University of Washington School of Public Health

Course Waiver Student Checklist

for Courses Covering CEPH Competencies

MPH—HSPOP: Community Oriented Public Health Practice

STUDENTS ARE REQUIRED to ensure that all competencies noted below are accounted for to waive an applicable course. If even one from the list below cannot be shown to have been included in prior course work, then a waiver cannot be granted for that course, and the required course must be completed.

All MPH students are required to ensure that the 12 Foundational Public Health Knowledge Competencies, the 22 MPH Foundational Competencies, and the five unique degree competencies (CEPH 2024 Criteria) are accounted for to waive any applicable course.

CEPH Foundational Public Health Knowledge Competencies

D1-1	HSERV 531	Explain public health history, philosophy, and values.
D1-2	HSERV 531	Identify the core functions of public health and the 10 essential services.
D1-3a	HSERV 533 and HSERV 538	Explain the role of quantitative methods and sciences in describing and assessing a population's health.
D1-3b	HSERV 533 and HSERV 538	Explain the role of qualitative methods and sciences in describing and assessing a population's health.
D1-4	HSERV 531	List major causes and trends of morbidity and mortality in the US or other community relevant to school or program.
D1-5	HSERV 534	Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.
D1-6	HSERV 533	Explain the critical importance of evidence in advancing public health knowledge.
D1-7	HSERV 534	Explain the effects of environmental factors on a population's health.
D1-8	HSERV 534	Explain biological and genetic factors that affect a population's health.
D1-9	HSERV 534	Explain behavioral and psychological factors that affect a population's health.
D1-10	HSERV 531	Explain the social, political, and economic determinants of health and how they contribute to population health and health inequities.
D1-11	HSERV 537	Explain how globalization affects global burden of disease.
D1-12	HSERV 534	Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health).

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MPH Foundational Competencies

	D2-1	HSERV 533 and HSERV 592	Apply epidemiological methods to settings and situations in public health practice.
	D2-2a	HSERV 538	Select quantitative data collection methods appropriate for a given public health context.
	D2-2b	HSERV 538	Select qualitative data collection methods appropriate for a given public health context.
	D2-3a	HSERV 533 and HSERV 592	Analyze quantitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.
	D2-3b	HSERV 533 and HSERV 592	Analyze qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.
	D2-4	HSERV 538	Interpret results of data analysis for public health research, policy, or practice.
	D2-5	HSERV 531	Compare the organization, structure, and function of healthcare, public health, and regulatory systems across national and international settings.
	D2-6	HSERV 531	Discuss the means by which structural bias, social inequities, and racism undermine health and create challenged to achieving health equity at organizational, community and systematic levels.
	D2-7	HSERV 534 and HSERV 592	Assess population needs, assets, and capacities that affect communities' health.
	D2-8	HSERV 534 and HSERV 592	Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs.
	D2-9	HSERV 531 and HSERV 592	Design a population-based policy, program, project, or intervention.
	D2-10	HSERV 540 and HSERV 592	Explain basic principles and tools of budget and resource management.
	D2-11	HSERV 538 and HSERV 592	Select methods to evaluate public health programs.
	D2-12	HSERV 537 and HSERV 592	Discuss the policy-making process, including roles of ethics and evidence.
	D2-13	HSERV 531 and HSERV 592	Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
	D2-14	HSERV 537 and HSERV 592	Advocate for political, social, or economic policies and programs that will improve health in diverse populations.
	D2-15	HSERV 537 and HSERV 592	Evaluate policies for their impact on public health and health equity.
	D2-16	HSERV 540 and HSERV 592	Apply leadership and/or management principles to address a relevant issue.
	D2-17	HSERV 540 and HSERV 592	Apply negotiation and mediation skills to address organizational or community challenges.
	D2-18	HSERV 534 and HSERV 592	Select communication strategies for different audiences and sectors.

D2-19	HSERV 595	Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation.
D2-20	HSERV 534 and HSERV 592	Describe the importance of cultural competence in communicating public health context.
D2-21	HSERV 538 and HSERV 592	Integrate perspectives from other sectors and/or professions to promote and advance population health.
D2-22	HSERV 531 <i>and</i> HSERV 592	Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative.

Community-Oriented Public Health Practice MPH Degree Competencies

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	HSERV 537	Mobilize communities to challenge health inequities and make effective systems change by catalyzing grassroots public health initiatives.
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	HSERV 540	Apply systematic problem-solving approaches to resolve complex public health challenges.
	HSERV 531	Design, facilitate, and mediate group processes, especially in settings of competing views, to make sound and considered team-based decisions in public health, drawing out diverse perspectives to ensure all voices are heard.
	HSERV 534	Synthesize research findings and other non-traditional sources of information to understand emerging public health issues.
	HSERV 538	Synthesize evidence for developing and evaluating public health programs.