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RICHARD M. FAIRBANKS
SCHOOL OF PUBLIC HEALTH

INDIANA UNIVERSITY
Indianapolis

DOCTORAL PROGRAM

IN

GLOBAL HEALTH LEADERSHIP (DrPH)

Academic Policies, Guidelines, and Procedures*

**INDIANA UNIVERSITY RICHARD M. FAIRBANKS SCHOOL OF PUBLIC HEALTH
DEPARTMENT OF HEALTH POLICY AND MANAGEMENT**

2017-2018 Academic Year

*Adapted from Doctoral Program in Health Leadership (DrPH), Department of Health Policy and Management, Gillings School of Global Public Health, University of North Carolina at Chapel Hill (Babich 2014)

These *Policies, Guidelines, and Procedures* describe rules, regulations, policies, and procedures for the Doctoral Program in Global Health Leadership (DrPH), as

established by the Department of Health Policy and Management at the IU Richard M. Fairbanks School of Public Health. Each Student should become thoroughly familiar with the material and, with a faculty advisor, ensure that their selected plan of study complies with the pertinent requirements.

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GENERAL INFORMATION

Program Goal and Background

The goal of the program is to produce graduates with the motivation, knowledge, and skills – and the ability to use those skills effectively – to become top leaders committed to improving the public's health.

This goal responds to the urgent need to develop better leaders to improve the health of the public both domestically and internationally. The Institute of Medicine's landmark 1988 report, *The Future of Public Health,* brought this need into sharp focus. The report concluded, "… public health will serve society effectively only if a more efficient, scientifically sound system of practitioner and leadership development is established." Since 1988, the Bureau of Health Professions, the Joint Council of Governmental Public Health Agencies, the Centers for Disease Control and Prevention, the World Health Organization, among others, have called for improved training of top health leaders.

In 2003, the Institute of Medicine in two major reports renewed and strengthened its call for improved training of future health leaders. One of these reports, *The Future of the Public's Health in the 21st Century,* recommended "leadership training, support, and development should be a high priority." The other report, *Who Will Keep the Public Healthy,* focused on "*Educating Public Health Professionals for the 21st Century",* as its subtitle states. The report notes that much has changed since the original 1988 IOM report was issued, and these changes require modification and improvement of the education of top health leaders and other professionals. The Doctoral Program in Global Health Leadership pedagogy and curriculum respond to this need.

The curriculum is inspired by and builds on lessons learned and insights gained from the Doctoral Program in Health Leadership (DrPH), launched in 2005 in the Department of Health Policy and Management, Gillings School of Public Health, University of North Carolina at Chapel Hill under the direction of Ned Brooks and Suzanne Babich (formerly Hobbs). The first distance doctoral program of its kind, it pioneered the use of Internet video for doctoral-level coursework and a highly interactive, experiential and multidisciplinary pedagogical approach to educating working health practitioners. Originally designed as a domestic-only program, the UNC program was expanded in 2007 to include international students.

The FSPH program builds on the success of the UNC model by increasing curricular content in practice-oriented research methodology, particularly in the areas of qualitative methods and implementation science, and configuring program operations to accommodate substantial collaboration with international institutional partners. Establishment of a global partner network enhances the diversity of opportunities for students, faculty and staff to learn from each other, leading to improved teaching and learning outcomes, broadening participants' personal and professional networks, and increasing institutional capacities to provide high-quality, urgently needed doctoral-level education in global health leadership. Close collaboration with global partners, including diverse, globally based faculty, helps to ensure a global perspective is brought to bear on the curriculum, better preparing graduates to practice effectively across varied global settings.

Students

The program is aimed at professionals working full-time in Indiana, across the U.S. and around the world with the potential and ambition to become senior health leaders. Examples include health directors, ministers of health, mid- to senior-level managers and leaders in government agencies, foundations, nonprofit and non-governmental organizations, program officers, as well as others working within the health field, which may include entrepreneurs and individuals working in nontraditional settings affecting the health of the public.

The focus of the Doctoral Program in Global Health Leadership (DrPH) is on developing leaders who will improve the public's health in the United States and globally. Therefore, (a) the curriculum is relevant and can be applied in both domestic and global work settings and (b) students come from the United States as well as from around the world. Because the mission of the program is to produces graduates who will lead applied efforts to improve the public's health around the world, cohorts do not include individuals who intend to focus predominantly on research or academic teaching positions. While we acknowledge that graduates may at times in their careers choose to engage in research and/or academic endeavors, this particular DrPH program is designed to meet the needs of individuals working in field settings who intend to remain working in field settings, domestically or internationally.

DrPH Global Health Leadership Program Governance

All responsibility for the academic conduct, standards, and requirements of the doctoral program rests with the faculty of the Department of Health Policy and Management through its duly appointed representatives, in accordance with other school and university policies.

> **Program Director.** The Director of the Doctoral Program in Global Health Leadership is responsible for all administrative affairs of the Program, including administration of academic conduct, standards, and requirements. In addition, the Director is responsible for recommending admissions and potential financial support, matching advisors with students, approving DrPH Global Health Leadership dissertation committee chairs and members, advising these committees on interpretation of policies and requirements, ruling on all petitions in accordance with the School of Public Health and Graduate School guidelines, and fulfilling any other administrative duties or responsibilities delegated by the Department Chair.

> Director: Suzanne (Sue) Babich, DrPH, MS
>   Associate Dean of Global Health and Professor, HPM

> **Program Committee.** The DrPH Global Health Leadership Program Committee meets at least four times per year and advises the Director with regard to all issues related to the Doctoral Program in Global Health Leadership (e.g., admission, curriculum). Committee members are drawn from the HPM faculty.

Class Size

Up to fifteen students will be admitted annually.

Program Costs

Please check with the Office of the Bursar, for the most recent tuition rates and fees. Students take 18 credit hours in each of years 1 and 2, and in the third year, they take nine credit hours for a total of 45 credit hours. In addition to tuition, students must provide their own computers and web cams per program specifications (information is provided to students separately and updated as necessary as the technology changes). Students will also be responsible for travel expenses related to three annual visits to campus (or an alternate location) in each of the first two years and at least one trip in the third year.

Financial Aid

We are working to raise funds for scholarships. For now, general University information about financial assistance is available at: http://www.iupui.edu/~finaid/

If you are in the military, the University's military tuition benefit is described at:
http://veterans.iupui.edu/benefits/

Admission Requirements

- A prior master's degree or doctoral degree (not necessarily in public health).
- At least several years of significant post-graduate experience in the health field, including at least five years in at least a mid-level leadership position with substantial management responsibility.
- Demonstrated leadership potential.
- Motivation to obtain senior-level positions in practice settings and to improve the public's health.
- Grade Point Average (GPA) of 3.0 or better in prior graduate study.

While all students are expected to be academically qualified for doctoral level study, special emphasis is placed on work history, demonstrated leadership and a practice-oriented career commitment.

English language fluency. If English is not your first language, please submit TOEFL or IELTS scores.

Preferred Minimum Requirements	
TOEFL (paper-based) *school code: 1325*	620
TOEFL (iBT) *school code: 1325*	92
TOEFL (computer version) *school code: 1325*	263
IELTS	7.0

Also note: Students without a master's or other advanced degree from an accredited school of public health must successfully complete five core courses (Biostatistics, Environmental Health, Epidemiology, Health Administration, and Social and Behavioral Science), all of which are offered online. These courses need not be completed before matriculating, but they must be completed concurrently with the Doctoral Program in Global Health Leadership in order for students to graduate. *Completion of some or all of these core courses prior to program matriculation is strongly encouraged, as most students find it extremely challenging to complete the courses at the same time that they are managing doctoral work.*

Program Advising

As soon as possible after matriculation, students are matched with a faculty advisor based in large part on mutual scholarly interests. This advisor will guide the student in interpreting course and program requirements and identifying dissertation committee members. In most cases, this faculty advisor also provides guidance on the dissertation proposal, implementation and defense although, on occasion, a different faculty member may chair a student's dissertation committee. In addition, the director of the Doctoral Program in Global Health Leadership and the HPM Student Services staff are available to work with students on general program matters and course registration issues.

Program Design

In each of the first two program years, students come to Indianapolis for three to five days in late August, in early January, and in mid-May, At times, an alternate site may be chosen which may require travel outside the U.S. or Indiana. Students are given ample time to make travel arrangements in these cases. Otherwise, learning takes place at homes and offices, away from the IUPUI campus. Students connect to faculty and peers mainly via computer. Students do not need to go to distance education sites such as videoconference centers to participate in the program.

We make substantial use of technologies (Internet Video, Canvas, Zoom) that allow students and faculty to interact productively and that support live video, audio, and data sharing. The technologies can also be used to connect guest speakers with students without having to bring everyone together in the same room. **NOTE: Students must have a high-speed Internet connection. Dial-up connections will not work with our technology. Also note that some international students may incur additional costs for teleconferencing during weekly class sessions. We may use a telephone audio bridge – not voice over Internet – for the audio portion of our online classes.**

The executive format functions as follows: During their first visit in August, students begin their studies with several days on campus during which they are oriented to the program, the Department and School, and the University. They also participate in-group discussions with top health care and public health leaders. They are introduced to the reminder of the first semester curriculum and are trained in using the program software. The students then return home for the balance of the semester.

Students receive material (recorded videos, narrative case studies, datasets, readings, etc.) via the Web each week. They study these materials on their own but must have completed required tasks before a regularly scheduled class session when they will convene live via Internet video. These three-hour synchronous learning sessions are divided into the components of the curriculum and led by faculty members responsible for each component, sometimes including guest speakers.

First-year students meet for class on Wednesdays; second-year students meet for class on Thursdays. Class times vary from cohort to cohort, depending upon the locations of students. However, typical connection times are 4-7pm EST or 5-8pm EST. Third-year students registered for dissertation credit hours attend an optional monthly online video chat group meeting until they have successfully defended their doctoral dissertations.

Students return to Indianapolis between semesters to conclude work on the preceding semester and begin work on the next semester's curriculum. This process is repeated throughout the first two years of the curriculum. All students move through the curriculum together at the same pace. Every course in the first two years is required of every student. Some students are expert at some elements of the curriculum, but every individual must nevertheless complete those elements. We want students to share their expertise with others in the cohort. We believe active interaction among students is an important part of good adult learning. The focus in the third year is on writing the dissertation. We expect you to try your best to proceed through the program with your cohort and to defend your dissertation within three years of matriculation. At the discretion of the program director and dissertation chair, that time frame may be extended and we will in rare cases permit extensions up to five years from matriculation.

Note that participation in the doctoral program requires attendance at six on-campus sessions during years 1 and 2 of the program. (It is possible that not more than once each year, the on-campus visit will take place in a location outside Indianapolis, including elsewhere in the U.S. or

abroad.) Exceptions will be made only in the case of 1) illness or death in the family, 2) mandatory organizational obligation (one time only), acknowledged in writing by employer. We understand that important professional and personal opportunities may conflict with scheduled on-campus sessions. However, priority must be given to attendance at on-campus sessions. Only in rare cases will other extraordinary circumstances be considered by the program director.

Similarly, on-time attendance is required at all weekly class sessions throughout years 1 and 2 of the program. Students are expected to arrange vacation and work-related travel plans to accommodate class session times. *Failure to attend class sessions and/or on-campus (or scheduled off-site, in-person sessions held at alternative sites) as specified or chronic tardiness for class sessions will disqualify student from continuation in the program.* Classes are set up in sequence and each is offered only once a year. Therefore, if a student does not complete a class on schedule, he or she will have to wait one year before the course is offered again.

ACADEMIC REQUIREMENTS

The curriculum is displayed by category below as well as in the dissertation conceptual model on page 17. The curriculum competencies are aligned with the model developed by ASPPH in 2006 and adapted for this program, which emphasizes a global perspective.

Course Requirements
The program curriculum is summarized in this table and in Appendix A.

DOCTORAL PROGRAM IN GLOBAL HEALTH LEADERSHIP (DrPH) CURRICULUM

Categories
(Credit hours in parentheses)

	LEADERSHIP	PUBLIC HEALTH	RESEARCH*
Year 1 Fall	H755: Organizational Leadership Theory and Practice (2) H756: Leadership in Global Health Law and Ethics (2)**	H757: A Population Perspective for Global Health (1)	H758: Initiating the Research Process (1)
Spring	H759: Leadership in Global Health Systems (2)	H760: Essentials of Practice-based Research (2) ***	H761: Literature Review & Appraisal (2)
Summer	H762: The Science of Global Health Implementation (2)	H763: Leadership Challenges in Global Health Informatics (2)	H764: Dissertation Preparation and Planning (2)
Year 2 Fall	H765: Financing Global Health (3)		H766: Fundamentals of Research Analysis (3)
Spring	H767: Executive Communication for Global Health Leaders(2)	H768: Global Health Policy Analysis and Advocacy (2)	H769: Strategic Theory and Practice in Global Health Leadership (2) H764: Dissertation Preparation and Planning (1)
Summer	H770: Leadership for Global Marketing, Public Relations and Fund-raising (2)		H771: Program Evaluation for Global Health Leaders (2) H764: Dissertation Preparation and Planning (1)
Year 3 Fall			H805: Doctoral Dissertation (3)
Spring			H805: Doctoral Dissertation (3)
Summer			H805: Doctoral Dissertation (3)

* First year research courses help with dissertation proposal preparation. Second year courses focus on conducting the dissertation.

** Also under "Public Health."
*** Also under "Research."

Written Comprehensive Examination

A written comprehensive examination is administered at the end of the second year of the program. The exam integrates key concepts from the overall program curriculum. Students have forty-eight hours in which to take the exam. Specific details about the examination are provided to students at least one week before the exam is scheduled to take place.

Note that this and all other examinations are given under the IUPUI Code of Conduct. Students are expected to read, understand, and follow the policies set forth there http://studentaffairs.iupui.edu/student-rights/student-code/

Dissertation

The DrPH dissertation is the ultimate academic test of a student's competency.   It requires the student to apply key aspects of the curriculum to improving the understanding of or resolving an important public health-related administrative or policy issue.

The dissertation should demonstrate the candidate's mastery of the skills and knowledge required to lead an important health-related program, to create a substantial change in policy for the public's health, or to develop new methods that accomplish either of these two goals. The dissertation should be of publishable quality in either the scholarly literature or applied literature in health care delivery or public health.

Guidelines for the Dissertation
Students have flexibility in designing a dissertation project, but all dissertations will highlight a potential strategy for addressing a current or past health policy or organizational issue or problem. The dissertation will outline a plan to guide implementation of organizational or policy change. The objective of the DrPH dissertation is to combine practice-based research with an understanding of the role of leadership in creating an implementation plan to improve the public's health.

Students have two options for dissertation formatting. One is the traditional, single monograph DrPH dissertation. The second option is to prepare three manuscripts for publication, tying them together with an opening and closing chapter. Those who are interested in the three-paper option should consult with the program director, dissertation chair, and their dissertation committee members to determine whether or not the alternative is feasible and desirable in their case. Choosing between the traditional DrPH dissertation format and the three-paper option requires consideration of the number of research questions that merit separate treatment in stand-alone manuscripts. There should be agreement at the end of a successful oral proposal defense as to what the format will be. The three-paper option is not appropriate for all students, and the choice of whether or not to use this option does not reflect the quality of the dissertation.

Note: The School of Public Health's Institutional Review Board on Research Involving Human Subjects (IRB) http://researchcompliance.iu.edu/hso/index.html must review *all* research involving human subjects (including dissertations and class research projects). Students must submit to the IRB, even if the planned research may be exempt as defined for certain human subjects research by the Code of Federal Regulations. *Only* the IRB can determine whether research is exempt. It is essential to receive IRB approval prior to beginning research. Approval is not given retroactively for any research.

Also: The University now requires that all faculty, staff and students who are engaged in the planning, conduct or analysis of research at IUPUI involving human subjects complete an online training module. ***This training must be completed before you can begin work on your dissertation.*** We recommend that you complete this module during your first semester in the Doctoral Program. A link to the online training module and details about the module can be found at http://researchcompliance.iu.edu/eo/eo_sessions.html. The Collaborative IRB Training Initiative

(CITI) at http://researchcompliance.iu.edu/eo/eo_citi.html is a web-based training package on issues relating to human subjects research. The University of Miami maintains the CITI web site, with content developed by a national consortium. CITI contains modules on topics like informed consent, vulnerable populations, ethical principles and IRB regulations. Each module has a short quiz at the end to assess understanding. Over 400 institutions are using CITI for their mandatory training.

OUTLINE OF TRADITIONAL DRPH DISSERTATIONS

Chapter 1: The Topic. The topic must be innovative and significant. "Innovative" means the dissertation must either identify new approaches to existing or past problems or apply existing approaches to new problems. "Significant" means that the dissertation's implementation plan must have the potential to create one or more important improvements in the health of the public, or that the identification and understanding of past failures and successes illuminates principles of organizational change or policy implementation that have application in improving future health policy.

Focus: Most dissertations will focus on either:

➢ A change at the top level of an organization or a set of organizations that improves the organizations' ability to improve the public's health; or
➢ Policy development and implementation at the local, regional, state, or national level aimed at improving the public's health

Researchable: The topic must be able to be stated as a research question.

Chapter 2: Literature Review. The dissertation must produce a scholarly analytical synthesis that demonstrates the student's ability to critically evaluate the relevant literatures on leadership and organizational or policy change as they relate to understanding the issue or problem and identifying alternative courses of action.

Chapter 3: Methodology. This chapter identifies and describes the appropriate tools to study the issue being examined. The methods used in the dissertation fall under the general rubric of "mechanisms for social change" and may include one or more of the following, as is appropriate for the topic: quantitative data analysis, including large data sets; qualitative analysis; or policy analysis. Policy analysis should include an analysis of the problem (needs statement), establishment of goals and evaluation criteria, identification of alternative policies to address the problem, evaluation of the alternative policies using the evaluation criteria, and a description of the implementation and evaluation plans.

Chapter 4: Results. This chapter describes what was found as a result of studying the issue using the methods described in Chapter 3.

Chapter 5: The Implementation Plan ("Plan for Change"). This section is the centerpiece of the DrPH dissertation and should be comprehensively detailed. This chapter presents an explicit strategy for addressing the issue with a focus on the resources, players, and contextual parameters affecting the change and should include a proposed evaluation methodology.

This section includes an application of the core elements of the DrPH leadership curriculum depicted on the triangle's borders in Figure 1, including:

1) The resources necessary to implement and maintain the organizational change or policy including people, funds and other infrastructure elements.
2) The players affecting the change including key stakeholders (i.e. populations, communities) and key decision-makers.

3) The contextual <u>parameters</u> affecting the change including law and policy, organizational or situational authority, ethics, political and public feasibility, and the prevailing social environment and norms.

Other topics covered in the curriculum (communications, informatics, policy analysis, social forecasting, scheduling, negotiation, assessment, planning, assurance, public relations, marketing, and evaluation) should be incorporated as applicable. (See inner circle, Figure 1). The implementation plan combines the various elements of the curriculum in a coherent and comprehensive strategy for making organizational or policy change.

<u>Chapter 6: Discussion</u>. This chapter explains how the plan will improve the public's health if implemented, incorporating the principles identified in the analysis in Chapter 5. It identifies any drawbacks/limitations and explains why the advantages outweigh the disadvantages. It also describes the plan's potential for further dissemination.

OUTLINE OF 3-PAPER OPTION DRPH DISSERTATIONS
<u>Chapter 1: The Topic and Literature Review</u>. The topic must be innovative and significant as with the traditional dissertation.

The literature review must be an analytical synthesis that demonstrates the student's ability to critically evaluate the relevant literatures on leadership and organizational or policy change as they relate to understanding the issue or problem and identifying alternative courses of action. The literature review should provide the detailed literature critique that is not usually included in empirical journal articles.

<u>Focus</u>: Most dissertations will focus on either:
- ➢ A change at the top level of an organization or a set of organizations that improves the organizations' ability to improve the public's health; or
- ➢ Policy development and implementation at the local, regional, state, or national level aimed at improving the public's health

<u>Researchable</u>: The topic must be able to be stated as a research question.

<u>Chapters 2-4: One manuscript per chapter.</u> Each manuscript should be a journal length paper that is written and formatted according to target journal requirements.

<u>Chapter 5: The Implementation Plan</u>. This section is the centerpiece of the DrPH dissertation and should be comprehensively detailed. This chapter presents an explicit strategy for addressing the issue with a focus on the <u>resources</u>, <u>players</u>, and contextual <u>parameters</u> affecting the change and should include a proposed evaluation methodology.
This section includes an application of the core elements of the DrPH leadership curriculum depicted on the triangle's borders in Figure 1, including:

4) The <u>resources</u> necessary to implement and maintain the organizational change or policy including people, funds and other infrastructure elements.
5) The <u>players</u> affecting the change including key stakeholders (i.e. populations, communities) and key decision-makers.
6) The contextual <u>parameters</u> affecting the change including law and policy, organizational or situational authority, ethics, political and public feasibility, and the prevailing social environment and norms.

Other topics covered in the curriculum (communications, informatics, policy analysis, social forecasting, scheduling, negotiation, assessment, planning, assurance, public relations, marketing, and evaluation) should be incorporated as applicable. (See inner circle, Figure 1).

The implementation plan combines the various elements of the curriculum in a coherent and comprehensive strategy for making organizational or policy change.

Chapter 6: Discussion. This chapter explains would synthesize findings across dissertation papers and discuss their implications for future research, practice, and/or policy. Additional discussion would include how the plan will improve the public's health if implemented, incorporating the principles identified in the analysis in Chapter 5. It identifies any drawbacks/limitations and explains why the advantages outweigh the disadvantages. It also describes the plan's potential for further dissemination.

Appendices: For details not included in the Chapters 2-4 journal articles, but necessary for the detail traditionally included in a dissertation, students should use additional appendices.

Oral Comprehensive Examinations – The Dissertation Proposal Defense and Final Defense

For all dissertations, a committee of at least four persons approved by the HPM Department evaluates the quality of the dissertation. The committee is chaired by a tenure track or approved fixed-term faculty member and consists of at least three other persons. One of these other persons must be a tenure track or approved fixed-term faculty member in the School of Public Health. Other members of the committee may be drawn from elsewhere within the University. Also, persons from outside the University may serve on dissertation committees with the approval of the Chair of the Department of Health Policy and Management and the Program Director. These persons will be granted adjunct faculty status in HPM for the duration of their service on dissertation committees.

The committee reviews and approves the dissertation proposal, provides guidance to the student in conducting the dissertation, and ultimately judges whether the dissertation meets the criteria for a scholarly work as outlined above. Specific areas of concern include the significance and appropriateness of the issue chosen, the appropriateness and execution of the methodology used, whether the results logically follow from the findings, the completeness and feasibility of the proposed implementation strategy and evaluation plan, and the appropriateness and utility any principles identified.

For all dissertations, the committee should be able to answer relevant questions about the dissertation, such as:

Overall Dissertation Evaluation Criteria:
- Considered as a whole, are the dissertation, its methods and findings, significant and innovative?
- Is the literature review thorough and applicable, and has it been synthesized effectively?
- Are relevant leadership theories cited and explained?

Needs or Problem Statement:
- Is the need for the project clearly identified?

Goals and Evaluation Criteria:
- Does the dissertation include a description of policy goals and relevant evaluation measures (e.g., cost, resources needed to implement, feasibility of implementation, political feasibility)?

Generating Alternative Options:
- Does the dissertation identify appropriate options that could be used to address the problem?

Data or Policy Analysis:
- Have appropriate research and data analysis methods been employed? (For example, has the student used appropriate quantitative, qualitative, or policy analysis methods to evaluate competing options?)
- Does the project describe how populations and communities will be affected by the change? Are the pros and cons in terms of effect on populations thoroughly analyzed?
- Are considerations of the ethical implications of the change adequate and appropriate?

Implementation Plan ("Plan for Change"):
(Students should address some or all of the following, as appropriate to the dissertation):
- What resources (financial, human and other) are/were needed to implement and maintain the change?
- Have the effects of the laws and policies that bear on this issue been adequately addressed?
- Are/Were the relevant policy makers and stakeholders identified? What are/were their positions? Has the student described a plan to obtain stakeholder support and/or reduce stakeholder opposition? For dissertations focusing on past policy, has the student identified the role that stakeholder groups played in the project being evaluated?
- Is/Was the proposed schedule of implementation realistic? Does/Did it make sense in the context of the project's budget and resources?
- Have the appropriate policy analyses, social forecasts, assessments, negotiations, communications, and other applications methods been identified and integrated appropriately into the plan? Are the marketing and public relations plans sound? For projects focusing on historical policies, have these facets been examined?

Evaluation Plan:
- Is the proposed evaluation plan sound?

NOTE: In those cases in which the implementation plan or the principles cannot be applied within the third year, the dissertation committee members must assess of the potential "real world" utility of these "products."

Dissertation chairs have some leeway in the actual format of the final oral dissertation defense. However, the following process is typical:

Doctoral Defenses -- Procedures

1. Convene the defense with introductions (as needed), greetings/welcome, and procedure/plan for defense
2. Hold optional closed Executive Session of Committee to clarify any remaining initial concerns before commencing defense.
3. Candidate's presentation, 25-30 minutes. Questions from Committee/audience should be held to end, unless for clarification only.
4. Committee members should be provided copies of any slides; three-per-page and b&w only generally OK.
5. Questions to Candidate first from Committee, then audience,
    or
6. Questions to Candidate first from audience, then from Committee, either in (a) open or (b) closed session.
7. Candidate excused from room following all questions.

8. Hold closed Executive Session of Committee to discuss the dissertation and the defense; additional requirements, if any; and outcome.
9. Invite Candidate back into the meeting and brief on the outcome
10. If successful defense, obtain signatures on Doctoral Dissertation completion form and dissertation cover sheets.
11. Detailed feedback by Doctoral Committee Chair immediately, or within 1-2 days, regarding any corrections, necessary changes, elaborations, and any additional work required for dissertation.
12. Assure that Committee delegates authority to Chair to determine whether or not the necessary revisions are successfully completed.

Chair responsibilities for the Defense:

1. Assure that all Committee members are on board ahead of the final defense. If a favorable outcome, albeit with minor changes or elaborations, is not a forgone conclusion then do not hold defense.
2. Run defense efficiently, fairly, and comprehensively.
3. Take notes during defense of all Committee member (and audience) questions in order to provide feedback to Candidate. This is particularly important regarding corrections, changes, elaborations, and any additional work required.
4. Celebrate completion and congratulate completion of doctoral studies!

Note: Candidates must be registered during the semester they defend.

(Source: John Paul, PhD, UNC-Chapel Hill)

Progress Report for Students Enrolled in Dissertation Hours (H805)

Students registered for H805 must complete a bi-annual progress report and submit it to their dissertation chair and the Doctoral Program in Global Health Leadership director at the end of June and December every year. It is the student's responsibility to keep their dissertation chair and Doctoral Program in Global Health Leadership director informed of their progress and any situations that cause deviations from their dissertation timeline. There is no specialized form on which to submit the report; students are expected to send the information via a detailed email message covering the items noted below.

For students who have not defended their dissertation proposal, the annual progress report should include specific progress on their dissertation proposal during the past year, timeline for scheduling their dissertation proposal defense and an explanation of delays in progress.

For students who have defended their dissertation proposals, the annual progress report should include the date of the dissertation proposal defense, names of dissertation committee members and progress to date on dissertation research, including status of the IRB application, data collection and overall status of work compared to the dissertation timeline.

Students are expected to move in lock step with their cohort and to defend their dissertation within three years of matriculation. Extension of the program beyond three years is not guaranteed and is subject to the discretion of the program director and dissertation chair. When there are extenuating circumstances, it may be possible to extend work in the program to not more than five years from matriculation.

Should the dissertation chair determine that sufficient progress has not been made, a grade of F (fail) for H805 may be assigned. Failure to provide progress reports to the dissertation chair and program director or repeated failure to make sufficient progress may result in removal from the program. In the event of insufficient progress, the program director will work with the student to explore their options.

Figure 1
DrPH Dissertation
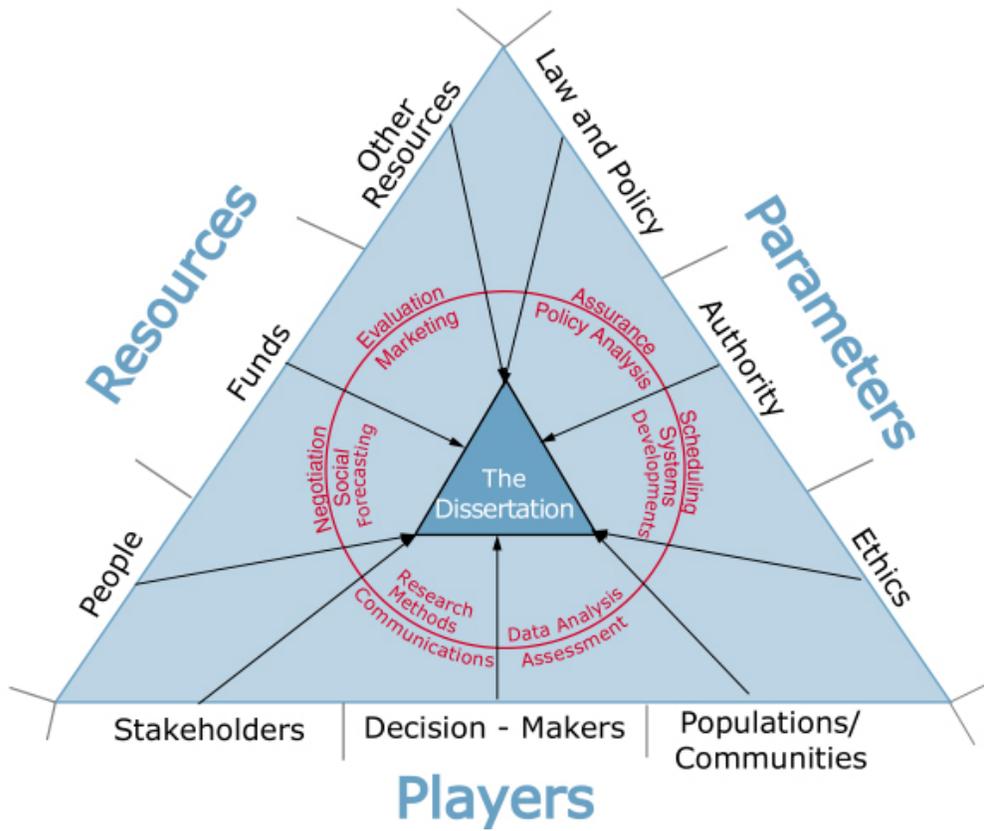
ETHICS, DISCRIMINATION, INSTITUTIONAL REVIEW BOARD, AND HIPAA

Ethics and Honor Code
The Responsibilities section of the Code of Student Rights, Responsibilities, & Conduct (link here) contains detailed information about illegal drugs, ethics, the Honor Code, non-discrimination, racial and sexual harassment, and the alcohol policy. You can also visit the Registrar's website for information on the Family Educational Rights & Privacy Act here.

Harassment and Discrimination
The University's Policy on Prohibited Harassment and Discrimination prohibits discrimination or harassment on the basis of an individual's race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression.

Students who want additional information regarding the University's process for investigating allegations of discrimination or harassment should contact the IUPUI Office of Equal Opportunity (OEO).

Director
IUPUI Office of Equal Opportunity
Union Building
UN 117
620 Union Dr.
Indianapolis, IN 46202
(317) 274-2306

Institutional Review Board (IRB) and Research Involving Human Subjects
It is the policy of the Indiana University that all research projects which involve human subjects shall be subject to review and approval by an appropriate Indiana University Institutional Review Board or, as appropriate, an officially appointed, Institutional Review Board (IRB) registered with the Office of Human Research Protections (or other office designated by the United States Department of Health and Human Services) prior to project initiation and without respect to funding or the source of funding.

CITI Training
All key personnel and any researchers directly interacting with subjects are required to complete CITI training every three years.

You must complete one of the following courses based on your main area of research:
- If you are mainly engaged in **biomedical research** complete: Biomedical Researcher, Stage 1
- If you are mainly engaged in **social or behavioral research** complete: Social/Behavioral/Educational Researchers, Stage 1
- VA researchers should complete the VA CITI course, and should affiliate their CITI account with Indiana University. The VA CITI course fulfills the Indiana University researcher education requirement for VA researchers.
- For assistance with affiliating your CITI account with Indiana University, please email irb@iu.edu.

All Principal Investigators and Co-Principal Investigators conducting interventional clinical trials are required to complete CITI GCP training every three years.
- CITI GCP training is a condition of IRB approval for interventional clinical studies.
- Only the CITI GCP course will be accepted as evidence of GCP training.

The length of the IRB approval process depends on the type of dissertation research. For example, approval of secondary data analysis or a study involving minimal risk to human subjects may be approved relatively quickly (e.g., within a week or two). Approval for collecting sensitive data about human subjects may require several revisions before IRB approval is granted (e.g., 1-2 months). If dissertation research will involve PHI, then a student may also be required to complete HIPAA training. Information about HIPAA can be found at this URL: http://research.unc.edu/offices/research-compliance-program/privacy/

Therefore, plan ahead so that the research is not delayed. In general, the process is:

1. Complete the proposal—either immediately after successfully defending the proposal, or after it is in relatively final form. If significant modifications are made to the proposal, then IRB approval of the modification is required.

2. Submit completed IRB application online.   See the Doctoral Program in Global Health Leadership Canvas site (Helpful Resources) for IRB IT contact information to include in your IRB application.

The IRB for the School of Public Health is the Non-Biomedical IRB (Committee E). For questions about the IRB process or how to complete particular aspects of the application, please contact the IRB office at 317-274-8289 or by email,IRB@IU.edu. For technical questions about online submission of IRB applications, contact Casey Mumaw at IU IRB Help Desk, 812-856-4242. To check the status of your review, go to:

https://apps.iu.edu/my2-prd/one/155174?casticket=ST-548440-baAfNIueoRPgI4bcQIUOcasprd06

FORMS

Required Forms
A number of forms must be completed and submitted to the school of Public Health during the doctoral program. All required forms are available from the FSPH department of student services. Students should check with the department of student services to ensure that the appropriate forms are filed on their behalf and at the appropriate times. ***Students are responsible for initiating and ensuring follow through for all relevant forms. ALL FORMS SHOULD BE SUBMITTED TO THE Department of Student Services, (pbhealth@iupui.edu 317-274-2000). Indiana University, Richard M. Fairbanks School of Public Health, Health Sciences Building (RG), 1050 Wishard Blvd. Floor 5, Indianapolis, IN. 46202-2872***

	Report	Filed after	Responsible party
1	*Curriculum vitae*	Each year	Student
2	*Preliminary Doctoral Written Examination*	Taking written comprehensive exams	Program Director
3	*Doctoral Committee Composition Note: When applicable, students are responsible for submitting forms to have non-IU faculty appointed to FSPH to serve on their committees.*	Assembling a dissertation committee	Student
4	*Approved Dissertation Project*	Defending the dissertation proposal (first oral examination)	Student
5	*Oral Examination*	Defending the dissertation proposal (first oral examination)	Committee Chair
6	*IRB Approval*	Getting IRB approval	Student
7	*Application for Graduation*	Completing all requirements (except dissertation defense), about 3 months before graduation	Student
8	*Final Oral Examination*	Defending the final dissertation	Committee Chair

1. *Curriculum Vitae:* **Filed by July 1 of each year:** Students must provide a copy of their current curriculum vitae to their advisor and to the Doctoral Program in Global Health Leadership Director. The curriculum vitae should describe students' research, teaching, and service activities.

2. *Report of Preliminary Doctoral Written Examination* (Part I: *Doctoral Exam Report Form*). **Filed after taking written comprehensive exams:** This form reports the results of the written comprehensive exam, and is filed regardless of whether the outcome of the examination is a pass or fail. The Director of the Doctoral Program in Global Health Leadership is responsible for filing this form for DrPH students.

3. *Report of Doctoral Committee Composition* (Part I: *Report of Doctoral Committee Composition & Report of Approved Dissertation Project*) **Filed after assembling a dissertation committee:** The doctoral dissertation committee must be approved by the Director of the Doctoral Program in Global Health Leadership and the chair of the HPM department. Often this form is completed at the same time as the oral defense of the dissertation proposal. The student is responsible for filing this form with the HPM Department of Student Services.

4. *Report of Approved Dissertation Project* (Part II: *Report of Doctoral Committee Composition & Report of Approved Dissertation Project*) **Filed after defending the dissertation proposal (first oral examination):** The dissertation committee signs this form indicating approval of the

proposed dissertation project. The student is responsible for filing this form with the HPM Registrar.

5. *Report of Oral Examination* (Part II: *Doctoral Exam Report Form*) **Filed after defending the dissertation proposal (first oral examination):** This form reports the results of the dissertation proposal defense, and is filed regardless of whether the student passes or fails the examination. The dissertation committee chair is responsible for filing this form.

6. *IRB Approval* **Filed after defending the dissertation proposal:** See section on IRB.

7. *Application for Graduation* **Filed after completing all requirements (except dissertation defense), about 3 months before graduation (please check University calendar for the exact filing date):** Degrees are awarded three times a year; May, August, and December. A student who expects to finish soon must notify the department of her/his intention to graduate by submitting an application for graduation on a specific date. In order to have the degree awarded at the desired time, all degree requirements must be completed (except the dissertation defense) no later than the deadline specified in the University Registrar's Calendar (2nd Friday in October for December graduation; 2nd Friday in February for May graduation; 2nd Friday in June for August graduation) for the relevant commencement. The School cannot make exceptions to this rule. If the student submits an application but does not satisfy the degree requirements by the deadline for graduation (*e.g.*, because of a failed final oral examination, outstanding grade of IN, etc.), the application will roll forward to the next commencement. After one year a new graduation application must be submitted. The student is responsible for filing this form.

8. *Report of the Final Oral Examination* (Part III: *Doctoral Exam Report Form*) **Filed after defending the final dissertation:** The final oral examination takes place at the time of the dissertation defense. The dissertation committee chair is responsible for filing this form.

APPENDIX A
Academic Schedule and Course Sequence: 2017-2018

FALL 2017
 H756: Leadership in Global Health Law and Ethics (2 credit hours)
 H755: Organizational Leadership Theory and Practice (2)
 H757: A Population Perspective for Global Health (1)
 H758: Initiating the Research Process (1)

Registration	(Registrar will notify)
Campus Visit	August 13-17, 2017
First Day of Classes	August 21, 2017
Last Day of Classes (online)	December 11, 2017

SPRING 2018
 H759: Leadership in Global Health Systems (2 credit hours)
 H760: Essentials of Practice-based Research (2)
 H761: Literature Review and Appraisal (2)

Registration	(Registrar will notify)
Campus Visit	January 7-11, 2018
First Day of Classes	January 14, 2018
Last Day of Classes (online)	April 30, 2018

SUMMER 2018
 H762: The Science of Global Health Implementation (2 credit hours)
 H763:   Leadership Challenges in Global Health Informatics (2)
 H764: Dissertation Preparation and Planning (2)

Registration	(Registrar will notify)
Campus Visit	May 14-17, 2018
First Day of Classes	May 20, 2018
Last Day of Classes (online)	June 19, 2018

FALL 2018
 H765: Financing Global Health (3)

 H766: Fundamentals of Research Analysis (3 credit hours)

Registration	(Registrar will notify)
Campus Visit	August 12-16, 2018
First Day of Classes	August 20, 2018
Last Day of Classes (online)	December 10, 2018

APPENDIX A (continued)

Academic Schedule and Course Sequence: 2018-2019

SPRING 2019

H767: Executive Communication for Global Health Leaders (2)
H768: Global Health Policy Analysis and Advocacy (2 credit hours)
H769: Strategic Theory and Practice in Global Health Leadership (2)
H764: Dissertation Preparation and Planning (1)

Registration	(Registrar will notify)
Campus Visit	January 6-10, 2019
First Day of Classes	January 7, 2019
Last Day of Classes (online)	April 29, 2019

SUMMER 2019

H770: Leadership for Global Marketing, Public Relations and Fund-raising (2)
H771: Program Evaluation for Global Health Leaders (2)
H764: Dissertation Preparation and Planning (1 credit hour)

Registration	(Registrar will notify)
Campus Visit	May 13-16, 2019
First Day of Classes	May 19, 2019
Last Day of Classes (online)	June 18, 2019

FALL 2019 – SUMMER 2020

H805: Doctoral Dissertation (3 credit hours each in Fall, Spring, Summer)

Registration	(Registrar will notify)

APPENDIX B
Degree Requirements Checklist

Theme	Course #	Course Title / Description	Hrs	Date Completed
PREREQUISITE COURSEWORK (NEEDED ONLY IF NO MPH/MHA)				
H501		US Health Care Systems and Health Policy	3	_____
E517		Fundamentals of Epidemiology	3	_____
B551		Biostatistics for Public Health I	3	_____
A519		Environmental Science in Public Health	3	_____
S500		Social and Behaviorial Science in Public Health	3	_____
FALL, YEAR 1				
Leadership		Organizational Leadership Theory and Practice	2	_____
Public Health		A Population Perspective for Global Health	1	_____
Ldship / PH		Leadership in Global Health Law and Ethics	2	_____
Research		Initiating the Research Process	1	_____
Dissertation	*Identification of dissertation topic (general description)*			
SPRING, YEAR 1				
Leadership		Leadership in Global Health Systems	2	_____
Research		Literature Review & Appraisal	2	_____
Rsch / PH		Essentials of Practice-based Research	2	_____
Dissertation	*Dissertation topic finalized*			
	First draft of literature review completed			
SUMMER, YEAR 1				
Leadership		The Science of Global Health Implementation	2	_____
Public Health		Leadership Challenges in Global Health Informatics	2	_____
Research		Dissertation Preparation and Planning	2	_____
Dissertation	*Dissertation*			
	• *Research Question*			
	• *Draft Chapter 1: The Topic*			
	• *Revised Chapter 2: Literature Review*			
FALL, YEAR 2				
Leadership		Financing Global Health	3	_____
Research		Fundamentals of Research Analysis	3	_____
Dissertation	*Continued development of dissertation proposal*			
	• *Determination of methods*			
SPRING, YEAR 2				
Leadership		Executive Communication for Global Health Leaders	2	_____
Public Health		Global Health Policy Analysis and Advocacy	2	_____
Research		Strategic Theory and Practice in Global Health Leadership	2	_____
Research		Dissertation Preparation and Planning	1	_____
Dissertation	*Dissertation proposal defense*			
	• *Research Question*			
	• *Background and Significance*			
	• *Literature Review*			
	• *Methods*			
	• *Timeline*			
SUMMER, YEAR 2				
Leadership		Leadership for Global Marketing. Public Relations and Fund-raising	2	_____
Leadership		Program Evaluation for Global Health Leaders	2	_____
Research		Dissertation Preparation and Planning	1	_____
COMPREHENSIVE EXAM				
YEAR 3				
Research		Dissertation	9	
Elective (optional)			3	
Elective (optional)			3	_____
Dissertation	*Fall: Data collection completed*			
	Spring: Type 1 → Draft Chapter 4: Results			
	* Draft Chapter 5: Implementation Plan*			
	* Type 2 → Draft Chapter 4: Results*			
	* Draft Chapter 5: Analysis*			
	Summer: Dissertation defense			

| | Total credits | 45 |