

Program-Level Assessment: Annual Report

Program Name (no acronyms): Master of Public Health (MPH) Program	Department: Behavioral Sciences & Health Education and Epidemiology & Biostatistics (offering concentrations in Behavioral Health & Health Education; Biosecurity & Disaster Preparedness; Biostatistics; Epidemiology; Global Health; Maternal & Child Health
Degree or Certificate Level:	College/School: College for Public Health and Social Justice
Date (Month/Year): June 2022	Assessment Contact: Jen Jen Chang, PhD, MPH Program Director and Professor of Epidemiology
In what year was the data upon which this report is based collected? AY2021-2022	
In what year was the program's assessment plan most recently reviewed/updated? 2021	
Is this program accredited by an external program/disciplinary/specialized accrediting organization? Yes, by the Council on Education for Public Health (CEPH)	

1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle? (Please list the full, complete learning outcome statements and not just numbers, e.g., Outcomes 1 and 2.)

For CEPH accreditation, MPH students must demonstrate 22 competencies, grouped into 8 domains, in their MPH training, regardless of concentration. Our 2022 MPH graduates are our third cohort of students to graduate under our revised MPH curriculum designed to meet these relatively new CEPH accreditation guidelines. This year, we assessed student learning outcomes associated with three domain groups of the 22 competencies – Policy in Public Health (4 competencies), Interprofessional Practice (1 competency), and System Thinking (1 competency).

MPH Program Learning Outcomes:

Policy in Public Health

FC 12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.

FC 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.

FC 14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.

FC 15. Evaluate policies for their impact on public health and health equity.

Interprofessional Practice

FC 21. Perform effectively in interprofessional teams.

Systems Thinking

FC22. Apply systems thinking tools to a public health issue.

2. Assessment Methods: Artifacts of Student Learning

Which artifacts of student learning were used to determine if students achieved the outcome(s)? Please describe the artifacts in detail and identify the course(s) in which they were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

Consistent with prior years, we used both direct and indirect measures for the MPH program assessment. The direct measures include data from our integrated learning experience capstone PUBH 5960 course, internship preceptor evaluation from the practice experience PUBH 5910 course, and public health certification exam scores. The data for the indirect measure is based on the annual MPH graduates exit survey.

DIRECT Measures:

1. Integrated learning experience capstone PUBH 5960 course. Data were abstracted from the capstone course final assignment from all course sections (1. Epidemiology (EPI) & Biostatistics (BST) concentrations, 2. Behavioral Science (BSHE)/Global Health (GLOH)/Maternal Child Health (MCH)/Public Health Practice (PHP) concentrations, and 3. online section for Biosecurity & Disaster Preparedness (BSDP) concentration). A random 10% sample was taken from the final course assignments for each course section. This results in a sample of two assignments from the EPI & BST section, two from the BSDP concentration, and four from the 3rd section of the course. These data were independently reviewed by three faculty using standardized rubrics against the learning outcomes associated with the selected domains, including Policy in Public Health (4 competencies), Interprofessional Practice (1 competency), and System Thinking (1 competency).

2. Internship preceptor evaluations from the practice experience PUBH 5910 course. The MPH Applied Practice Experience (APEX) PUBH 5910 course allows MPH students to integrate competencies acquired through their classroom learning into a community-based public health practice/project. Upon completion of APEX, internship preceptor evaluations are required to assess the student's mastery of program learning outcomes and competencies applied to the practice experience project. Preceptor evaluations were gathered from MPH students who completed their APEX requirement during Summer 2021, Fall 2021, and Spring 2022. Students who completed an internship in Summer 2021 consisted of both 2021 and 2022 MPH graduates. A total of 42 APEX preceptor evaluation forms from student internships were abstracted for Summer 2021, Fall 2021, and Spring 2022. We evaluated all available data from the internship preceptor evaluations across all MPH concentrations specifically focusing on the competencies associated with Policy in Public Health, Interprofessional Practice, and System Thinking.

3. Public Health Certification Exam Scores. Fundamental competency in the domains identified by the National Board of Public Health Examiners (NBPHE) for the CPH (CPH) exam shares similarities with CEPH in the knowledge and competency bases that guide their credential or accreditation process, despite some differences. Both cover the Policy in Public Health and Program Management competency domains that encompass competencies in Interprofessional Practice and System Thinking.. Student performance outcomes in the CPH exam among our MPH graduates provide an external, nationally standardized measure of student mastery of our CEPH-accreditation-based competencies and learning outcomes. While MPH students (excluding the BSDP concentration) were required to take the CPH exam in AY 2021-2022, we waived the requirement to pass the CPH exam as an MPH graduation requirement this year due to the COVID-19 pandemic and the disruption that it caused in these students' lives and education.

INDIRECT Measures:

MPH graduates Exit Survey. The MPH graduates Exit Survey was administered in class on April 4, 2022, to second-year MPH students enrolled in the 0-credit hour PUBH 5950 course required for CPH exam review and preparation. Data from the Exit Survey provided students' self-assessment of their mastery of each of the CEPH-based MPH program competencies and learning outcomes. Data from 49 students (response rate: 82%) who completed the 2022 MPH Exit survey related to the selected domains of Policy in Public Health, Interprofessional Practice, and System Thinking were analyzed using SPSS and R statistical Software for this program assessment.

Madrid student artifacts are not applicable to the MPH program, nor are any other off-campus locations.

3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and **include them in/with this report document** (please do not just refer to the assessment plan).

DIRECT Measures:

1. Integrated learning experience capstone PUBH 5960 course final assignment. Three faculty independently reviewed a 10% sample of the final course assignment from all sections of the PUBH 5960 Capstone course, using the same rubric as last year (see Appendix for details of rubrics), updated with the three domains of CEPH competencies in Policy in Public Health, Interprofessional Practice, and System Thinking. Projects from all sections of the capstone (PUBH 5960) were reviewed to cover all eight of our MPH concentrations. The rubric was originally developed based on the existing MSPH program assessment. The review of capstone projects focused on the MPH Program Learning Outcomes in the domains selected for this year's assessment which include Policy in Public Health, Interprofessional Practice, and System Thinking. Per CEPH requirements for the integrated learning experience capstone course, students identify a small number of the core competencies (learning outcomes) rather than all CEPH competencies to integrate with a few concentration competencies in their capstone projects.
2. Internship preceptor evaluations from the practice experience PUBH 5910 course. APEx preceptor evaluations were analyzed in Excel to assess the outcome achieved by students in each of the twenty-two core competencies as determined by the student's preceptor. APEx preceptor evaluations were collected from students who completed their internship during Summer 2021, Fall 2021, and Spring 2022. Each preceptor assessed student APEx outcomes for each of the twenty-two competencies using the following Likert scale: significant or above average competence, moderate or average competence, limited or no competence, or unable to assess. Descriptive analysis was conducted regarding preceptor evaluations of MPH students APEx outcomes by mastery of each competency.
3. Certified in Public Health (CPH) exam scores Data from the CPH exam from our MPH graduates (May 2022 graduates cohort) was obtained from the NBPHE. Descriptive analysis was conducted using Excel to determine and track the average score of our MPH graduates in each of the CEPH-mandated domain areas and core competencies. This year's assessment focused on the MPH Program Learning Outcomes in the Policy in Public Health, Interprofessional Practice, and System Thinking domains from the CPH exam results.

INDIRECT Measures:

MPH graduates Exit Survey. We conducted descriptive analysis for the MPH students Exit Survey data from students who graduated in May 2022 using SPSS. We characterize the percentage of students reporting mastery of each program learning outcome with a focus on the selected domains of Policy in Public Health, Interprofessional Practice, and System Thinking.

4. Data/Results

What were the results of the assessment of the learning outcome(s)? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

Direct Measures:

1. Integrated learning experience capstone PUBH 5960 course final assignment. We conducted assessment in a 10% random sample of our Capstone course with two assignment outputs from students in the EPI & BST concentrations, four from students in the BSHE, GLOH, MCH, and PHP concentrations, and two from online students in the BSDP concentration. No major differences were observed in the learning outcomes between the online or face-to-face instruction modalities. Appendix A shows that competencies in Policy in Public Health, Interprofessional practice, and System Thinking were inconsistently covered in student capstone projects across different MPH concentrations. Overall, student projects from the BSHE, GLOH, MCH, and PHP concentrations are more likely to demonstrate competencies in the learning outcomes of Policy in Public Health and System Thinking domains. The most lacking in these competencies were in student projects from EPI/BST concentrations. These mixed findings may be attributed to the CEPH guideline for the integrated learning experience capstone course to integrate a few foundational competencies only with some of the concentration competencies. In the capstone course, students are mentored through a process of identifying appropriate foundational and concentration competencies for the projects they chose.

2. Internship Preceptor Evaluations from the Applied Practice Experience PUBH 5910 course. Forty-two preceptor evaluation forms from completed student internships were abstracted from the Summer 2021, Fall 2021, and Spring 2022 terms. Table 1 details the findings from descriptive analysis of preceptor evaluations on the selected competencies in Policy in Public Health, Interprofessional Practice, and System Thinking. For each competency, the preceptor selects from the response options “significant or above average competence,” “moderate or average competence,” or “unable to assess.” “Unable to assess” is selected when the competency does not apply to the student internship project. Overall, the evaluations indicate satisfactory outcomes across these competencies, with nearly 100% of MPH students achieving at least moderate or average competence. Out of the 42 students, two preceptors indicated students had “limited or no competence” in the system thinking competency. The Interprofessional Practice competency has the highest percentage (81%) of preceptors reporting students having “significant or above average competence,” followed by the System Thinking competency (60%).

3. Certified in Public Health (CPH) exam. The MPH graduates who completed the CPH exam in May 2022 were our second MPH student cohort to take the CPH exam where the exam contents were aligned with the new CEPH accreditation competencies, which were implemented in our revised MPH curriculum. Our 2022 MPH May graduates had an 82% passing rate on the CPH exam in March/April 2022. This passing rate is similar to the rate obtained in 2021 (83%), but still slightly below the national passing rate of 85%. It is noteworthy that passing the CPH exam was not required for graduation for our 2021 and 2022 MPH graduate cohorts. Given the continued COVID-19 pandemic and the additional stressors placed on students over the past two years, the MPH Steering Committee decided to waive the requirement to pass the exam for graduation. Before the pandemic, our CPH exam passing rate was consistently greater than 90%, which exceeded the national passing rate for the CPH exam. Data from the CPH exam for our May 2022 MPH cohort shows the following results pertaining to the selected competencies. The average institutional score in the *Policy in Public Health* domain was slightly lower this year (10.7 out of 17) compared to the average score for the domain in 2021 (11.5). The CPH exam does not have separate domains labeled *Interprofessional Practice* and *Systems Thinking*, but rather this content is distributed throughout the other domains. Thus, average scores are not available for these two domains. The three lowest institutional average scores in 2022 were in the domains of *Policy in Public Health*, *Law and Ethics* (11.8 out of 17), and *Health Equity and Social Justice* (11.8 out of 17). However, due to the relatively small sample sizes, it unclear if the observed differences in the CPH exam average test score between 2021 and 2022 is statistically significant.

INDIRECT Measures:

MPH graduates Exit Survey. Of the 49 MPH students who completed the self-assessment of their learning outcomes in the 2022 MPH Exit survey, 75% to 80% of the students rated themselves as proficient, above average, or very proficient in the learning outcomes under the Policy in *Public Health* category, compared to 88% to 100% in these same learning outcomes in 2021 (Appendix D). For the learning outcome of Interprofessional Practice category, 97% of the students rated themselves as proficient, above average, or very proficient, compared to 100% last year. For the System Thinking category learning outcome, 86% of the students rated themselves as proficient, above average, or very proficient, compared to 100% last year. Again, due to the relatively small sample sizes, it unclear if the observed differences in the Exit survey results between 2021 and 2022 is statistically significant.

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you?

The mixed findings from the competency and learning outcome assessment in the Capstone student projects require a more systematic approach to address the issue. Even though CEPH does not require a capstone course project to address competencies in all domains, including the Evidence-Based Approach to Public Health, Public Health & Health Care System, Planning and Management to Promote Health, Leadership, Communications, Policy in Public Health, Interprofessional Practice, and System Thinking domains, data we collected from other sources (MPH alumni survey and Employer Interview Survey) speak to this need to help MPH students demonstrate proficiency in all those competency domains. Data from the MPH alumni survey and the Employer Interview Survey were not included in this

program assessment because those surveys are not conducted annually.

Regarding the CPH exam, *Policy in Public Health* and *Law and Ethics* have some of our lowest-scoring domains based on data in the past two years (Appendix C). Despite previous attempts to revise and increase this content in the required CPH exam preparatory course as part of the MPH curriculum, it seems to be a continuing trend. The MPH Steering Committee is planning to enact a curriculum subgroup to review course syllabi for quality, consistency of content between sections, and overall course content. We hope this will bring to light areas where further revisions can be made to support our students' success better. In addition, an MPH curriculum innovation task force consisting of college faculty and staff is charged with the responsibilities of strengthening our MPH curriculum common core to address some deficiency identified in student test scores and survey results that are related to the competencies in the Policy in Public Health domain.

It is of concern that the CPH exam passing rate has declined significantly in the past two years, partially due to the disruption in learning brought by the pandemic and the waiver of passing the CPH exam to graduate. For our 2023 MPH graduating cohort, passing the CPH exam will be required for graduation. We expect the CPH exam passing rate to increase in 2023 to our previous rate of over 90%.

The differences in the competency proficiency levels in Policy in Public Health, Interprofessional Practice, and System Thinking observed in the data from the 2021 and 2022 MPH graduates Exit Survey are noteworthy. However, due to the differences in response rate between the two survey years and the relatively small sample size, it is difficult to conclude if the observed difference is meaningful. We will continue to assess and track the trends in the data from the MPH Exit Survey to inform future curriculum changes if needed.

6. Closing the Loop: Dissemination and Use of **Current Assessment Findings**

- A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

Results from the annual program assessment are shared with the MPH Steering Committee, consisting of faculty representatives from all concentrations in the MPH program. Results will also be shared with the department chairs to share and discuss the results in their department faculty meetings.

- B. How specifically have you decided to use these findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

Changes to the Curriculum or Pedagogies

- Course content
- Teaching techniques
- Improvements in technology
- Prerequisites
- Course sequence
- New courses
- Deletion of courses
- Changes in frequency or scheduling of course offerings

Changes to the Assessment Plan

- Student learning outcomes
- Artifacts of student learning
- Evaluation process
- Evaluation tools (e.g., rubrics)
- Data collection methods
- Frequency of data collection

Please describe the actions you are taking as a result of these findings.

An MPH curriculum innovation task force was formed, consisting of faculty and staff from the college, to strengthen our MPH curriculum to ensure student proficiencies in the Evidence-Based Approach to Public Health, Public Health & Health Care System, Planning and Management to Promote Health, Leadership, Communications, Policy in Public Health, Interprofessional Practice, and System Thinking competencies before entering the workforce. Data from this program assessment will be used to inform the discussion for the MPH curriculum innovation. We hope to conclude this work by the end of AY 2023-2024. One of the main goals is to strengthen the common core course in our MPH curriculum so that students show proficiency in all the aforementioned competency domains. The task force will also evaluate ways to possibly standardize course

contents and instructions in all sections of the integrated learning capstone course in all MPH concentrations to address the mixed findings observed in the MPH program assessment in the past two years.

If no changes are being made, please explain why.

NA

7. Closing the Loop: Review of Previous Assessment Findings and Changes

A. What is at least one change your program has implemented in recent years as a result of assessment data?

Last year, as part of the self-study for CEPH accreditation, the MPH program standardized syllabi, assignments, and course contents covered in the multiple sections of PUBH 5010: Mission and Practice of Global Public Health and PUBH 5050: Health Care Across the Lifespan. Both courses build skills and competency in the Public Health & Health Care Systems domain. This change helps ensure that all our students receive high-quality instruction and an opportunity to enhance their knowledge and skills in this domain.

B. How has this change/have these changes been assessed?

We have not assessed the outcome of this change as it pertains to the Public Health & Health Care System competency domain not addressed in this MPH Program assessment.

C. What were the findings of the assessment?

NA

D. How do you plan to (continue to) use this information moving forward?

NA

IMPORTANT: Please submit any assessment tools (e.g., artifact prompts, rubrics) with this report as separate attachments or copied and pasted into this Word document. Please do not just refer to the assessment plan; the report should serve as a stand-alone document.

**Appendix A;
Assessment Rubric for MPH Capstones (Epidemiology/Biostatistics, SP22, n=2)**

Learning Outcomes (LO)	LO Assessed by this Capstone (Yes/No)	Capstone Demonstrates Achievement of Competency (Ambient Air & Hospital Visits ...)	Capstone Demonstrates Achievement of Competency (COVID-19 & Pediatric Mortality Index Performance...)	Overall
1. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.	N/A			Capstone projects were not designed to cover and assess the selected learning outcomes for this year's assessment.*
2. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	N/A			
3. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	N/A			
4. Evaluate policies for their impact on public health and health equity.	N/A			
Interprofessional Practice				
1. Perform effectively in interprofessional teams.	N/A			
System Thinking				
1. Apply systems thinking tools to a public health issue.	N/A			

*Competencies assessed by Epidemiology/Biostatistics capstone are listed below.

1. MPH 3: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
2. MPH 4: Interpret results of data analysis for public health research, policy, or practice.
3. Biostat 1: Analyze data with complex statistical models.
4. Biostat 5: Manage and process data using a variety of software packages.
5. EPI 3: Develop appropriate epidemiologic study designs and analytical strategies to test hypotheses.
6. EPI 5: Synthesize and communicate epidemiological findings.

**Appendix A;
Assessment Rubric for MPH Capstones (BSHE, GLOH, HMP, MCH, PFP, SP22, n=4)**

Learning Outcomes (LO)	LO Assessed by this Capstone (Yes/No)	Capstone Demonstrates Achievement of Competency (Health Equity in STL...)	Capstone Demonstrates Achievement of Competency (Community Health Worker Training Eval...)	Capstone Demonstrates Achievement of Competency (STL Foodbank WIC Support Initiative...)	Capstone Demonstrates Achievement of Competency (Menstrual Hygiene Management ...)	Overall
Policy in Public Health						
1. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.	No	Yes	No	No	No	This competency is largely not addressed.
2. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	Yes	Yes	No	Yes	Yes	This competency is mostly addressed.
3. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	No	Yes	No	No	Yes	This competency is largely not addressed.
4. Evaluate policies for their impact on public health and health equity.	Mixed	Yes	No	No	No	This competency is largely not addressed.
Interprofessional Practice						
1. Perform effectively in interprofessional teams.	No	No	No	No	No	Interprofessional practice not addressed.
System Thinking						
1. Apply systems thinking tools to a public health issue.	Mixed	Yes	Yes	No	Yes	System thinking competency is addressed to a varying degree based

						on the scope and nature of the student project.
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**Appendix A;
Assessment Rubric for MPH Capstones (Biosecurity & Disaster Preparedness, SP22, n=2)**

Learning Outcomes (LO)	LO Assessed by this Capstone (Yes/No)	Capstone Demonstrates Achievement of Competency (Traumatic Brain Injury)	Capstone Demonstrates Achievement of Competency (Haiti's Earthquake Vulnerability)	Overall
Policy in Public Health				
1. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.	No	N/A	N/A	This competency does not apply to the nature of the two sampled projects.
2. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	No	No	Yes	This competency is addressed in one of the sampled projects.
3. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	No	Yes	Yes	This competency was addressed in both sampled projects.
Interprofessional Practice				
1. Perform effectively in interprofessional teams.	No	No	No	This was not implicitly addressed.
System Thinking				

1. Apply systems thinking tools to a public health issue.	No	Yes	Yes	This competency is demonstrated in the sampled student projects.
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Appendix B. Descriptive Analysis Results of Internship Preceptor Evaluations of MPH Students' Selected Competencies (n=42, Summer 2021- Spring 2022)

for the MPH degree:		Significant or above average competence		Moderate or average competence		Limited or no competence		Unable to assess		Total
#	Question	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	
12	MPH 12:	30.95%	13	21.43%	9	0.00%	0	47.62%	20	42
13	MPH 13:	33.33%	14	40.48%	17	0.00%	0	26.19%	11	42
14	MPH 14:	28.57%	12	23.81%	10	0.00%	0	47.62%	20	42
15	MPH 15:	33.33%	14	26.19%	11	0.00%	0	40.48%	17	42
21	MPH 21:	80.95%	34	9.52%	4	0.00%	0	9.52%	4	42
22	MPH 22:	59.52%	25	23.81%	10	4.76%	2	11.90%	5	42

Note:

MPH 12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence. (Policy in Public Health)

MPH 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes. (Policy in Public Health)

MPH 14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations (Policy in Public Health)

MPH 15. Evaluate policies for their impact on public health and health equity. (Policy in Public Health)

MPH 21. Perform effectively in interprofessional teams. (Interprofessional Practice)

MPH 22. Apply systems thinking tools to a public health issue. (System Thinking)

Appendix D. MPH Exit Survey 2022

MPH Exit Survey, Self-Assessment of Competencies, Policy in Public Health, Interprofessional Practice, and Systems Thinking for Spring 2022 MPH Graduates vs. 2021 MPH Graduates (n = 49, April 2022)

Competencies	2022 MPH Exit Survey (n=49, 82% response rate)		2021 MPH Exit Survey (n=34, 75% response rate)	
	n	%	n	%
Policy in Public Health				
1 Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence:				
Not at all Proficient	3	6.1	0	0.0
Somewhat Proficient	9	18.4	6	17.6
Proficient	15	30.6	7	20.6
Above Average Proficiency	11	22.4	14	41.2
Very Proficient	11	22.4	7	20.6
2 Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes:				
Not at all Proficient	2	4.1	0	0.0
Somewhat Proficient	8	16.3	4	11.8
Proficient	17	34.7	7	20.6
Above Average Proficiency	11	22.4	14	41.2
Very Proficient	11	22.4	9	26.5
3 Advocate for political, social, or economic policies and programs that will improve health in diverse populations:				
Not at all Proficient	2	4.1	0	0.0
Somewhat Proficient	10	20.4	5	14.7
Proficient	12	24.5	6	17.6
Above Average Proficiency	14	28.6	12	35.3
Very Proficient	11	22.4	11	32.4
4 Evaluate policies for their impact on public health and health equity:				
Not at all Proficient	3	6.1	0	0.0
Somewhat Proficient	8	16.3	4	11.8
Proficient	11	22.4	5	14.7
Above Average Proficiency	17	34.7	13	38.2
Very Proficient	10	20.4	12	35.3
Interprofessional Practice				
1 Perform effectively in interprofessional teams:				
Somewhat Proficient	1	2.0	0	0.0
Proficient	8	16.3	5	14.7
Above Average Proficiency	18	36.7	9	26.5
Very Proficient	22	44.9	20	58.8
System Thinking				
1 Apply systems thinking tools to a public health issue:				

Not at all Proficient	1	2.0	0	0.0
Somewhat Proficient	6	12.2	0	0.0
Proficient	11	22.4	10	29.4
Above Average Proficiency	17	34.7	11	32.4
Very Proficient	14	28.6	13	38.2
