GRADUATING
STUDENT EXIT SURVEY

Fall 2010 – Summer 2011

Prepared by
The Offices of Academic and Student Affairs
June 2012
**TABLE OF CONTENTS**

List of Tables

<table>
<thead>
<tr>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>v</td>
</tr>
</tbody>
</table>

Executive Summary

<table>
<thead>
<tr>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>vi</td>
</tr>
</tbody>
</table>

Survey Questions

**CLASS DEMOGRAPHICS**

- Demographics – age, gender, race, US citizenship  
- Degree Program  
- Degree and Program Major  

**ACADEMIC ADVISING**

Q01. The academic advising system for students was clearly explained to me.  
Q02. My academic advisor was readily accessible to me.  
Q03. My academic advisor treated me with respect.  
Q04. My advisor was sufficiently familiar with the degree programs and curricula to guide me in selecting my course of study  
Q05. My advisor understood my career goals.  
Q06. I clearly understood the role of my advisor and committee member(s) as guides in my academic program.  
Q07. I was comfortable expressing my ideas to my academic advisor and committee members.  
Q08. I was an active participant with my committee.  
Q09. Comment cards were useful for my committee and me.  

**FACULTY**

Q10. There were faculty available whose fields of expertise satisfied my academic interests.  
Q11. I was intellectually challenged by my interactions with SPH faculty.  
Q12. The SPH faculty were approachable.  
Q13. The SPH faculty were enthusiastic about their subject.  
Q14. The SPH faculty motivated me to do my best.  
Q15. The SPH faculty were effective teachers.  
Q16. The SPH faculty treated me with respect.  

**RESOURCES**

**FACILITIES**

Q24. Labs  
Q24a. Equipment  
Q24b. Availability  
Q24c. Amount of space  
Q25. Bike Racks  
Q25a. Availability  
Q25b. Functionality  
Q26. Study areas/Meeting spaces  
Q26a. Availability  
Q26b. Amount of space  
Q26c. Functionality  
Q27. Classrooms  
Q27a. Size  
Q27b. Comfort  
Q27c. Arrangement  
Q27d. Adequacy of A/V equipment  
Q28. Lunchroom/Vending area  
Q28a. Cleanliness  
Q28b. Atmosphere  
Q28c. Quality of food  

*Tabular data omitted* - 

Graduating Student Exit Survey – Fall 2010-Summer 2011
Q28d. Variety of food
Q28e. Vending choices
Q28f. Services

CE/THESIS PROPOSAL

RESEARCH WORKSHOP

Q34 Did you attend a Research Services Student Proposal Workshop?
   NO. Did you attend a Research Services Student Proposal Workshop offered by the Associate Dean for Research? If not, why?
   YES. Did you attend a Research Services Student Proposal Workshop offered by the Associate Dean for Research? If so, did the workshop adequately address the proposal process? Why or why not?

RESEARCH

PRACTICUM EXPERIENCE

CAPSTONE COURSE AND EXAM

Q44. I took the Capstone Course and Exam as my Culminating Experience (CE).

ACADEMIC PROGRAMS AND OUTCOMES (For all students)

Q45. The academic standards at the School of Public Health are about right in terms of rigor.
Q46. Some students do not seem to be qualified for admission to a graduate school.
Q47. I found the symposiums, colloquia, seminars and other extra-curricular programs stimulating and broadening.
Q48. The school provided courses enabling me to meet my degree program objectives.
Q49. Courses were available so that I could finish my program in a timely manner.
Q50. I was satisfied with the # of courses available in my program area.
Q51. I would have liked the opportunity to take evening classes.
Q52. The educational experience I had as a student at the School of Public Health met my expectations.
Q53. My UTH-SPH education has prepared to meet the demands of my current or first public-health related job after leaving the School.
Q54. The thesis/dissertation helped me to integrate the breadth of public health knowledge.
Q55. The CE course and Exam helped me to integrate the breadth of public health knowledge.
Q56. The thesis/dissertation gave me the opportunity to apply the knowledge that I gained in my educational program toward a relevant public health problem.
Q57. The CE Course and Exam gave me the opportunity to apply the knowledge that I gained in my educational program to a relevant public health problem.
Q58. I found the thesis/dissertation to be a useful culminating experience for my degree program.
Q59. I found the CE Course and Exam to be a useful culminating experience for my degree program.
Q60. The thesis/dissertation helped to prepare me for a public health career.
Q61. I found the CE Course and Exam helped to prepare me for a public health career.
Q62. Pass/Fail grading encouraged me to attempt courses that I might not have taken under a traditional letter grading system.
Q63. I worked equally hard for an “A” or a “P”.
Q64. Having a GPA reported from my SPH courses will help me in my work or my future educational goals.

ACADEMIC PROGRAMS AND OUTCOMES (For MPH and DrPH students only)

Q65. My UT SPH program enabled me to synthesize and integrate knowledge acquired in course work and other learning experiences.
Q66a. My UT SPH Program provided me with an understanding of biostatistics.
Q66b. My UT SPH Program provided me with an understanding of epidemiology.
Q66c. My UT SPH Program provided me with an understanding of environmental sciences.
Q66d. My UT SPH Program provided me with an understanding of management and policy/health services administration.
Q66e. My UT SPH Program provided me with an understanding of social and behavioral sciences.
Q67. My UTSPH program provided skills and experience in applying basic public health concepts and specialty knowledge to the solution of community health problems.

ACADEMIC PROGRAMS AND OUTCOMES (For MS and PhD students only)

Q68. My research degree program adequately prepared me for an academic career.
Q69. My UTSPH degree program provided me with a public health perspective in the application of my specialty area.
### QUALITY OF STUDENT LIFE

<table>
<thead>
<tr>
<th>Q70</th>
<th>The School of Public Health provides a variety of community service opportunities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q71</td>
<td>Were you aware of the Student Association during your time in the school?</td>
</tr>
<tr>
<td>Q72</td>
<td>I participated in SPH Student Association social activities.</td>
</tr>
<tr>
<td>Q73</td>
<td>I worked in the Student Association as an officer on SPH committees.</td>
</tr>
<tr>
<td>Q74</td>
<td>In general, the quality of life at the School of Public Health is satisfactory.</td>
</tr>
<tr>
<td>Q75</td>
<td>I felt a part of a diverse, inclusive public health community at SPH.</td>
</tr>
</tbody>
</table>

### EDUCATIONAL TECHNOLOGY

<table>
<thead>
<tr>
<th>Q76</th>
<th>Did you ever take any classes via ITV?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q76a</td>
<td>My experience in ITV was satisfactory.</td>
</tr>
<tr>
<td>Q76b</td>
<td>I would recommend an ITV course to a fellow student.</td>
</tr>
<tr>
<td>Q77</td>
<td>Did you ever take any classes online?</td>
</tr>
<tr>
<td>Q77a</td>
<td>My experience with online courses was satisfactory.</td>
</tr>
<tr>
<td>Q77b</td>
<td>I would recommend an online course to a fellow student.</td>
</tr>
<tr>
<td>Q78</td>
<td>Would you take a continuing education workshop if available online in the future?</td>
</tr>
<tr>
<td>Q79</td>
<td>Would you take a degree program if available online in the future?</td>
</tr>
</tbody>
</table>

### EMPLOYMENT

<table>
<thead>
<tr>
<th>Q80</th>
<th>During the majority of time that I was a student, I was: (employed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q81</td>
<td>If you were employed during your degree program, were you working in a public health related field?</td>
</tr>
<tr>
<td>Q82</td>
<td>Did you ever work as a graduate assistant?</td>
</tr>
<tr>
<td>Q83</td>
<td>Did you work as a teaching assistant?</td>
</tr>
<tr>
<td>Q84</td>
<td>Do you have a need for resources from the SPH Career Services in transitioning from student to public health professional?</td>
</tr>
<tr>
<td>Q85</td>
<td>Were there any Career Services unavailable that you would have utilized?</td>
</tr>
<tr>
<td>Q86</td>
<td>What resources have you utilized here at the SPH to assist you in searching for employment?</td>
</tr>
<tr>
<td>Q86</td>
<td>What resources have you utilized here at the SPH to assist you in searching for employment?</td>
</tr>
<tr>
<td>Q86b</td>
<td>I would recommend an online course to a fellow student.</td>
</tr>
<tr>
<td>Q87</td>
<td>What resources have you utilized here at the SPH to assist you in searching for employment?</td>
</tr>
<tr>
<td>Q88</td>
<td>Faculty/Students</td>
</tr>
<tr>
<td>Q89</td>
<td>Is your current or pending work based in the United States?</td>
</tr>
<tr>
<td>Q90</td>
<td>Is your current or pending position in a medically underserved area or in a developing country?</td>
</tr>
</tbody>
</table>

### OTHER COMMENTS

<table>
<thead>
<tr>
<th>Q93</th>
<th>What would have helped you complete your degree sooner?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q94</td>
<td>What skills acquired at UTSPH do you think will be most useful in your career?</td>
</tr>
<tr>
<td>Q95</td>
<td>What aspects of public health practice or research were not adequately addressed in your program at UTSPH?</td>
</tr>
<tr>
<td>Q96</td>
<td>Would you recommend UTSPH to others who are interested in graduate study in public health?</td>
</tr>
</tbody>
</table>

### GENERAL SATISFACTION

<table>
<thead>
<tr>
<th>Q97</th>
<th>Please tell us about the best educational experience you had while at SPH?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q98</td>
<td>Please tell us about the class you had at the SPH that you think will help you the most in the next step of your career.</td>
</tr>
<tr>
<td>Q99</td>
<td>What is the greatest strength of UTSPH?</td>
</tr>
<tr>
<td>Q100</td>
<td>What is the greatest weakness?</td>
</tr>
<tr>
<td>Q101</td>
<td>Would you participate in alumni association activities?</td>
</tr>
<tr>
<td>Tables - Executive Summary</td>
<td>Survey Question</td>
</tr>
<tr>
<td>---------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>1. Major Strengths and Weaknesses of UTSPH</td>
<td>Q. 99-100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tables – Full Report</th>
<th>Survey Question</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Class Demographics</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>3. Degree Programs:</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>4. Degree and Major of Respondents</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>5. Academic Advising</td>
<td>Q. 1-9</td>
<td>2</td>
</tr>
<tr>
<td>6. Faculty</td>
<td>Q. 10-16</td>
<td>2</td>
</tr>
<tr>
<td>7. Facilities</td>
<td>Q. 24-28</td>
<td>3</td>
</tr>
<tr>
<td>8. Research Workshop</td>
<td>Q. 34</td>
<td>9</td>
</tr>
<tr>
<td>9. Capstone Course and exam</td>
<td>Q. 44</td>
<td>12</td>
</tr>
<tr>
<td>10. Academic Programs and Outcomes – all students</td>
<td>Q. 45-64</td>
<td>13</td>
</tr>
<tr>
<td>11. Academic Programs and Outcomes – MPH/DrPH</td>
<td>Q. 65-67</td>
<td>14</td>
</tr>
<tr>
<td>12. Academic Programs and Outcomes – Ms/PhD</td>
<td>Q. 68-69</td>
<td>15</td>
</tr>
<tr>
<td>13. Quality of Student Life</td>
<td>Q. 70-75</td>
<td>15</td>
</tr>
<tr>
<td>14. Educational Technology</td>
<td>Q. 76-79</td>
<td>16</td>
</tr>
<tr>
<td>15. Employment</td>
<td>Q. 80-92</td>
<td>17-19</td>
</tr>
<tr>
<td>16. Overall Recommendation</td>
<td>Q. 96</td>
<td>34</td>
</tr>
<tr>
<td>17. Alumni Association Activities</td>
<td>Q. 101</td>
<td>56</td>
</tr>
</tbody>
</table>
Executive Summary

Over the last two academic years (2009-2011), the Student Exit Survey questions have been modified to allow the academic and student affairs teams to identify areas of student concern and to allow for input in the development and enhancement of programs, services and resources for all students. This survey reflects the responses from UTSPH students who graduated in the 2010-2011 academic year.

A total of 343 students graduated from the School of Public Health during the fall 2010 through summer 2011; of those, 247 graduates (72%) completed the student exit survey. Percentages in the report are based on the number of responses to individual questions. Student comments are included where requested and are taken directly from the individual surveys. Comments have not been edited other than the omission of personal identifiers. Where possible, student comments were placed into categories and statistics are included for a three-year period so that results may be compared over time.

Seventy-two percent (72%) of respondents were female (177) and 28% were male (70). Approximately, fifty percent (49.8%) were full-time students during their degree program, and 50.2% percent were part-time. Of those employed at the time of graduation, the majority (95.7%) reported that they were working in a public health related field. The median age of survey participants was 29 years and the percent of graduates by degree program is as follows: MPH, 84.5%; DrPH, 2.4%; MS, 2.8%; and PhD, 10.5%. Survey participants from the regional campuses accounted for 21% of all MPH graduates in 2010-2011. Further, 81% of graduates were U.S. citizens or permanent residents, and 31.4% were under-represented minorities.

It is of note that there was an error in the design of the 2010-2011 survey that allowed students who answered “no” to gateway questions related to use of a variety of student services (questions 17-23) to nonetheless respond to subsequent questions regarding the quality, friendliness and efficiency of the service. Thus, all quantitative data related to these questions were excluded from this report. Individual level comments regarding all of these services are, however, included.

Academic Advising

Of the 244 respondents to the academic advising questions, most stated their advisors were readily accessible (87.3%), provided appropriate guidance (89.3%), and understood their career goals (89.3%). In addition, 88.1% reported that they were active participants in their advisory committees, and 88.9% stated that they were comfortable in expressing their ideas with their advisors/committee members.

While the vast majority of graduates reported positive experiences with their advisors and their committee structure, some students were critical in their comments with regard to the 1) quality of the advising, 2) inconsistent messages related to degree requirements, and 3) the availability of faculty (see comments for Q.99 Strengths and Q.100 Weakness). In the fall of 2010, a new advising structure was implemented based on feedback from previous graduates. However, an observation continued to occur in the 2010-2011 survey. Only 46.3% of graduates thought the comment cards used by faculty were useful in the end of semester evaluation meeting process, which is similar to graduates in 2008-2009 (50.2%) and 2009-2010 (53.2%).

Faculty

Eighty-three percent (83.2%) of graduates reported that faculty expertise was available for their particular academic interest, and 89.8% were intellectually challenged by the faculty. The UTSPH faculty were rated as effective teachers by 88.9% of survey participants and faculty were praised in graduates’ comments for their expertise, teaching and mentoring. A small number of negative comments (29) with regard to faculty were submitted when asked of the school’s weaknesses.

Academic Programs and Standards

Approximately 79.6% of respondents indicated that their educational experiences met their expectations, and 77.5% agreed with the degree of academic rigor which is significantly less than the previous year (AY 2009-2010 - 85.5%). In addition, 88.2% reported that the school provided courses to meet the objectives of
their degree programs. Overall, 85.5% of survey participants reported that courses were available for finishing their programs; however, several respondents noted that they wanted more courses available after 5:00 p.m. (49.1%).

Of the MPH and DrPH degree program respondents, 94% thought that the program enabled them to synthesize and integrate public health knowledge. The great majority (95.8%) reported that their program provided them with the skills and experience in applying basic public health concepts and specialty knowledge to the solution of community health problems.

In 2010-2011, there was a significant drop in the percentage of MS and PhD graduates who reported that they were adequately prepared for academic careers than in the previous year (64.8% vs 79.6%). Further, 71.6% of MS and PhD graduates reported that they were provided with a public health perspective in the application of their academic specialty area compared to 2009-2010 (88.1%) and 2008-2009 (86%).

Research
Students in the MPH program who graduated in the summer of 2010, were in the first MPH cohort that had the option of completing either a written culminating experience (WCE) or a capstone course. Consequently, for the first time in the School's history, a portion of the graduating class did not participate in a research experience. Unfortunately, a gateway question related to the completion of a WCE, thesis or dissertation was not added to the student exit survey. Therefore, quantitative data for the aforementioned questions were not included in this report. Future surveys will be designed to have discrete questions that address guided research experiences via WCE or thesis / dissertation, vs other types of research experiences available within the school. Individual level comments regarding student research experiences are, however, included.

School Resources
During the 2010-2011 academic year, the school’s resources were used by over 90% of the survey respondents. Specifically, percentages for use by unit are as follows: library services (84.9%), computer laboratory (73.5%), admissions office (79.1%), research services (37.7%), student affairs office (86.3%), and classrooms (94.7%).

As noted above, there was an error in the 2010-2011 survey that allowed students who answered “no” to gateway questions about use of school resources (questions 17-23) to nonetheless respond to subsequent questions regarding the quality, friendliness and efficiency of the resource and service. Consequently, data on students’ ranking of these features may not be directly comparable to data from previous years, and are therefore not included in this report.

Of the 85.2% of graduates who had taken an ITV class during this period, 71.3% reported a satisfactory ITV experience, and 66.7% would recommend an ITV course to others which is slightly less than the previous year (70.3%). Eighty-one percent (81%) of graduates reported taking an online course, of which 76.2% would recommend an online course to others.

“What would have helped you [the graduate] complete their degree?”
One-hundred six (106) comments were submitted by respondents to question 93 of the survey. Nineteen percent (19%) of the comments were related to the lack of communication and guidance provided by the faculty/advisor (“not accessible” or “did not return calls”), insufficient mentoring (“not enough” or “meetings cut short”) and incorrect advising (“didn’t know degree requirements” or “did not know academic and/or thesis procedures”). Fifteen percent (15%) listed the lack of faculty mentorship and administrative assistance with the thesis project. These graduates also noted that research options were limited.

Ten percent (10%) noted that the capstone course and exam was a good culminating experience option and wish it were offered earlier for those struggling to complete the thesis. Eleven percent (11%) noted course availability needed to increase for part-time and dual degree students; and 16% of graduates felt that the
student services and resources (9 comments), including those at regional campuses (8 comments), were not enough to meet the needs of students.

Finally, Table 1 below lists the major strengths (156 comments) and weaknesses (154 comments) of the UT School of Public Health as reported by graduates:

Table 1: Major Strengths and Weaknesses of UTSPH (Survey Q.99 and Q.100)

<table>
<thead>
<tr>
<th>Strengths (n = # of comments)</th>
<th>Weaknesses (n = # of comments)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty expertise, guidance (52) and Staff (8)</td>
<td>Faculty Advising (29)</td>
</tr>
<tr>
<td>Course availability including variety of ITV and online options (24)</td>
<td>Regional Campus System/Resources (27)</td>
</tr>
<tr>
<td>Diversity (21)</td>
<td>Student Services and Administration (23)</td>
</tr>
<tr>
<td>Location (9) and Regional Campuses (7)</td>
<td>Academic Rigor (11)</td>
</tr>
<tr>
<td>School Atmosphere/Environment (6)</td>
<td>Course Availability (5)</td>
</tr>
<tr>
<td>Research (5)</td>
<td></td>
</tr>
</tbody>
</table>

Increasingly, we see graduates, alumni and current students providing feedback to faculty and administrative leaders throughout the academic year and not just during the completion of the exit survey as part of the graduation check-out procedure. Examples include the following:

1) As a result of a request made by the student association, all students can now access course evaluations on-line;
2) Students and alumni are invited to review and provide input into the accreditation, Health Science Center and UTSPH academic policy process by participating as active members of University and School Councils and Committees; and
3) Students are invited to one-on-one or group meetings with the school’s leadership.

Students provide qualitative, quantitative and anecdotal information to the leadership in formal Council meetings and other open forums, with the expectation that the issues brought forth will be addressed immediately and subsequent action items, will be shared via various formats. Such is the case with the exit survey and the data presented in the full report, Graduate Student Exit Survey, fall 2010- summer 2011. The full report will be distributed to faculty and staff, as well as posted to the UTSPH website.
### Table 2. Class Demographics

<table>
<thead>
<tr>
<th>Attendance</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>49.8</td>
</tr>
<tr>
<td>Part-time</td>
<td>50.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>72</td>
</tr>
<tr>
<td>Male</td>
<td>28</td>
</tr>
</tbody>
</table>

### Table 3. Degree Programs

<table>
<thead>
<tr>
<th>Degree</th>
<th>Respondents</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DrPH</td>
<td>6</td>
<td>2.4</td>
</tr>
<tr>
<td>MPH</td>
<td>209</td>
<td>84.5</td>
</tr>
<tr>
<td>PhD</td>
<td>26</td>
<td>10.5</td>
</tr>
<tr>
<td>MS</td>
<td>6</td>
<td>2.6</td>
</tr>
<tr>
<td>TOTAL</td>
<td>247</td>
<td>100</td>
</tr>
</tbody>
</table>

### Table 4. Degree and Major of Respondents

<table>
<thead>
<tr>
<th>Division</th>
<th>Degree</th>
<th>Graduates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(n)</td>
<td>(%)</td>
</tr>
<tr>
<td>Biostatistics</td>
<td>MPH</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>MS</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>PhD</td>
<td>8</td>
</tr>
<tr>
<td>Environmental and Occupational Health Sciences</td>
<td>MPH</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>DrPH</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PhD</td>
<td>2</td>
</tr>
<tr>
<td>Epidemiology and Disease Control</td>
<td>MPH</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>MS</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PhD</td>
<td>12</td>
</tr>
<tr>
<td>Health Promotion and Behavioral Sciences</td>
<td>MPH</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td>DrPH</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PhD</td>
<td>4</td>
</tr>
<tr>
<td>Management, Policy and Community Health</td>
<td>MPH</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>DrPH</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>PhD</td>
<td>4</td>
</tr>
<tr>
<td>Other (International Family Health)</td>
<td>MPH</td>
<td>1</td>
</tr>
</tbody>
</table>

### Regional Campuses

<table>
<thead>
<tr>
<th>Campus</th>
<th>Degree</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austin Regional Campus</td>
<td>MPH</td>
<td>16</td>
</tr>
<tr>
<td>Brownsville Regional Campus</td>
<td>MPH</td>
<td>6</td>
</tr>
<tr>
<td>Dallas Regional Campus</td>
<td>MPH</td>
<td>20</td>
</tr>
<tr>
<td>El Paso Regional Campus</td>
<td>MPH</td>
<td>4</td>
</tr>
<tr>
<td>San Antonio Regional Campus</td>
<td>MPH</td>
<td>32</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>US Citizenship</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>80.9</td>
</tr>
<tr>
<td>No</td>
<td>19.1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA</td>
<td>26.3</td>
</tr>
<tr>
<td>BK</td>
<td>9.4</td>
</tr>
<tr>
<td>CA</td>
<td>42.3</td>
</tr>
<tr>
<td>HA</td>
<td>21.1</td>
</tr>
<tr>
<td>NA</td>
<td>0.9</td>
</tr>
</tbody>
</table>
Table 5. Academic Advising (Survey Questions 1-9)

<table>
<thead>
<tr>
<th>Academic Advising</th>
<th>Total Responses</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The academic advising system for students was clearly explained to me.</td>
<td>243</td>
<td>73.0</td>
<td>74.7</td>
<td>77.3</td>
</tr>
<tr>
<td>2. My academic advisor was readily accessible to me.</td>
<td>244</td>
<td>89.9</td>
<td>88.4</td>
<td>87.3</td>
</tr>
<tr>
<td>3. My academic advisor treated me with respect.</td>
<td>244</td>
<td>95.5</td>
<td>93.6</td>
<td>93.5</td>
</tr>
<tr>
<td>4. My advisor was sufficiently familiar with the degree programs and curricula to guide me in selecting my course of study.</td>
<td>244</td>
<td>85.8</td>
<td>87.3</td>
<td>89.3</td>
</tr>
<tr>
<td>5. My advisor understood my career goals.</td>
<td>243</td>
<td>87.8</td>
<td>87.8</td>
<td>89.3</td>
</tr>
<tr>
<td>6. I clearly understood the role of my advisor and committee member(s) as guides in my academic program.</td>
<td>244</td>
<td>88.3</td>
<td>86.5</td>
<td>85.3</td>
</tr>
<tr>
<td>7. I was comfortable expressing my ideas to my academic advisor and committee members.</td>
<td>243</td>
<td>91.4</td>
<td>90.7</td>
<td>88.9</td>
</tr>
<tr>
<td>8. I was an active participant with my committee.</td>
<td>244</td>
<td>93.9</td>
<td>91.8</td>
<td>88.1</td>
</tr>
<tr>
<td>9. Comment cards were useful for my committee and me.</td>
<td>244</td>
<td>50.2</td>
<td>53.2</td>
<td>46.3</td>
</tr>
</tbody>
</table>

Table 6. – Faculty (Survey Questions 10-16)

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Total Responses</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. There were faculty available whose fields of expertise satisfied my academic interests.</td>
<td>244</td>
<td>88.8</td>
<td>86.6</td>
<td>83.2</td>
</tr>
<tr>
<td>11. I was intellectually challenged by my interactions with SPH faculty.</td>
<td>245</td>
<td>86.3</td>
<td>86.5</td>
<td>89.8</td>
</tr>
<tr>
<td>12. The SPH faculty were approachable.</td>
<td>245</td>
<td>89.9</td>
<td>89.5</td>
<td>93.0</td>
</tr>
<tr>
<td>13. The SPH faculty were enthusiastic about their subject.</td>
<td>245</td>
<td>89.8</td>
<td>90.7</td>
<td>95.1</td>
</tr>
<tr>
<td>14. The SPH faculty motivated me to do my best.</td>
<td>245</td>
<td>83.1</td>
<td>85.5</td>
<td>84.9</td>
</tr>
<tr>
<td>15. The SPH faculty were effective teachers.</td>
<td>245</td>
<td>83.1</td>
<td>85.4</td>
<td>88.9</td>
</tr>
<tr>
<td>16. The SPH faculty treated me with respect.</td>
<td>243</td>
<td>90.3</td>
<td>93.5</td>
<td>94.7</td>
</tr>
</tbody>
</table>
### Table 7. – Facilities (Survey Questions 24-28)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>24. Labs (Q 24 a - c.)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used services</td>
<td>234</td>
<td>13.5</td>
<td>10.1</td>
<td>13.7</td>
</tr>
<tr>
<td>a. Equipment</td>
<td>61</td>
<td>62.1</td>
<td>45.2</td>
<td>52.5</td>
</tr>
<tr>
<td>b. Availability</td>
<td>61</td>
<td>63.9</td>
<td>48.4</td>
<td>47.6</td>
</tr>
<tr>
<td>c. Amount of Space</td>
<td>61</td>
<td>60.0</td>
<td>41.9</td>
<td>45.9</td>
</tr>
<tr>
<td><strong>25. Bike Racks (Q25 a - c.)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used services</td>
<td>234</td>
<td>16.5</td>
<td>5.5</td>
<td>6.8</td>
</tr>
<tr>
<td>a. Availability</td>
<td>48</td>
<td>62.5</td>
<td>42.9</td>
<td>33.3</td>
</tr>
<tr>
<td>b. Functionality</td>
<td>15</td>
<td>62.5</td>
<td>42.9</td>
<td>31.2</td>
</tr>
<tr>
<td><strong>26. Study Areas/Meeting Space (Q 26 a - c.) Used services</strong></td>
<td>236</td>
<td>63.7</td>
<td>54.5</td>
<td>59.7</td>
</tr>
<tr>
<td>a. Availability</td>
<td>155</td>
<td>83.1</td>
<td>79.0</td>
<td>78.1</td>
</tr>
<tr>
<td>b. Amount of Space</td>
<td>155</td>
<td>77.4</td>
<td>76.0</td>
<td>72.2</td>
</tr>
<tr>
<td>c. Functionality</td>
<td>154</td>
<td>79.7</td>
<td>76.8</td>
<td>75.4</td>
</tr>
<tr>
<td><strong>27. Classrooms (Q27 - 27d.)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used services</td>
<td>233</td>
<td>98.5</td>
<td>97.6</td>
<td>95.7</td>
</tr>
<tr>
<td>a. Size</td>
<td>231</td>
<td>90.0</td>
<td>90.5</td>
<td>94.3</td>
</tr>
<tr>
<td>b. Comfort</td>
<td>233</td>
<td>88.0</td>
<td>88.0</td>
<td>91.8</td>
</tr>
<tr>
<td>c. Arrangement</td>
<td>231</td>
<td>85.9</td>
<td>88.6</td>
<td>90.9</td>
</tr>
<tr>
<td>d. Adequacy of A/V equipment</td>
<td>228</td>
<td>81.4</td>
<td>82.0</td>
<td>83.3</td>
</tr>
<tr>
<td><strong>28. Lunchroom/Vending Area (Q28.-28F) Used services</strong></td>
<td>235</td>
<td>70.9</td>
<td>61.8</td>
<td>71.9</td>
</tr>
<tr>
<td>a. Cleanliness</td>
<td>180</td>
<td>84.7</td>
<td>86.8</td>
<td>90.6</td>
</tr>
<tr>
<td>b. Atmosphere</td>
<td>180</td>
<td>76.7</td>
<td>77.4</td>
<td>83.9</td>
</tr>
<tr>
<td>c. Quality of food</td>
<td>177</td>
<td>49.3</td>
<td>48.7</td>
<td>58.2</td>
</tr>
<tr>
<td>d. Variety of food</td>
<td>177</td>
<td>43.6</td>
<td>45.3</td>
<td>52.0</td>
</tr>
<tr>
<td>e. Vending choices</td>
<td>179</td>
<td>45.4</td>
<td>46.9</td>
<td>57.5</td>
</tr>
<tr>
<td>f. Service</td>
<td>175</td>
<td>53.9</td>
<td>60.4</td>
<td>65.7</td>
</tr>
</tbody>
</table>

### COMMENTS - CULMINATING EXPERIENCE/THESIS PROPOSAL

Q.33 A. What would you improve about the CE/Thesis Proposal approval process?

*(Comments are listed as submitted with only the names of individuals removed.)*

**Length of Process**
- Shorten the review process.
• The approval took 8 weeks. I would do something to make this more efficient.
• It appears that no effort is made to approve proposals in less than 2 weeks and that they don’t even look at it until they have held it for 2 weeks and thus the process takes more than a month to complete. The windows that were available for me to work the process were limited and those in the proposal process appear to take pride in slowing the process down.
• The entire process is lengthy and time wasting. Needs to be more streamlined and there needs to be a class to prep students for the process.
• It really took a long time, especially when the office was promising a two week turnaround. Luckily, this did not delay me as my research data had already been collected by previous projects.
• Add deadlines to encourage students to complete faster.
• Make the deadlines more findable.

Communication
• Better communication, as if I had not looked at other student’s proposal, I would have not had a clear idea of what was expected of me.
• I wish the faculty tries to reply to emails more quicker.
• There should be improved communication with all committee members during the proposal process as well as a clear order of how the proposal should be completed. My faculty committee members would often defer to my thesis director who was from another institution. However, the external committee member was not familiar with SPH’s thesis process. The committee members never met or communicated with one another about my project, making it difficult for me to navigate the process.

Instructions and Guidance
• Timelines, clear instructions and better coordination between faculty and research office.
• The only thing that I found unclear was all the forms that needed to be completed for my thesis proposal approval. I did not realize that there were separate forms from Student Affairs that needed to be signed as well. Perhaps an idea is to put these forms in the same area online.
• Explain the process better at the beginning. I had so many questions to start with that I didn't even know what to ask or how to even begin.
• The contents of the actual proposal were very confusing. I was only directed to the website that had the Thesis template and a list of things that were not to be included in the proposal. One thing that was not clearly conveyed is that depth to which the literature review has to be done for an MS degree. It might be better to have a template specifically for the thesis proposal that mentions that an in depth systematic review of literature is not required for an MS.
• Clear cut timelines for the process intervals (not just overall deadlines), available paperwork online (I had to email several times to post documents even near the deadlines).
• Let people know how to do it. I felt like I had to do everything myself, and it took me an extra semester to graduate because no one told me how long it took to get the proposal approved. The information is on the website, but it isn't well known and you have to go searching for it. The academic advisors should also understand the process because I felt like my committee and my advisor were not informed with what to do, and they were not much help.
• I would begin by encouraging faculty members to begin discussing the proposal process during the first semester of the program. In my experience, proposals and theses were not discussed until the second year, and my peers and I were reprimanded for not understanding how the system worked, how long it took, or even how to begin the process. Having an open conversation about topics of interest, the type of process, the length of the process, and the available resources during the first semester would allow students to begin thinking about their areas of interest early on. I would also encourage faculty to meet to discuss their various advising strategies and approaches with regards to the CE/thesis. From interacting with various faculties it was apparent that there were different levels of expectation and availability of help within the university. Lastly, I would recommend that advisors have an orientation session for guiding their students through the CE/thesis process. I believe the advisors could benefit from listening to student feedback and from understanding what areas of the
CE/thesis process are the most confusing. I think, at times, advisors forget that many students are experiencing the CE/thesis process for the first time, and they might need more guidance in areas such as selecting a topic, or seeking advice.

- There was lack of information available for the kind of CE (Practice based) that I was developing. Administrative changes and lack of clear information led to the delay in the formation of a coherent proposal.
- As I recall, there were no standard forms or templates for the proposal. This would have been helpful. I had to find other students who were willing to share theirs in order to see how they formatted their proposals.
- I began my degree program in 2000 and am finally finishing it. I found it difficult to get more than a packet of information on how to do a CE/Thesis proposal. And only when I got my 4th new advisor did I even learn about the Capstone course.
- Clarity of the term "proposal" must be precise. Forms are not clearly labeled to determine which ones are applicable to culminating experiences.
- There needs to be more information for those writing qualitative type papers. Just about all the information was geared toward those writing quantitative papers and analyzing data. I had a bit of trouble writing the methods portion of my paper initially, and there were very few resources I found that could help me with this issue.
- More information should be given regarding the iRIS system and submitting IRB protocols.
- More structured information regarding proposal process and CE requirements. More involvement of committee members during the process should be promoted by school administration.
- A document or packet should be made readily available to all students who wish to pursue the CE/Thesis option. The packet/document should include a suggested time-line, calendar of important dates, and a list of available resources.
- I did not have any guidance when trying to formulate a CE/Thesis Proposal.
- The hardest part was trying to find data to use for the thesis. It would be helpful for more guidance in that area.
- Provide proper guidance for students wishing to write a thesis. There was no guidance provided at all and I was very dissatisfied with the process. During orientation, more emphasis needs to be placed on the thesis and process involved especially for those individuals wishing to graduate within two years. There needs to be more focus on career goals as well so the thesis writing process and practicum search can fit within this realm. Again, no guidance provided to students.
- I received little guidance on writing the proposal. I was able to figure it out on my own, although I think the information on the website can be condensed. Once I wrote it, the approval was straightforward.
- The period from committee (faculty) approval of proposal to final SPH/UTHSC-H approval to begin work was stressful. It would have been nice to have more guidance documents on the web for examples of good information to provide to the IRB/CPHS for projects that are likely eligible for expited or exempt review. My major guidance was from a very busy reviewer and I would have liked to have found some examples online for "simple" survey projects.
- Simpler process.
- Though I started doing my thesis proposal, I was offered the chance to do the CE and Capstone course with CPH exam option to graduate. I do like the thesis option, but I think thesis advisors should offer more help to students inexperienced in writing something as important as a masters thesis. I was unsure what to do, how to start, and what resources to use. I think a full semester course in thesis development should be offered by the school. This would lay out expectations, help students generate ideas, offer students feedback, and get students on the correct timeline to complete the thesis project.
- I think a timeline for students who wish to do primary data collection that involves the IRB would be helpful, as well as a resource for the IRB process. It was difficult to know how quickly to submit the IRB application, and my faculty advisor did not have time to walk me through the iRIS submission. It was caused me to be very anxious because I did not know if I was completing it correctly and I was on a tight deadline (as all students are).
- Make the approval process more objective, and less subjective. If the faculty member is not proficient
on the topic selected by the advisee, then the approval is at the discretion of the faculty member. The review and revision process of three weeks is too long. It would be easier to meet the deadlines if the faculty were required to revise and return drafts of the proposal in a shorter time period.

- I think that if people with student affairs and other administrative staff could be more approachable things would be easier. Many of us have various jobs and trying to juggle with study is challenging...sometimes we just want to call and get our answers instead of going through the website and reading.
- Submit it online and then print to obtain signature.
- Ensure way to get electronic signatures.
- There needs to be a clearer process or perhaps more direct advising on the process of completing a CE/thesis proposal. Perhaps having PhD students who did their MPH available as mentors for the process would be helpful. The IRIS system is confusing and the redtape often is more challenging than putting your scientific thoughts to paper. It seemed more an exercise of addressing the red tape (which is a component of public health) than demonstrating my knowledge of public health.
- Stress the importance of a research/thesis supervisor. At the end of my thesis write up, it was my thesis supervisor that knew all of my research and not necessarily my advisor or committee....the thesis supervisor was a big help in ensuring everything was done in time...
- The system can be more efficient. People who don't have a research project that concerns human subjects shouldn't have to take the human subjects course nor go through IRB approval. There should be some way to be exempt from it early. Since everyone had to go through the same process, I was told to not turn in my proposal early because it wouldn't be looked at at all. I know that these barriers would deter a lot of people from doing research because the time factor is important. The process was also very confusing. Having more accessible information about it on the UTSPH website would have been useful, but I understand that the UTSPH website was going through a transition phase during my approval. I still think research staff did an excellent job considering the circumstances, and I don't think I would have gotten through it quickly enough without her.
- I would propose scheduling more information sessions for explaining the thesis proposal process, especially for those students who were not able to take PH 1498 for preparing a thesis proposal. Students should be required to declare after their 2nd semester what CE option they will do and then should be required to attend this informational session.

Faculty

- Better direction from advisors. I decided to complete the capstone course instead.
- I think students and advisors should be more informed of their role, requirements, and responsibilities that are entail with the thesis writing process.
- My current advisor for the last 8 months has been great, Dr. X. However, I was passed around to two other advisors, which was not a good experience. Early on when Dr. X left, I could not find anyone to accept me. I asked and asked various professors, so I did it on my own as far as finding out what classes to complete etc.
- My advisors refused to be involved during most of the proposal approval process. They would not respond to my e-mails asking for help throughout the semester nor did they give me an accurate time line (do this by this date if you want to graduate by this time). When it came to our evaluation meeting, all of a sudden I was inundated with feedback (most not constructive and told in a condescending tone) and also informed that I should have contacted specific people to get permission to access data, that I had to have chosen a thesis supervisor ahead of time, and that my idea would not work and I would not graduate on time. I would have benefited with more time with advisors who actually cared about my research interests and me as a person. My advisors were too busy with their own research and work to take the time to get to know what I wanted out of grad school and to help me achieve my goals. The way that I got by was through asking my friends. In the end I changed my committee and dropped the idea of a thesis because the beaucratic and administrative hoops I'd have
to jump were too ridiculous. Unfortunately I know of at least 6 other classmates who did the same due to the lack of guidance, support, and feedback from their advisors.

- I think advisors should have a clearer idea and able to come to a consensus of what the project should be.
- Encourage faculty to be aware of the process and changes to the process.
- I felt that having different committee members impeded the process to having a timely submission of a proposal. I strongly believe that there should only be one advisor per committee, with optional members being up to the individual student.
- I suggest this process is explained to each student individually by their assigned committee members instead of relying on students to attend workshops that are not accessible to everyone. A checklist with deadline and form requirements provided to the student upon entering the program would be extremely helpful in planning their CE/thesis. Not all students have the luxury of attending school daily or weekly to build strong communication relationships with staff that have the information they need to complete the program on time.
- I actually had a really hard time getting my advisors to return drafts and answers to questions in a timely manner. For example, it took one of my advisors 3 months just to give me feedback on the first draft of my proposal. I think they're supposed to return them within 2 weeks? Because of such long timeline, I spent an extra year in school, and spent an additional $20,000...just to finish. I understand faculty are extremely busy and they're being pulled in multiple directions. But, there needs to be greater incentive and/or emphasis on teaching students rather than just bringing in grant funds. Similarly, my advisors didn't even have time to read my paper for content. I was the one who had to tell them the first draft of my paper was bad and that I should re-write several sections! One other mind-set I didn't appreciate was this idea that I'm just a "masters" student and not a "doctoral" student. I felt I was being held to an intellectually inferior standard because I'm choosing a different career path. Granted, there are a lot of masters students who don't care, and may be laxidiasical about their education. But, if the University/faculty held students to a higher educational standard, students would perform at that higher level. As the student grows rapidly, I think it's going to be important to remember that masters students are just as important as the doctoral students...and both are equally motivated to understand the content in which they're studying. Both populations deserve quality time with their professors. And, if professors are not provided the freedom or time to effectively teach, our profession could quite well become a joke.
- The faculty committee should provide more support for students that are attempting to create a thesis. As an MPH student, this was my first time to create something at this magnitude. Perhaps a class to help guide students would be helpful. I felt very lost and received little support until it was too late.
- Couldn't communicate effectively with thesis supervising professor and elected Capstone option.
- I already gave my feedback to Dr X. For me it was a painful process because I finished my fourth dissertation and it took me four years to complete. I think the outsider team member refused to give me the data after getting my written material. I am thinking it will be the responsibility of the school to inquire about such incidence to learn the mistake we made, so that another student will the pay prize of their life year which no one can get back once lost...I think I should have finished my degree in 2008 if I have provided the right guidance in time. I am totally responsible for that because I was not sure how I can speak for myself. At least now after my PhD I am feeling empowered enough to speak out and make a difference. I think the researcher wrote a grant with my proposal and Ii will appreciate if the school will double check to make sure that researchers will not use student's valuable ideas and materials for their own grants.. Ii think this is the ethical challenge of electronic era, where once I will email my proposal how I can make sure that outsider researcher will not write a grant with my proposal after refusing to give me the data which he promised before.
- When I was planning on writing a thesis, my advisors basically laughed in my face when they thought I could finish it in one semester. Another classmate of mine had the same experience. That was a really disheartening experience for me.
- Requiring academic advisor approval of content type and not just merit can cause projects to fail.
Capstone
- I completed the exam option. I understand that we were the first class to get to use this option so things were being worked out as we went, but I felt that most of the staff didn't know how to answer all the questions for what was needed to be completed for the exam option and I still don't know how I'm supposed to get my CPH certificate (I did pass the exam).
- I did not pursue the thesis process, but did the Capstone class instead.
- I took the CE Capstone. It was highly disorganized and it does not help in any way to review for the test. The slides that faculty provided for the 5 disciplines were a joke. They were simple outlines instead of detailed information about what is the most important things that we should take away from each core discipline. It is unfair that some people have not reviewed things in a year or so and since we are on a different campus, the instruction of the material may be different.
- Did not submit a thesis. Graduated after clearing the Capstone course.
- I was enrolled in capstone course thus no thesis approval process was required.
- I did Capstone as a regional campus student, and I wish all the paperwork/approvals would just reside in one place either regional or Houston instead of coordinating between 3 locations (since I did not live in either).
- Ok the Capstone class so I cannot comment on the CE/Thesis process.
- The exam option was an excellent one- I really appreciated the chance to go back and brush up on epi/biostat especially!
- For those doing a culminating experience, such as the capstone course, it was not clear until entering the course what the course actually entailed. Additionally, since the capstone course was relatively "new", many faculty members could not give me specific information about the requirements for the course. Thus, I entered the course thinking it was a "prep course" for the exam, when in reality it was a regular course with an exam component that you had to study for on your own.
- I to-Capstone course definitively must be more challenging and motivating.
- Did capstone, so still improving.
- Allow individuals to take the test earlier so they can retake if necessary before the deadline for graduation.

Website
- I would recommend the information on the website be easier to find and more clearly explained. I was also told different things my different faculty members which ended up being quite confusing.
- The SPH website looks beautiful but the content is horrible. It was an arduous task to find the information I needed. The Brownsville academic advisor frequently walked me through stuff holding my hand because the info I needed was wrong or just silly...
- The website could be more specific and student affairs a little more friendly and informative in giving information on the process.
- More information online that is easier to find and more informational sessions for students to attend.
- More clear instructions provided early in the degree process. A single page listing with check boxes for each form & task you have to complete along with the contact person for that task would be ideal. The information is available on the website, but it is a bit scattered and requires a fair amount of reading and cross-checking to make sure that everything is in line. One page with all the information that can be checked off as you go would make things much simpler. Also, using a visual representation of the process would be helpful (i.e. a time line or a flow diagram).
- The website is helpful but it would be useful to have a clear time line and when specific documents are due. Plus, it would be helpful if academic advisors were more familiar with the process and understood the time lines.
- I think it would be nice to have a clearer website with information about forms needed for the CE. I was very confused about the entire process and did exactly know which pieces needed to be completed and when.
- The website information has improved tremendously over the years. I also appreciate the new system with the help of Ms. X very much. The process for this (PhD) is much more efficient than the previous system (for MPH) several years ago.
• When I was developing my Dissertation Proposal, the template online was not the latest version required of students.
• Have certain forms be available year round
• Guidelines should be clearly stated on the website, and updated promptly when guidelines are changed. Any changes should also be clearly communicated to all advisors and academic affairs staff so they can advise students appropriately.

N/A
• None (3).
• Nothing. My proposal was approved within a week.
• NA (2).
• No Suggestions .
• I did the capstone so this section is NA.

Other
• I don't know.
• Thesis approval system is excellent.
• The approval process is appropriate and acceptable.
• Nothing, it was great!
• I was required to submit to both Baylor IRB and UT IRB which posed significant delay in submitting my proposal. In addition, one of my committee members was oversees for much of a semester and I was unable to obtain his signature which was required prior to submission. This delayed my graduation significantly and required me to enroll each semester that this was delayed.
• More full-time research staff at the office of research for assistance of students.
• Having someone available who can help with technical issues like formatting our thesis and uploading to the UMI website.
• Thesis formats available for macs.
• Stress it in the beginning so it's something to think about at the start.
• It's telling that you don't have the dual degree program that I was enrolled in listed as an option above. Having to complete two separate theses because the programs couldn't agree was very frustrating to deal with.
• I would have a persons whose sole job was to focus on this aspect of student life
• If the thesis is on a policy issue, and human subjects do not need to be protected, one could probably skip IRB approval.

Table 8. – Research Workshop (Survey Question 34)

<table>
<thead>
<tr>
<th>Research Workshop</th>
<th>Total Responses</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q 34. Did you attend a Research Services Student Proposal Workshop?</td>
<td>228</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>85</td>
<td>45.5</td>
<td>47.4</td>
<td>37.3</td>
</tr>
<tr>
<td>No</td>
<td>143</td>
<td>54.5</td>
<td>52.6</td>
<td>62.7</td>
</tr>
</tbody>
</table>
If yes, why?
- Yes, so I could learn about the process.
- Yes.
- I took the course with Dr X.
- Was very helpful and gave me a sense of what types of issues a researcher might face.

If not, why?
(Comments are listed as submitted with only the names of individuals removed.)

Capstone Exam
- I was in the Capstone class.
- Took the exam option.
- I took the capstone course.
- I was enrolled in capstone course.
- I participated in the Capstone/Exam option.
- Took capstone exam/not applicable.
- I completed the capstone exam.
- I chose to do the Capstone Course as my CE.
- I planned on completing the Capstone course instead of research.

Regional Campus
- I am a student at the San Antonio regional campus and there was definitely disconnect between the program in Houston and the one in San Antonio.
- None at convenient times at the Dallas campus.
- Not in Houston.
- I am a Brownsville student. If they were offered via ITV I did not know about it.
- I was unaware of the availability of this service to regional campuses.
- Not offered on our Dallas campus.
- Austin campus.

Schedule Conflicts
- I work full time and the times were in the middle of the day when I could not get out of work.
- I work full time and was unable to go to the scheduled times.
- Not offered at a time I could attend while working full-time.
- Hard to do with full time job & family.
- I was working at the time.
- Work full-time and unable to go to campus on non-class days.
- I am also in a 80 hrs/ week job.
- I didn't have time. -Work -It is hard to schedule between work and classes. -I had limited access to the campus due to work responsibilities that prevented me from attending workshops occurring before 5pm.
- The time is not available for me.
- Scheduling Conflicts.
- Could not make it to any of the workshop offerings.
- Was not in town during the session.
- if I did not attend, it would have been because of a scheduling.
- I had a time conflict with other events.
• Time.
• CE/thesis are scheduled during the weekday and during times that don't work for working students.
• Conflict.
• Time conflicts with work.
• It held at a time I had a prior commitments.
• I was a full-time student with two jobs, an internship, and a fellowship.
• I was working full-time and could never get away.
• Working full time not available for workshop would be nice if it was archived online.
• The schedule was not comfortable for me.
• I was not available to attend any of the workshops. I completed the Capstone Exam option.
• Not able to get away from work.
• One wasn't held at the time I worked on the thesis.
• Worked full time, could not find time to attend.
• Work schedule and distance from campus made it difficult for me to attend.
• I believe I was almost done with the proposal when the workshop was offered during the semester I wrote it.

Did not need to attend
• I did not feel it was necessary.
• I did not need it.
• I did not feel the need to attend.
• I had completed a thesis previously and did not feel the need to attend prior to my dissertation proposal.
• Understood the process fine.
• Felt familiar with the research process.
• I had extensive prior experience preparing research proposals.
• I've written these types of documents before.

Did not write a thesis
• Did not write a thesis.
• I did not pursue the thesis process.
• I did not have to.
• I did not do a thesis.
• Did not submit thesis for graduation. Attended the Capstone course.

Website
• I thought the online information adequate.
• I felt like I could get adequate information about the proposal writing process on the school's website and from classmates.

Did not know about it
• Did not know about it
• Never heard of it.
• I was not aware of it.
• Didn't know such a thing existed.
• Didn't know about it. If it was emailed to me I must have skipped the email.
• I was not aware of any workshop.
• Did not know when it happened.
• I didn't know there was workshops for this until I already finished my proposal. I think these workshops should be better announced. Maybe faculty should know of them and suggest students to go. Or they should be required.
• Was not told about them since off campus, nor encouraged by anyone to take (this does not include
my last 10 months).
• I don’t remember hearing about the workshop. However, it is likely that the workshop was announced, and more probable that the workshop didn’t work around my schedule. Unfortunately, many of the events that are created to help students advance with their practicum, proposal.
• I didn’t know about one. My email gets spammed with so much junk (from UTSPH) that it’s hard to figure out what is important. It would be nice to have an online calendar (easily accessible and clear) to identify important workshops.
• Did not know it was offered.
• I didn’t know about it.

Other
• It was supposedly a one week course which was not highly rated useful.
• I completed my masters at SPH and felt comfortable with the process.
• I can’t remember if I attended.
• I was a dietetic intern and took a class required for interns taught by Dr. X that explained everything fully.
• Received same information in a class by head of Research Services at the time.
• My advisor did a very good job of explaining everything to me.
• Completed Dietetic Research Methods Class
• It was not offered when I was going through the thesis process.
• Not very interested in research.
• I did a CE.

<table>
<thead>
<tr>
<th>Capstone Course and Exam*</th>
<th>Total Responses</th>
<th>2008-2009 (%)</th>
<th>2009-2010 (%)</th>
<th>2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>44. I took the Capstone Course + Exam as my Culminating Experience (CE)</td>
<td>215</td>
<td>N/A</td>
<td>N/A</td>
<td>44.2</td>
</tr>
<tr>
<td>Yes</td>
<td>95</td>
<td>N/A</td>
<td>N/A</td>
<td>44.2</td>
</tr>
<tr>
<td>No</td>
<td>120</td>
<td>N/A</td>
<td>N/A</td>
<td>55.8</td>
</tr>
</tbody>
</table>

*The Capstone Course and Exam was first offered in the Summer of 2010
<table>
<thead>
<tr>
<th>Academic Programs</th>
<th>Total Responses 2010-2011 (n)</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>45. The academic standards at the School of Public Health are about right in terms of rigor.</td>
<td>240</td>
<td>83.5</td>
<td>85.5</td>
<td>77.5</td>
</tr>
<tr>
<td>46. Some students here do not seem to be qualified for admission to a graduate school.</td>
<td>239</td>
<td>36.9</td>
<td>32.6</td>
<td>40.6</td>
</tr>
<tr>
<td>47. I found the symposiums, colloquia, seminars and other extra-curricular programs stimulating and broadening.</td>
<td>239</td>
<td>69.4</td>
<td>73.4</td>
<td>74.9</td>
</tr>
<tr>
<td>48. The school provided courses enabling me to meet my degree program objectives.</td>
<td>238</td>
<td>88.8</td>
<td>91.9</td>
<td>88.2</td>
</tr>
<tr>
<td>49. Courses were available so that I could finish my program in a timely manner.</td>
<td>240</td>
<td>66.7</td>
<td>84.4</td>
<td>85.5</td>
</tr>
<tr>
<td>50. I was satisfied with the number of courses available in my program area.</td>
<td>239</td>
<td>66.7</td>
<td>65.3</td>
<td>66.5</td>
</tr>
<tr>
<td>51. I would have liked to have more opportunity to take additional evening classes.</td>
<td>240</td>
<td>47.7</td>
<td>52.3</td>
<td>49.1</td>
</tr>
<tr>
<td>52. The educational experience I had as a student at the School of Public Health met my expectations.</td>
<td>240</td>
<td>78.0</td>
<td>79.1</td>
<td>79.6</td>
</tr>
<tr>
<td>53. My UT SPH education has prepared me to meet the demands of my current or first public-health related job.</td>
<td>238</td>
<td>73.5</td>
<td>78.0</td>
<td>77.8</td>
</tr>
<tr>
<td>54. The thesis/dissertation helped me to integrate the breadth of public health knowledge.</td>
<td>234</td>
<td>87.7</td>
<td>92.4</td>
<td>56.0</td>
</tr>
<tr>
<td>55. The CE Course + Exam* helped me to integrate the breadth of public health knowledge.</td>
<td>225</td>
<td>N/A</td>
<td>N/A</td>
<td>49.3</td>
</tr>
<tr>
<td>56. The thesis/dissertation gave me the opportunity to apply the knowledge that I gained in my educational program to a relevant public health problem.</td>
<td>234</td>
<td>N/A</td>
<td>93.0</td>
<td>58.2</td>
</tr>
<tr>
<td>57. The CE Course + Exam* gave me the opportunity to apply the knowledge that I gained in my educational program to a relevant public health problem.</td>
<td>222</td>
<td>N/A</td>
<td>N/A</td>
<td>49.5</td>
</tr>
<tr>
<td>58. I found the thesis/dissertation to be a useful culminating experience for my degree program.</td>
<td>234</td>
<td>86.2</td>
<td>91.3</td>
<td>53.8</td>
</tr>
<tr>
<td>59. I found the CE Course + Exam* to be a useful culminating experience for my degree.</td>
<td>220</td>
<td>N/A</td>
<td>N/A</td>
<td>49.6</td>
</tr>
<tr>
<td>Academic Programs</td>
<td>Total Responses 2010-2011 (n)</td>
<td>Strongly Agree / Agree 2008-2009 (%)</td>
<td>Strongly Agree / Agree 2009-2010 (%)</td>
<td>Strongly Agree / Agree 2010-2011 (%)</td>
</tr>
<tr>
<td>-------------------</td>
<td>-------------------------------</td>
<td>--------------------------------------</td>
<td>--------------------------------------</td>
<td>--------------------------------------</td>
</tr>
<tr>
<td>65. My UT SPH program enabled me to synthesize and integrate knowledge acquired in course work and other learning experiences.</td>
<td>236</td>
<td>89.5</td>
<td>92.9</td>
<td>94.0</td>
</tr>
<tr>
<td>66a. My UT SPH program provided me with an understanding of biostatistics.*</td>
<td>238</td>
<td>N/A</td>
<td>N/A</td>
<td>83.6</td>
</tr>
<tr>
<td>b. My UT SPH program provided me with an understanding of epidemiology.*</td>
<td>238</td>
<td>N/A</td>
<td>N/A</td>
<td>95.8</td>
</tr>
<tr>
<td>c. My UT SPH program provided me with an understanding of environmental sciences.*</td>
<td>237</td>
<td>N/A</td>
<td>N/A</td>
<td>84.8</td>
</tr>
<tr>
<td>d. My UT SPH program provided me with an understanding of management and policy/health services administration.*</td>
<td>238</td>
<td>N/A</td>
<td>N/A</td>
<td>74.8</td>
</tr>
<tr>
<td>e. My UT SPH program provided me with an understanding of social and behavioral sciences.*</td>
<td>238</td>
<td>N/A</td>
<td>N/A</td>
<td>90.8</td>
</tr>
<tr>
<td>67. My UT SPH program provided skills and experience in applying basic public health concepts and specialty knowledge to the solution of community health problems.</td>
<td>237</td>
<td>90.5</td>
<td>92.8</td>
<td>95.8</td>
</tr>
</tbody>
</table>

*Question added to survey in 2010-2011.*
Table 12. – Academic Programs - MS/PhD Only (Survey Questions 68-69)

<table>
<thead>
<tr>
<th>Academic Programs</th>
<th>Total Responses 2010-2011 (n)</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>68. My research degree program adequately prepared me for an academic career.</td>
<td>119</td>
<td>78.5</td>
<td>79.6</td>
<td>64.8</td>
</tr>
<tr>
<td>69. My UT SPH degree program provided me with a public health perspective in the</td>
<td>116</td>
<td>86.0</td>
<td>88.0</td>
<td>71.6</td>
</tr>
<tr>
<td>application of my specialty area.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 13. – Quality of Student Life (Survey Questions 70-75)

<table>
<thead>
<tr>
<th>Quality of Student Life</th>
<th>Total Responses 2010-2011 (n)</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>70. The School of Public Health provides a variety of community service opportunities.</td>
<td>240</td>
<td>83.2</td>
<td>84.3</td>
<td>69.6</td>
</tr>
<tr>
<td>71. I was aware of the SPH Student Association during my time in the school.</td>
<td>239</td>
<td>90.2</td>
<td>86.6</td>
<td>88.7</td>
</tr>
<tr>
<td>72. I participated in SPH Student Association social activities.</td>
<td>239</td>
<td>57.7</td>
<td>50.0</td>
<td>50.2</td>
</tr>
<tr>
<td>73. I worked in the Student Association as an officer on SPH committees.</td>
<td>237</td>
<td>21.4</td>
<td>14.0</td>
<td>17.3</td>
</tr>
<tr>
<td>74. In general, the quality of student life at the School of Public Health satisfactory.</td>
<td>239</td>
<td>89.0</td>
<td>82.5</td>
<td>74.5</td>
</tr>
<tr>
<td>75. I felt a part of a diverse, inclusive public health community at the SPH.*</td>
<td>51</td>
<td>N/A</td>
<td>N/A</td>
<td>0</td>
</tr>
</tbody>
</table>

*New question in 2010-2011; the majority of students had no opinion;
** Q. 75. Responses – 31.4 % Disagreed; 68.6% had No Opinion
<table>
<thead>
<tr>
<th>Educational Technology</th>
<th>Total Responses 2010-2011 (#)</th>
<th>Strongly Agree / Agree 2008-2009 (%)</th>
<th>Strongly Agree / Agree 2009-2010 (%)</th>
<th>Strongly Agree / Agree 2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>76. Did you ever take any classes via ITV?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>202</td>
<td>84.5</td>
<td>82.7</td>
<td>85.2</td>
</tr>
<tr>
<td>No</td>
<td>35</td>
<td>15.5</td>
<td>17.3</td>
<td>14.8</td>
</tr>
<tr>
<td>a. My experience in ITV was satisfactory.</td>
<td>212</td>
<td>77.1</td>
<td>78.6</td>
<td>71.3</td>
</tr>
<tr>
<td>b. Would you recommend an ITV course to a fellow student?</td>
<td>204</td>
<td>69.0</td>
<td>70.3</td>
<td>66.7</td>
</tr>
<tr>
<td>77. Did you ever take any classes online?*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>187</td>
<td>N/A</td>
<td>N/A</td>
<td>81.0</td>
</tr>
<tr>
<td>No</td>
<td>231</td>
<td>N/A</td>
<td>N/A</td>
<td>19.0</td>
</tr>
<tr>
<td>a. My experience with online courses was satisfactory.*</td>
<td>201</td>
<td>N/A</td>
<td>N/A</td>
<td>84.1</td>
</tr>
<tr>
<td>b. Would you recommend an online course to a fellow student?*</td>
<td>198</td>
<td>N/A</td>
<td>N/A</td>
<td>76.2</td>
</tr>
<tr>
<td>78. Would you take a continuing education course if available online in the future?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>191</td>
<td>84.5</td>
<td>80.1</td>
<td>82.3</td>
</tr>
<tr>
<td>No</td>
<td>41</td>
<td>15.5</td>
<td>19.9</td>
<td>17.7</td>
</tr>
<tr>
<td>79. Would you take a degree program if available online in the future?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>127</td>
<td>54.1</td>
<td>56.7</td>
<td>54.3</td>
</tr>
<tr>
<td>No</td>
<td>107</td>
<td>45.9</td>
<td>43.3</td>
<td>45.7</td>
</tr>
</tbody>
</table>

*New question in 2010-2011*
Table 15. – Employment (Survey Questions 80-92)

<table>
<thead>
<tr>
<th>Employment</th>
<th>Total Responses 2010-2011 (n)</th>
<th>2008-2009 (%)</th>
<th>2009-2010 (%)</th>
<th>2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>80. During the majority of time I was a student, I was:</td>
<td>239</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employed Full-time</td>
<td>96</td>
<td>N/A</td>
<td>N/A</td>
<td>40.2</td>
</tr>
<tr>
<td>Employed Part-time</td>
<td>93</td>
<td>N/A</td>
<td>N/A</td>
<td>38.9</td>
</tr>
<tr>
<td>Unemployed by Choice</td>
<td>38</td>
<td>N/A</td>
<td>N/A</td>
<td>15.9</td>
</tr>
<tr>
<td>Unemployed but looking</td>
<td>12</td>
<td>N/A</td>
<td>N/A</td>
<td>5.0</td>
</tr>
<tr>
<td>81. If you were employed during your degree program, were you working in</td>
<td>208</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a public health related field?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>156</td>
<td>76.8</td>
<td>76.7</td>
<td>75.0</td>
</tr>
<tr>
<td>No</td>
<td>52</td>
<td>23.2</td>
<td>23.3</td>
<td>25.0</td>
</tr>
<tr>
<td>82. Did you ever work as a graduate assistant?</td>
<td>237</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>91</td>
<td>53.9</td>
<td>47.1</td>
<td>38.4</td>
</tr>
<tr>
<td>No</td>
<td>146</td>
<td>46.1</td>
<td>52.9</td>
<td>61.6</td>
</tr>
<tr>
<td>83. Did you work as a teaching assistant?</td>
<td>238</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>40</td>
<td>23.0</td>
<td>20.0</td>
<td>16.8</td>
</tr>
<tr>
<td>No</td>
<td>198</td>
<td>77.0</td>
<td>80.0</td>
<td>83.2</td>
</tr>
<tr>
<td>84. Do you have a need for resources from the SPH Career Services in</td>
<td>239</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>transitioning from student to public health professional?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>102</td>
<td>46.4</td>
<td>47.3</td>
<td>42.7</td>
</tr>
<tr>
<td>No</td>
<td>137</td>
<td>53.6</td>
<td>52.7</td>
<td>57.3</td>
</tr>
<tr>
<td>85. Were there any Career Services unavailable that you would have</td>
<td>227</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>utilized?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>48</td>
<td>N/A</td>
<td>N/A</td>
<td>21.1</td>
</tr>
<tr>
<td>No</td>
<td>179</td>
<td>N/A</td>
<td>N/A</td>
<td>78.9</td>
</tr>
<tr>
<td>86. What resources have you utilized here at the SPH to assist you in</td>
<td># of students who answered</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>searching for employment?</td>
<td>YES to each:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Career Services</td>
<td>88</td>
<td>30.5</td>
<td>32.0</td>
<td>35.6</td>
</tr>
<tr>
<td>Alum</td>
<td>30</td>
<td>12.2</td>
<td>14.3</td>
<td>12.1</td>
</tr>
<tr>
<td>Faculty/Students</td>
<td>105</td>
<td>34.5</td>
<td>34.3</td>
<td>42.5</td>
</tr>
<tr>
<td>Job Notice</td>
<td>88</td>
<td>27.9</td>
<td>24.6</td>
<td>35.6</td>
</tr>
<tr>
<td>None</td>
<td>86</td>
<td>41.1</td>
<td>40.0</td>
<td>34.8</td>
</tr>
<tr>
<td>Employment by Type of Organization</td>
<td>Total Responses 2010-2011 (n)</td>
<td>2008-2009 (%)</td>
<td>2009-2010 (%)</td>
<td>2010-2011 (%)</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-------------------------------</td>
<td>---------------</td>
<td>---------------</td>
<td>---------------</td>
</tr>
<tr>
<td>87. Which of the following best describes the type of organization for which you work or will work?</td>
<td>238</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*(NOT HEALTH RELATED RESPONSES HIGHLIGHTED)*

<table>
<thead>
<tr>
<th>Employment by Type of Organization</th>
<th>2008-2009 (%)</th>
<th>2009-2010 (%)</th>
<th>2010-2011 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Association, Foundation, Voluntary, NGO or other non-profit organization-HR</td>
<td>5.8</td>
<td>1.8</td>
<td>5.9</td>
</tr>
<tr>
<td>Consulting firm-HR</td>
<td></td>
<td>3.6</td>
<td>1.3</td>
</tr>
<tr>
<td>Continuing training (not employed)-HR</td>
<td></td>
<td></td>
<td>2.5%</td>
</tr>
<tr>
<td>Federal government (US or foreign)-HR</td>
<td>8.4</td>
<td>6.0</td>
<td>2.1</td>
</tr>
<tr>
<td>Federal government (US or foreign)-NHR</td>
<td>0.5</td>
<td></td>
<td>0.4</td>
</tr>
<tr>
<td>Hospital or other health care provider-HR</td>
<td>29.3</td>
<td>38.0</td>
<td>38.2</td>
</tr>
<tr>
<td>Hospital or other health care provider-NHR</td>
<td>0.5</td>
<td></td>
<td>0.8</td>
</tr>
<tr>
<td>Military-HR</td>
<td></td>
<td>3.6</td>
<td>1.3</td>
</tr>
<tr>
<td>Not seeking employment (not employed; not continuing training)-HR</td>
<td>6.3</td>
<td>1.8</td>
<td>0.4</td>
</tr>
<tr>
<td>Other Industrial or Commercial firm-HR</td>
<td>1.6</td>
<td>1.8</td>
<td>0.8</td>
</tr>
<tr>
<td>Other Industrial or Commercial firm-NHR</td>
<td></td>
<td></td>
<td>0.4</td>
</tr>
<tr>
<td>Pharmaceutical, biotech or medical device firm-HR</td>
<td>2.6</td>
<td>1.2</td>
<td>2.1</td>
</tr>
<tr>
<td>Seeking employment-HR</td>
<td>7.3</td>
<td>8.4</td>
<td>17.2</td>
</tr>
<tr>
<td>Self-employed-HR</td>
<td>0.5</td>
<td>1.8</td>
<td>0.8</td>
</tr>
<tr>
<td>Self-employed-NHR</td>
<td></td>
<td></td>
<td>0.8</td>
</tr>
<tr>
<td>State or local government-HR</td>
<td>4.7</td>
<td>6.0</td>
<td>7.6</td>
</tr>
<tr>
<td>State or local government-NHR</td>
<td></td>
<td></td>
<td>0.4</td>
</tr>
<tr>
<td>University or College Faculty-HR</td>
<td>12.6</td>
<td>12.0</td>
<td>7.1</td>
</tr>
<tr>
<td>University or College Faculty-NHR</td>
<td></td>
<td></td>
<td>0.4</td>
</tr>
<tr>
<td>University or College Staff-HR</td>
<td>1.5</td>
<td>0</td>
<td>9.2</td>
</tr>
</tbody>
</table>

*Total Health Related Positions (HR-Health Related/Non-Health Related differentiated in 2010-2011 survey)*

95.7
89. Is your current or pending work based in the United States?

| Yes | 212 | 88.8 | 95.2 | 91.8 |
| No  | 19  | 11.2 | 4.8  | 8.2  |

90. Is your current or pending position in a medically underserved area or in a developing country? (Medically underserved is defined as a population that has access to fewer primary health care providers per person than the U.S. national norm or approx)

| Yes | 44  | 19.3 | 18.1 | 19.5 |
| No  | 182 | 80.7 | 81.9 | 80.5 |

Q.91 - What is the gross salary of your current or pending position? [Please note: Salary ranges of public health professionals are often requested by potential students.)

73.7% (182) of graduates responded to this question.
Q.92 - If you are not employed in a public health or health related field, which of the following is the primary reason?

<table>
<thead>
<tr>
<th>Reason</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of jobs in your preferred location</td>
<td>10 (9.3%)</td>
</tr>
<tr>
<td>Lack of jobs in your specialty area</td>
<td>6 (5.6%)</td>
</tr>
<tr>
<td>More satisfied working in another field</td>
<td>7 (6.5%)</td>
</tr>
<tr>
<td>Not applicable</td>
<td>49 (45.4%)</td>
</tr>
<tr>
<td>Personal reasons</td>
<td>15 (13.9%)</td>
</tr>
<tr>
<td>Pursuing additional training in another discipline</td>
<td>7 (6.5%)</td>
</tr>
<tr>
<td>Pursuing additional training in public health or a health-related discipline</td>
<td>14 (13.0%)</td>
</tr>
</tbody>
</table>

43.7% (108) of graduates responded to this question.

OTHER COMMENTS

Q. 93 - What would have helped you complete your degree?

(Comments are as submitted with only the names of individuals removed)

Communication with and Guidance from Advisors/Faculty/Committee

- Staff availability. In the beginning of my proposal development I had a difficult time finding dissertation committee members and the semesters go by quickly. I also conducted independent research on human subjects so that was time consuming in terms of IRBs.
- I would have appreciated a more accessible committee. It was difficult for me to complete my thesis in a timely manner because my committee was constantly out of town or would not respond to correspondence. There was also little communication between my committee members.
- It was cumbersome trying to add a committee member from the Center for Clinical and Translational Sciences (CCTS). This process should be expedited.
- I really think that having an advisor randomly assigned to me was bad. I started out with a guy who had some serious communication issues. I tried to have a good attitude about it, but in retrospect, I wish I had jumped ship sooner. As it was, I realized later there were great mentors available that I never got to know and didn't take advantage of, which is a major regret I have.
- Faster responses from faculty members. I also would have appreciated being shown more respect from faculty members, who, with a few exceptions, I felt for the most part were respectful of my time.
- More communication with my committee.
- More active research projects in my department. More interaction with alumni.
- I was blessed to have the best committee members. My advisor Dr. X was the main reason that I was able to finish. UT is lucky to have him as one of its staff. God bless him and my other faculty members who all taught me useful information.
- My committee and research advisor.
- My academic committee, my mentors and advisor, SPH resources including faculty, classes, library, computer lab, student services, etc.
- Guidance from faculty, better organization from Student Affairs and Admissions, more resources for job and practicum opportunities, a game plan for graduating on time (i.e., timeline in which students can monitor their progress and see online what else is needed to complete requirements).
• Again, there was not enough support from faculty. Students were left to help each other to get questions answered.

• I was passed around to various advisors and did not feel there was a commitment for all the time and money I expended at the University. My advisors were not committed to the student except for Dr. X. The above questions were in part answered from the involvement I had with my previous two advisors. The negative comments are associated with them. Positive comments are associated with Dr. X.

• More input/involvement from committee during CE process, mostly from second member which was not in my specific division.

• Having more feedback from my academic advisors and professors. Feedback related to coursework, work and volunteering opportunities, and feedback related to my academic skills.

• I better advisor at the beginning of the training to help me identify my areas of interest and select courses.

• A better relationship with my adviser or an adviser with an interest in Geriatrics.

• More guidance from academic advisor for creating a thesis proposal. Also, better response and help from student affairs.

• Guidance that would allow me to progress to completion in a timely manner. Although my committee provided positive support, I was not given adequate information regarding what forms and deadlines existed by the main office in Houston to complete my degree. The majority of this information I found on-line. Unfortunately, details that can only be provided by those who have experienced the process before were not provided to me until it was too late. This was an oversight that was most likely due to the fact that my studies largely occurred off-campus. As a result, much of my thesis work was self-guided.

• Better advisement -I began this degree program back in 2000. I had Dr. X as my original advisor and I think I was a student of higher caliber than others in the program at the time. I took about 40 hours of coursework Fall 2000/Spring 2001 b/c that is what I was used to in college and I was a fulltime student. He questioned that and was not very approachable at all. He looked down on the idea that I was applying to medical school. So when I got into Medical school in San Antonio, all I needed to do was research to complete the degree but felt like I had no support at SPH. I ended up just not doing anything with SPH until 2004 when I registered for thesis hours. I didn't get any help from the San Antonio campus as I was a Houston student and minimal help from Houston and so I went on to residency not having completed the MPH degree yet again. Finally, post residency, I had the pleasure of speaking to Dr. X who wanted me to finish the degree as much I did. She helped me re-enroll, evaluate what work I had left and got me a different advisor. Then over the last 4 semesters, I have had 3 different advisors due to people leaving/retiring. My final advisor helped me learn about the capstone course so I could finish. My point - a better advisor back in 2000 would have helped me complete the degree sooner.

• More guidance or interest from my advisor.

• A clearer outline of classes expected to be completed for each degree program.

Assistance with Thesis

• More assistance selecting a thesis topic.

• More guidance from academic advisor for creating a thesis proposal. Also, better response and help from student affairs.

• A clearer goal of what my thesis project would be.

• More support from my original thesis supervisor. I was revising a thesis proposal from 2006-2008 with no success of approval to even submit my proposal to Research Services for approval. Each semester I paid for tuition and even took additional coursework for enrichment purposes during this time. I was discouraged and took an extended leave of absence. I applied for re-admission when the Capstone Exam option was available due to graduation being in my control and not the subjective decision of another.

• Deciding my thesis topic earlier in my degree plan.

• A clearer understanding of how to complete a thesis. I think it would be beneficial to have a
powerpoint that discusses the process of completing a thesis, available to students online.

- More assistance in helping to finish my thesis. This was my #1 goal when coming to this school and was very disappointed that I was not able to do so.
- The thesis option was a very good learning experience, but it was a very lengthy and tedious process.
- A better understanding of the CE thesis process, an advisor and committee more active in my Graduate degree career.
- None -my advisor and committee member's advice. My fellow classmates' previous experiences.
- More information on thesis/proposal process. -There were some challenges with obtaining IRB approval and my CE project.
- More help in thesis.
- I started out doing a thesis project but ended up being offered a chance to graduate by taking the CE/Capstone course and CPH exam. While I really like both options, I think that the thesis option should be modified to help students who really do not know what they are doing because they have never done a graduate level thesis project. I strongly recommend a semester long thesis development course for students. I think more evening courses would have helped me because I worked full time through out my MPH program.
- An earlier start on the proposal.
- Not having to do a thesis.
- Better guidance and communication as to what was required of a research thesis and thesis project. - Feeling a bit more of a sense of guidance in the thesis process.
- Better access to data and/or a workshop in how to navigate the "request for data" proposal.
- The thesis process could have taken less time. Faculty need greater incentive/more time to devote to their students.

Resources/Services

- Better communication and collaboration with Administrative staff during last 5 hours of MPH. Administrative staff should look at prospective graduates in advance to avoid errors.
- A little more guidance and information from the school.
- Resources were adequate.
- Student parking at the main SPH bulding especially on sundays and extended library hours.
- The SPH library is awful. The number and diversity of journals is quite limited and seems to have gotten smaller while I was a student. Streamlining this process and better integrating the HAM-TMC library should be a priority.
- Having a full time or part time person working in the computer lab to help students with statistical programs, research questions.
- A more responsive Student Services and better website.
- Better guidance from the start. Better organization within the school.
- More guidance and resources throughout my time at SPH. I thought the resources students received during orientation were great and extremely helpful. I would have appreciated receiving similar information as I transitioned through the program, especially because a lot of that information wasn’t applicable until the second or third semester.

Course Availability and Delivery

- More online courses or more evening classes.
- I would have been able to complete my degree sooner if more core classes were offered every semester; some courses were only offered annually.
- More classes offered for the other divisions.
- Better availability of required course courses that are offered once a week instead of in 2 segments/week.
- More classes offered online.
- More electives offered in the evening.
- I would have preferred fewer ITV courses. Over half of my courses were taught without any faculty in
the room and it allowed students to talk and get distracted, not paying attention. I think I would have been able to learn much more and would have been much more engaged had more of my classes been taught by a faculty at my campus. I could definitely tell that I was learning more when guest lecturers would come to Austin to present during an ITV course or during a regular course taught by a faculty on site. This was a consistent problem over the past 2 and a half years.

- More classes schedules that are friendly to the working professional - nights/weekends.
- MORE COMMUNICATION CLASSES! How to effectively communicate as a public health practitioner.
- Ability to take more in class courses, be around other students and meet more with my advisor (difficult due to personal circumstances)...I worked full time and lived over 60 miles away from the campus. It also would not hurt to have a better understanding of the student/advisor relationship. At times I felt a disconnect between me, my advisor and the school because of a lack of communication and guidance from my advisor and my understanding of my role as a student.
- More online courses.
- More evening classes and a wider variety of online options.

**Capstone course/Exam**

- I took the Capstone Course and Exam to finish my degree. I do not think that I would have finished if this option had not been available. I got stuck in the proposal stage of my thesis and in a year's time never got my proposal approved. I feel as if the thesis was some big ambiguous project that I would have liked clearer instructions on.
- Having an option of not completing a thesis.
- Having the opportunity to take the exam last summer.
- Having the Capstone course being offered earlier.
- The Capstone Exam/ Course being offered from the beginning.
- Better guidance during the Capstone Course by the instructors, and clear instructions on which resources to use to study.
- Capstone offered earlier.
- If a course like capstone would have been started earlier.
- The addition of the Capstone option earlier than 2010.
- Switching over from thesis to capstone course+exam earlier.
- Wish I could have used the CE course and exam option. It would have helped me finish a lot faster.
- Capstone option earlier.

**Regional Campus**

- More interesting classes offered towards the Dallas campus such as those geared for the global health concentration as well as more management classes would have been helpful.
- It would have helped to have the Austin Regional Campus more integrated with the main campus in Houston. It also would help to have more opportunities for employment at regional campuses from the beginning of the study program.
- More courses available online, and more ITV offerings for regional campus students.
- I wish I actually did my degree at the campus instead of a regional.
- I think additional resources and faculty at the Dallas regional office would have helped.
- Regional students should be allowed to do more than a generalized MPH. If the regional sites are strong enough to allow PhD candidates to enroll, why can't the MPH students do MPH Epidemiology?
- More resources for regional campuses.
- More variety of classes at regional campus.

**Degree plan**

- A written plan of the typical order of when classes are normally taken by students, ie- for a HPBS student it is recommended to take 1111, Epidemiology, etc fall semester, spring semester...1112, etc
and then just filling in where elective courses should be taken. Most of my classmates and I took the
same courses the same semesters, but that was mostly figured out after talking with previous students
and/or professors.

- A degree plan from the first day of orientation (before would have been even better!), a more
structured format and guidance for Global Health Concentration - I didn't finish one for many
reasons, but getting started late due to confusion was a big factor.
- A more structured degree plan.

Funding

- Grants.
- Availability of financial assistance through scholarships/traineeships/fellowships.
- More paid internship / financial support for foreign student.

N/A

- I don't know.
- I had everything I needed.
- N/A (7)

Other

- Degree completed.
- I did not have any trouble completing my degree.
- Not much else, it was great
- The advising from Dr. X really DID help.
- Nothing, great job.
- Did complete my degree - that's why I'm doing this survey.
- My strong motivation for degree with significant help from faculty and colleagues.
- I think if I needed any more resources, they were available, I just didn't pursue very many.
- Fewer advisors on my thesis committee to streamline the process. –
- Mandatory computer lab courses.
- Better time management to get my CE completed.
- UT-H SPH building at Houston, Texas needs geographic expansion to establish as a “comprehensive
and commendable public health institute“ comprising individualized blocks for all of the core public
health sciences with their own research and policy centers to provide education and training to
students to become public health scientists/researchers for advancement of the “future public health
sciences”. For example, “influenza research and policy center” with the collaboration of the divisions
of Epidemiology with the Management and Policy sciences by following in the foot steps of other
credible public health schools in the United States.
- I didn't realize how much I can negotiate early on with my academic committee (in my PhD). I would
have been able to take less coursework given my background.
- More information on careers applicable to course subjects to help determine earlier what field I was
interested in.
- Having a Biostatistics professor would have certainly helped.
- Having other options available to me (that are now available) that would have served to replace the
CE.
- I would have liked more time at the school rather I would only go to class and leave. I am Full time
employed.
- I was a dietetic intern. It was difficult completing my degree and finishing my internship at the
same time.
- A timeline and degree planner provided at orientation. Direction to an academic advisor who
matched my research interests.
- Being able to reach my advisors in a timely manner during my proposal stage. Also having more
variety of classes offered in at my campus that were not conflicting in the schedule.
- More guidance from the campus.
• Understanding the general timeline of my courses. I wish there would have been more workshops presented on the CE/Dissertations & proposals explaining step-by-step what needs to be done and how.
• Better coordination between the schools, no one seemed to know or care about the dual degree program MPH/MS (informatics).
• Enrolling in school full time.
• More methods courses in Epidemiology The Division of Epidemiology needs a more vigorous doctoral seminar that is METHODS-BASE (i.e., people discuss the methods used rather than the topic). It would also be helpful to differentiate Molecular epi/genetics from Field Epi so that students can discuss their research with a group of people who are interested in the methods they use. The school should also take measures to encourage independent research on behalf of students, rather than just using a faculty member’s dataset.
• More information about the availability of publically available data.
• My self motivation was really the driving factor not external factors.
• Conducive academic environment.
• Maybe more encouragement and positive, constructive challenges from academic advisors.
• I think an office in Student Affairs, that looked specifically at job placement/job options in the medical center & elsewhere, would be beneficial, but this doesn’t really pertain to degree completion.
• More faculty, courses, and other resources in my area of interest.
• Better guidance on crafting a useful practicum.
• More interaction with other students.
• Another student mentor.
• I would have liked more global health course offerings.
• More practical experience.
• More organization on the part of administrators and sometimes professors.
• Less bureaucracy in the Graduation Process.

Q.94 - What SKILLS acquired at UT-H SPH do you think will be most useful in your career?
(Comments are submitted with only the names of individuals removed.)

Research
• Research skills.
• Research, Environmental Health Science knowledge, ability to write a strong scientific research paper, ability to present public health research and outcomes to a professional audience.
• Research and theoretical elements of health behavior and interventions.
• Research methods.
• Research.
• Throughout the dissertation experience, I recognized that my ability to synthesize and summarize information was growing. I learned a tremendous amount throughout that experience, and it prepared me for life as an academic researcher.
• Research skills.
• Research techniques.
• Researchcg skills.
• Research skill of using various data bases, working with diverse populations.I also appreciated the free classes that were offered by the IT division on using basic programs like EXCEL, ACCESS etc.
• Several skills, especially the ability to critically evaluate any research paper and ability to conduct a research that can be published in peer-reviewed journals.
• Research and writing; also cultural competency.
• Research skills.
• Research.
• Research related training.

Writing and Analytical Skills

• Application of public health knowledge to solve major public health problems.
• Analytical skills, research skills and understanding of systems in public health.
• Analyzing data objectively.
• Analytical.
• Problem-solving skills.
• Thinking analytically about public health issues.
• I believe my writing skills improved.
• Writing and cognitive skills.
• Several skills, especially the ability to critically evaluate any research paper and ability to conduct research that can be published in peer-reviewed journals.
• Research and writing; also cultural competency.
• Research methods and Scientific writing.
• Analytical skills.
• Grant writing, writing scientific papers.
• I feel that my oral and written communication skills have been greatly enhanced as a result of my educational experience. I have also learned a great deal about using software such as statistical software.
• Review, writing and synthesis of literature.
• Grant writing.
• Grant writing, writing scientific papers.

Biostatistics/Epidemiology

• Epidemiology and biostatistics.
• Knowledge of epidemiology.
• Field epidemiology.
• Fundamentals of Epidemiology.
• Biostatistics/Epidemiology/BH knowledge.
• Data analysis skills that involve using SAS or Stata or SPSS.
• Epi Info.
• GIS - Epidemiology and biosafety experience and knowledge.
• Biostatistics data analysis strategies.
• Epidemiology, biostatistics.
• Biostatistics.
• Biostatistical knowledge.
• Statistics.
• Basic biostatistics and the ability to use biostatistical software as well as an increased knowledge of epidemiology.
• The basic epidemiological and biostatistic principles.
• The skills I learned in Field Epidemiology are aiding me with my current job. I have learned how to effectively collect data and am applying my knowledge to real-world situations.
• Epidemiology.
• The various epidemiology based courses will be most useful in my career.
• Epidemiology.
• Epidemiological Methods & Tools.
• Skills acquired in Epi 3 and biostats.
• Biostats and epi.
• Epidemiology, Research, ethics, biostatistics, global health.
• Biostats.
• I have learned to develop research questions & think about how to design research around the
primary question.

- Understanding of study design, biostats
- An over-all understanding of Biostatistics and Epidemiology, to apply to my clinical research.
- Biostats and epidemiology.
- Understanding of biostatistics and research design.
- Statistical concept.
- Knowledge of epidemiologic practices.
- Epidemiology and biostatistics.
- Epidemiology.
- Statistical and social networking.
- My epidemiology training, as I want to be a veterinarian.
- Biostatistics, epidemiology are the areas I found most useful.
- Knowledge of epidemiology.
- Epidemiological understanding; ability to comprehend journals.
- Data management, data analysis, communicating with the community.
- Epidemiology was useful.
- Knowledge gained in biostatistics, epidemiology, and health policy.
- Environmental health and safety skill; strong analytical and statistical skill; and interpersonal/social skill.
- Since most faculty treated me as a colleague, rather than student, I gained more confidence in my ability to offer my opinions and/or ideas to more senior faculty than myself.
- Field epidemiology.

**Health Promotion/Behavioral Science**

- Behavioral Sciences is the area I found most useful.
- Intervention mapping.
- Peer-review of other’s grants/papers (obtained from the Behavioral Sciences Doctoral Seminar group).
- Health promotion strategies.
- Intervention Mapping and all the writing that goes with research/intervention proposals.
- IMAPPING.
- The intervention mapping course taught by Dr. X was the best course I took here (learned a lot!)
- Program development and evaluation (Intervention Mapping), epidemiology, biostatistics, leadership and reframing the way I approach issues, communication and building relationships with community.
- Program planning and evaluation.
- Evaluation.
- Intervention planning.
- Biostatistics, epidemiology, and behavioral health are the areas I found most useful.
- Intervention mapping. epidemiology.
- Needs assessment, curriculum programming, planning, implementation, evaluation.
- Social/behavioral science.
- All the information I learned in my behavioral science classes and the dietetic internship will be very useful in my future career.
- Learning about behavioral sciences.

**Management and Policy Skills**

- Policy skills.
- Policy development.
- Management and policy/health services administration.
- Management skills.
- Health Policy Analysis, Critical Thinking.
- Knowledge gained in health policy.
Communication
- Communication, research and presentation.
- Communication of results of research.
- Professionalism, communicating information, public speaking.
- Effective communication, presentation skills, epidemiology competencies.
- Communicating with the community

Software – STATA/SAS
- Using stata and access.
- SAS programming.
- Learning how to use all statistical programs in addition to STATA.
- The ability to synthesize data and to plan out effective interventions.
- Software knowledge.
- Data management, data analysis.

General Course Work
- Also enjoyed learning about environmental health.
- All!
- Can't single out one skill that will be most useful. The SPH helped me develop a diverse set of skills that will be extremely useful in my career.
- I feel like my academic training at SPH pales in comparison to the knowledge I gained working as a research assistant. This was by far the best part of being an SPH student. However, this is because I had highly dedicated mentors.
- Overall Public health experience.
- This program definitely gave me an overview of the many ways in which public health can be applied to any scenario. Being in a situation I will incorporate many of these tools to address the issue.
- I think everything I have learned would benefit me in my career.
- Overall course work and thesis/CE will be useful in my career.
- Core course selections were perfect.
- Knowledge about the U.S. health care system, principles of five major areas of public health, communication and interpersonal skills.
- Most of the classes I took in my major.
- The knowledge gained and the degree itself. The connections I made.

Analyses and Critical Thinking
- Critical evaluation of research studies; study design; theories of behavior change; the policy cycle.
- Learning how to critically examine research papers, how to write reports and how to analyse data from trends more effectively.
- Epidemiological understanding; ability to comprehend journals.
- Peer-review of other’s grants/papers (obtained from the Behavioral Sciences Doctoral Seminar group).
- Since most faculty treated me as a colleague, rather than student, I gained more confidence in my ability to offer my opinions and/or ideas to more senior faculty than myself.
- Critical thinking, evidence based thinking, and systems thinking
- Critical thinking, analyzing research studies, developing evidence-based solutions to health issues
- I think my skills in thinking through a problem in a complex, critical matter will be the most useful. I also think that my skills in analyzing a problem and reading/drawing conclusions from primary literature will be useful.
- Critical thinking related to public health research. This includes various methodology and analysis techniques.
- Skills to critically evaluate the scientific literature, develop proper solutions for public health problems, and communicate effectively with others for my own findings.
• Critical thinking, scientific literature, and writing.
• Health Policy Analysis, Critical Thinking.
• Knowledge of the research process and how to interpret academic publications.
• Ability to recognize or identify issues and critically evaluating, assessing and investigating the issues, and providing/implementing interventions.
• Looking at a scenario from multiple view points and at the macroscopic level rather than a narrow focus.

Practicum
• The best experience was my practicum. I acquired research skills and ability to conduct population assessment and program implementation skills.
• Practicum opportunity greatly enhanced my skills in the field of clinical Research.
• Practicum experience.

Other
• Also enjoyed learning about environmental health.
• Presentation skills
• I learned to do powerpoint my second semester there in 2001 - when powerpoint was just getting off the ground.
• Teamwork, Practical experience and leadership.
• General PH vocabulary and skills.
• The program is definitely a graduate school program in that a student must be an independent worker and willing to seek help if he/she needs it. The program taught me to be proactive about asking questions and finding appropriate answers. It taught me the necessary skills to be a professional in my field, but also taught me how to interact with individuals from various fields and how to present my expertise so that others may benefit from it.
• I do academic research at a non-profit research center. As such, I use my prior experience and undergraduate training in molecular biology research to study diseases such as cancer, diabetes, obesity, and osteoarthritis. I feel that I can now combine my skills in epidemiology with my experience in molecular biology to better understand diseases from a molecular/cellular level to a population level. I love combining these disciplines to better understand the molecular epidemiology of diseases. I now have aspirations to attend medical school, after which I hope to be able to do translational research as a physician-scientist.
• Working with minimal supervision.
• Dietetics and nutrition related knowledge acquired during internship.
• I think completing my practicum and thesis allowed me to put into practice the principles I have learned. I learned much from my degree program.
• A good understanding of the core study subjects in public health.
• Knowing how to perform literature searches and to create program material.
• Counseling skills, motivational skills with clients.
• All those skills related to occupational health.
• Knowledge of Public health.
• How to understand and perform cost-effectiveness and cost-benefit analyses.
• For me, I think I have gained a skill in incorporating a public health perspective that will help me in my future career as a physician.
• In my degree, the global health classes prepared me for my future career in global health.
• Literature Search skills.
• Maternal and Child Health concentration.
• The course by Dr. X was best for career preparation!
• Industrial hygiene skills.
• Working as part of a team with people of diverse educational and cultural backgrounds.
• More opportunities for practical training as an independent researcher in all of the public health sciences like pre and post doctoral fellowship programs.
• I had all I needed as a student from the middle east, however, I would have liked being part of a university research as a graduate students.
• Assignments which required me to work with community organizations in completing my assignments.
• Learning to work with individuals who’s cultures were very different from mine. Also working in interdisciplinary teams.

N/A (3)

Q95. What aspects of public health practice or research were not adequately addressed in your program at UT-H SPH? (Comments are submitted with only the names of individuals removed.)

Epidemiology
• I think there should be more of an emphasis on foundational classes such as epidemiology and biostatistics and you should have to take more to graduate.
• Advanced Epidemiology.
• Molecular epidemiology.

Infectious Disease
• Infectious disease
• Needed more infectious disease.
• More hands on infectious disease.

Biostatistics
• Statistics (2)
• Practical application of biostatistics- I took both intermediate classes and felt that I was just encouraged to memorize Stata commands and when it came to analyzing my data for my thesis- I found that I needed A LOT of help.
• I felt that the instruction of biostatistics was lacking.
• Would have liked to apply more biostatistics in other classes.
• Biostatistics (6)
• More classes on how to use and manage SPSS, SAS or another software program would have been really helpful...as I look into more public health jobs, I'm finding that they want people who are able to handle these software.
• I think there should be more of an emphasis on foundational classes such as epidemiology and biostatistics and you should have to take more to graduate.
• -The El Paso regional campus do not have a Professor in Biostatistics. It is very hard to imagine an accredited top ranked school of public health not having at least a professor of Biostatistics in a regional campus. I think it is very hard to learn Biostatistics online or ITV. The most critical part of the MPH program is to analyze data. It is hard to imagine learning SAS/Stata/EpiInfo ITV or online. I would not at all recommend online courses for those that involve quantitative component. The Division of Biostatistics had considerable problems in teaching via ITV; partly because of the interruptions, and ITV issues related in teaching.
• I regret not taking a biostatistics course on campus but they were never available after 5pm. The online course did not provide me the foundation I need to feel comfortable with the subject.
• Would have liked to be more proficient in biostats- from a practical standpoint .
• Helping to learn SPSS/STATA.
• I wish I could have some database management courses.
• I don't think the biostatistics courses gave students a way to apply their knowledge in real world settings. I learned more from analyzing my data for thesis than I did in an entire semester of biostatistics.
• Probably data analysis.
• I do not feel comfortable with really understanding biostatistics. I also feel that so many examples
were focused solely on obesity and adolescent sexual health, I feel my knowledge about other subjects is limited.

- Applying biostatistics to work which I will participate in in the future. I felt as though too much time was spent in class going over theory and less on practical examples.

**Occupational Health**
- Workforce Health.
- Works compensation issues (in occupational health). Where public health is headed - future areas of research.
- I would have liked to have taken more occupational health courses, which generally were not available to students at regional campuses.
- Infection Control in an occupational setting
- I think the school is too much focalized in public health from a political perspective. More technical expertise is needed, especially in the case of occupational and environmental health.

**Environmental Science**
- Environmental sciences; I took both courses online and it was not satisfactory enough to retain the key points. Environmental focused on too many specific details and did not hit the key take home points for all practicing public health professionals.
- Environmental Sciences,
- Environmental health (2)
- Contemporary research activities in environmental health sciences

**Management and Policy**
- The mgmt course was such a mix of assignments, I do not feel
- I learned anything related to mgmt which I did not already learn from my career experience.
- Management and policy (3).
- MPACH
- PH policy
- I feel that the aspect of public health which was not adequately addressed was the policy aspect of healthcare. I felt that my general education policy/management course at SPH provided more of a historical overview (which was very interesting); however with all of the changes and political issues with healthcare at present, I feel that these aspects were not adequately addressed.
- I declare myself a little lacking in terms of management and policy knowledge; however, I did have the opportunity to take more classes; therefore, I cannot say that the school did not have the adequate resources to prepare me.
- Policy wasn't really broached in most of the courses I took. I wish I had more background in that.
- I would have liked to have taken more course work in management, policy, and health services. I would also have loved to have taken more course work in global health, which is my area of interest, but few courses were offered at my campus. Many of the concentrations offered at the Houston campus were not offered at my regional campus.
- I was not able to take as many policy and ethics courses as I would have liked. They were not offered.
- Classes on policy sciences were not offered at the Dallas campus -None .

**Grant Writing**
- Grant writing (2).
- Grant budgeting and financial aspects of managing programs, grants, and research would have been very helpful and practical.

**Advising**
- The academic advisor who was originally assigned to me was less than interested in being my advisor. I was an MPH student and he said that he primarily works with PhD students. He was very inaccessible
during my first semester and during my first committee meeting, he practically ignored me. I changed advisors during my second year and was very satisfied with my new advisor.

GIS applications
- GIS applications in public health.
- I am very interested in GIS applications for public health and spatial statistics. Only very recently has this been introduced at UTSPH, and very few faculty specialize in this area, which left me seeking external collaborators on my dissertation.
- During my 4 years at UTSPH, I cannot recall a course in multilevel modeling being taught. I had to teach myself this skill in order to accomplish my research objective for my dissertation... I also believe this is an increasingly important tool for epidemiologists.

Regional Campuses
- I feel there is a sever disconnect at the Austin Regional Campus in preparing students for a career after graduation.

Real-life/Applied Practical Experience
- In general I would have preferred more practical applications of the subject matter of interest. Instead of just learning the tool, more emphasis spent on learning which tool is best to use for which job.
- Insufficient real-life/practical experiences to complement class work
- There will always be the need for more applied experience. I believe I learned the most from my thesis experience, because I was actually applying concepts and developing a study on my own. The background from coursework was necessary, but without the thesis experience, I would not be as confident with what I learned in the MPH program. There are still areas of the degree that I do not feel confident in and perhaps could have used more applied experience in each of the core subjects.
- More community involvement. -how to become integrated into the community as a public health professional. I think the school needs to do a better job of tying students with the community. SEIS and SIGHT should not be the only organizations that link students with the community. This should be school-wide.
- Students need better preparation to work in an integrated public private non profit world to create a greater network of resources, as well as more effective communication and collaborations for public health as a whole.
- Academic rigor and application of public health in real world situations.

Research
- I did not feel that there were adequate research opportunities
- I believe that maybe some sort of research course should be a part of the MPH curriculum so that the students begin thinking about research topics/endeavors.
- Interpreting research results/analysis of results.
- Research services...perhaps a course required as part of the degree program can fill this need.
- How to narrow focus into a research project.
- Qualitative studies and research was not adequately addressed.
- As a student, I was often asked to design research studies in research methods courses; therefore I have less experience in implementing / conducting self- designed studies. Also, doctoral students are not encouraged enough to conduct research; the onus is on students to find research opportunities. I would recommend more emphasis on participating in research & writing publications while taking coursework.

N/A
- None (8)
- I dont' know.
- I cannot think of any at this time.
- NA (17)
• None - I received a broad experience in public health practice.
• None - I can't think of anything that was adequately explained, at least amongst the topics in which I was interested.
• None that I can think of –none.
• None that I can think of now.
• None, everything was addressed. We were also reminded that we were working in "perfect world scenarios" while completing coursework and notified of the challenges that we may face in the "real world".
• No opinion here.

Other
• Ethics training (beyond a simple CITI course or other online program) should be required of all students in a face-to-face format (either a course or workshop). This training should focus on IRB issues, HIPPA, informed consent, patient/participant privacy, etc.
• Compliance testing and applicable laws. Field experience with recent scientific methods. Applicability of relevant standards to environmental health problems.
• I would have liked to learn more techniques for behavior modification.
• -I think my education at the UTSPH touched on nearly every aspect of public health and research that I could think of. I do strongly wish that there were more courses that dealt with genetic or molecular research, like the course I took called Genetic Aspects of Chronic Disease, because that is the field of my specialization.
• Mostly all areas
• Measurement theory.
• More information about potential career paths and courses needed for proper skill set for this career.
• UT-H SPH building at Houston, Texas needs geographic expansion to establish as a “comprehensive and commendable public health institute” comprising individualized blocks for all of the core public health sciences with their own research and policy centers to provide education and training to students to become public health scientists/researchers for advancement of the “future public health sciences”. For example, “influenza research and policy center” with the collaboration of the divisions of Epidemiology with the Management and Policy sciences by following in the foot steps of other creditable public health schools in the United States.
• I wish there would have been more animal-related classes for those of us wanting to be veterinarians or other jobs held in close association with animals.
• I would have preferred more classes on social marketing.
• I wish that there were more adolescent and dental health care classes offered.
• Sexual and reproductive health. This is my area of interest and besides two maternal and child health classes, there were no other courses offered to me that pertained to sexual/reproductive health which was very disappointing.
• I think "writing essays" more often throughout the Masters program would be very helpful in our ability to write papers/articles/abstracts.
• Emerging interests in new methodologies for spatial epidemiology
• I had little opportunity to gain real in-depth knowledge in any aspect, so I would say all aspects were inadequately addressed.
• I sought out classes and opportunities around leadership and health communication, but most students do not. I think these are essential skills that practitioners of public health will need to use and should learn in a public health program.
• General application of public health skills learned in classes.
Table 16. – Overall Recommendation (survey Question 96)

<table>
<thead>
<tr>
<th>Recommend UTSPH?</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q.96 – Would recommend UTSPH to others who are interested in graduate study in public health</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>223</td>
</tr>
<tr>
<td>No</td>
<td>10</td>
</tr>
</tbody>
</table>

**GENERAL SATISFACTION**

**Q.97 - Please tell us about the educational experience you had while at SPH.**
(Comments are submitted with only the names of individuals removed.)

**Practicum Experience**
- The dietetic internship or my clinical practicum at hospitals in the medical center.
- My practicum. It just showed me other options for a future career.
- My practicum with UTSW faculty.
- My practicum at The Methodist Hospital.
- My practicum experience at MD Anderson Center for Minority Health.
- The practicum experience was very helpful in gaining real world experience in the field of public health.
- Field Epi Practicum
- Practicum and the thesis process were by far the most valuable educational experiences for me. Both of these were lengthy processes and demanded a lot of hard work, but I learnt the most from these processes.
- I found the Practicum the best educational experience.
- Practicum and research process.
- MY best educational experience was my practicum during Fall 2009 semester where I got an opportunity to apply and test my knowledge and skills about public health principles in a project related to breast cancer.
- My practicum/ the advisors.
- Practicum in the infection control dept at Memorial Hermann TMC.
- The site visits for Environmental Science and also the practicum experience-These 2 experience really gave me real world application of what we were learning in our PH classes.
- Got the opportunity to work at MDACC

**Faculty/ Advisors**
- The advisors.
- Faculty are more than willing to help.
- Working with my advisor, Dr. X, to write my thesis.
- My advisor!
- My faculty advisor Dr X was the greatest support and the best mentor.
- Excellent teachers for the most part.
- I think that the faculty was very accommodating and approachable.
- The best thing about my experience at UTSPH was my advisor, Dr. X. She went out of her way to
guide me throughout my two and a half years at the school. I felt respected and I felt that she challenged me to work hard and do my best. I do not feel I can make this statement about any other faculty members.

- Working with Dr. X and Dr. X.
- I think the best experience was the interaction with my academic advisor, Dr. X. He gave me clear advice on the curriculum. I took one course with him so I know he is also a great teacher; very knowledgeable and enthusiastic. I wish all teachers can be like him.
- The faculty at the SPH were superb. The two that stand out most are Dr. X and Dr. X. They are experts in their field but are extremely approachable and are effective in transfer of knowledge and skills.
- When my number II advisor was released and the final advisor was assigned to me, Dr. X.
- Working with my academic advisor, Dr. X.
- Excellence of course work for the public health sciences, offered by the UT-H SPH faculty members and prompt guidance by my academic and dissertation advisor, Dr. X.
- Great faculty.
- Advisor interactions.
- My Advisor - X, was AMAZING and understanding of my needs!
- Working with my advisor.
- I have to say my advisor, Dr. X, was the most helpful and understanding person I met during my time at the SPH. I am glad that I had her as my advisor. I can't say enough good things about her, and hope that more students are able to meet and work with Dr. X in the future.
- Working on my dissertation/working with my dissertation advisor.
- My academic advisor and thesis advisor were excellent! Always going the extra mile for me.
- Dr. X is very supportive. He is there for all students when it is required. He involved students in the research projects. He is extremely helpful. Dr. X is very helpful. She is there for students in all issues. Dr. X and Dr. X are very nice. Dr. X is very student friendly. Dr. X is very knowledgeable in the area of global health. The best experiences are all with my faculty. East or West, my faculty is the BEST.
- Faculty's genuine interest in the progress of their students (personal experience).
- Working with my mentors, X and X. The classes at SPH for the most part were a breeze and did not challenge me. There were times when I was stressed and working hard, but it was more about volume of work (2-3 papers due around same time) than the quality of the work.
- Experienced faculty who were always available for guidance and encouragement.
- Although I would have liked to be at the main campus, El Paso Regional campus was great. The faculty have an open door policy and are willing to help you.
- My first 2 semesters there, when I did classes on campus, I had great professors!!! They really are passionate about what they do and made you want to go to class everyday. When I came back for orientation Aug 2009 - they were super excited to see me back and wanted me to finish!
- Mostly responsive faculty members and resource availability.

Environmental Science

- The site visits for Environmental Science. This experience really gave me real world application of what we were learning in our PH classes.
- Dr. X's Environmental Sampling & Analysis class was by far the best educational experience I had at SPH. The course was challenging.
- Dr. X's classes and Dr. X' classes. Some contact with Dr. X.
- I enjoyed most of my EOH courses equally.

Culminating/Thesis Experience

- The thesis process was by far the most valuable educational experience for me. It was lengthy process and demanded a lot of hard work, but I learnt the most from these processes.
- Writing my thesis.
- Although frustrating at times, the thesis was the best learning experience I had at the SPH.
• Personally, I enjoyed being able to write the thesis paper I wanted and convey my findings. I feel great that I was able to accomplish this task as I was a bit intimidated by the whole process and was contemplating the capstone exam route. My thesis brought to the forefront many things I have learned through my public health program.
• Primary data collection for thesis.
• The whole culminating experience process really brought together my public health competencies.

Dissertation Experience

• My dissertation was the best educational experience. I had an outside mentor that was extremely helpful in helping me navigate through the various hospital IRBs. My dissertation research helped me find employment and was a great learning experience.
• Completing courses that were selected by recommendation from advisors and committee members, PhD dissertation completion.
• Working on my dissertation/working with my dissertation advisor.
• I think that the doctoral dissertation experience really brought all my theoretical research skills to life. I have an excellent committee and excellent mentor.
• I felt that everything I learned in the PhD program came together when I wrote up the results of my dissertation. I had fantastic feedback from my committee and they worked hard with me to teach me how to analyze the data and report the results.

Epidemiology

• I have had three courses that shaped my experience at SPH. The first two were during my MS program and guided me to the PhD program.... X's Intermediate Biostat course and X's Advanced Epi II. Those professors are no longer at SPH, but their influence will forever be felt. As a doctoral student, there was no class that pushed me as hard or taught me as much as X's Field Epi course. It forces the student to think about the big picture in research by compiling small pieces into one cohesive final project. It was one of the best courses I have ever had.
• Field Epi Practicum.
• The best experience I had was volunteering with the Student Epidemic Intelligence Society and using those opportunities to enhance what I learned in the classroom.
• Dr. X's Intro to Epidemiology was the best course overall.
• Field epi was a great class to learn how to put a proposal together. Also, the capstone course was a great way to re-evaluate the competencies of public health.
• Dr. X's Field Epi course was rigorous but I felt like I learned the most in that class.
• Intro to Epidemiology with Dr. X.
• I felt I had several... The best classes were those that taught a practical skill, not just a weekly "here's the research I do" lecture/seminar. Some of these included Field Epidemiology (X/X), Factor Analysis/SEM (X), Sampling (X).
• I learned the most from Dr. X. Although the two courses I took with him were on-line, he was supportive and provided suggestions on how to approach and plan epidemiology studies.
• In the class Cancer Epidemiology in Geoethnic populations the format of the class allowed us to research and present on different cancers. This pushed us to dig deep into each cancer trying to become knowledgeable enough to be able to present it to the class. It allowed us to think in ways we couldn’t have had it been done traditionally.
• The epi course where we had to design a study-field methods?
• I felt that UT-SPH was great educational experience, and the knowledge that I learned will be helpful in my future career especially the courses of field epidemiology, advanced epidemiology, and the culminating experience.
• Field epidemiology was one of the best educational experiences I've had at the school. It was a 'tour de force', but it was the most comprehensive example of public health practice I have had at this school.
• Epi 3 was the most challenging class to me, and Epi 1 was interesting which help gain my interest in the field.
• I liked my intro Epi class a lot.
• Intervention mapping from Dr. X--she was an excellent professor and really cared about student interests. Intro to epi--Dr. X really made this class interesting and I learned a lot from her.
• Field Epi.
• Field Epidemiology. While it was the hardest course I had ever taken, it was also one of the most enriching education experiences I ever had. I left that class feeling as though I could accomplish whatever I wanted to.
• Epi 3 course was very insightful and beneficial to my educational experience.
• I loved X's intro to epidemiology class and X's physical activity class! Both were excellent professors who made class fun, engaging, and applicable.
• The classes in Epidemiology were the best experience, in terms of writing proposals or critically reviewing articles published in well-known journals.
• I took a class with Dr. X called Topics in Infectious Diseases, it was a very easy class truth be told, but what I enjoyed the most was the different speakers who came to lecture us and it was great learning what people do in the 'real world'.

Biostatistics
• Biostatistics - both semesters.
• Biostats, and my class on using SPSS to analyze datasets.
• Dr. X's Intermediate Biostat course. The professor is no longer at SPH, but Dr. X's influence will forever be felt.
• During my biostat class, I learned statistical software which are very helpful to me.

Behavioral Sciences
• I felt I had several... The best classes were those that taught a practical skill. The Behavioral Sciences Doctoral Seminar.
• Intervention mapping from Dr. X--she was an excellent professor and really cared about student interests.
• Intervention Mapping was the best class I took at SPH. Not only was it well taught, I really felt it prepared me with the skills necessary to do this type of work. In fact, all the classes I took that worked on a real or mock project were good because they required putting knowledge into practice (as opposed to those classes that were more topical in nature and did not have as effective teaching activities). As far as other experiences go, my GA position opened up a lot of opportunities for me to grow and develop my skills as well as put classroom knowledge into real-world projects.
• Really great feedback sessions in an Intervention Mapping class with Dr. X and classmates which thoroughly helped me to understand what I was planning out.
• Going through the process of planning a program in PH1113.
• All of my behavioral science classes were wonderful and were great educational experiences.
• The best educational experience at UTSPH was Intervention Mapping. Dr. X and the student group leaders were very helpful. The class really provided me with an opportunity to comprehensively apply all of the skills learned.
• IMAPPING was the best class I took. I was finally, after over a year, able to research a topic I was interested in. Also, I love the PBL groups in some of the larger classes. It allowed for a more thorough understanding of the materials and a good experience working within a group.
• Most of my health promotion classes.
• The best educational experience was participating in the summer course in which you attend the Disparities in Healthcare and Social Justice conference.

Management and Policy
• Dr. X's Health Policy in the US course is outstanding. The breadth of subject matter and quality of the texts and other reading material are really good. The teaching is excellent. This should be a required course for all SPH students.
• The Management courses I took were most appealing to me.
• Taking the leadership luminaries course.
• Dr. X's current issues in healthcare class.

Dietetic Internship
• The dietetic internship program.
• The dietetic internship or my clinical practicum at hospitals in the medical center.
• I was in the Dietetic Internship, and the contacts I made and experiences I had in the Texas Medical Center were incredible. The preparation at UTSPH - MNT, Public Health Nutrition, etc - was excellent.

Interaction/Environment
• In spite of a couple of gripes, I loved this program and am leaving it very enthusiastic about it, about my future, and about the way the program treated me. I have had so many positive experiences that I cannot narrow it down to just one. I thoroughly enjoyed studying under professors who are experts in their field, yet are friendly, approachable, and willing to help me learn. I will miss the interactions I had with students who had the same interests as me in health care and research. I will miss all the learning I did and the challenges that I had to rise up to meet.
• Meeting with other students for study groups; the opportunity to work in groups and learn from each other as well as the faculty.
• Developing connections and learning in a communal environment.
• I loved the smaller class sizes (before the surge of students). The discussions amongst students and professors in class were amazing and very helpful. I learned a lot from the discussion sections of the course.
• I really enjoyed coming to class and meeting with people.
• Enjoyed the exchange of ideas with instructors and fellow students.
• During my community based health assessment course as well as program evaluation course. They were the most useful because of its applied nature.
• The faculty were very approachable and helpful to students and the student body is quite united. It is a really nice atmosphere to learn.

Capstone
• Leading presentation compilations in MPH CE/Capstone Course.
• The capstone class--it brought everything together and tied up my classes very well. I loved it.
• The Capstone Course was the best learning experience overall and was very interesting.

Other
• Going to school and just being a student
• The critical thinking seminar was an efficient and effective program to fine tune my skills.
• Having this exit survey finally on the web.
• The seminars by far were the most educational. A close second would be the APHA conference I attended, where I was able to interact with alumni.
• Studying for some tests and getting a 100% score. Giving presentations in class which were appreciated.
• Using online courses, as they facilitated progress in the program.
• My stress/coping classes.
• The realities of research world
• Conducting my thesis research
• My public health economics course was engaging and energizing with Dr X a non UTSPH professor affiliated with UTSW. Good interaction between host faculty and regional campus is important.
• Being part of the global health concentration.
• Overall my experience was very good...until I got to the thesis process. I enjoyed all of my classes, was happy I could choose papers/projects that I was interested in, and the students in my class were awesome. My favorite experience was my first semester I was in the Global Health seminar class and I asked if we could have someone come speak on different health care systems around the globe. Instead of saying "sure," my professor "why don't you give us the presentation?" Nervous as I was to
do it, it was a great experience because I got to search for myself the answers and then present it to class.

- I had a great time synthesizing different areas of Public Health thru the courses offered. There is a lot of flexibility and understanding from the faculty about my eventual goals and their willingness to allow me to choose my courses appropriately
- The opportunities provided by faculty to engage in public health opportunities outside the classroom.
- STEER was by far the best experience, mostly for camaraderie with other students, as well as a glimpse of public health in action at the border!
- Maybe health and development w/ Dr. X.
- I think my class in adolescent sexuality was the most fun. But honestly, the best experience that made me see how SPH is like a family was joining the intramural sports.
- Overall, the educational experience will be invaluable to my future.
- Studying different areas of public health
- I really enjoyed the rounded educational program I recieved at SPH,especially in terms of being able to apply what I learned in class to actual research projects, working as a graduate assistant. course work (e.g., health promotion and health education, management, economics, econometrics, statistics) and dissertation work.
- I liked being able to apply my topic of interest in almost all of my course work (researching and writing from various angles).
- Dr. X's Public Health Policy and High Performing Systems class at the SARC.
- Learning team building skills and seeking international opportunities.
- Having received my BS and DrPH at this SPH I have overall enjoyed the experience here. I took away some good experiences and knowledge from many of the classes.
- I loved my experience at SPH. I was introduced to an array of topics which opened my eyes to interests I may have never known. I was challenged by faculty and peers.
- Definitely. All my experience was a good one. I liked the stress and disease course by Dr. X and the Biometry courses.
- The class "Health Services Performance & Delivery" was very good; health promotion core was also quite good; several others.
- NA
- I absolutely loved my experience at the SPH! I loved that my teachers were not consumed with ensuring they had a certain number of enrolled students, or a certain number of A's, B's, C's, etc. My teachers were interested in ensuring we learned the public health material they had to teach us. Even as a student I can feel that there is a cultural change happening. I hope this does not become detrimental to the manner in which faculty have functioned until now. I understand that our current economic times are extremely difficulty, but why create change that negatively impacts a school's AWESOME teaching style. I truly loved completing my Masters at SPH and would like to continue on to a PhD.
- I took several interesting, informative electives via online and ITV with strong professors and guest lectureres that broadened my perspective and understanding of public health.
- The best experiences were classes that involved higher-level thinking and discussion.

Q. 98 - Please tell us about the CLASS you had at the SPH that you think will help you most in the next step of your career. (Comments are submitted with only the names of individuals removed.)

Epidemiology

- Field research methods in Epidemiology.
- As a cancer epidemiologist, exposure to genetic epidemiology is necessary for success. X's class was a great introduction to the subject, and I still refer to my notes as a reference for my postdoctoral work.
- Field Epidemiology with Dr. X.
- That's a tie between injury epidemiolgy taught by X.
- Epi Data Management
• Field Epi (2)
• Epidemiology (intro)
• Introductory Epidemiology
• /Adv Epi 1
• Field Epidemiology by Dr X.
• Epidemiology
• Dr. X's Field Epi course was rigorous but I felt like I learned the most in that class. Also, her global health courses.
• This is hard to answer because there was more than one course that I feel will really help me. I think Genetic Aspects of Chronic Disease is one, but Epidemiology is probably the one I would have to say help me the most. I felt that it was the very foundation of public health and that truly understanding it helped me approach molecular biology research a whole new way. I hope to use the knowledge from Epi along with my aspirations of going to med school and becoming a DO or MD to understand the dynamics of translational research in molecular epidemiology.
• Introduction to Epidemiology.
• Epidemiology and immunology are most relevant.
• Advanced Epidemiology II by Dr X.
• Epidemiology, Biostats and Toxicology.
• Field Epidemiology with Dr. X.
• Epidemic Investigations.
• EPI/Control of Infectious Diseases.
• Field epi .
• My first epidemiology class was great!
• I think all classes were essential for the next step in my career. Again, perhaps Field Epidemiology was the most helpful.
• Field Research Methods in Epidemiology by Dr. X.
• Epidemiology
• Epi 1 & 3.
• Epidemiology II, Medical Microbiology.
• Epidemiology - Fundamentals, field epi: Global health seminars and overview.
• Field Epi – X.
• Epidemiology I.
• Rapid Assessment Methods with Dr. X-- the class trained us in tools that we can use to conduct epidemiological field studies.
• Field Epidemiology will help me the most in the next step in my career because it's taught me the importance of asking the right question.
• No one class was fully responsible for helping me. Mostly my epidemiology courses.
• Methods for Exposure Assessment will help me the most of the DrPH courses I took for my career. I enjoyed the class and appreciate the high performance standards the professor had. The courses that are most related to my career path I took for my masters and SPH. I have such a narrow focus, that no one class at SPH defines what I am interested in doing, but rather each class shows me some tools I might use along the way.
• Epi III was far and away the most useful for practical data analysis and study design.
• Epidemiology Course taught by Dr.X.
• Advanced Epidemiology.
• Epidemiology.
• Epidemiologic Proposal Development
• Statistical methods in epidemiological researches.
• Another tough call, probably intro to epi actually.
• I do not believe any of them really apply to the next step in my career, but I believe the course "Biological Basis of Emerging Infectious Diseases" was the best at developing critical thinking and analytical skills when working with literature and research.
**Biostatistics**

- Advanced Biostatistics.
- Intermediate methods in Biostatistics I and II by Dr. X.
- Statistics - a combination of classes helped me.
- Fundamental of biostatistics.
- Biostats (3).
- Biostatistics series.
- The most helpful classes are Logistic regression, Survival analysis and SAS programming.
- Biostatistics series.
- Introduction to Biostatistics.
- Biostatistics (2).
- All biostatistics courses I have taken.
- Biostatistics courses.
- Fundamentals of biostatistics.
- Biostat.
- A combination of classes helped me. No one class was fully responsible for helping me. Mostly my biostats course I took.
- Intro to Data Management and Data Analysis.
- Advanced Biostatistics.
- Time Series Analysis -- aid in analyzing physiological signals.
- Theory of Biostatistics I and II, Statistical methods for Correlated Outcome Data,
- Intermediate Biostatistics with Dr. X at the SARC was the course I think will help me the most in the next step of my career. Dr. X's expertise was impressive, and he really helped his students to understand the material. I am glad that I was able to take the series of biostatistics courses with him.

**Environmental Health**

- The contemporary issues in the Environmental Health Sciences.
- Foundations of EOHS.
- Dr. X's Overview of EH was outstanding and served as a terrific foundation for future work. The Social Behavioral class designed by Dr. X was outstanding and she should be consulted on design of other online classes because I still remember so much of what I learned in that class even though it is not my major interest in PH.
- Toxicology.
- Occupational safety taught by Dr. X.
- Man's Impact on the Environment (2)
- Introduction to Industrial Hygiene 1.
- Industrial Hygiene; Hazard controls.
- Toxicology.
- Industrial hygiene.
- The class that will help reach my next goal I would have to say the Toxicolgy class taught by Dr. X.
- Fundamentals of Industrial Hygiene
- Environmental Sampling & Analysis
- Foundations of environmental and occupational health
- Environmental health classes were of interest and helped direct my area of interest
- The contemporary issues in the Environmental Health Sciences and statistical methods in epidemiological researches.
- Environmental Microbiology--it was probably the closest to my interests in content.

**Behavioral Science**

- Health Planning by Dr. X.
• Soc beh science.
• Intervention mapping. pulled all the info together from different disciplines to learn how to create a health promotion program.
• The program planning and evaluation taught @ SARC by Dr. X provided hands on experience and was the most applicable to my current public health position.
• Intervention Mapping - Dr. X.
• Health promotion 1 -Strategic Healthcare Management -I hope to practice public health in the area of Maternal and Child Health. All of my Health Promotion classes, as well as my MCH class will help me in the next step of my career.
• Intro to behavioral science and my leadership luminaries course.
• Program Evalution.
• Theories and methods and program evaluation
• Intervention Mapping and my evaluation classes. I want to use these in my career but I am having a hard time finding jobs in these areas.
• I loved the intervention mapping class. I found it intriguing but challenging, which made for a great experience. The class was set so that students not only understood the details of using the intervention mapping framework, but also were able to apply their new-found knowledge by creating a theory- and evidence-based program. The professors were readily available for answering questions and for providing feedback, and the class allowed for one paper re-write, which helped students focus less on their grades and focus more on the content. The process and flow of the class allowed the students to think about how theory and public health can be applied to program and individuals outside of the university setting. This set of skills will be extremely useful in my future careers.
• The class that will probably help is the Social Behavior class I took as a core.
• I think I learned the most in my intervention mapping class as far as doing very indepth research and formulating an education program.
• Either Program Evaluation or Intervention Mapping.
• During my community based health assessment course as well as program evaluation course. They were the most useful because of its applied nature.
• All health promotion and behavioral science required courses.
• Intervention Mapping...as hard as it was, that class was awesome.
• Social and Behavioral Aspects of Community Health.
• Intro to Program Evaluation.
• IMAPPING.
• Intervention Mapping (2).
• Intervention Mapping (PH 1113). It is the gold standard in intervention development, and after the class I feel like I can both utilize it and teach it to others.
• Intervention mapping. It applies to many different areas of life as it is at its core a method for identifying and solving problems. I want to be able to design effective community interventions, so this class was the most practical (and most difficult!) of all my classes at SPH.
• Planning and Implementation of Health Promotion Programs.
• Intervention mapping. This class pulled all of the knowledge together we had learned and forced us to synthesize.
• PH1113 with Drs. X and X was the class in which I learned the most regarding the application of theories and material learned in previous classes.
• PH 1111, 1112, and 1113. Dietetic Internship.
• Intervention Mapping because they brought everything.
• DISPARITY, PROGRAM EVAL, DISABILITY, AND EMERGENCY MGT COURSES WILL LIKELY TO HELP ME MOST IN THE NEXT STEP OF MY CAREER.
• Chicano Health - this class helped me understand the importance of feining variables in research as well as the importance of being culturally competent

Management and Policy
• US HEALTH POLICY.
Admin and policy.
Dr. X's Health Policy in the US course provided background and insight on health policy that will be helpful to me in my plans to work in the policy area.
Texas Health Policy.
Health Policy Analysis.
Dr. X's Class on Social and economical determinants of health was an eye opener for me. I would recommend this class to all those who come from developing nations and all who would prefer to work in the field for Public Health in economically disadvantaged nations.
Management and policy studies.
I really enjoyed Survey Design & Research; Advanced Health Services Research; US Health Policy.
Dr. X's Public Health Policy and High Performing Systems class at the SARC.
I believe that the management courses will help me most in my career.
I think that Drs. X and X's Cost-effectiveness course (PH3915) will be one of the most helpful, as I am currently working on a paper using the techniques I learned in their class. -The public health surveillance course by Dr. X will help me the most by providing realistic projects used to conduct disease surveillance, for example.
I really enjoyed Survey Design & Research; Advanced Health Services Research; US Health Policy.
Same as above - comprehensive, factual overview of the health care system.

MCH Concentration
- Maternal and Child Health Concentration.
- Maternal and Child health seminars, public health nutrition and community based health assessment. They had strong research material along with real world application. This helped make the research concrete as well as illuminated possible career paths.
- My two MCH courses were most applicable to my career goals.
- MCH concentration.
- Maternal child health-Dr X.

Capstone
- Capstone!
- The Capstone course because they brought everything
- Capstone + Exam will help me the most in my career. It was a great synthesis class that really applied my PH knowledge and skills. The exam was a great and much needed review of core concepts.

Other
- Dr. X's proposal development course was hands down the best class I took. She really helped students understand the process of proposal development and that is a skill we will all use in our careers. Best class!!!
- I very much enjoyed the child and adolescent health class taught by Dr. X over the summer months
- The research class required of dietetic interns taught by Dr. X.
- Disaster management.
- Public health risk communication.
- Seminar.
- Dissertation.
- My favorite class at SPH was Vaccines and Immunizations. It was small and the professor and students regularly got into very good discussions. Sadly, this class is no longer being taught because of the school’s push to have larger classes.
- Dr. X's course on high-performing healthcare systems was excellent!
- The Global Health Overview and the Society and Health class were my two favorite courses. The two courses greatly opened up my world view and defined what I wanted to do with public health.
- Medical Geography
- All the ones mentioned in Q97.
• My medical informatics classes are more pertinent, however, the MPH classes help me facilitate research better.
• I can't pick just one, I feel all of the classes I have taken at SPH have contributed to my career.
• Dr.X's Tropical Disease course.
• Research classes.
• My thesis work will be the most beneficial.
• NA.
• Practicum offered a chance to have a hands on, professional public health practice experience. I met my current boss through my practicum.
• Public Health and Human Rights- discussed a variety of human rights issues in public health.

Q.99-What is the greatest strength of UT-H SPH?
(Comments are submitted with only the names of individuals removed.)

Diversity
• Diverse culture and friendliness of students and staff.
• Diversity of the student body.
• Diversity (7).
• Diversity of programs.
• Diversity and the Research Services office (very helpful).
• The diversity of the students and faculty. The numerous campuses is also a strength, as students can take classes in different locations and gain experience from different locales.
• The diversity of the students and the professors that are currently working in public health that also teach classes.
• It's diversity and professors who have true expertise in so many areas.
• Diversity of thought, ethnicity and breadth of courses available.
• It's Faculty and Diversity.
• Diversity of student body
• The diversity. there are so many ways to get involved.
• Unity in Diversity
• The greatest strength of the program was the diversity of the format of classes that afforded me the opportunity to work full time and get a degree.
• Intellectual distinction of the UT-H SPH itself as a public health institute, scholarly commitment, gracious supervision, respect and understanding for the cultural diversity on the part of the faculty members under the leadership of our current dean, Dr. X.
• I like that there is input from other regional campuses around Texas. This provided a certain amount of diversity that probably each campus on its own would not be able to enjoy.
• Diversity of student body
• Its diversity. Proximity to the medical center (opportunities for collaboration and supplementary experiences). Its warm, open, and collaborative culture as opposed to a competitive one (within students and faculty); everyone is willing to help each other improve.
• Diversity and various perspectives of health.
• Students of diverse cultures.
• Having a diverse study population.

Faculty
• Faculty (12)
• The faculty are always willing to talk to students, and most have an open door policy. The feeling that we are colleagues (particularly for those in the PhD program) rather than professor-student is motivating.
• Many faculty members were so helpful with my understanding of the public health field. Also, the extracurricular activities offered at SPH were great!
• I think there are some wonderful faculty here that enjoy teaching. Many have retired and I feel bad for new students who will not have the privilege of their expertise--like Dr. X and Dr. X. Professors/advisors that care about each student's success and are passionate about their areas of expertise.
• Very educated faculty.
• The encouragement by faculty -X-I am pleased to know that the faculty of UT-H SPH are leaders in their fields and making headlines with their work.
• Great faculty that are encouraging and work hard to better educate their students
• Its faculty and, therefore, its reputation. I love the fact that I was privileged to graduate from a highly ranked and reputable graduate school. This is possible because of the caliber of faculty we have.
• Dr. X and Ms X. These two faculty members/staff greatly helped me during my time at the school and should be rewarded for their work with students. I think they encompass what the School of Public Health states its mission is, while other faculty/staff members do not. For some faculty/staff members it was very clear that teaching and helping students was not a priority.
• Faculty were approachable, available and helpful to students.
• The enthusiastic, supportive, accessible faculty.
• Faculty-student interaction.
• Its faculty, the regional campuses, and its research.
• Great teachers and fun but very useful seminars.
• The faculty.
• It's diversity and professors who have true expertise in so many areas.
• The ability to link qualified faculty from different campuses to UTSPH students.
• It's Faculty and Diversity.
• The faculty. They are very dynamic and are doing amazing research--at least in Brownsville. I had very limited interactions with faculty in Houston, and the ones I did interact with seems more like washed up lecturers.
• Great faculty!
• Their faculty
• The faculty is amazing.
• Committed and expert faculty.
• The flexibility that the faculty give you to pursue your own research area even if they do not have experience in it themselves. Out of my three degrees, I feel that this experience has been the most rewarding educational experience.
• The accessibility of the faculty.
• Breadth of academic programs and a very engaging faculty.
• My advisor, Dr. X provided excellent support and guidance in my course selection, my thesis preparation, and my career goals. Also my classmates in Austin made this experience great! I feel like our cohort worked together well and provided support and friendship to one another to make it through the program in one piece.
• The friendliness and openness of the faculty.
• Great faculty.
• The faculty interest in students.
• Incredible faculty.
• Qualified faculty.
• Experience of instructors.
• The variety and expertise of faculty (minus those in Biostatistics - see comments in Q100).
• Interaction with faculty members for courses and research, Courses selection for more practical approaches in public health.
• The great attitudes of the faculty and their willingness to assist students.
• Large number of qualified, subject matter experts teaching interesting courses and the ability to
connect students and teachers across the state via ITV, e-mails and communication about scholarships, practicums and job opportunities.

- Faculty on cutting-edge of public health research and practice.
- Some of the professors.
- Teaching of faculty members.
- Faculty and student bodies

Staff

- The people.
- The enthusiastic, supportive, accessible staff.
- The staff.
- It's people.
- The amount of knowledgeable staff.
- The staff.
- There are also other staff that really go out of their way to help you---like X, X, X, and X in the library. They were all very kind and helpful.
- Its warm, open, and collaborative culture as opposed to a competitive one (within students and faculty); everyone is willing to help each other improve.

Location

- Location (4)
- Location in TMC (2)
- Location to medical center and other institutions.
- Proximity to the medical center (opportunities for collaboration and supplementary experiences). It is located in the TMC. It makes it easy to get a degree in public health. It was not overly challenging and could be done while working full time.
- It is accessible from all the major cities in Texas (basically).

ITV Classes

- The opportunity to learn from faculty from all regional campuses via ITV.
- ITV classes.
- The use of ITV, for courses that can be taken by professor X are more knowledgeable in certain courses.
- Large number of qualified, subject matter experts teaching interesting courses and the ability to connect students and teachers across the state via ITV, e-mails and communication about scholarships, practicums and job opportunities.

Online Classes

- Online and evening classes
- Online courses provided more opportunities for regional campus students.
- Online classes and flexible schedules and locations. A can-do customer service attitude is appreciated.
- Many online courses.
- The online classes! I took all the online classes that were possibly offered. I am very impressed by the attention paid to details by the instructors and I felt I learnt a lot more through online classes than the traditional classes.
- Availability of online courses for MD/MPH Students
- THE ONLINE COURSES AND EXCELLENT FACULTY AND ADVISORS

Courses availability and variety

- The flexibility to somewhat tailor the program to your specific career goals and interests through the electives and individual degree programs.
- Diversity of thought, ethnicity and breadth of courses available.
- Wide variety of classes
• Structured curriculum
• New focus on the student
• An ability to mold the course according to the needs of the student.
• Flexibility of class times and options (online/itv/independent study/in house)
• Flexibility in terms of the choice and number of courses per semester as well as the duration for the completion of all the required credits/courses for graduation.
• Its very flexible and allows students to maintain employment while attending
• This school offers wonderful classes.
• The greatest strength is the rigorous course work and also the focus on core PH concepts and hands on experiences. The school really encourages PH problem-solving, research, synthesis, and analytical skills.
• Broad array of classes to tailor your degree program according to personal interests or needs
• Caters to working professionals (availability of courses)

Regional Campuses
• Multiple locations in the state.
• The distant campuses were a blessing in that you did not have to move.
• The numerous campuses is also a strength, as students can take classes in different locations and gain experience from different locales.
• Its faculty, the regional campuses, and its research.
• I cannot comment on the UT-H SPH since I am in Austin. The greatest strength in Austin is the approachability of the faculty.
• I like that there is input from other regional campuses around Texas. This provided a certain amount of diversity that probably each campus on its own would not be able to enjoy.
• The professors at the Austin Regional Campus are very open to discuss course work and work with students on various research opportunities.

Tuition Costs
• The tuition costs were relatively low compared to other schools.
• Quality education at an affordable price.
• Cost.
• Affordable high-level education.
• Tuition rates.

Work Opportunities for Students
• Availability of GRA/TA positions.
• The centers of research at SPH that employ students; teaching real public health job skills and potentially train them on content more advanced than courses address.

Atmosphere
• Friendly atmosphere.
• Its unity and willingness to help people.
• The greatest strength of UT-H SPH, at least at the SARC, was the atmosphere. Everyone from the professors, administrative assistant, and students all helped to make my time spent there more interesting, informative, and enjoyable.
• Everyone is friendly and willing to help.
• Providing an environment suitable for non-traditional students (i.e. parents).
• That it is really designed for graduate education where one feels part of the school, not just a student. I was proud to say that I belong to the UT. SPH.

Resources
• Resources at TMC.
• Availability of resources.
• It is a large school with many resources.
• Availability of needed resources.

Research
• Its faculty, the regional campuses, and its research.
• Strong research standards.
• Their need for research.
• I would say the research aspect because there is a lot of famous work being done here.
• The research of the faculty.

Other
• Relevance of an EOH program, the ABET accreditation for industrial hygiene and links to industry.
• Vast knowledge.
• My background in biomedical research.
• The use of feedback is the greatest strength of UT-H-SPH. Regardless of some of the frustrations I have had with the University, I can always rely on having my voice heard and seeing immediate changes. The emphasis on evaluations and feedback, and the changes I have seen during my short time here, tell me the University sincerely cares about its students and their experiences.
• Focus on border health/TX health issues.
• MCH concentration.
• Intellectual distinction of the UT-H SPH itself as a public health institute, scholarly commitment, gracious supervision, respect and understanding for the cultural diversity on the part of the faculty members under the leadership of our current dean, Dr.X.
• Epidemiology.
• Established and long record of providing public health training.
• Established institution during a transition or increase in the interest of Public Health.
• The quality of the students is very impressive.
• Collaboration among divisions.
• It does bring in some very good students.

Q.100 - What is the greatest weakness?
(Comments are submitted with only the names of individuals removed.)

Biostatistics
• Biostatistics 1725 & 1726
• Not enough statistics.
• I don't think our program really prepared me well to become a good Master-level Biostatistician/Analyst. I found two major courses were missing: Advanced SAS programming and Experimental design. I think they should separate MS and PhD students and design different courses for them. I think for each course, the professors have to think about what the target students are and based on that, they can come up with a proper syllabus.
• Biostatistics.
• Mathmatics skill
• BIOSTATISTICS. I am graduating knowing basically nothing about biostatistics. I managed to get As in both of my biostatistic classes but I learned nothing. The faculty were the worst I've ever had in my educational experience. They were unable to explain the concepts and extremely poor conveyers of the information. They would have us use the statistical software for homework without showing us or explaining how to use it, so only those people who'd used it before were in a good position. I really cannot express how unsatisfied I am with this department.

Management and Policy Science Courses
• UT-H SPH does not offer a great Management and Policy course. I would recommend an overview or
intro to MAPs type course to fulfill the core requirement.

- I would have liked to have more policy and management type professors at the Dallas campus.

**Environmental Studies**

- Variety of courses in environmental sciences.

**Faculty/Advisors/Advising**

- Another weakness is that many faculty have difficulty running ITV equipment, and some ITV classes have no faculty or TA representative in remote sites. It would be beneficial to always have someone fully trained and confident with the equipment in the room. X and X do a great job, but I often feel as if they do more work than they should have to do.
- Poor advising system. In retrospect, I wish I could have "applied" for an advisor.
- Guidance in completing the culminating experience/thesis.
- There is great confusion in the steps needed to take for those graduating.
- For me, one of the criticism that I have to make about the administration of the MPH program is the choice of advisors. I think the student should have full responsibility for this and he should be the main guide for choosing classes, rather than fulfilling the requirements of a committee. This school does emphasize that they leave a lot of leeway to the student, but this is not what I've seen or experienced.
- Again, the research aspect. The faculty are too focused on their own research and work to take the time to help students. Advisors will cut short meetings, be rude, or even ignore the student completely. I know of MANY students who took the wrong classes, missed out of fellowships and opportunities, or even dropped out of the program just because of the failure of the advisor to be involved. In order to make this school better, the professors need to realize that the students are important too. Many students want to participate in research but find it hard to enter a lab. Most profs already know which students they want and thus, if you're not in the click- it's hard to get in! Perhaps more guidance on getting into research labs or a program that helps students do that.
- The faculty is more focused on research and teaching than mentoring their advisee's.
- Not much unity among the classes. Everyone is here for different reasons and there is not a sense of community. Professors are very divided for time with individual research and I didn't feel like I got to know any faculty other than my research advisor.
- Not enough practitioners of public health, faculty very heavily research focused.
- The greatest weakness at the ARC is the lack of diversity in the faculty. With a particular interest in infectious disease, I was disappointed that not one faculty member in this campus had an infectious disease background. The original recruiting for this program (2009 when I entered) was not clear that this limitation existed. I feel I would have been better prepared for my personal career interests in public health if I would have had the opportunity to be near/working with an infectious disease researcher.
- Lack of guidance throughout the process. It is relatively sink or swim, at times, which, arguably is not necessarily a bad thing for a graduate program. over all it is a great program.
- Advisors - I had an amazing advisor and I completed a thesis in 2 years. All my friends who did not have good advisors had to choose the exam option to graduate in 2 years. Those who did not have a good advisor and did not do the exam will not graduate in 2 years.
- I think that some of the faculty at SPH were little too easy-going which led some courses to lack structure.
- Lack of time for faculty.
- I feel the advising process lacks a tailored program for students to meet their long term career goals after school, and instructing students on course work necessary to meet that goal.
- Professors and advisors who have no interest or time to work with students such as Dr. X.
- Instructors need more information and training on how to use blackboard appropriately and efficiently.
- Also, a handful of professors did not seem to want to teach the course they were teaching. They were unapproachable and did not make this experience a good one.
• Advisors' control over student progress & lack of conflict resolution options for students.
• You can get lost if you don't have the right advisors.
• Some of the faculty seem to be spread too thin to be able to provide the guidance necessary to their students.
• Everybody is too busy with additional projects or studies to teach. Need more faculty who is there only to teach.
• There could be a tad more friendliness; also, I've heard some students say that professors may not always respond to email.
• I feel as though as we transition into online classes professors are not sure how to teach them effectively. Students get nothing out of discussion board posts, from my experience most students did them as fast as possible to get them done.
• Professors are very divided for time with individual research and I didn't feel like I got to know any faculty other than my research advisor.
• Another weakness born of all the changes, though, is the constant flux of degree programs; in addition, the faculty weren't always clear about the most updated requirements.
• There could be a tad more friendliness; also, I've heard some students say that professors may not always respond to email.
• I was greatly frustrated by the lack of direction and feedback that I received when my proposal was not approved.
• Help in finishing a graduate thesis.

Research
• Again, the research aspect. Many students want to participate in research but find it hard to enter a lab.
• Lack of research diversity (too many faculty interested in the same research area such as genetics)
• UT-H SPH building at Houston, Texas needs geographic expansion to establish as a “comprehensive and commendable public health institute” comprising individualized blocks for all of the core public health sciences with their own research and policy centers to provide education and training to students to become public health scientists/researchers for advancement of the “future public health sciences”. For example, “influenza research and policy center” with the collaboration of the divisions of Epidemiology with the Management and Policy sciences by following in the footsteps of other creditable public health schools in the United States.

Student Affairs/Administrative Staff
• I have had some of my student affairs documents misfiled or misplaced during my time. Administrative services were challenged at times.
• Lack of communication in Student Affairs. I felt it was very difficult to talk to anyone other than a graduate assistant at times, though at times they were helpful. I feel like a more organized system or process is needed to help students navigate through the requirements for graduation.
• Student affairs graduation process.
• The graduation approval process was ridiculous.
• First, the lack of guidance and understanding of what is exactly required for my degree program was the first obstacle that I encountered. It seems like there is lack of communication between from the administration side of SPH to the faculty side of SPH. As an advisee my advisor/comittee member would tell me one thing and to check with student affairs and when I would try to confirm with student affairs, student affairs had no idea what the faculty member was referring to.
• The admissions process was horrible! The registrars office could never get back to me with one solid answer to “Has all my paperwork been received?” I attempted to call the SPH admin as well, and they never returned my call. I was very close to not attending the school because I had SO MUCH DIFFICULTY getting through the admissions staff.
• Student affairs (graduation process needs to be planned better) and providing guidance for those who need help focusing down to a research topic
• Admissions and Student Affairs did not communicate well with students. There were several
occurrences where emails and voice messages were ignored.

- Another weakness is its administrative dept. They are completely -either overworked or inept. I have received scholarship letters in the mail only to find out that they sent it by mistake?!!!! They lose paperwork and even don't respond to e-mails. The greatest hold-up to getting a degree at UTSPH is getting things approved by other people. This process HAS to be streamlined otherwise students will not graduate in time, will drop doing a thesis, and the reputation of this school will be greatly diminished. Despite us being a UT school, the admin group is like a community college. For example, how is it that all thesis proposals now go through 2 people?!?!?! This HAS to be changed.

- Organization with guiding new students and even returning students.
- A lack of organization and logistical timeline to make the bureaucratic pieces easier and more streamlined.
- Complicated administrative processes.
- Anything related to administration.
- Administrative disorganization - I want to know who to talk to and where their office is so when they don't return my email, I can hunt them down. Forms are confusing, graduation process is confusing, lots of confusion over the past 2 years about what went where when. Glad to be done with it!!
- Administration and lack of night classes for students with full time jobs.
- Administrative bureaucracy.
- Organization, helpfulness and professionalism of administrative staff.
- I do feel that UT-SPH has been letting good quality staff go. When Staff X left we lost a HUGE asset! He really understood the needs of the students and he ENJOYED helping the students. There are a great many staff members employed by UT-SPH that DO NOT enjoy helping the students and you feel like you are a burden to them when you need assistance. So to see people like him leave was very upsetting and the students ALL suffered. There are some faculty that really do not like to help students either, but I've seen lots of good faculty retire or leave since I've been here too.
- Administrative staff.
- A lack of organization and logistical timeline to make the bureaucratic pieces easier and more streamlined.
- Organization. Priorities.
- Organization, helpfulness and professionalism of administrative staff.
- The graduation process, it should be streamlined. too many frivolous emails :)

**Regional Campuses**

- The regional system needs better integration. I feel very isolated at the Brownsville SPH.
- Lack of co-ordination between different campuses
- Since I was enrolled in a regional campus there were some things that worked against my expectations of the program. Not having accessible to some classes, not having on-site faculty such as a biostat professor, or not having access to certain practicum/research opportunities.
- The regional campuses are not as integrated into the Houston campus as they should be. There should be more effort to expand course offerings at regional campuses, including having faculty from Houston teach at the regional campuses (in person, not ITV or web) on a periodic basis. On a related note, the SPH also seems to be moving more and more toward web-based instruction, which although of some use tends to isolate students and deprive them of the benefits of group education activities.
- The only weakness that I can think of is the relative disconnectedness of the regional campuses. Being a student from the San Antonio regional campus, I felt disconnected from the hub of activity at the main campus. While it was really convenient for me to take course in my own hometown, I think I wasn't able to get the full experience of the SPH. I must mention though that this disconnectedness did get better as I progressed through my years at the SA regional campus. Perhaps this was because organization and communication improved. I would like to see more interaction between the main campus and the regional campuses. I would like to see the Dean of the SPH visit the regional campuses periodically. I would like to see more speakers visit the regional campuses. I would like more activities exchange between the campuses.
• The main campus Houston not supporting regional campus in terms of recruiting a Professor of Biostatistics
• The lack of access to the same resources at the regional campuses that are available to Houston UTSPH students. I was very disappointed to find out that the epidemiology concentration was not available at my regional campus. This will always be a disadvantage to me in my field.
• Regional campuses lose out on some of the best courses offered at the main campus.
• Students at the satellite campuses do not have the same exposure to faculty and resources that are available at the main campus.
• The regional campuses are isolated from Houston and lack support in career and academic services
• The lack of classes offered at regional campuses.
• The lack of opportunities given to the regional campuses. We are alienated. I often petitioned for a class but was denied.
• If every campus could enjoy all the resources the Houston campus has, that would be wonderful. However, this was not the case. From courses, to student organizations, and even job and practicum opportunities, the Houston campus has it all. -Lack of connection with regional campuses
• Too dependent on ITV in regional campus.
• Greater diversity in subject matter expertise at regional campuses
• The greatest weakness is the organization between the regional campuses and Houston. Also, much more is available to Houston students than regional campus students in every aspect.
• Lack of exposure to resources for students at Austin regional campus
• The distant campuses were both a strength and a weakness in that, being in Dallas, one never felt like you were really part of the school. School activities and job fairs only seemed to be geared towards Houston students. Majority of classes of interest also only seemed to be available to Houston students, there was lack of flexibility in the scheduling of classes. There were not enough online classes to cater for everyone, in that we were competing with certificate students to get online openings for even core classes...very frustrating! Not enough networking opportunities and practicum opportunities offered to students in the Dallas campus.
• A disconnect between the main campus and other campuses.
• Difficulty communicating amongst the different campuses when there are classes incorporating students from various sites.
• I would have liked to have more policy and management type professors at the Dallas campus.
• Lack of coordination between the different schools.
• Seeming inability to respond adequately to the variety of problems that are associated with its distance teaching/learning apparatus.
• Again, I would have preferred fewer ITV courses and more courses with a faculty member present. I know I could have performed better and learned more had there been more interaction with faculty. Not having met half of my professors in person made it difficult to connect with the program.
• Austin's campus being a "satellite-campus" made me feel disconnected at times to the school. I often felt like I worked full time and went to school on the side. I felt much less like a student than I did during undergrad. Had there been more of a real campus feel, with more professors in Austin teaching the classes and more engagement among faculty, staff, and students, my experience would have been much better. Receiving emails everyday about events, activities, support, and workshops offered in Houston made it feel like we were disconnected from the other campuses.
• Austin's campus being a "satellite-campus" made me feel disconnected at times to the school. I often felt like I worked full time and went to school on the side. I felt much less like a student than I did during undergrad. Had there been more of a real campus feel, with more professors in Austin teaching the classes and more engagement among faculty, staff, and students, my experience would have been much better. Receiving emails everyday about events, activities, support, and workshops offered in Houston made it feel like we were disconnected from the other campuses.
• At the SARC, the greatest weakness is the lack of the ability to graduate with a concentration. I really would have liked to be able to graduate with my MPH in a concentration in biostatistics. To my knowledge, that was not an option, and that was the only thing I was disappointed with at the SPH. In the future, I hope they are able to bring a DrPH biostatistics program to the Houston SPH.
Grading System

- There are two obvious weaknesses, and they are not independent. The Pass/Fail system encourages laziness among students. I was asked numerous times while studying for exams, "Why are you studying so hard? This is just Pass/Fail." That kind of attitude is not acceptable in a graduate program. It also speaks to the level of students in the program. I had a number of classmates that were astonishingly weak in crucial areas and never should have been admitted to the program. The increased student body, while helping UT financially, surely cannot do anything to resolve this problem.

- Second, the P/F grading scale vs letter grades is detrimental to those students that want to go on and apply to additional programs or professional schools outside of the SPH. In my opinion, at a graduate level students should be able to work to earn the letter grade they deserve rather than coasting to get a P. I know that my GPA would have been higher if I had letter grades for some of the P/F classes that I took. I had asked about this previously and was told that the comment cards were useful in a P/F class. While this may be true for SPH, when applying to outside programs they are interested in GPA and don't have places for a "comment card".

Course availability

- Classes should be offered at least once a year. I wanted to take a medical microbiology class, but it was offered only once (my last semester) and I couldn't take it because I was pregnant and in my last trimester so I felt uncomfortable being around the specimens. It would have been great if it was offered at least once each year because I could have taken it my first year I was enrolled (I took other courses instead because that one was never offered until the last semester I was enrolled).

- Lack of sufficient online/evening courses for students who work, the programs tend to be inflexible with preference to students who don't work, as working students cannot easily attend morning/afternoon-only courses.

- Some classes not being offered every semester.

- Courses not available in the evening hours - shutting out an entire population of students by limiting classes to the daytime.

- UT-H SPH does not offer a great Management and Policy course. I would recommend an overview or intro to MAPs type course to fulfill the core requirement.

Academic Rigor

- Some of the classes were not rigorous enough while some were very rigorous. A consistently high level of effort should be required for all public health school classes. Also, many students who used the school as a stepping stone for another degree seemed to not take the courses seriously.

- Not enough variety in degree programs.

- I don't think our program really prepared me well to become a good Master-level Biostatistician/Analyst. I found two major courses were missing: Advanced SAS programming and Experimental design. I think they should separate MS and PhD students and design different courses for them. I think for each course, the professors have to think about what the target students are and based on that, they can come up with a proper syllabus.

- The rigor of courses should be tested and standardized (at a higher rate than it currently is).

- Classes were pretty basic. Did not necessarily translate into practical knowledge or skills.

- Unfortunately, the educational experience I had at UT-H-SPH did not meet my expectations. It should be noted, however, that the statement is a generalization, as there were some classes that exceeded my expectations and taught me a wealth of knowledge. Overall, some of the classes seemed loosely put together and were not academically challenging. This was made more apparent when I had to prepare for the capstone exam and realized I was reviewing material that had never been discussed or presented in my previous classes. I think the introductory classes, in particular the core classes that all students are required to take at UT-H-SPH, need to be in line with the ASPH departmental objectives.

- The lack of concentrations a student can choose upon graduating, such as epidemiology or biostatistics.
Students from the satellite schools should have the opportunity to choose professors from Houston that could work as their advisors so that they can also earn a concentration degree.

- Programmatically, behavioral sciences and epidemiology were fairly strong programs, but the other three, while not bad, did not match the same caliber. I know many changes have been implemented to streamline and standardize the core courses, but when I started, they were all over the place (esp. management and policy).
- It is not rigorous enough.
- Academic rigor
- Some of the classes were not rigorous enough while some were very rigorous. A consistently high level of effort should be required for all public health school classes. Also, many students who used the school as a stepping stone for another degree seemed to not take the courses seriously.

**Auxillary Services and Resources**

- Parking, library hours and resources
- Parking!
- Logistically, basics such as housing, parking, and the lack of graduate student funding.
- The library needs improvement.
- The library hours should be extended.

**ITV**

- If every campus could enjoy all the resources the Houston campus has, that would be wonderful. However, this was not the case. From courses, to student organizations, and even job and practicum opportunities, the Houston campus has it all. My campus was lacking in these areas as well as others. Also ITV, though important, was difficult to work with at times. Being able to stay focuses and reciprocally engage in the classes was a bit of a challenge with ITV. Also the days that technical problems occurred meant wasted time. Another issue was that if one was struggling with a class, it was a bit difficult to get help. My issue was with biostats, which I took ITV and later lecture, which helped me, but I felt I wasted both time and money.
- Too dependent on ITV in regional campus.
- ITV instruction
- ITV connectivity.
- Again, I would have preferred fewer ITV courses and more courses with a faculty member present. I know I could have performed better and learned more had there been more interaction with faculty. Not having met half of my professors in person made it difficult to connect with the program.

**Funding/Scholarships**

- Funding for students.
- Limited scholarships and Graduate assistantship positions
- Logistically, basics such as housing, parking, and the lack of graduate student funding.

**Other**

- Inadequate number of jobs for students.
- The importance of issues relating to international students are not really understood at times.
- Advanced epi I.
- Not much unity among the classes. Everyone is here for different reasons and there is not a sense of community.
- Ut link is an awful website. Registering for classes was always confusing. Why do we have two IDs? I still have to look up the one at begins with an A everytime I use it.
- It doesn't seem up to par with schools like Emory...there were some students that I felt did not have enough requirements to be in graduate school.
- It needs more technical/technological expertise. It is too much oriented to policies and programs and sometimes solutions to health problems are simpler from a technical/technological perspective.
- There are too many silos in UTSPH.
• The MPH program has morphed into a program that is all about social programs without thought to the cost of those programs. It is a program that Karl Marx would be proud of.
• Lack of real connections with the community.
• The ability to have this degree program drag on despite a student's intention of graduating on time
• Outdated office space.
• Difficultly with the "red tape" and ensuring requirements were met.
• It felt a bit discombobulated at times. Like too much was changing and no one could really give a straight answer on what was going on.
• Unsure.
• Class sizes are becoming to big.
• Ushering unqualified students through the doors.
• The link between the institution and the community.
• Prior to Faculty X arriving, students were not treated as adults and given the appropriate attention that we should deserve for the dollars we invested. I feel that things are greatly improved by Faculty XX on the scene.
• Could offer more international PH opportunities
• The diveristy. I feel like some races are over-represented, but that may just be that they're the ones who are applying more.
• Late addition of the Capstone Exam.
• Information about courses for the next semester. It seems that there's always a lag time.
• There is little interaction among the SPH community of students and faculty/committee
• I am concerned about the trend toward pushing out true shoe leather epidemiologists who do basic PUBLIC HEALTH in order to bring in highly specialized scientists who work on medical/basic science issues.
• Many students do not seem prepared for graduate school.
• More collaboration opportunities for students with the world’s largest medical center, major port authority, oil & gas industry. Houston is such a opportunistic city, I would like to see more Houston (& suburbs) ties. I felt like the library was used by most students to check personal e-mails and socialize rather than to use the computers as electronic card catalogues or to crack open a book.
• In my opinion, it was better than my master school.
• Website is poorly organized and information is unaccessible through the search bar
• Communication about everything....much communication is last minute (about speakers, etc) and website information is frequently lacking or not clear.
• The number of essays/articles/proposals that should be written during the entire course can be increased so that at the time of graduation, you can be very comfortable at writing.
• Graduate programs are not well known outside of TMC.
• All of the extra fees.

N/A
• No opinion.
• None (3)
• n/a (3)
• I didn’t find one.
• None that I can think of.
### Table 17. - Alumni Association Activities (Survey Question 101)

<table>
<thead>
<tr>
<th>Participation in alumni activities</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(n)</td>
</tr>
<tr>
<td>Q.101 – Would you participate in alumni association activities?</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>188</td>
</tr>
<tr>
<td>No</td>
<td>40</td>
</tr>
</tbody>
</table>