assignment that is a component of the integrative learning experience (Criterion MPH.7) may not be listed as the means of providing instruction and assessment, since the ILE is meant to draw on knowledge and skills the student has already attained and/or practiced. 	<p>No competencies may be mapped to assignments in elective courses.</p> <p>To show compliance,</p> <ul style="list-style-type: none"> • In the template, identify the one assessment and corresponding course that presents the strongest or clearest evidence, except in the specific cases outlined below. • In the ERF, provide all documentation given to students relevant to each assessment. This includes the full set of instructions and any background materials (e.g., scenario for a case study) or the specific quiz or exam question(s). • In the ERF, provide a course outline for the course in which the assessment occurs. The course outline must show weekly topics and activities and provide an overview of major course expectations. A syllabus may contain this information, but if it does not, the unit may pull materials from the learning management system that contain the necessary information. <p>Each row of the template should only include one course and assessment, except in the following scenarios.</p> <ol style="list-style-type: none"> 1) No single course or assessment fully addresses the concept, but each addresses a facet. In this case, the template must use parenthetical notation to specifically indicate <i>which</i> piece of the competency area each corresponds to. 2) In each of the following situations, the unit will need to list <i>multiple</i> courses and assessments in one or more rows of the template: <ul style="list-style-type: none"> • units with multiple concentrations that choose to address one or more competencies in concentration courses rather than in courses that are required of all MPH students • units that have different sets of required courses across different formats (e.g., a different set of foundational

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			<p>courses for online students, one or more differences in required courses for joint degree students)</p> <ul style="list-style-type: none"> • units that include choices or options within the required curriculum <p>Even when the circumstances above exist, the unit should present a single template with multiple entries per row, not multiple templates.</p> <p>Samples will be available in the Accreditation Data Templates.</p> <p>Classroom discussion is generally not an appropriate assessment, since it is typically not structured to allow faculty to determine whether the student could reasonably be expected to perform the competency.</p> <p>Generally, reviewers can infer that students received instruction prior to completing an assessment based on the assessment itself; however, if the overall context raises questions about whether the unit provided instruction prior to asking students to complete an assessment, reviewers may look to the written documentation about the course and/or require additional information from the unit.</p> <p>For instance, if assessment of students' abilities to apply leadership skills occurs in a course with no apparent focus on leadership, reviewers will seek additional information to ensure that students are not asked to perform a skill in which they do not appear to have received instruction. Therefore, it is important to ensure that course outlines clearly indicate where students learn content relevant to the competencies. In some cases, the unit may wish to supplement the course outline with additional evidence if the connection between the course content and competency is unlikely to be apparent to a peer reviewer. This is not necessary in cases where the course content and competency are clearly aligned. The interpretation and tips on individual competencies, below, may provide helpful context.</p>
68	Each MPH student must have an opportunity to demonstrate their ability to perform each	When a group assignment, alone, is intended to provide evidence of students' competency attainment, individual students' competence may be obscured, and not all group members	The following is a non-exhaustive list of methods that could be acceptable to supplement a group assessment. In each case, the specific implementation is important for verifying compliance, and the unit must be prepared to explain to peer reviewers why they

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	<p>competency and to receive feedback on their performance, as appropriate. Therefore, assignments or products produced by a group of students may not serve as the sole method of assessing a competency; when group projects are used for competency assessment, they must be supplemented with other methods designed to distinguish individual students' ability to perform the competency.</p>	<p>may be capable of performing the competency. Therefore, extra documentation is required.</p> <p>The MPH program is not fully equivalent to a job: it is intended to allow students to learn and grow, thus, the MPH program of study must give each student the opportunity to receive feedback on their personal development of foundational public health skills. Without a baseline of foundational competence as an individual, students may not be well positioned to function as collaborative team members later in their careers, so practicing collaboration skills cannot substitute for or obscure individual skill development.</p> <p>The template requires the unit to clearly identify any assessments that are submitted by groups of students rather than by each student alone and to describe supplementary assessment methods for individuals.</p> <p>A variety of methods may be appropriate to supplement group assessment, as noted in the tips column. Note the following:</p> <ul style="list-style-type: none"> Peer assessments or self-assessments that focus primarily on process (e.g., numeric ratings of how much individuals contributed) or general reflection (e.g., how well did you contribute to the group?) are not sufficient. The supplementary method need not be equally robust as the group assessment. For example, a complex group assignment that focuses on application of skills might be supplemented by one or more quizzes, exams, homeworks, or problem sets that examine each student's familiarity with the underlying facts, principles, steps in a process, etc. 	<p>believe that this method serves as an effective supplement to assess individual students.</p> <ul style="list-style-type: none"> Quizzes, exams, homeworks, or problem sets that examine each student's familiarity with the facts, principles, steps, etc. necessary to successfully complete a complex task or skill. Often, it would be appropriate to have multiple such assignments throughout the term as students progress through different phases of learning and completing the group project. Oral or written questions to which individual students must respond in which they articulate the rationale underlying the group's approach, justify their decisions, explain or extend the group's reasoning, etc. <p>For example, during a synchronous group presentation of a project, the instructor might ask probing questions designed to elicit substantive responses: each group member must be prepared to answer any question posed by the instructor and cannot "pass" to another group member, and all group members must participate by answering at least one question during the presentation.</p> <ul style="list-style-type: none"> Structured written or oral assignments completed throughout the duration of the project (i.e., not only once the project is complete) in which each student must explain and reflect on the substance of the project and the group's progress; the assignment must be sufficient to allow an instructor to discern among group members and identify individuals who may be "at risk" for not adequately developing the competency. It is the instructor's responsibility to determine how to address individuals who do not appear to be adequately developing the competency. Instructor or teaching assistants' synchronous observation of groups, during which they make note of group members' performance and contributions and identify individuals who may not be adequately developing the competency. This might include attending group meetings during which key discussions and decision making occur. It is the instructor's

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		<p>For each group assignment listed in the template, the unit must provide the following, in addition to the requirements associated with assessments completed by individuals:</p> <ul style="list-style-type: none"> • A succinct description, in the template, of the method(s) for individual competency assessment. • In the ERF, documentation given to students relevant to the method(s) for individual competency assessment. This includes the full set of instructions, writing prompt(s), or specific quiz or exam question(s). 	<p>responsibility to determine how to address individuals who do not appear to be adequately developing the competency.</p> <ul style="list-style-type: none"> • Instructor or teaching assistants' asynchronous observation of groups, during which they make note of group members' performance and contributions and identify individuals who may not be adequately developing the competency. It is the instructor's responsibility to determine how to address individuals who do not appear to be adequately developing the competency. This might involve <ul style="list-style-type: none"> ○ requiring groups to use Google Docs to track individuals' written contributions and regularly monitoring this document before the project's completion ○ requiring groups to use tools in which group members individually annotate the group product and regularly monitoring this document before the project's completion • Designing assignments in which group members must complete parallel tasks at each stage that they then draw together for a more comprehensive whole. For instance, each group member might analyze a comparable subset of data; the group then combines the individual members' analyses for use in the final product. The instructor can review these parallel formative tasks before the full, final project is submitted. • Requiring students to collaboratively develop and use rubrics that assess each individuals' substantive contributions and competency development. Ask students to articulate what they believe it would look like to adequately perform the competency in question. • Using instructor-developed rubrics for individual peer or self-assessment that are focused on the specific elements of the underlying skill, not primarily on interpersonal skills and teamwork. <p>The method should be thoughtfully selected, and, typically, methods should allow for formative assessment and/or feedback before a final product is submitted.</p>
76	1. Apply epidemiological methods to address	Assessment must include the application of core epidemiologic concepts (e.g., bias, error)	Units may consider a range of "public health questions" to which students will apply epidemiological methods (e.g., questions

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	public health questions	and principles (e.g., sample size, incidence, prevalence, morbidity, etc.) to understand a public health problem through interpretation of existing data or development of a study design.	relating to environmental exposures, questions relating to assessing a specific community's health).
77	2. Analyze quantitative data using statistical methods	Analysis must be conducted using software or programming, including, as appropriate, emerging technologies.	Units may consider addressing emerging technologies (e.g., AI, natural language processing) in instruction and assessment. Units may consider using alumni feedback and feedback from external partners to consider which software or applications are currently most useful for likely post-graduation employment. Specialized statistical software is not required if the unit determines that Excel or comparable software is likely to be relevant to students' post-graduation careers.
78	3. Analyze qualitative data	Analyzing data that are already grouped for the student is not sufficient. Students must apply recognized methodological techniques (e.g., coding, thematic analysis, content analysis, grounded-theory methods). Analysis must be conducted using software or programming, including, as appropriate, emerging technologies.	Ensure clarity on the software or computer application used. Excel or Word may be sufficient for this competency—use of specialized qualitative analysis software is not required. Units may consider addressing emerging technologies (e.g., AI, natural language processing) in instruction and assessment.
79	4. Assess the credibility of data sources	The focus must be on the credibility of specific sources for data used in support of an identified finding or conclusion. Evaluating the overall quality of a published article or report is not sufficient, nor is general study design critique (e.g., identifying possible selection bias) without a more specific examination of particular data. See tips.	Assignments may focus on identifying potential bias due to funding sources, organizational affiliations of the researchers, choice of study participants, issues related to data equity, etc. Sources other than data published in well-established, peer-reviewed journals are typically most amenable to learning and practicing this skill (e.g., reports from think tanks, industry groups, governmental and non-governmental bodies, etc.). Sources of information may be quantitative or qualitative.
80	5. Interpret results of data analysis for public health research, policy, or practice	Students must analyze, draw conclusions, make recommendations, etc. based on quantitative and/or qualitative data. Simple assessment of whether a result is statistically significant is not sufficient. Interpretation of a published article or set of articles is not sufficient, since an article has	

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		already explicated or drawn conclusions from the output of data analysis.	
83	6. Assess needs, assets, and capacities that affect a community's health	<p>Assignment must address assets and capacities, in addition to needs or gaps.</p> <p>Students must use primary or secondary data to assess a specific community defined by the student or instructor.</p>	
84	7. Examine systemic factors that contribute to challenges in achieving optimal population health status for a given community or communities	<p>The assessment must require an examination of interdependent factors that influence the health of one or more designated communities or populations.</p> <p>The assessment must address more than one factor. Factors include environmental, biological, ecological, behavioral, cultural, and/or structural factors, and/or global interdependence.</p>	Units may wish to focus instruction and assessment on the types of communities in which students are likely to be employed and factors particularly relevant to those settings, if applicable.
86	8. Propose strategies to collaborate across groups for influencing public health outcomes	"Strategies" may address identifying and/or engaging with relevant partners. Students must propose actions for collaborating with partners for one or more specific scenarios or issues.	<p>Considering multi-sectoral partners may be appropriate.</p> <p>The assignment may consider the skills needed for recognizing appropriate partners and engaging with them in an appropriate manner, chosen based on intended outcomes. Relevant concepts may include the importance of sharing power and including individuals and local organizations as fellow experts and decisionmakers.</p>
89	9. Design a population-based program or policy, taking into consideration social and/or community contexts	<p>The assignment must require students to address social practices or community characteristics relevant to the population(s) for whom the program or policy is designed; thus, the instructor or student must explicitly define the population(s).</p> <p>For the "program" option, this competency can be addressed via a program design or program development assignment.</p> <p>For the "policy" option, students must actually draft proposed text for, e.g., a local ordinance, hospital or school district policy, municipal regulation, etc.</p>	Consideration of social practices or community characteristics might include cultural adaptation or tailoring, community involvement in planning, etc.

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		Writing a policy analysis memo that assesses different options and recommends an approach, without drafting the actual language that would be used, is not sufficient to address this competency.	
91	10. Design a plan to evaluate a population-based program or policy, taking into consideration social and/or community contexts	<p>The assignment must require students to address social practices or community characteristics relevant to the population(s) for whom the program or policy is designed; thus, the instructor or student must explicitly define the population(s).</p> <p>Students must outline a plan or approach relevant to formative evaluation, process/implementation evaluation, or outcome/effectiveness evaluation of a specific program or policy. It is not necessary to implement the evaluation.</p> <p>Developing the plan or approach might include identifying key indicators, planning for primary or secondary data collection, and defining an analysis plan.</p> <p>Selecting or applying the appropriate statistical test or other analytical approach to data that have already been identified for the student is not sufficient without other elements mentioned above.</p>	Consideration of social practices or community characteristics might include cultural adaptation or tailoring, community involvement in planning, etc.
93	11. Advocate for policies to improve health	<p>To demonstrate that they would be able to advocate for policies, students must, at a minimum, produce a product that would be part of an advocacy campaign or effort designed to influence policy makers such as legislators or regulators (e.g., legislative testimony, fact sheet, advocacy strategy outline, etc.).</p> <p>Ability to “advocate” for a position in a debate or in standard persuasive communication not</p>	<p>“Policy is a law, regulation, procedure, administrative action, incentive, or voluntary practice of governments and other institutions.”¹</p> <p>“Policies to improve health” include those related to social drivers of health.</p> <p>Relevant precursor knowledge may include assessing power relations, power mapping, and strategies such as collaborating</p>

¹ Centers for Disease Control and Prevention. (2024, September 23). *Definition of policy*. <https://www.cdc.gov/polaris/php/policy-resources-trainings/definition-of-policy.html>

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		directed to policy makers or as part of an advocacy campaign is not sufficient.	both with other agencies as well as outside strategies, such as collaborating with community organizing groups
94	12. Assess the impact of policies on public health	<p>Students must locate, use, and/or interpret existing data (e.g., on health behaviors, health exposures, or health outcomes) to assess the impact or potential impact of an existing or proposed policy; however, empirical evaluation studies using statistical data are not required.</p> <p>A literature review, systematic review, or similar activity focusing on the conclusions of published articles is not sufficient; the student must access specific data points. See tips.</p>	<p>“Policy is a law, regulation, procedure, administrative action, incentive, or voluntary practice of governments and other institutions.”²</p> <p>A variety of policy types may be appropriate for this competency (e.g., policies relevant to climate change or emerging technologies).</p> <p>Students may draw on data that are reported within published articles; data contained in policy reports by governmental or non-governmental bodies; or from publicly available data sets (e.g., dashboards).</p>
97	13. Communicate audience-appropriate public health content orally	<p>Students must demonstrate the ability to orally communicate with a specifically identified audience (selected by the instructor or student).</p> <p>The assignment’s explicit focus must include attentiveness to the audience’s characteristics and needs, as tailoring information for a specific audience is this competency’s distinguishing feature.</p> <p>Students must deliver the communication synchronously or via recording: writing a script is not sufficient.</p>	<p>Individuals from the intended audience do not need to receive the communication, as long as the faculty member assesses the communication on students’ ability to appropriately communicate with the specified audience.</p> <p>Students may use emerging technologies for oral communication to meet intended audiences where they are (e.g., TikTok, Facebook Live, Instagram Live).</p> <p>Students may practice communication skills relating to a range of topics (e.g., risk communication).</p>
98	14. Translate public health science for the general public	<p>Students must prepare the most appropriate format for the intended audience (e.g., narrative, graphical, and/or oral material).</p> <p>The material must interpret and communicate appropriately complex scientific and/or technical information with consideration for factors such as literacy and health literacy.</p> <p>The general public includes non-peer, non-academic audiences without training in public</p>	<p>Individuals from the general public do not need to receive the communication, as long as the faculty member assesses the communication on students’ ability to appropriately communicate with them.</p> <p>Instruction and assessment may focus on concepts such as avoiding jargon, literacy and health literacy, etc.</p> <p>If desired, emerging technologies (e.g., AI, natural language processing) may be used as a tool to facilitate translation but should not be the sole source for generating the final product.</p>

² Ibid

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		health or related fields. Students may choose a specific subset or population within the general public as long as it meets the non-peer, non-trained definition.	
99	15. Apply communication strategies to address inaccurate or misleading public health information	<p>Students must prepare or design specific narrative, graphical, and/or oral material OR must prepare a communication strategy or campaign document that addresses particular inaccurate or misleading information.</p> <p>Explanation of general principles for addressing such information is not sufficient without application to a specific scenario or set of information.</p>	<p>Information generated by AI, information shared on social media, etc. may be appropriate to consider.</p> <p>Although an assignment in which students describe general principles to address disinformation or misinformation is not sufficient to demonstrate this competency, <i>learning key principles and techniques is necessary</i> to be able to complete an appropriate assessment. If not apparent from other context, reviewers may request information on the instruction provided to students.</p>
103	16. Apply leadership principles to address an organizational challenge	<p>Students must develop their own strategies, grounded in leadership principles in which they have received instruction, for a given challenge by responding to a case study or scenario.</p> <p>"Leadership is a set of mindsets and behaviors that aligns people in a collective direction, enables them to work together and accomplish shared goals, and helps them adjust to changing environments."³</p> <p>It is insufficient to describe general leadership principles in an essay or exam, describe leadership skills exhibited by others, or have students self-reflect on their personal leadership styles without requiring application to a particular set of facts.</p>	<p>Given that students must learn specific leadership principles before attempting to perform this competency, units may be asked for additional evidence if this precursor instruction is not readily evident based on other context.</p> <p>Reflecting on, describing, and analyzing leadership styles and skills in oneself or others may be a helpful precursor to this skill, but the assignment must extend beyond such reflection.</p> <p>Key leadership principles might include ethical practice, accountability, collaboration, and/or adaptability, among others.</p>
104	17. Develop a project or organizational budget, with justification	Students must produce both a budget table and accompanying narrative that explicates assumptions or otherwise expands on the budget table (i.e., the narrative should not simply restate the figures in words).	
105	18. Use a systems thinking tool to visually represent and	Evidence of competency demonstration must include both non-narrative and narrative content.	Issues that may be particularly amenable to demonstrating this competency include those relating to the physical environment, One Health, climate, and ecology and relating to preventing,

³ McKinsey & Company. (2014 September 10). *What is leadership?* <https://www.mckinsey.com/featured-insights/mckinsey-explainers/what-is-leadership> (accessed 7/21/25)

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	<p>explain a public health issue</p>	<p>For the non-narrative content, students must show that they can apply at least one specific tool from the discipline of systems thinking: causal loop diagrams, concept maps, systems archetypes, and network analyses are the most commonly applicable tools.</p> <p>For the narrative content, students must either write or orally narrate their systems thinking analysis of the issue.</p> <p>Describing the value of systems thinking or how systems thinking <i>would apply</i> is not sufficient.</p> <p>Logic models and evidence tables are not sufficient to address this competency.</p>	<p>preparing for, mitigating, responding to, and recovering from emergency scenarios and disaster outcomes.</p> <p>The following references may be useful:</p> <ul style="list-style-type: none"> • Peters, D.H. (2014). The application of systems thinking in health: Why use systems thinking? <i>Health Research Policy and Systems</i>, 12, 51. doi:10.1186/1478-4505-12-51 • https://health-policy-systems.biomedcentral.com/articles/10.1186/1478-4505-12-51 (this article has a number of references) • Senge, P. (2006). <i>The fifth discipline: The art and practice of the learning organization</i>. New York: Doubleday. • Rowitz, L. (2014) Public health leadership: Putting principles into practice. Burlington: Jones & Bartlett. Chapter 4 - A systems and complexity perspective