## **Integrative Learning Experience (ILE)**

## Guidelines for Master of Public Health Degree Candidates

## (MPH-generalist and MPH-CHPS)

**Integrative Learning Experience**

MPH students complete an Integrative Learning Experience (ILE) that demonstrates synthesis and integration of public health knowledge in the foundational and concentration-specific competencies. The ILE should be completed in the final year of the student’s program.

**High-quality written product**

The ILE represents a culminating experience that may take many forms. Regardless of form, students must produce a high-quality written product that is appropriate for the student’s educational and professional objectives. The written product must show evidence of substantive, logically flowing writing. Written products may include the following: program evaluation report, training manual, policy statement, legislative testimony with accompanying supporting research, etc. A poster is not an acceptable written format for the ILE. An ILE may be the result of a data‐driven research project, the result of an Applied Practice Experience (APE) project which may be either data‐driven or driven by policy/administration recommendations, or an independent project developed in consultation with a faculty member based on shared academic and professional interests. Ideally the written product is developed and delivered in a manner that is useful to external stakeholders, such as non-profit or governmental organizations.

**Format of the written product**

Students will consult with their ILE academic advisor for guidance on the format of the written product. Overall, the format should be determined by the requirements of the specific product and take into account the needs of the end user. For example, a training manual should be structured to facilitate new learning. Citations formatted correctly for the type of product and setting (such as APA or AMA styles) will often accompany the ILE written product. Written products must include a minimum of 500 words. In general, written products will have 3,000-5,000 words.

**Selection of the ILE academic advisor and reader/grader**

The ILE is envisioned as an opportunity for the student to receive direct mentoring while in the public health program. As such, one faculty member will serve as the primary academic advisor for the ILE. This faculty member can be either a core faculty member in the student’s area of concentration or an affiliated faculty member, giving the student a wide range of potential exposure to professional activities across faculty supporting the public health programs at the University of Montana. The ILE academic advisor may be, but does not need to be, the student’s primary advisor. The ILE academic advisor works closely with the student to develop an ILE proposal. One additional faculty member will serve as a reader and grader of the ILE. The faculty reader/grader will be selected by the student in consultation with the ILE academic advisor and may be any faculty member at the University of Montana with the appropriate expertise to evaluate the written product.

**Selection of competencies and evidence of synthesis**

Students in consultation with their ILE academic advisor select foundational and concentration-specific competencies appropriate to the student’s educational and professional goals.

In the ILE students demonstrate the application of more than one competency within the context of a single project. Therefore, students select four or more competencies and demonstrates how the ILE facilitates the integration of the selected competencies through the written product. At least four competencies must be selected. The selected competencies must include at least one foundational competency and at least one concentration-specific competency. Foundational and concentration-specific competencies can be found on the program website and below.

**Foundational Competencies**

1. Apply epidemiological methods to the breadth of settings and situations in public health practice
2. Select quantitative and qualitative data collection methods appropriate for a given public health context
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software as appropriate
4. Interpret results of data analysis for public health research, policy or practice
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels
7. Assess population needs, assets and capacities that affect communities' health
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
9. Design a population-based policy, program, project or intervention
10. Explain basic principles and tools of budget and resource management
11. Select methods to evaluate public health programs
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes
14. Advocate for political, social and economic policies and programs that will improve health in diverse populations
15. Evaluate policies for their impact on public health and health equity
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
17. Apply negotiation and mediation skills to address organizational or community challenges
18. Select communication strategies for different audiences and sectors
19. Communicate audience-appropriate public health content, both in writing and through oral presentation
20. Describe the importance of cultural competence in communicating public health content
21. Perform effectively on interprofessional teams
22. Apply systems thinking tools to a public health issue

**Generalist Concentration-specific Competencies**

1. Gather, integrate and analyze descriptive health data from rural or frontier settings.
2. Identify the common demographic characteristics of rural or frontier areas and their implications for provision of public health services.
3. Explain the challenges associated with provision of environmental health services in the context of rural or frontier areas.
4. Demonstrate basic understanding and respect for a multiplicity of values, believes, traditions and experiences and feelings of satisfaction or distress stemming from social determinants in rural or frontier settings.
5. Utilize basic statistical skills to reason about problems associated with the populations of low density and widespread geographic dispersion.

**Community Health and Prevention Sciences-specific Competencies**

Area I: Assess Needs, Resources, and Capacity for Health Education/Promotion

Area II: Plan Health Education/Promotion

Area III: Implement Health Education/Promotion

Area IV: Conduct Evaluation and Research Related to Health Education/Promotion

Area V: Administer and Manage Health Education/Promotion

Area VI: Serve as a Health Education/Promotion Resource Person

Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

For more information on these Community Health and Prevention Sciences-specific Competencies, please visit the National Commission for Health Education Credentialing website: <https://www.nchec.org/responsibilities-and-competencies>

**ILE Proposal form**

The proposal form requires the student and the ILE academic advisor to detail the project’s approach, associated public health foundational and concentration‐specific competencies, and evidence of synthesis of competencies. The proposal form is located on the program website and should be completed prior to the start of the ILE.

**Example: Competencies and evidence of synthesis**

The table below provides an example of competencies that are put into practice jointly and result in a written document.

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| --- | --- |
| Competencies  (foundational and concentration-specific) | Evidence of synthesis |
| 4. Interpret results of data analysis for public health research, policy or practice | I will complete one major section of a rural county’s community health improvement plan. This will include analyzing data the department has already collected, interpreting the findings, designing one or more interventions to address the identified health problem, and suggesting appropriate evaluation methods. I will synthesize and summarize the findings in written form suitable for inclusion in the community health improvement plan. Data tables and references will be included. |
| 9. Design a population-based policy, program, project, or intervention |
| 10. Select methods to evaluate public health programs |
| Generalist concentration-specific competency 5. Use basic statistical skills to reason about problems associated with the populations of low density and widespread geographic dispersion |

**Final written product and grading**

The student will submit the final written product to the ILE academic advisor and the reader/grader. The ILE academic advisor and the reader/grader complete a grading rubric to evaluate the ILE with regard to the student’s demonstration of the selected competencies. After making any required changes, the student must submit a copy of their final, approved IPE written product to the SPCHS department office, where it will be kept on file. It is the student’s responsibility to be aware of all graduation and ILE deadlines.

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