



Office of the President
University of Maryland, Baltimore County
1000 Hilltop Circle, Baltimore, MD 21250

June 4, 2019

James D. Fielder, Jr. Ph.D.
Maryland Higher Education Commission
6 North Liberty Street
Baltimore, MD 21201

Phone: 410-455-2274
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Dear Secretary Fielder:

Associate Director of Collegiate Affairs Karen King-Sheridan requested that UMBC revise and resubmit two new program proposals. The two revised proposals--for a UDC in Social Dimensions of Health and an LDC in Allied Health Preparatory Studies--are attached for review.

Each certificate was designed to serve students already enrolled at UMBC, and neither is expected to generate new undergraduate enrollments. The LDC gives students an affiliation and awards them a credential for work they are already pursuing at UMBC, in most cases prior to subsequent transfer to an allied health program at another institution. The UDC gives students from a variety of majors the opportunity to gain knowledge and develop marketable skills in a specialized dimension of the health field, in preparation for their career or graduate studies. For each proposed new program, faculty are already teaching the courses in the curriculum, and there is capacity for additional students. Also, for each program UMBC is reallocating the small amount of additional funding needed to launch and operate the new program successfully.

Ms. King-Sheridan emphasized the need for UMBC to provide additional information on resources--in the table and the narrative--for each proposal, including, per COMAR13B.02.03.14 **Finances**, "sufficient detail to permit the Secretary to make a judgment on the adequacy of resources." To that end, each proposal now includes a conservative estimate on enrollment projections. In addition, we made another good faith effort to identify any possible increase in tuition and fee revenue for UMBC that might accrue from implementation of each certificate. However, even using the very conservative enrollment projections we developed, the resulting table of resources painted a false picture of UMBC generating additional tuition revenue by offering these two new certificates, when we have no reason to believe that will happen in reality, because the students who will pursue these certificates are already enrolled and paying tuition at UMBC. Therefore the budget tables in the attached proposal show no added tuition and fee revenue being generated by these two certificates. UMBC has done a thorough assessment of the resources needed to offer these programs. We affirm that the resources needed by the programs are reflected in the reallocated funds included in the revised budget tables and the revised narratives for each attached proposal, and that these budgets and their accompanying narratives provide you with "sufficient detail to permit the Secretary to make a judgment on the adequacy of resources."

Thank you very much for your careful review of these proposals.

Sincerely,

Freeman A. Hrabowski, III

President

cc: Dr. Antonio Moreira



Cover Sheet for In-State Institutions New Program or Substantial Modification to Existing Program

Institution Submitting Proposal **UMBC**

Each action below requires a separate proposal and cover sheet.

- New Academic Program
- New Area of Concentration
- New Degree Level Approval
- New Stand-Alone Certificate
- Off Campus Program
- Substantial Change to a Degree Program
- Substantial Change to an Area of Concentration
- Substantial Change to a Certificate Program
- Cooperative Degree Program
- Offer Program at Regional Higher Education Center

Payment Yes
Submitted: No

Payment R*STARS
Type: Check

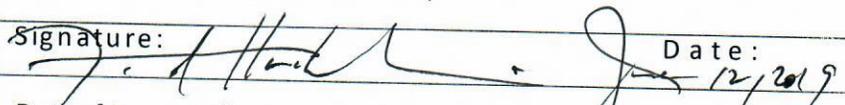
Date Submitted:

Department Proposing Program	Sociology, Anthropology, and Health Administration & Policy
Degree Level and Degree Type	Upper Division Certificate
Title of Proposed Program	Social Dimensions of Health

Total Number of Credits

Suggested Codes	HEGIS: _____ I CIP: 51.2212
Program Modality	<input checked="" type="radio"/> On-campus <input type="radio"/> Distance Education (<i>fully online</i>) <input type="radio"/> Both
Program Resources	<input checked="" type="radio"/> Using Existing Resources <input type="radio"/> Requiring New Resources
Projected Implementation Date	<input checked="" type="radio"/> Fall <input type="radio"/> Spring <input type="radio"/> Summer Year: 2020
Provide Link to Most Recent Academic Catalog	URL: http://catalog.umbc.edu/

Preferred Contact for this Proposal	Name: Beth Wells
	Title: Assistant Vice Provost for Academic Affairs
	Phone: (410) 455-8907
	Email: bwells@umbc.edu

President/Chief Executive	Type Name: Freeman A. Hrabowski, III
	Signature:  Date: <u>June 12, 2019</u>
	Date of Approval/Endorsement by Governing Board:

Revised 6/13/18

A. Centrality to institutional mission statement and planning priorities:

The Social Dimensions of Health (SDH) upper division certificate provides undergraduate students with a structured curriculum that addresses the social forces impacting health and wellbeing across populations. Conceptualized in terms of health disparities, health inequities, and the social determinants of health, having a trained SDH workforce is of critical local, regional, and national importance. We anticipate the SDH certificate will appeal to current UMBC students from across a wide variety of disciplines, including those in pre-professional allied health programs, Social Work, and the social sciences, including Sociology, Anthropology, Health Administration and Policy, and Psychology. The certificate is designed as a supplemental credential to a primary major for existing UMBC students. It is not anticipated to result in new student enrollments for UMBC.

The educational objective of the SDH upper division certificate is to build students' competency in conceptualizing and analyzing health with relevant sociocultural perspectives and theories. Students who obtain this certificate will gain greater insight into how age, race/ethnicity, gender, socioeconomic status, and geographic region, among other variables, critically impact health behaviors, health status, and disease vulnerability over the life course. Currently, UMBC does not offer a structured undergraduate curriculum in this area and there is no formal system of advising students who are interested in the topic. In addition, students who take the initiative to complete the relevant set of courses do not receive any formal recognition for their competence. Thus, the certificate will provide a mechanism for students to complete a formal curriculum, obtain advising on the process and subject area, and document their competence.

The proposed program supports the institution's mission and strategic goals. With respect to UMBC's mission of *preparing students for graduate and professional study or the workforce*, with particular emphasis on the *sciences, human services and public policy*, this upper division certificate first directly addresses the MCAT's new section on the sociocultural factors that influence behavior and behavior change. Second, this certificate strengthens students' preparation for graduate school or for joining the health services or health policy workforce. All of the major U.S. government & non-governmental health agencies, including the Centers for Disease Control and Prevention, National Institutes of Health, and Agency for Healthcare Research & Quality, as well as the World Health Organization, have placed the social dimensions of health in the forefront of their programming. The certificate also ties directly to UMBC's vision of supporting *social justice* with its goal of enhancing students' knowledge of strategies for promoting health equity.

The SDH upper division certificate further supports the University's strategic goal to *increase national prominence in selected multidisciplinary areas* including *health*. Indeed, UMBC's strategic plan specifies health as a multi-disciplinary strategic goal in the area of collective impact in research, scholarship, and creative achievement. The proposed multidisciplinary certificate builds on our department's expertise in Medical Sociology, Medical Anthropology, Public Health, Health Administration, Health Policy, and Gerontology. The certificate similarly aligns with CAHSS' multi-disciplinary efforts in the area of health equity.

Because the proposed certificate closely aligns with the Department of Sociology, Anthropology, and Health Administration and Policy's (SAHAP) current curriculum, minimal funds will be needed for the first five years of implementation. All of the courses in the certificate are offered regularly, and most have capacity for additional students. The exception tends to be HAPP 354. If demand for courses exceeds capacity, UMBC pressure enrollment funds will be requested for additional sections. Certificate advising will be provided by the Associate Chair, who will serve as the Certificate Director, and the Department's Academic Adviser, who will incorporate it into her current advising load. Promotional materials will be developed as part of the Department's ongoing promotional efforts.

UMBC is committed to the ongoing administrative, financial, and technical support of the SDH upper division certificate, as well as enrolled students' certificate completion. The certificate will be housed in SAHAP, the third largest Department in the College of Arts, Humanities, and Social Sciences, as measured by head count enrollments.

B. Critical and compelling regional or statewide need as identified in the State Plan:

The SDH upper division certificate helps to address Maryland's critical need for the advancement of knowledge and training in the areas of health, diversity, and cultural competence. The 2017-2021 Maryland State Plan for Postsecondary Education emphasizes the creation of a "competitive workforce [that] can work with diverse people, understand emerging technologies, communicate clearly, and find effective answers to questions that have never been asked before" (Maryland Higher Education Commission [MHEC], n.d.a, p. 66). These goals are echoed in the University System of Maryland (USM) 2020 Strategic Plan and the 2018 Plan Update, which emphasizes "equity, diversity, inclusion, and civic engagement" (<https://www.usmd.edu/10yrplan>). The USM 2020 Plan further establishes that "the USM will strive to produce graduates who are knowledgeable of and sensitive to the cultural, environmental, and technological issues facing a global economy" (USM 2010, p. 4).

Core to these competences is knowledge of the ways racial, ethnic, and socioeconomic status inform health. Thus, the SDH certificate directly addresses State and System goals by deepening students' knowledge of the evidence regarding the relationships among age, race/ethnicity, gender, socioeconomic status, and region and disease vulnerability, health behavior, and health services. The certificate then enhances students' understanding of the relevant social theories, policies, and interventions surrounding health inequities.

The 2017-2021 Maryland State Plan for Postsecondary Education also establishes 1) access, 2) success, and 3) innovation as priorities for the state's post-secondary education system. The plan particularly encourages the use of innovative certificates and stacking credits to minimize financial and time costs. The SDH certificate courses are highly "stackable" in that they also can serve as electives for the undergraduate majors in Anthropology, Health Administration and Policy, and Sociology. In addition, three of the certificate's courses (SOCY 310, 315 and 359) carry general education social science credit. Two of the courses (SOCY 451 and ANTH 312) carry Writing Intensive credit. Program materials and advising sessions will be used to ensure students are aware of these opportunities.

The USM plan theme 2 further suggests the university system needs to include a focus on "the health and quality of life of its citizens" as a means of maintaining the state's economic competitiveness (USM 2010, p. 13). Health disparities undermine states' economic well-being, both through excess health care costs and lost productivity (Ayanian 2015). The SDH certificate contributes to this goal by helping to train the next generation of the workforce to have a clearer understanding of population health and the theories and evidence base surrounding health disparities. The plan's theme 2.d.2 additionally specifies the goal to "boost training and research in such vital health-care fields as medicine, nursing, pharmacy, allied health, public health, and the emerging area of cybersecurity" (USM 2010, p. 17). The certificate contributes to this goal by providing foundational health disparities training to pre-medical and allied health students, allowing them to function more effectively in their future health professions. As noted above, the Medical College Admission Test (MCAT) now includes sections on the social and behavioral influences on health to ensure students have this knowledge base prior to entering medical school.

Finally, the creation of the certificate signals UMBC's continued commitment to addressing issues that are highly relevant to many underrepresented students. The certificate provides a unique structure for systematically exploring the social theories and policies surrounding ethnic/racial health disparities,

a major societal issue. Completion of the SDH certificate will distinguish students from their peers and make them more competitive as potential employees as well as prospective students of health professional/allied health graduate programs.

C. Quantifiable & reliable evidence of market supply & demand in the region and state:

The SDH upper division certificate is designed to better prepare students for employment across the health care system, which faces ongoing challenges related to the administration, financing, and delivery of health care. Students who complete this certificate in connection with their undergraduate bachelor's degree will be prepared to work in entry level community health, social and human service, research, and administration positions across the health care sector. State and national data on the education, health, and business sectors show considerable job market strength and demand for graduates who are prepared to engage in this work. Indeed, Healthy People 2020 establishes that developing programs and policies to more effectively address the social determinants of health and the nation's significant health disparities is a national priority (<https://www.healthypeople.gov/>).

Briefly, Maryland state occupational projections for 2017-2019 indicate strong demand in several relevant job categories including medical and health services manager (+3.7%), social and community service managers (+2.2%), social and human service assistants (+2.1%), and life, physical, and social science occupations (+1.7%) (http://www.dllr.state.md.us/lmi/iandoproj_sh01i/).

At the national level, the Bureau of Labor Statistics' employment projections for 2016-2026 are even more robust. Employment in healthcare practitioner and technical occupations is expected to grow 15%, while the life, physical, and social science occupations are anticipated to expand 9.6% (<https://www.bls.gov/emp/tables/emp-by-major-occupational-group.htm>). Specific relevant job categories that will be experiencing strong growth nationally are health educators (+14.5%), community health workers(+18.1%), medical scientists(+13.4%) and survey researchers (+2.5%) (<https://data.bls.gov/projections/occupationProj>). SDH certificate holders will have knowledge and skill sets that are directly applicable to employment in these sectors.

Beyond these labor projections, multiple large federal agencies located in this region, including the Centers for Medicare and Medicaid Services and the Social Security Administration, are established employers of UMBC graduates. Our graduates also compete for staff support research positions at the University of Maryland, Baltimore and Johns Hopkins University medical campuses. The SDH will provide UMBC graduates with additional relevant, marketable health-related knowledge and skills to fulfill employer needs.

The current and projected supply of prospective graduates comes from SAHAP's majors (n=460) and minors (n=179) as well from the pool of undergraduate majors in the Biological Sciences (n=1,692), Emergency Health Services (n=81), Psychology (n=1086), Social Work (n=407), and Management of Aging Studies (n=25), among other programs (<https://oir.umbc.edu/databook/student-term-headcount-enrollment/>).

D. Reasonableness of program duplication:

The SDH upper division certificate is designed as a supplemental credential that documents students' competency in the social dimensions of health. It is intended to serve current UMBC students who have already selected a primary major, and it is not anticipated to result in new enrollments at UMBC. Our review of the online program descriptions of regional institutions identified no similar upper division certificate programs that are grounded in the social sciences. Existing health-related undergraduate programs are in the form of academic majors and often include math or biological science requirements.

Briefly, Bowie State University has no comparable program. Coppin State University offers a health information management major, training students for health IT positions, and an interdisciplinary BS in health science with core courses in anatomy, pathophysiology, pharmacology, and statistics. These areas are not covered in the proposed SDH certificate.

Morgan State University offers a BS in Health Education with three concentrations: Environmental Health ("a scientific orientation to the field of health"), Health Administration ("a business approach to health"), and Health Promotion and Education ("a community and learning approach to health") (http://www.morgan.edu/school_of_education_and_urban_studies/departments/health_physical_education_recreation_dance/degrees/majors.html). This BS degree requires courses in the natural sciences, management, and health education, respectively. The SDH certificate's focus on Sociological and Anthropological theories does not overlap with the BS in Health Education's concentrations.

Likewise, Towson University's Health Promotion, Wellness, Prevention, and Community Health Education track of the Allied Health major is oriented towards health care practice and involves a range of allied health courses that are beyond the scope of the SDH certificate.

The University of Baltimore offers a BS in health systems management that focuses on business and management in health care settings, an area not covered in the SDH Certificate. Similarly, the University of Maryland, College Park's (UMCP) BS in Community Health combines courses in the natural sciences and public health, requirements that are outside the focus of the SDH certificate

In sum, our analysis of regional institutions suggests that the proposed upper division certificate addresses an important credential gap. The programs described above provide broad training in their respective health-related areas in contrast to the SDH certificate, which is distinctively grounded in the social sciences, particularly Sociology and Anthropology. Furthermore, we are proposing a certificate rather than a free-standing major, providing students with a unique opportunity to explore social science theories and methods related to health and disease as a supplement to their primary major. This course of study enhances students' preparation for careers or graduate school in a range of disciplines, from Medicine to Public Health to Sociology or Anthropology.

E. Relevance to high-demand programs at Historically Black Institutions (HBIs)

We anticipate the proposed Social Dimensions of Health certificate may expand students' interest in pursuing graduate training at Morgan State University's MPH program, which is focused on the public health of urban minority and underserved communities. We will ensure students are informed of the opportunity for advanced study at Morgan State University during advising and we will post the MPH program materials within the Department. We are interested in exploring affiliation agreements that would facilitate students' movement into the MPH program after graduation.

F. Relevance to the identity of Historically Black Institutions (HBIs)

As noted above, no similar programs exist at Bowie State University and the certificate is not anticipated to impact Bowie's institutional identity. Similarly, with the SDH certificate's narrow focus as a social science supplement to a primary major, the certificate will not affect the demand for Coppin State University's majors in health information management and health science. This is also the case with respect to Morgan State University's multidisciplinary BS in Health Education.

Likewise, the University of Maryland Eastern Shore (UMES) is not likely to be impacted by the proposed upper division certificate. The closest allied health program at UMES, the Human Ecology Department, provides very distinct programming in Family and Consumer Sciences and Food and Nutrition. The proposed certificate does not overlap with these foci.

G. Adequacy of curriculum design and delivery to related learning outcomes:

The SDH upper division certificate entails a total of 5 courses/15 courses credits (see Table I: Social Dimensions of Health List of Courses). Students complete three required courses (9 credits) that provide foundational knowledge of the sociocultural forces informing health and illness experiences and the structure and operation of health care and public health systems. Students complete two electives from selected Sociology, Anthropology, or Health Administration and Policy courses that provide additional training on the social dimensions of health and illness in a substantive area or using a distinct disciplinary lens. The Department's Associate Chair will serve in the capacity of Director of the certificate, overseeing the implementation and running of the program.

Table I. Social Dimensions of Health List of Courses

Certificate Requirements - 3 courses (9 credits) required	Credits
<i>SOCY 310 Social Stratification and Inequality</i> examines the divisions and class structures within American society. This includes how race, gender, and ethnic identity intersect with class structures, and how political structures shape social stratification and inequality.	3
<i>SOCY 351 Sociology of Health, Illness and Medicine</i> explores how health, illness, and the field of medicine are shaped by social and cultural forces. Special attention is given to the role of persistent sociocultural inequalities in shaping health and health care.	3
<i>SOCYIHAPP 354 Social Bases of Public and Community Health</i> investigates the structure of community and public health services. Students learn how social and biological forces intersect to create public health challenges and analyze public health policies and practices.	3
Elective courses - 2 courses (6 credits) required	
<i>ANTH 312 - Medical Anthropology</i> examines how people across places and positions experience illness and healing and the influence of sociocultural, political-economic, and technological factors. This course also explores the research and policy translation process.	3
<i>ANTH 424 Psychological Anthropology</i> examines how the social and cultural environment shape who people are, what they want, what they do, and how they think and feel, as well as how people make use of their sociocultural worlds in ways that are psychologically satisfying and meaningful.	3
<i>HAPP 350 Public Health Ethics</i> explores the field of public health ethics, including how public health ethics and law/policy can work together to address ethical challenges and decision making.	3
<i>HAPP 380 - Global Issues in Health and Disease</i> introduces students to the major concepts in global health. Students consider global health challenges through frameworks of social-ecological determinants, human rights, equity, and social justice.	3
<i>SOCY/HAPP 420 Epidemiology</i> examines the history of epidemiology as a science and its application in the study of acute and chronic disease. This includes epidemiological research designs and how to assess potential causal associations and effects.	3
<i>SOCY 332/GWST 332 Human Sexuality in Sociological Perspective</i> explores key concepts, theories, and ideologies in human sexuality. The course also examines the interplay between race, class, and gender stratification and sexual orientation, sexual violence, and STDs.	3
<i>SOCY 359/EHS 345 Death and Dying</i> employs a broad multidisciplinary approach to examine past and present death attitudes and behavior. Topics include death throughout the life cycle, suicide, euthanasia, bereavement, and the impact of culture and religion on death perspectives.	3

<i>SOCY 374 Drugs and Alcohol in Society</i> examines key terms and theories surrounding drug and alcohol use in societies past and present, including models of addiction, characteristics of drug substances, their histories, and the politics of prevention and treatment.	3
<i>SOCY 451 Sociology of Health and Illness Behavior</i> examines the social contexts of illness and medical care. Students investigate the illness experience, the social-historical development of the medical system, and current ethical issues and debates in medicine.	3
<i>SOCY 458 Sociology of Mental Health and Illness</i> explores theories of mental illness and psychological distress. This includes the social factors that affect mental health and illness and the complicated relationship between treatment and the criminal justice system.	3

The educational objectives are to enhance students' 1) foundational understanding of the sociocultural forces underlying the health and illness experiences of individuals and groups; 2) competency in employing sociocultural theories and data to analyze health issues; and 3) proficiency in identifying how sociocultural variables intersect in health care delivery, public health practice, and health policy. The specific student learning outcomes include 1) knowledge of the major global trends in health, health inequities, and efforts to promote health equity; 2) understanding of the leading sociocultural theories and data explaining variation in health, illness, and health services; 3) ability to recognize the sociocultural forces relevant to a proposed health policy, health care delivery system, or public health program; and 4) understanding of how to analyze health, illness, and health equity issues using a sociocultural lens. These educational objectives and specific student learning outcomes are designed to enhance graduates' preparation for employment or graduate school in medicine, allied health, or social science fields.

Under SAHAP's current Student Assessment Plan all courses are routinely evaluated to ensure students are meeting course-specific learning outcomes and program learning objectives. Each instructor is charged with developing clear learning objectives and outcomes. The learning outcome assessment procedures vary by course and generally include evaluation of specific exam questions, student papers, or final projects, using a carefully constructed rubric. The Associate Chair/Certificate Director will evaluate learning assessment data on the same timeline as the undergraduate major assessment to ensure the program level learning outcomes are being met.

No specialized accreditation for the proposed certificate exists. The SDH certificate also does not require other institutional contracts. Certificate management and courses will be housed within SAHAP.

The courses included in the certificate provide several opportunities for students to simultaneously complete general education requirements. Socy 310, a core requirement, will fulfill one Social Science GEP. Students may complete a second Social Science GEP through Socy 359, an elective. In addition, both Anth 312 and Socy 451 are Writing Intensive. Finally, all 15 credits of the certificate apply towards the upper level graduation requirement.

Students will be provided clear, complete, and timely information on the curriculum, course, and degree requirements. Curriculum and degree requirements are provided on the SAHAP website and in the UMBC catalog. Student progress in the certificate will be tracked in UMBC's "degree audit" system. The Department also makes available a paper "checksheet" for each program, allowing students an option for non-electronic tracking of their progress. The Department follows the Faculty Development Center's recommendations for course syllabi, which ensures that students have a clear understanding of course requirements. The Department also maintains electronic copies of previous course syllabi that can provide prospective students with an understanding of course expectations. In addition, all advertising, recruiting, and admissions materials will clearly and accurately describe the

focus and requirements of the certificate. We will provide this material on our website, Department bulletin boards, the University Catalog, and admissions materials.

H. Adequacy of Articulation

No articulation agreements are associated with this certificate.

I. Adequacy of faculty resources

Eight of SAHAP's full time faculty, including four with tenure and four who are tenure track will provide courses towards the certificate. Table 2 provides the faculty degree training and courses taught. The T/TT faculty actively conduct research related to the social dimensions of health across the life course. Three long-time adjunct faculty teach two electives.

Ongoing pedagogy training is provided by UMBC's Faculty Development Center (FDC). The SDH faculty regularly participate in FDC programs, including year-long faculty learning communities, workshops examining best practice approaches, Scholarship of Teaching & Learning Book Groups, and the Provost's Teaching and Learning Symposium. SAHAP also schedules workshops with appropriate information technology offices to provide faculty and staff with training on key learning management tools, including Blackboard (the current learning management system), Box, and Google Drive. A SAHAP faculty member also has agreed to serve as a resident expert on recent Blackboard upgrades, having piloted some of the changes in her class. Finally, the SDH Certificate does not include a distance education program; training in best practices for distance education is not needed.

Table 2: Faculty Resources

Instructor, terminal degree, & field	Title	Courses Contributing
Full time Faculty		
Jennifer Callaghan-Korn, PhD, International Health	Assistant Professor	HAPP 380 Global Issues in Health and Disease
Bambi Chapin, PhD, Cultural Anthropology	Associate Professor	ANTH 312 Medical Anthropology ANTH 424 Psychological Anthropology
Sarah Chard, PhD, Medical Anthropology	Associate Professor	ANTH 312 Medical Anthropology
Henderson, Loren, PhD, Sociology	Assistant Professor	SOCY 310 Social Stratification and Inequality SOCY 332 Human Sexuality in Sociological Perspective
Andrea Kalfoglou, PhD, Public Health	Associate Professor	HAPP/SOCY 354 Social Bases of Public and Community Health HAPP 350 Public Health Ethics
John Schumacher, PhD, Medical Sociology	Associate Professor	SOCY 351 Sociology of Health, Illness and Medicine SOCY 451 Sociology of Health and Illness Behavior
Dena Smith, Ph.D., Sociology	Assistant Professor	SOCY 351 Sociology of Health, Illness and Medicine SOCY 451 Sociology of Health and Illness Behavior SOCY 458 Sociology of Mental Health and Illness
Trevitt, Jamie, PhD, Public Health	Assistant Professor	HAPP/SOCY 420 Epidemiology
Adjunct/Part time faculty		
Kim DeMichele, PhD, Gerontology	Adjunct Lecturer	SOCY 359/EHS 345 Death and Dying

Kate Hemmis, MA, Applied Sociology	Adjunct Lecturer	SOCY 374 Drugs and Alcohol in Society
Margaret Knisley, MA, Applied Sociology	Adjunct Lecturer	SOCY 374 Drugs and Alcohol in Society

J. Adequacy of library resources

The SDH brings together existing SAHAP faculty specializations and coursework. Much of SAHAP's annual library budget is dedicated to maintaining library resources in this area and SAHAP will be attentive to continuing this practice. The President assures that appropriate library resources are available to support the needs of this program.

K. Adequacy of physical facilities, infrastructure and instructional equipment

No new physical facilities, infrastructure, or instructional equipment are needed for this program as the certificate builds on existing research foci and courses in SAHAP. The President assures that appropriate physical facilities, infrastructure, and instructional equipment are available to support the needs of this program.

L. Resources and Expenditures

The President assures that no new general funds from the State are required. The SDH certificate builds on existing curriculum and faculty research areas in SAHAP. We do not anticipate that the certificate will draw significant numbers of new students to UMBC, as it is a credential designed to supplement a primary major. Thus, no added tuition or revenue funds can be attributed to this program, so none are shown in the budget. Estimates on the number of existing students projected to pursue this certificate are conservative. Because all the certificate's courses are routinely offered and generally have capacity for additional students, we do not anticipate adding sections during the first years of the program. If additional sections are needed, we will apply for UMBC pressure enrollment funding.

Since the program will not add resources to UMBC, resources to support the minimal costs of the SDH certificate during the first five years will come from the reallocation of funds within the Department (Table 3). This includes a reallocation of Department-supported administrative staff time for program support (5% time) and, if needed, funds from the existing GA budget to support a GA grader who will provide grading assistance due to small increases in course enrollment (Table 4).

M. Adequacy of provisions for evaluation of program

All courses are routinely evaluated per SAHAP's Student Assessment Plan to ensure students are meeting course-specific learning outcomes and program learning objectives. Each instructor is charged with developing clear learning objectives and outcomes. The learning outcome assessment procedures vary by course and generally include evaluation of specific exam questions, student papers, or final projects, using a carefully constructed rubric. Program-level assessments, to include the SDH once it is approved, occur biennially and look across courses to identify consistent strengths and gaps in students' learning, student retention, student & faculty satisfaction, and cost-effectiveness.

N. Consistency with the State's minority student achievement goals

UMBC's response to USM Guidelines for Cultural Diversity include the goals "to ensure access to educational and employment opportunities for a diverse, student, faculty, and staff and community" (Goal 1), "to provide a culture of safety, inclusion and respect" (Goal 3) and "to encourage and support individual development and advancement" (Goal 4). The proposed SDH upper division certificate contributes directly to these goals by 1) providing an educational curriculum that directly

examines how health and social difference intersect; 2) allowing students to obtain formal credentials indicating their expertise in this area; 3) creating classroom environments that train students how to respectfully discuss these challenging topics, which will contribute to UMBC's broader culture of inclusion and respect; and 4) providing an alternative academic home for UMBC diverse student body. SAHAP's majors currently are 74% non-majority. Non-majority students often are attracted to our department's majors because of the focus on issues of culture, race, social stratification, and health. Through the certificate additional non-majority students will have a means to identify SAHAP as a supportive academic home.

O. Relationship to low productivity programs identified by the Commission:

The SDH upper division certificate has no direct relationship to a low productivity program.

P. Adequacy of Distance Education Programs

The SDH upper division certificate is not a distance education program.

References:

Ayanian, John (October 1, 2015). The Costs of Racial Disparities in Health Care. Harvard Business Review, retrieved from: <https://hbr.org/2015/10/the-costs-of-racial-disparities-in-health-care>.

Maryland Higher Education Commission (MHEC) (n.d.). 2017-2021 State Plan for Postsecondary Education: Increasing Student Success with Less Debt, retrieved from <http://www.mhec.state.md.us/About/Pages/2017StatePlanforPostsecondaryEducation.aspx>.

University System of Maryland Board of Regents (USM) (2010). Powering Maryland Forward: USM's 2020 Plan for More Degrees, A Stronger Innovation Economy, A Higher Quality of Life, retrieved from: <http://www.usmd.edu/10yrplan/USM2020.pdf>.

**TABLE 3:
RESOURCES**

Resources Categories	(Year 1)	(Year 2)	(Year 3)	(Year 4)	(Year 5)
1. Reallocated Funds ¹	2,660	3,740	3,822	3,907	3,994
2. Tuition/Fee Revenue (c + g) ²	0	0	0	0	0
a. #F.T. Students	5	10	15	20	25
b. Annual Tuition/Fee Rate (3% increase per year)	0	0	0	0	0
c. Annual Full Time Revenue (a x b)	0	0	0	0	0
d. # Part Time Students	0	0	0	0	0
e. Credit Hour Rate (3% increase per year)	0	0	0	0	0
f. Annual Credit Hours	30	60	90	120	150
g. Total Part Time Revenue (d x e x f)	0	0	0	0	0
3. Grants, Contracts, & Other External Sources	0	0	0	0	0
4. Other Sources	0	0	0	0	0
TOTAL (Add 1 - 4)	2,660	3,740	3,822	3,907	3,994

¹ Reallocated funds involve a reallocation of department-supported administrative staff time and a reallocation of existing GA funds.

² There is no anticipated tuition and fee revenue attributable to this certificate, because the students expected to pursue this credential are existing UMBC students who are already paying tuition and may already be enrolling in the courses in this certificate. This certificate is designed specifically for students already attending UMBC, to provide an academic pathway that entails developing specialized knowledge and skills and earning a credential for their work. If students already attending UMBC choose to pursue this credential, no added tuition or fee revenue to UMBC will result. This is why we have reallocated funds from other sources to pay the minimal added costs of offering the certificate.

TABLE 4: EXPENDITURES

Expenditure Categories	(Year 1)	(Year 2)	(Year 3)	(Year 4)	(Year 5)
1. Total Faculty Expenses [1a x (1b + 1c)]	0	0	0	0	0
1a. # FTE	0	0	0	0	0
1b. Total Salary	0	0	0	0	0
1c. Total Benefits	0	0	0	0	0
2. Total Administrative Staff Expenses ¹ pa x (2b + 2c)]	2,660	2,740	2,822	2,907	2,994
2a. # FTE	.05	.05	.05	.05	.05
2b. Total Salary (3% annual increase)	40,000	41,200	42,436	43,709	45,020
2c. Total Benefits (33%)	13,200	13,596	14,004	14,424	14,857
3. Total Support Staff Expenses [3a x (3b + 3c)]	0	0	0	0	0
3a. # FTE	0	0	0	0	0
3b. Total Salary	0	0	0	0	0
3c. Total Benefits	0	0	0	0	0
4. Equipment	0	0	0	0	0
5. Library	0	0	0	0	0
6. New or Renovated Space	0	0	0	0	0
7. Other Expenses (GA grader to support increased enrollments of single sections) ²	0	1000	1000	1000	1000
TOTAL (Add 1 - 7)	2,660	3,740	3,822	3,907	3,994

¹The Department will reallocate department-funded administrative staff time to provide administrative support to the certificate during the first five years.

²The Department will allocate funds from the existing GA budget to support a GA grader, which will be supplemented by Department Revolving Account funds if necessary.