

Diversity, Equity, and Inclusion in Global Public Health Program: An Exploratory Study of Syllabi
of Master's of Public Health Courses at St. Catherine University

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Abstract

Background: Many universities aim to provide content that opens new ways of seeing the world to students. One method for achieving this is by critiquing one's courses for diverse, equitable, and inclusive (DEI) elements. The course syllabus contains vital details that support students in achieving their academic objectives and personal development.

Methods: The purpose of this exploratory study used both qualitative and quantitative methods. The existing DEI syllabi assessment tool was developed by Rutgers University and Boston University. We reviewed and adapted DEI domains.

Results: The outcome of this tool developed a table comparison of Rutgers and Boston DEI syllabi assessment tool and tailored DEI elements to global health focus. We quantified course content into graphic charts. We discussed the Master's of public health (MPH) department and interviewed MPH instructors. We analyzed the emerging themes. In their reflections, instructors discussed visualization, inclusive representation, reflecting on resources and advice for adjuncts, evaluation of both students and faculty, accessibility and accountability.

Conclusion: This global health DEI assessment tool gives instructors the chance to consider aspects of DEI, as well as various formats for delivering content, geographic areas, and assignments. It also highlights a useful visualization element that helped instructors understand the DEI of their course. This tool looks for strategies to support instructors in incorporating DEI materials into their courses.

Historically, the United States has had unfair education systems relating to what race can go to school, what is taught in a Western mindset, and learning about events through a white colonial lens (Huff, 2022). There are biases and privileges in school systems, and policies and practices need to be equitable and inclusive (Huff, 2022). Diversity, equity, and inclusion (DEI) are emerging themes that enrich experiences in higher education and its academic learning environment.

Many schools of public health are incorporating DEI strategies of people from all geographic representations, ways of teaching and learning styles, as well as a variety of health topics. There are some challenges with DEI teaching and learning, such as creating safe spaces, health-related social factors, and their effects on societal well-being (Taylor et al, 2019). Public health programs are trying to provide a 'safe space' environment where students can learn about privilege, oppression, and how to have difficult conversations that are relevant to issues pertaining to diverse groups of people (Kyoko, 2018). This difficult dialogue is guided through courses that provide respectful ground rules and expectations in those spaces (Taylor et al, 2019). Through dialogue, students and faculty are applying their social justice lens to critically reflect on their own identities, privilege, oppression and engaging anti racism work (Kyoko, 2018). Due to the injustice of racist laws and practices that prevent communities of color from having good health, racism is associated with adverse health outcomes for individuals (Taylor et al, 2019). Social justice and anti-racism content are important in promoting equality and equity. As anti-racism efforts are a part of social justice, having more representation of underrepresented groups and community engagement strategies can raise students' awareness of community issues (Merzel, 2022). Along with educating students, it is important to reflect on

addressing racial oppression as a barrier to health equity and acknowledging that racism is a public health issue (Hagopian et al., 2018). It is important for schools of public health and programs to engage in social justice and expand anti-racism and DEI in teaching as they reflect the core values of the discipline (Ash et al., 2020).

Current research shows that higher education is striving for diversity, equity, and inclusion. For example, a University of Michigan study looked at the connection between college students' interactions with diverse peers and their academic outcomes (Gurin et al. 2002). It has been demonstrated that diverse experiences have a positive impact on learning outcomes (Gurin et al. 2002). In another study, McPhail et al show there is a need for more diversified learning for students, and there are efforts being made to provide teaching and learning settings that benefit all students equally (McPhail, 2021). At universities, a part of building DEI is to have anti-racism practices (National Association of Diversity Officers in Higher Education, 2021).

Development of Diversity, Equity, Inclusion in Schools of Public health

Schools of public health are acknowledging the historically constructed oppressive systems by intentionally incorporating anti-racism practices into their classrooms. Students are given a safe space and a chance to take part in reflecting on their own experiences. This demonstrates to students the importance of participating in anti-racism discussions to understand how privilege and power can disproportionately affect the health of certain communities. Faculty members at public health programs can educate students about discriminatory practices and support them as they reflect on various types of health barriers

from various cultures, races, genders, etc. When professors do this, their classrooms develop into safe environments where diverse learning can take place and everyone is welcome, especially in schools of public health that offer programs that focus on global health.

Faculty show how they incorporate these DEI into their classes in their syllabi. In a study, Fuentes et al show institutions are incorporating anti-racism and DEI into their curricula and syllabi in an approachable manner that educates students (Fuentes et al., 2020). In another research paper, Richmond et al show a syllabus is a student's first point of contact with any course, as it communicates both content coverage and descriptions of class logistics, student workload requirements, important deadlines, and grading criteria (Richmond et al., 2018). Further exploration, Hagopian et al advise faculty to include a paragraph in their course titled “classroom climate” that refers to the social climate of the learning environment because students have varying social life experiences (Hagopian et al., 2018). The syllabus includes crucial information that aids students in achieving their learning goals and personal growth. Schools of public health need to assess what they currently have in order to improve course content and ensure that courses adhere to diversity, equity, inclusion, and anti-racism in the course syllabus.

Schools of public health across the U.S are taking the initiative to develop syllabi and course assessment tools. Rutgers University School of Public Health developed a comprehensive tool in 2022. Their syllabus assessment tool contains an overview of their purpose, characteristics of DEI, and definitions of discrimination, racism, and structural racism. It identifies 26 dimensions of DEI and provides different examples of their application to course content and materials. The second part of the Rutgers tool includes reflection statements and

questions to assist faculty in critiquing their course content and delivery (Rutgers, 2022). More recently, Boston University School of Public Health (BUSPH) developed a condensed version of the Rutgers tool. Boston added the element of “Justice” to their DEI component assessment because health disparities are related to human rights and equity within local and global communities (BUSPH, 2022). They include eight (8) different dimensions of DEI, and examples of how to identify their presence within a syllabus. Given student interest, there are a growing number of public health programs with a concentration in global health.

Development of Diversity, equity, inclusion in Global health programs

Global health is a broad field with many health topics. We have to look at different parts of the world about health barriers that may include low and middle-income countries, infectious diseases, chronic diseases, environmental health, health policy, and cultural influences on people’s health.

St. Catherine University's (St. Kate’s) Masters in Public Health (MPH) Global Health program is concentrated to diversity, equity, and inclusion in their teaching, content delivery and materials. They recently implemented a social justice teaching, skills based curriculum across their entire core courses. This framework helps strengthen the curriculum and improve student skills in critical thinking through challenging discussions (Munala et al, 2022). This study given by the department of global health concentration explores how to adapt the Rutgers and BUSPH syllabi assessment tool to global health content. We aim to define new insight into the global health program's potential for further development in DEI and offer faculty members

guidelines for considering DEI in the curriculum, the classroom, or their teaching approach like course syllabi.

This project aims to pilot and revise an adapted global health DEI curriculum assessment tool. Does the revised tool better serve faculty in a global health program in assessing the content and delivery of their courses than existing tools? Specific aims include: (a) compare the draft St. Kate's global health tool to the Rutgers and BUSPH tools and revise, (b) apply the draft St. Kate's global health courses to the sample DEI syllabus assessment tool, (c) present results to public health faculty with the DEI draft and reflect on its utility, (d) interview public health faculty individually and analyze the interview data to produce a revised tool.

Method

Design and Curriculum

The process of adapting, piloting and critiquing a global health DEI tool provided faculty with greater opportunity for reflection on the inclusiveness of their course content. This was an exploratory study utilized both qualitative and quantitative methods. The study started with the lead, a graduate student and a supportive faculty member from September 2022 to April 2023. The interviews were conducted by the lead and the interviewees were MPH faculty. The setup of the interviews was virtual on Google Meet for 40 minutes to one hour. We explained the aims of this study in creating this global health DEI assessment tool.

Our aim A was to compare our tool with Rutgers and BUSPH and use iterative comparative analysis with one student (I) and one faculty member to identify potential edits and development of questions to guided faculty interviews. We made a table column of each

school, Rutgers, BUSPH, and St. Kate's listing what each tool has and what it lacks. We compared and contrasted (1) cover page, (2) different dimensions of DEI, (3) diverse content delivery, (4) statements, and (5) reflection questions. Then we included interactive elements such as check-off boxes and rating scale methods that help assess DEI dimensions that could be present in the course syllabus. We integrated Rutgers and BUSPH DEI tools and transformed them to fit St. Kate's global health curriculum.

We used the Rutgers examples in appendix one as guidelines to decide on various categories that represented various aspects of diversity. Then, we tracked the frequency of each DEI component and made an Excel spreadsheet. We had a list of DEI categories and the number of course weeks to record for those content delivery and assignment frequencies in appendix three. The diverse content deliveries and assignments from the syllabus for St. Kate's MPH course were modified after we modified our DEI dimensions characteristics. Also, we used the university's Desire to Learn (D2L), an online learning platform. By doing this, we were able to ensure that the assignments and content deliveries accurately matched the syllabus. We looked at each syllabus to see if it demonstrated different content and delivery methods not found in the Rutgers curriculum for our first aim A.

Our aim B was to apply the St. Kate's global health DEI syllabus assessment tool to sample curricula. We set a goal to examine 11 St. Kate's MPH course syllabi of core courses and electives, those are listed below.

1. HLTH 6000 Critical Issues in Global Public health
2. HLTH 6030 Design and Implementation of Global Health Programs
3. HLTH 6040 Global Health Policy and Governance
4. HLTH 6050 Monitoring and Evaluation of Global Health Programs
5. HLTH 6100 Ethics and Human Rights for Global Health
6. HLTH 6110 International Perspectives in Environmental Health Sciences

7. HLTH 6130 Social & Behavioral Health Theories and Applications
8. HLTH 6210 Health Communication
9. HLTH 6310 Refugee and Immigrants Health
10. HLTH 6320 Global Issues in Women's Health
11. HLTH 6330 Public Health in Conflict and Humanitarian Emergencies

We took the frequencies and transformed them into a graphic/bar chart for the visual representation of DEI of content delivery and assignments. This brings us to our next strategy, which entailed introducing St. Kate's global health DEI syllabus assessment tool to St. Kate's MPH department and outlining its potential strengths and weaknesses.

Our aim C presented the DEI draft to public health faculty and reflected on its utility. We shared the pilot analysis with the MPH department to get their feedback to further develop this global health DEI assessment tool. This aim was reflected in the results, what they valued, what to remove, and possible additions to the tool. We used BUSPH reflection questions to examine the faculty's reflection responses for elements of DEI in the syllabus. We added three reflection questions to discuss potential changes for development, as listed below.

1. What changes did you make to the course? Why did you make them?
2. Are there areas identified above in which you would like support or areas where you would be comfortable sharing your expertise?
3. Would you consider adding some of these DEI domains on course evaluation for students?

Our aim D, was the student (I) lead and conducted interviews with both MPH faculty and adjuncts and analyzed the results to create a revised tool. We shared the faculty's DEI visual graphs of the content and delivery methods. The questions for interviews are listed below.

1. What are the strengths of this global health DEI assessment? What about this tool did you like?
2. What are the weaknesses of this global health DEI assessment? What was missing or what was unclear?

3. What aspects of this DEI tool should be expanded upon or reduced?
4. What did you notice in your course using this global health DEI assessment?
5. How did the graphs help you reflect on your course? Was seeing a visual presentation of some of the content analysis helpful? Please explain
6. What is the value of assessing DEI in your course?
7. How might faculty keep themselves accountable for DEI in their courses?

Results

The purpose of this assessment was to pilot and revise a modified global health diversity, equity, and inclusion (DEI) curriculum assessment tool to support faculty in a public health global health program. We wanted to operationalize these characteristics as we developed cover pages, different dimensions of DEI, diverse content delivery, statements and reflection questions. Our final results of the global health DEI Syllabus assessment tool are figured below.

St. Catherine University Masters in Public health (MPH) Global Health Program Syllabus Assessment Tool for Diversity, Equity, and Inclusion

St. Catherine University's Master of Public Health in Global Health program aims to incorporate a global perspective and a social justice lens for students by engaging with global and local settings in reducing health disparities and addressing disease prevention.

St. Kate's Mission:

To educate women to lead and influence

St. Kate's Vision:

To be respected globally for educating individuals who transform the world

Land Acknowledgement Statement [from MPH Social Justice curriculum]:

Let's take time to remember that St. Kate's is located on traditional Dakota land. Let's be mindful that institutions like St. Kate's are part of the present and past colonial violence in North America and that there is much work ahead to decolonize higher education. Let's take a moment to reflect on what you can do in your own sphere of influence further this work. We would also like to encourage you to learn more about Minnesota's Indigenous communities and to support Indigenous authors and artists.

Goal:

The goal of this syllabus assessment tool is to provide reflection points and questions on the diversity, equity, and inclusion (DEI) characteristics of their courses.

Global Health Diversity, Equity, Inclusion Syllabus Assessment

Course Number and Title:

Course Format (e.g. in person, online):

Course Instructor(s):

Part 1 (Course Reflection): Examine your syllabus and course for elements of diversity, equity, and inclusion. This will help guide you to reflect on creating an inclusive and equitable climate for learning in your courses. *Please note that you may not be able to identify the gender, race, ethnicity, nationality, or abilities of the authors or speakers unless they self identify or they are known to you.*

One way to analyze your course is to quantify the different voices and modalities of content delivery via bar and pie charts to create visual aids to assess representation and diversity.

Assessment categories:

- 1 – Dimension is not covered
- 2 – Dimension is addressed occasionally
- 3 – Dimension is addressed thoroughly

Dimensions	Statements to consider	Examples in syllabus or teaching	Assessment
<input type="checkbox"/> Inclusion of multiple Race/Ethnicity/Nationality perspectives (guest speakers, readings, etc.)	My course includes a diverse mix and balance of speakers representing race/ethnicity/nationality perspectives.		
<input type="checkbox"/> Inclusion of Indigenous groups/refugees/disabled communities (guest speakers, readings, sexuality etc.)	My course includes a diverse mix and balance of voices and experiences of indigenous groups/refugees/LGBTQ+/disabled communities.		
<input type="checkbox"/> Inclusion of Gender perspectives (male, female, non-binary)	My course includes a diverse mix and balance of gender perspectives of male, female, non-binary, and LGBTQ+.		
<input type="checkbox"/> Inclusion of Geographic Representation of speakers, videos, readings, and resources	My course includes a diverse mix and balance of geographic representation of speakers, videos, readings, and resources.		
<input type="checkbox"/> Accessibility and accommodation for students	My course content/materials are accessible to all students,		

Syllabus Assessment for Diversity, Equity, Inclusion

<p>(visual or hearing impairments, physical or learning disabilities)</p>	<p>including those with disabilities.</p> <p>My course has the University's accommodation and accessibility contact information.</p> <p>I encourage the use of online course materials vs. the purchase of textbooks to reduce student expenses.</p>		
<p><input type="checkbox"/> Critical engagement on historical and current racist practices</p>	<p>My course includes a diverse mix and balance of content; materials critically engage with the effects of current and historical oppression on health inequities.</p> <p>I have guidelines or ground rules for course discussions with student participation (i.e., engaging in respectful disagreement without attacking individuals; making it clear that no student speaks for all other people who share a characteristic with them)</p>		
<p><input type="checkbox"/> Diverse Content delivery (using multiple teaching techniques, simulation activity, community engagement, student-led learning)</p>	<p>I utilize different pedagogies to engage various student learning styles</p>		
<p><input type="checkbox"/> Classroom climate (Teaching/Learning Philosophy, Academic Integrity, learning resources)</p>	<p>My course includes principles of professional attitudes and behavior for hybrid or online course format, including communication.</p> <p>I am prepared to handle differences of opinion/thinking/positionality in the classroom.</p>		

Syllabus Assessment for Diversity, Equity, Inclusion

	<p>My course includes academic resources for students (library, writing assistance, Grammarly, Turnitin).</p> <p>My course includes contact information for the instructor & office hours.</p> <p>I provide accommodations on scheduling assignments for religious holidays.</p> <p>I provide opportunities for my students to share their pronouns and to indicate the pronunciation or phonetic spelling of their names.</p> <p>My course includes a land acknowledgment statement.</p>		
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Please reflect on the following for this course:

1. What changes did you make to the course? Why did you make them?
2. Are there areas identified above in which you would like support or areas where you would be comfortable sharing your expertise?
3. Would you consider adding some of these DEI domains on course evaluation for students?

Analysis

We operated our aim A in a comparison table of the draft global health tool to Rutgers and Boston to developed St. Kate's tools. In appendix two, we listed aspects of DEI and compared them to see what was missing, what could be changed, or how elements of DEI from Rutgers and Boston could be combined. We compared the format for all the schools of the DEI and we needed a cover page with the title, mission, and vision statements, as well as the land of acknowledgment and goals of this tool, for St. Kate's global health program.

Next, we had eight DEI dimensions. We expanded BUSPH's dimension of 'inclusion of perspectives' to 'Inclusion of multiple Race, Ethnicity, and Nationality perspectives' because it focuses on the diverse identity elements that intersect Rutgers' examples of DEI. We added 'Inclusion Indigenous groups, refugees, LGBTQ individuals and disabled communities' because they are vulnerable groups of people that face health disparities. Another added on was the 'Inclusion of Gender perspectives' such as male, female and non-binary individuals because people may or may not identify with any gender. Next, we had 'Inclusion of Geographic Representation of speakers, videos, readings, and resources' because St. Kate's MPH Global health strives to focus on worldwide content materials. BUSPH had DEI dimensions that we modified like Accessibility and Accommodation for Students, Critical Engagement on Historical and Current Racist Practices, Diverse Content delivery, and Classroom Climate.

Furthermore, we modified seventeen statements from BUSPH and Rutgers. We included an Excel template that has counts of all categories of content delivery and assignments. In appendix three, we compiled a list of DEI categories for content delivery and assignment

frequencies. In our last section of the tool, we utilized Boston's reflection questions and asked an additional question about course evaluation for students.

We applied our aim B of the tool to MPH course syllabi of core courses and electives. We examined 8 out of 11 St. Kate's MPH course syllabi of core courses and electives. Courses not applied to assessment tools due to limited time were Ethics and Human Rights for Global Health, Refugee and Immigrants Health and Public Health in Conflict and Humanitarian Emergencies. We counted each of the frequency categories from the list in appendix 3. Then we transformed the frequencies into a pie chart or a bar chart for the visual representation of DEI of content delivery and assignments. In appendix four, it figured an example of content delivery, geographic areas, and assignments for the global health policy and governance course.

We completed our aim C of reflection and discussion with the public health faculty from the MPH department. We discussed topics related to whether there are ideas to avoid self-bias and how faculty can be held accountable to implement changes identified in the tool. To these questions, we had put a disclaimer that you may not be able to identify the gender, race, ethnicity, nationality, or abilities of the authors or speakers. Furthermore, to assessed representation and diversity, we mentioned in the assessment that a way to analyze courses was to quantify the different voices and content delivery methods into visual graphs. See the appendix for pie charts and bar charts.

For aim D, we interviewed only five of the participants involved in our interview process about the global health DEI syllabus assessment tool. Among the five participants, there were four faculty and one adjunct. We analyzed emerging themes related to (1) Visualization aid, (2)

representation of gender, sexuality and disability, (3) accessibility, (4) guidance and resources, (5) course evaluation, (6) accountability.

Theme 1: Visualization aid

All five participants described the assessment tool as having visualization aids, such as a checklist for different DEI dimensions and pie charts and bar charts of course content delivery.

“This is a good rubric to check and to keep ourselves accountable. That is one way of being inclusive and we have aspects of equity in our courses and then two, it's good because then if every course is covering it, this is like a universal tool that we can all use to engage all our courses that way.”

Participant 2 (faculty)

“I found it helpful to have visual aids. Let me see visually as a diversity of course content and where there may be gaps or where there may be a lot of one thing but not a lot of other. So that was helpful for me. The dimensions are helpful and just kind of make me probe and think about who's been represented.”

Participant 4 (faculty)

Theme 2: Representation of Gender, Sexuality, and Disability

The inclusion of different communities in the global health course content was mentioned by some participants. One participant raised the issue of the lesbian, gay, bisexual, transgender, and queer (LGBTQ) communities' underrepresentation in the global health lens. People with disabilities are another group that is underrepresented in course material, according to two participants. Two participants raised the importance of different gender perspectives in course content.

“We don't talk about it enough... We need to do a better job on that particularly in this class because it's the critical issues, foundational global health class. Aspects of ability, I think are assumed and so just doing a better job in terms of including those perspectives and being very intentional... include examples around ability and the gender perspective.”

Participant 2 (faculty)

Theme 3: Accessibility

One participant mentioned including accessibility and accommodations for students with disabilities in the course materials.

"We need more clarity about what we mean by accommodations or student disabilities... on Canvas we can push a button and it'll tell us how accessible in theory on canvas or shell is... how would I make the judgment that this is accessible folders or accessible canvas? I now know because they've got the software built into it. But I'm not sure of my syllabus and I want to be certain."

Participant 4 (faculty)

Theme 4: Guidance and Resources

Two participants mentioned wanting guidances and resources for adjuncts in global health course content delivery.

"We teach to the book. I can lecture on the book... how do you capture if additional examples are brought in that might add some diversity, or might include more groups or include different perspectives without like listening to every single lecture...if there was some sort of guidance... to address every learning style like reading audio visual and interactive...like to have some goalpost so without having a benchmark of saying, this is what we aim for. This is not what we aim for. It's hard to know where we are."

Participant 1 (adjunct)

"If an adjunct is teaching the class and they change it slightly, whenever the assessment is done, might not fully capture how the class starts. And so maybe when I can teach it, having them bring this blueprint to say, you know, this assessment is here because it's important and so if you want to change it slightly this is what you do or do is make sure this remains."

Participant 2 (faculty)

Theme 5: Course Evaluation

Another emerging theme, two participants mentioned evaluation of the course DEI content delivery from students and faculty.

“ We have both the faculty evaluation and the course evaluation, so maybe adding a question on, did you do feel like the different aspects of these are dimensions of diversity, equity and inclusion that are weak in my syllabus...then in our course, departmental evaluations, add a question to say, what did you think about the change perspective? What did you think about the inclusion of perspectives on disabilities... And so then given the students also a way to respond and say, yes, we definitely saw this... having a question in the evaluation, so you're having both the faculty accountability and accountability from the students perspective.”

Participant 2 (faculty)

“What I liked was that question at the end, would use some of this DEI in your course evaluations...that's a good probing question. Different departments can adapt this or add it...having the student perspectives and engaging students in that self assessment process... get some feedback, some ideas or look for some other sources that are the presenters or voice video representation or articles that might provide additional depth.”

Participant 4 (faculty)

Theme 6: Accountability

Another emerging theme is the accountability of reporting and reviewing DEI.

“I could take your tool or a rubric or something self evaluate my own course and then make adjustments...there should also be an expectation that one week prior to course going live you have to do an assessment on the DEI. ”

Participant 1 (adjunct)

“We can keep ourselves accountable to use a checklist to really see what is there and then the assessments we are using to to assess the different aspects of the DEI so a checking system is useful will be useful of the course and what is there and it's done. Is it easy to assess the course and for the faculty.”

Participant 3 (faculty)

“We do have an annual self assessment. We go over our accomplishments in the previous years and goals for the upcoming year. I think it would be good to just have like DEI in your coursework. As one of the things to just discuss the questions there (the annual DEI) forces some thoughts about it and some goal around it.”

Participant 5 (faculty)

The global health DEI assessment tool has generated dialogue among instructors that reflect its supportive visualization, inclusivity of representation, consideration for guidances and

resources for adjuncts, evaluation of students and faculty, and methods to have DEI accountability.

Discussion

The purpose of this assessment was to modify existing diversity, equity, and inclusion (DEI) syllabi assessment tools to better serve instructors and students in a global health program in assessing the content and delivery of their courses. Faculty identified a positive visualization component that supported instructors' understanding of the DEI of their course. Instructors were aware of their global health content and delivery and may take the next steps of add-ons or minimize specific learning materials. The checklists for dimensions of DEI, statements to consider and reflection questions were helpful to self-evaluate and strive for our goals for the global health curriculum.

The global health syllabi assessment tool provides instructors the opportunity to reflect on elements of diversity, equity, and inclusion in a global health lens. To be an all inclusive approach it is important to have evidence of DEI in teaching methods and content (Cotton et al, 2022). Any DEI assessment tool will bring awareness to the lack of inclusion of geographic areas, social determinants of health, and different populations (Cotton et al, 2022). In relation to the representation theme, Merzal's current literature connects to the need for greater representation of underrepresented groups, in order to increase students' learning experience of community issues (Merzel, 2022). The interviews found that instructors need more diversified learning for students such as gender, LGBTQ, and disabled communities and efforts are needed and plan to provide teaching and learning content delivery that benefit all students

(McPhail et al, 2021). Moreover, Merzel literature mentioned how gender influences health, emphasizing the need for students to learn about various perspectives from men, women, and non-binary individuals (Merzel, 2022). The DEI tool in a global health lens will help assess faculty knowledge and uncertainty of how to integrate content from LGBTQ, disabled, immigrants and refugees communities (Cotton et al, 2022). Furthermore, the best practice of global health DEI in classrooms is to begin with the syllabus where as faculty develops the content and materials for students (Cotton et al, 2022). The global health DEI components give understanding to social justice perspectives and how we structure our course syllabus, including the learning environment, student inclusion, and engagement (Taylor et al, 2019).

One of the main goals of this assessment was to find ways to support instructors in incorporating DEI materials into their classes, and enhance students' learning for critical thinking and challenging discussion (Munala et al, 2022). Course evaluation of students and faculty was one of the effective ways to measure students' development and faculty's content and delivery development. By studying course syllabi, we can see what we currently have and use it to improve, and we can understand why global health programs need DEI based on the dialogues. In this area of study on DEI, each of these themes is connected to the others.

Two of the themes that need to be explored more are guidance and resources for adjuncts and methods to have DEI accountability. Some interviews mentioned potential solutions for guidance and accountability. One participant expressed their worries about how to record their own resource of DEI content delivery and their uncertainty about how frequently or for how long DEI assessment is required. They also experienced struggles in finding guest speakers without a budget, limitations with online learning, avoiding tokenism, and accessing

resources on DEI health content. Another participant was concerned about time length and limited tools for online courses versus in-person courses. These experiences reflected participants' challenges.

Limitations

The disadvantage of this assessment study is that not all of the visual graphs may be accurately counted because there are multiple counts of readings, videos, and various geographic locations for each course. The categories may not be appropriately named due to multiple types of the same kind such as what is considered long paper, short paper, reflection essays, types of discussions, and case studies. Another barrier was assessing DEI in-depth writing prompts for qualitative (text) analysis. Furthermore, instructors' syllabi may have inconsistent counts of assignments and content deliveries compared to their D2L online system. Meanwhile this makes the graphs can be inaccurate of numbers of readings, videos, podcasts etc. The last limitation is not having enough time to assess all MPH courses that include electives, skills, and core courses.

Implications

These results matter because assessing DEI in global health courses is likely to encourage instructors to incorporate a variety of content delivery, gender perspectives, different geographic areas, and diverse assignments. Instructors can focus on maintaining a system that supports them to teach ideas around DEI content and delivery and that helps student development. This assessment tool study highlights the value of representation of different voices, challenges thinking of self-bias and what is DEI, and overall global health learning. There

were recommendations to expand on how to use this global health DEI assessment tool. A suggestion was using this tool in a facilitation training with faculty and adjunct. Another idea was implementing the reflection statements into the University yearly DEI required training. Likewise to use the DEI tool universal to all field studies. Furthermore, to have course evaluation for students and faculty about DEI teaching methods and assignments. In addition, an individual suggested using public health academic APA citations instead of inclusive full names for learning purposes. Lastly, with this assessment tool, instructors can help each other and keep one another accountable for DEI course content and delivery.

Conclusion

In conclusion, this tool for measuring DEI in global health helps faculty and adjuncts to reflect related to social justice and anti-racism content as it portrays the core values of St. Kate's and establish evidence of DEI elements especially in global health focus. There are three main key components from St. Kate's assessment tool for global health DEI syllabi. The first component was to assess whether anti-racism practice was present in the course content. This was important to know if faculty and adjuncts were evidently engaging and discussing why racism affects health, why social justice is needed for health equity, and how to support communities to stay healthy. The second component of St. Kate's global health DEI syllabi assessment tool was to assess if teaching strategies and assessments were diverse. The third component was to assess the course content as an equitable selection of global geographic areas and inclusivity of different communities related to health. The visual graphs can tell you many details of the course and help you provide an overview of numbers on DEI content

delivery and assignments. There is room for improvement in DEI across all global health courses. St. Kate's global health program is working toward bringing in social justice perspectives, DEI elements, and accountability by assessing instructors' course content delivery, and reflections. Overall, this DEI syllabi assessment tool will keep diverse voices central, align with global health program's objectives, incorporate social justice and further develop students' knowledge and skills.

MPH Competencies

My project contains three or more MPH competencies for the capstone. According to our syllabi assessment tool from Rutgers University and Boston University, racism, social inequities, and structural bias all undermine health and make it difficult to achieve health equity at the organizational, community, and societal levels, as discussed and reflected in this project's competence C6. Along with applying ethical and social justice principles to global health research and practice, this project adheres to competence G2, and this tool also looks at cultural competence in the distribution of public health higher education. Finally, this project follows competence C3-b, in which we demonstrate our competency in qualitative data collection techniques appropriate for a specific public health context by conducting in-depth interviews and asking reflection questions.

References

- Ash, Allison N.; Hill, Redgina; Risdon, Stephen; and Jun, Alexander (2020) "Anti-Racism in Higher Education: A Model for Change," *Race and Pedagogy Journal: Teaching and Learning for Justice*: Vol. 4: No. 3, Article 2. Available at:
<https://soundideas.pugetsound.edu/rpj/vol4/iss3/2>
- Boston University School of Public Health. (2022). *Boston University School of Public Health Syllabus Assessment Tool for Diversity, Equity, Inclusion, and Justice*
- Cotton, S., Theeke, L., Barnhart, C., Marino, L., Messer, J., Minor, A., & Smothers, A. (2022). Evidence of diversity, equity, and inclusion in nursing syllabi: A descriptive analysis. *Journal of Nursing Education*, 61(12), 665-671.
doi:<https://doi.org/10.3928/01484834-20221003-02>
- Fuentes, M. A., Zelaya, D. G., & Madsen, J. W. (2021). Rethinking the Course Syllabus: Considerations for Promoting Equity, Diversity, and Inclusion. *Teaching of Psychology*, 48(1), 69–79. <https://doi.org/10.1177/0098628320959979>
- Gurin, P., Dey, E. L., Hurtado, S., & Gurin, G. (2002). Diversity and higher education: Theory and impact on educational outcomes. *Harvard Educational Review*, 72(3), 330-366. Retrieved from
<https://pearl.stkate.edu/login?url=https://www.proquest.com/scholarly-journals/diversity-higher-education-theory-impact-on/docview/212287515/se-2>
- Hagopian A, West KM, Ornelas IJ, Hart AN, Hagedorn J, Spigner C. Adopting an Anti-Racism Public Health Curriculum Competency: The University of Washington Experience. *Public Health Reports*. 2018;133(4):507-513. doi:10.1177/0033354918774791
- Huff, L. (2022, February 28). *Through a White Colonial Lens: A Look into the US Education System*. School of Marine and Environmental Affairs.
<https://smea.uw.edu/currents/through-a-white-colonial-lens-a-look-into-the-us-education-system/>
- Kyoko Kishimoto (2018) Anti-racist pedagogy: from faculty's self-reflection to organizing within and beyond the classroom, *Race Ethnicity and Education*, 21:4, 540-554, DOI: 10.1080/13613324.2016.1248824
- Merzel Cheryl R. Diversity, Equity, and Inclusion on the Frontlines of Education. *Pedagogy in Health Promotion*. 2022;8(3):171-173. doi:10.1177/23733799221113510
- McPhail, C. J. (2021, April 26). *Fostering Social Justice in Higher Education | Diverse*. Diverse: Issues In Higher Education.

<https://www.diverseeducation.com/institutions/community-colleges/article/15108962/fostering-social-justice-in-higher-education>

Munala L, Allen EM, Beall OM, Phi KM. Social Justice and Public Health: A Framework for Curriculum Reform. *Pedagogy in Health Promotion*. 2022;0(0). doi:10.1177/23733799221143375

National Association of Diversity Officers in Higher Education. (2021). *A Framework for Advancing Anti-Racism Strategy on Campus / First*. National Association of Diversity Officers in Higher Education. <https://nadohe.memberclicks.net/assets/2021/Framework/National%20Association%20of%20Diversity%20Officers%20in%20Higher%20Education%20-%20Framework%20for%20Advancing%20Ant-Racism%20on%20Campus%20-%20first%20edition.pdf>

National Institute for Learning Outcomes Assessment. (2019, November). A Comprehensive Approach to Assessment of High-Impact Practices. *National Institute for Learning Outcomes Assessment*. <https://eric.ed.gov/?id=ED604467>

Richmond, A. S., Morgan, R. K., Slattery, J. M., Mitchell, N. G., & Cooper, A. G. (2019). Project Syllabus: An Exploratory Study of Learner-Centered Syllabi. *Teaching of Psychology*, 46(1), 6–15. <https://doi.org/10.1177/0098628318816129>

Rutgers University School of Public Health. (2022). *Assessment of Rutgers School of Public Health Curricula for Diversity, Equity, and Inclusion*. Rutgers School of Public Health.

Taylor, S. D., Veri, M. J., Eliason, M., Hermoso, J. C. R., Bolter, N. D., & Van Olphen, J. E. (2019). The Social Justice Syllabus Design Tool: A First Step in *Doing Social Justice Pedagogy*. *Journal Committed to Social Change on Race and Ethnicity (JCSCORE)*, 5(2), 133–166. <https://www.jstor.org/stable/48645358>

Appendix 1: Rutgers Examples of Diversity, Equity, Inclusion Syllabi

Diversity Through Course Content and Materials

Our courses should represent diverse people and perspectives through course content and materials. Doing so helps all students to imagine themselves within various learning scenarios. Course content and materials may include, but is not limited, to the following:

- **Assignments (e.g., papers) and Assessments (e.g., exams) Examples**
 - Use varied names and socio-cultural contexts in test questions, data sets, and/or assessments.
- **Guest Speakers Examples**
 - Guest speakers represent a diverse range of views and perspectives.
 - Guest speakers represent diverse backgrounds (e.g., community members, people of color, women, LGBTQ2IA individuals).
- **Lectures, Slides, Videos and/or Examples**
 - Diverse names (e.g., double surnames) and socio-cultural contexts in examples
 - Diverse examples to illustrate concepts with a range of domains of information
 - Avoiding references that are likely to be unfamiliar to some students based on their backgrounds (e.g., citing U.S. American pop culture in a class with many international students, use of idioms and slang, etc.)
 - Teaching the conflicts/controversy around equity in the field to incorporate diverse perspectives
 - Using language inclusive of gender and sexual diversity (e.g., use of gender-neutral pronouns like they, them, their).
 - Review course materials to ensure use of non-stigmatizing and non-biased language [e.g., crosswalk with the CDC Health Equity Style Guide).
- **Readings, Textbooks, and/or other Assigned Books Examples**
 - Authors of readings
 - Readings deliberately reflect the diversity (e.g., gender, ethnicity, and race) of contributors to the field (e.g., first author and senior author).
 - Readings emphasize a range of ideas and backgrounds of experts who have contributed to the field.
 - Readings about a community or geographical region includes authors from that region.
 - Readings deliberately reflect the diversity (gender, race, sexual orientation, etc.) of target populations and settings (e.g., rural, reservation, homogenous ethnic, religious community, etc.) throughout the United States and/or world.
- **Syllabus Examples**
 - Diversity, equity, and inclusion statements within the syllabus
 - Deliberately choose and present course materials so as to prioritize universal accessibility and the diverse learning styles of our student body.
 - Deliberately choose and present course materials with a range of student financial resources in mind (e.g., purchasing required textbook).

- Include authors full names, not just initials in citations. This can help emphasize gender diversity or assumptions about authorship
- Review syllabus to ensure use of non-stigmatizing and non-biased language (e.g., crosswalk with the CDC Health Equity Style Guide).
- **Visuals/Images used within course Examples**
 - Visuals used do not reinforce stereotypes, but include diverse people or perspectives or are neutral (e.g. stick figures or cartoons).

References

1. Gurin, P., Day, E. L., Hurtado, S., & Gurin, G. (2002). Diversity and higher education: Theory and impact on educational outcomes. *Harvard Educational Review*, 7(3), 330–366.
2. Ladson-Billings, G. (2009). Foreword. In M. L. Hill (Eds.), *Beats, rhymes, and classroom life: Hip-hop pedagogy and the politics of identity* (pp. vii–x). New York, NY: Teachers College Press.
3. Peoples, W. A., Fleming, P. J., & Creary, M. S. (2023). Working Toward Health Equity Requires Antiracist Teaching. *American Journal of Preventive Medicine*.
<https://doi.org/10.1016/j.amepre.2022.10.023>
4. Phillips, K. W. (2014). How diversity makes us smarter. *Scientific American*.
5. Gay, G. (2002). Preparing for culturally responsive teaching. *Journal of teacher education*, 53(2), 106-116.
6. Ladson-Billings, G. (1995a). But that’s just good teaching! The case for culturally relevant pedagogy. *Theory Into Practice*, 34, 159–165.
7. Hammond, Z. (2014). *Culturally responsive teaching and the brain: Promoting authentic engagement and rigor among culturally and linguistically diverse students*. Corwin Press.
8. Day, L., & Beard, K. V. (2019). Meaningful inclusion of diverse voices: The case for culturally responsive teaching in nursing education. *Journal of Professional Nursing*, 35(4), 2

Adapted from Resources Developed By:

- University of Utah Center for Teaching & Learning Excellence:
<https://ctle.utah.edu/inclusiveteaching/syllabus.php>
- Cornell University Center for Teaching Innovation:
<https://teaching.cornell.edu/resource/incorporating-diversity>
- The University of Kansas Center for Teaching Excellence: <https://cte.ku.edu/creating-inclusive-syllabus>
- Tufts University Center for the Enhancement of Learning and Teaching:
<https://provost.tufts.edu/celt/the-syllabus-as-a-tool-for-setting-the-climate/>
- University of Denver Office of Teaching & Learning:
<https://www.du.edu/facsen/media/documents/iesyllabuschecklist.pdf>
- University of Washington Center for Teaching and Learning:
<https://www.washington.edu/teaching/topics/inclusive-teaching/>
- Yale University Poorvu Center for Teaching and Learning:
<https://poorvucenter.yale.edu/FacultyResources/Diversity-Inclusion>
- Boston University School of Public Health:
https://cdn.ymaws.com/www.aptrweb.org/resource/resmgr/webinars/busph-deij-assessment_2022.pdf

Appendix 2: Comparison Diversity, Equity, Inclusion Syllabi of Public Health Universities

Rutgers	Boston University	St. Kate's
<ul style="list-style-type: none"> ● Title ● Mission and vision statement ● Overview of DEI Assessment tool ● Explain why is this important for students ● Define meaning of <ul style="list-style-type: none"> ○ Discrimination ○ Diversity ○ Equality ○ Equity ○ Inclusion ○ Racism ○ Structural Racism ● Dimensions of DEI (26) <ul style="list-style-type: none"> ● Ability/Disability ● Age ● Citizenship ● Cognitive Ability ● Culture ● Education Level ● Ethnicity ● Experiences ● Gender ● Gender Expression ● Gender Identity ● Geographic Area ● Immigration status ● Language ● Learning Styles 	<ul style="list-style-type: none"> ● Title ● Mission and vision statement ● Objectives ● DEI Assessment <ul style="list-style-type: none"> ○ Course # and title, format, instructor ○ Have 8 dimension of DEI <ul style="list-style-type: none"> ■ Inclusion of perspective (guest speeches, readings, etc.) ■ Accessibility (captioning, free online readings, etc) ■ Critical engagement ■ Diverse pedagogical teaching techniques (using multiple teaching modes) ■ Respect for students needs ■ Respect for student Identity ■ Attention to language ■ Facilitating discussion of different perspectives ● Has 4 columns of <ul style="list-style-type: none"> ○ Represented of DEI, Statements reflections, examples in syllabus/teaching, Assessment categories rate ● Statements that were used in both Boston and Rutgers were <ul style="list-style-type: none"> ○ My course content/materials are accessible to all students, including those with disabilities. 	<ul style="list-style-type: none"> ● Course # and title, format, instructor ● Land of acknowledgement statement ● Has 3 columns of check off list <ul style="list-style-type: none"> ○ Dimensions of DEI (8) <ul style="list-style-type: none"> ■ Inclusion of multiple Race/Ethnicity/Nationality perspectives (guest speeches, readings, etc.) ■ Inclusion of Indigenous groups/refugees/d isabled communities (guest speeches, readings, etc.) ■ Inclusion of Gender perspectives (male, female, non-binary, LGBTQ+) ■ Inclusion of Geographic Representation of speakers, videos,

<ul style="list-style-type: none"> ● Marital Status ● Mental Health ● Military Experience ● Nationality ● Parental/Caregiver Roles ● Political Affiliation/World Views ● Race ● Religion ● Sexual Orientation ● Socioeconomic Status/Class ● Student Enrollment Status <ul style="list-style-type: none"> ● Diversity of course content and materials <ul style="list-style-type: none"> ○ Assignments ○ Guest speakers ○ Lectures, slides, videos ○ Readings, textbook, other readings ○ Syllabus examples ○ Visual/images ● Actual DEI Assessment <ul style="list-style-type: none"> ○ Course # and title, format, instructor ● Has 4 columns of <ul style="list-style-type: none"> ○ DEI Represented content and materials ○ Weeks/Modules ○ Description/Examples ● Course Reflection rating ● Reflection questions 	<ul style="list-style-type: none"> ○ My course content/materials critically engage with the effects of current and historical oppression on health inequities. ○ Diverse pedagogical choices are utilized to teach my course (i.e., lecture, problem-based learning, simulations, debate, etc.). ○ I avoid/accommodations scheduling assignments and assessments (i.e., exams, quizzes, assignment due dates) on religious holidays. ○ I provide opportunities for my students to indicate the pronunciation or phonetic spelling of their names. ○ I provide a space for my students to indicate preferred names/pronouns. ○ I avoid the general use of male pronouns. I avoid cultural phrasing that does not translate from English easily. ○ I am prepared to handle differences of opinion/thinking/positionality in the classroom. ○ I have guidelines/ground rules for course discussions with student participation (i.e., engaging in respectful disagreement without attacking individuals; making it clear that no student speaks for all other people who share a characteristic with them). 	<ul style="list-style-type: none"> readings, and resources ■ Accessibility for students who have visual or hearing impairments ■ Critical engagement (on historical and current racist practices) ■ Diverse Content delivery (using multiple teaching techniques) ■ Classroom climate (Teaching/Learning Philosophy, Academic Integrity, learning resources) <ul style="list-style-type: none"> ● Visual Presentation of Pie/bar charts of Content Delivery, Geographic area, ethnicity/nationality, and assignments. ● Google excel ● Course Reflection Rating: we have most of them but not all of Rutgers ● 4 Reflection Questions: we have them all <p>What we need:</p>
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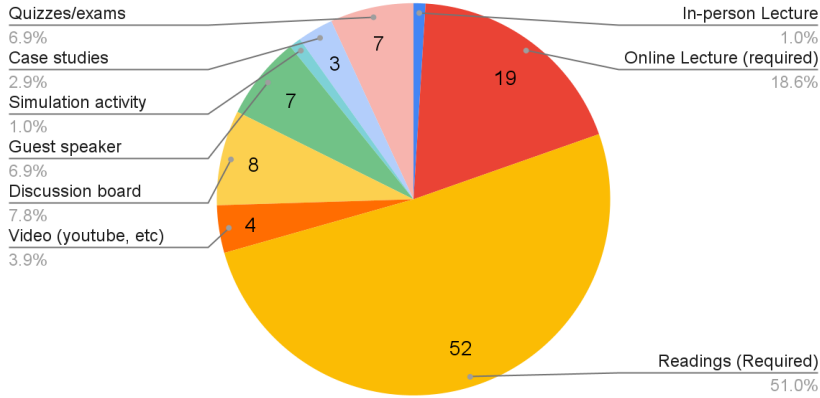
<ul style="list-style-type: none">○ In completing this assessment, did you make any changes to the course? Why did you make them?○ What are the strengths of this course in integrating Diversity, Equity, and Inclusion?○ What are the areas of growth for integrating Diversity, Equity, and Inclusion in this course?○ What are the plans for addressing these areas of growth?	<ul style="list-style-type: none">○ I am comfortable providing an environment for discussion of personal and academic topics related to race, ethnicity, gender, gender identity, religion, sexual orientation, socioeconomic status, ability/disability, nationality.● Reflection question (2)<ul style="list-style-type: none">○ what changes could you see making to the course?○ Are there areas identified above in which you would like support or areas where you would be comfortable sharing your expertise?	<ul style="list-style-type: none">● Title● Mission and vision statement● Objectives
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Appendix 3: List of DEI Categories for Content Delivery and Assignment Frequencies

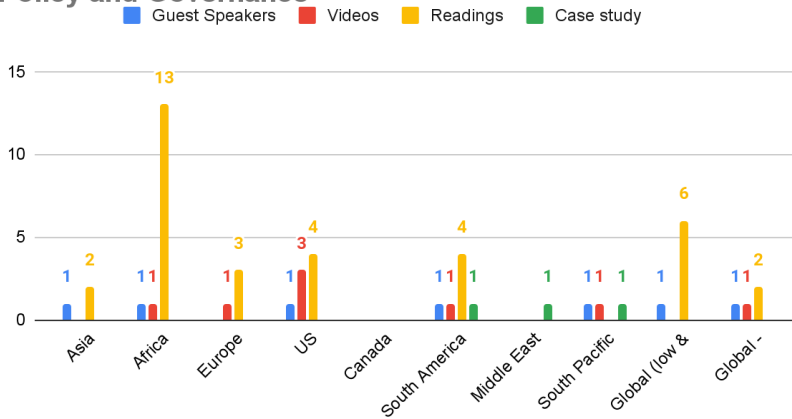
Content Delivery	Gender	Geographic Area	Assignment Diversity
<ul style="list-style-type: none"> ● In-person Lectures ● Online Lectures (required) ● Readings (chapters and Articles) ● Podcasts ● Videos ● Class Discussions ● Group Discussions ● Pair Discussions ● Discussion boards ● Guest Speakers ● Student-led learning ● Simulation Activities ● Case Studies ● Quizzes/exams ● Service Learning 	<ul style="list-style-type: none"> ● Males ● Females ● Non-binaries 	<ul style="list-style-type: none"> ● Africa ● Asia ● Canada ● Europe ● Global-generic ● Global (low- & middle-income countries specifically) ● Middle East ● South America & Caribbean ● South Pacific (Australia, PNG, New Zealand & islands) ● United States 	<ul style="list-style-type: none"> ● Discussion boards ● Quizzes/exams ● Case studies ● Roleplay/debates ● Peer-Reviews ● Oral presentations ● Posters ● Data analysis and/or displays ● IPE Activities ● Reflection essays ● Policy briefs ● Grants ● Short paper 2-6 pages ● Lengthy paper 10-20 pages ● Voice threads <ul style="list-style-type: none"> ○ Commenting ○ Creating your own ○ Students create videos

Appendix 4: Pie and Bar Chart Content Delivery, Geographic Areas, and Assignment Frequencies

Content Delivery: HLTH 6040 – Global Health Policy and Governance



Geographic area (Count Content): HLTH 6040 Global Health Policy and Governance



Assignments: HLTH 6040 – Global Health Policy and Governance

