Dear Marty —

I hope the 2016-2017 school year is off to a great start for you.

When we met last spring I promised to update you on the follow up items from the Graduate Certificate review. As was requested we have drafted a handbook which is attached here. It has been submitted for approval to the chair of the Population Health Sciences Curriculum Committee. We are also updating the learning objectives of the program (they are referred to as competencies here) and once that process is complete we will update the handbook. Those learning objectives will be the foundation for curriculum review and updating of courses and electives, which we do routinely.

A second item that was requested as an analysis of the drop out rate. The committee felt that the cost of the field courses was a cause of drop out, but in talking with students we heard many additional things. Capstone students found the tuition cost to be a barrier at times, and many students cited scheduling problems or their workload to be causes for dropping. We did a more systematic assessment of the drop rate and the results are summarized below. They suggest that, in addition to working harder to create lower cost field experiences in the US and internationally, we need to have more flexible scheduling options, such as more on-line courses and more course offered in short-course formats. We are planning to work on all of these things in 2016-2017 and 2017-2018.

The third suggestion of the committee was that we meet with La Ruth McAfee to explore how our program might be diverse. Now that we have a better understanding of the drop rate, I feel ready to reach out to her to look for additional strategies on diversity. We do have a number of graduates from diverse backgrounds who are willing to be spokespeople for the program, and I am looking forward to taking advantage of any campus initiatives and skills to expand our reach in this way.

Since the review another issues that has come up in relation to the way this program interfaces with the medical curriculum that I would like to discuss with you. As you likely know, a few years ago the first year medical students switched from a graded transcripts to transcripts that only record pass/fail (though it is now changing to a three level system - something like high pass, pass, credit). Students are still graded and know their numerical grade, but their transcripts do not reflect that. For our certificate program to work for medical students they do need to take courses in that first year. Even if it is a graded class, it shows as pass/fail on the transcript. If they are counting a medical school course, there is a numerical grade assigned by the teacher, but it is not communicated on the transcript. We would like your guidance on how to handle these credits in our program.

Best,

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Follow-up Assessment of Causes of Student Attrition
Graduate/Professional and Capstone Certificates in Global Health

The Graduate/Professional and Capstone Certificates in Global Health underwent a decadal review by the Graduate Faculty Executive Committee (GFEC) in the fall of 2015. One area of concern conveyed by the committee was the number of students who did not complete the program. The review committee suggested that the cost of the field experience might be the cause of the drop rate. It is an important goal of the program to make the program financially accessible to all. Capstone Students pay tuition and field experience costs, while graduate and health science students do not accrue additional tuition fees but many do pay for some or all of their field experience.

In order to develop a plan to address the dropout rate comprehensively and effectively, GH Certificate staff reviewed the causes of non-completion. Seventy-seven files of students who did not complete the certificate program from 2006 to 2015 were reviewed. Of these 77, 39 students indicated why they dropped the program:

- **Scheduling problems**: 14 (35%)
- **Graduation before completion**: 7 (18%)
- **Family/moved**: 8 (21%)
- **Academic plans changed**: 7 (18%)
- **Finances**: 1 (3%)
- **Other factors** (*lost proof of completion, courses too basic*): 2 (5%)

In order to further investigate the primary reasons students have been unable to complete the certificate program, 35 additional students who had dropped in the six most recent years were contacted by email with a link to a survey.

Of those students, 9 responded to the survey giving the following reasons (students could choose more than one):

- **Time constraints** (e.g. graduated before completion): 3 (38%)
- **Courses/field experience did not fit into schedule** (e.g. difficulty with primary academic program): 3 (38%)
- **Finances**: 2 (25%)  (*Of those two students, both stated that tuition costs, not the field experience costs, were the issue.*)
- **Other contributing factors** (*beginning an MPH program [2], not being of interest [1], moving [1]*): 5 (63%)

In review of the findings, the most prevalent reasons for not completing the certificate were associated with scheduling issues; students not having enough time within their primary academic program to complete the certificate requirements or certificate courses conflicted with their primary curriculum. Three students listed financial issues as a reason to drop; none of the 3 indicated that the field
experience specifically was prohibitive, so the concern may have been related to tuition as well as field costs. While financial access and equity is always a priority, it appears from these key findings that additional measures beyond funding to cover tuition and field courses may be needed to impact the drop rate. Potential solutions to improve the attrition rate may include adding more online courses, re-evaluating course requirements and making it easier to earn credit during less intense times of year (summer, breaks). We will also continue to develop globally-oriented engagement that can be carried out in a Wisconsin, but working with underserved populations or global health, or by working on health issues from a global perspective that transcends the geographic borders of our state and nation.
December 22, 2015

Professor Jonathan Patz  
Director, Global Health Institute  
University of Wisconsin-Madison  

Sent Electronically

Dear Professor Patz:

As you know, an important part of the University’s ongoing review process is the vetting of graduate programs by the Graduate Faculty Executive Committee (GFEC). When the School of Medicine and Public Health assembled a review committee to conduct a decadal assessment of the Graduate/Professional Certificate and Capstone Certificate in Global Health programs, Professor Cynthia Czajkowski was asked to serve as GFEC’s representative on the committee and was given the responsibility for attending to graduate training issues. Professor Czajkowski led a discussion of the review at the GFEC meeting on November 20, 2015. In this letter, I summarize the committee’s discussion.

The GFEC recognizes the value of the Global Health certificate programs and was impressed by the widespread involvement of faculty from across schools and colleges. In addition, the high levels of enrollment suggest there is a demand for these programs and the review revealed that students are generally satisfied with the certificates.

The value of the programs notwithstanding, the review pointed to several areas of concern. First, the GFEC was concerned by the high level of student attrition. It seems likely that part of the reason for the lack of completion is the cost and logistical challenges for students to participate in the field experience. While the committee understands the value of such field opportunities, if they are a barrier to program completion, this is problematic. The GFEC recommends you consider alternatives to field placements or means of supporting student travel expenses. Second, there seems to be a problem maintaining faculty commitment to teach the courses required for the certificates. Obviously, program viability depends on sufficient faculty participation which will be vital should the program wish to expand to meet student demand. Third, the population of students participating in the programs is not especially diverse, and this is something the Committee believes the program should work to improve. Members of the GFEC believe the program would benefit from working with LaRuth McAfee, Graduate School Assistant Dean for Diversity, Inclusion and Funding to develop strategies to diversify the program’s applicant pool and increase both the number of admitted and enrolled underrepresented students. Finally, all graduate programs must have a student handbook which provides students with information about program requirements and grievance procedures. The Graduate School provides a handbook template online (https://kb.wisc.edu/GSAdminKB/page.php?id=34123).

Dean’s Office

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The concerns raised by the review led the GFEC to request follow-up information from the program’s faculty leadership. To minimize the work required of the program, we ask you to provide updated information on efforts to address the concerns raised by the Committee when you undertake the review of the undergraduate global health program in the 2016-17 academic year.

The concerns of the GFEC notwithstanding, we are grateful for the work you do to provide high quality graduate education. Thank you for your efforts on behalf of our graduate students.

Sincerely,

William J. Karpus
Dean of the Graduate School

Cc: Richard Moss, School of Medicine and Public Health
    Elizabeth Petty, School of Medicine and Public Health
    Andrea Poehling, School of Medicine and Public Health
    Lori DiPrete Brown, Global Health Institute
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