Baylor University
Robbins College of Health and Human Sciences

Department of Public Health
Criteria for Tenure and Promotion

Revisions Approved by the Office of the Provost, June 27, 2022—James Bennighof

Introduction

The faculty in the Department of Public Health represent multiple specialty areas within the field of public health. As a result, faculty members have a diverse array of professional interests and teaching, research, and service approaches. Candidates for tenure and/or promotion must demonstrate that their academic maturity, imagination, initiative, and leadership are adequate to sustain continued production of quality teaching, scholarly work, and student mentoring*. The typical publication and granting patterns for the candidate's discipline at research universities will be considered in the department's tenure and/or promotion evaluation.* The following section provides typical baseline standards that indicate a candidate is ready to be considered for tenure and promotion. These criteria are based on the mission and goals of Baylor University and the Robbins College of Health and Human Sciences as outlined in the *Pro Futuris* Vision Statement and the Baylor University Faculty Handbook. Further, the criteria align with Baylor's academic strategic plan, Illuminate. Faculty members within the Department of Public Health will re-evaluate the departmental promotion criteria every 5-7 years.

I. Tenure and Promotion to Associate Professor

Faculty teaching loads in Public Health may vary considerably, though tenure-track faculty members hired since 2015 have been assigned a 2-2 teaching load, often with further reduced teaching loads during the initial year(s).

A. Scholarship Expectations (Research & Scholarly/Creative Contributions)

1. Grant Procurement

Submitting grant proposals to and obtaining funding from external funding sources is required. Internal funding is encouraged as a means to assist in procuring external funding. At least one or more externally funded grants for which the total matches or exceeds the amount of startup funds provided upon employment must be obtained during the tenure period. Annual efforts to secure external funding are expected throughout the tenure process unless the faculty member is under grant-related restrictions such as an early career grant. Annual efforts include a combination of external grant submissions, involvement in grant mentorship programs, and interdisciplinary research collaborations with other faculty members internal or external to Baylor.

Grants that provide the full Baylor indirect rates and can be classified as research grants by Carnegie are strongly encouraged. ***Tenure candidates should provide evidence of consistent effort to seek, obtain, and manage the use of external funding over the length of the tenure period. All proposals should reflect a clear and focused research agenda.***

2. Productivity in Publications and Presentations

The minimum standard productivity rate in Public Health is an average of three peer-reviewed journal publications per year and two presentations per year at national or international conferences (resulting in at least 15 publications and at least 10 presentations at the end of the tenure period). Mentoring students as co-authors and co-presenters is strongly encouraged. ***Scholarly output should reflect a clear and focused research agenda.***

It is the responsibility of the candidate to communicate the quality of publication outlets with respect to factors such as impact factor, circulation of journal, reputation, rejection rate, eigenfactor, article influence score, size of circulation, number of peer reviewers, etc. It is the responsibility of Public Health tenured faculty within the candidate's public health specialty area to provide guidance and assessment of the quality of publication outlets. External reviewers also address such factors. A candidate for tenure and/or promotion will count articles with evidence as being "accepted" and "in press" toward the total number of publications.

3. Quality of Publications

It is expected that a majority of the candidate's publications be in high quality journals within the candidate's discipline and that a majority of the publications exhibit academic leadership (e.g., first-author publications, corresponding author [sometimes indicated by last authorship position in the field of public health], or mentorship of students as first author). Faculty members must be able to document the impact of the scholarship produced. For example, in addition to the journal metrics indicated above, faculty members shall use criteria such as total number of citations, h-index, immediacy index, and other metrics to demonstrate the "impact" of their articles.

Types of Scholarly Contributions and Different Types of Publications

The Public Health faculty fully supports different types of scholarship dissemination (e.g., books of scholarly significance, book chapters, and refereed monographs). Specifically, we identify here common, viable forms of publication in our fields. Generally, with the acknowledgement that there are often exceptions, the priority/importance of the different forms of publication follows the order below. *In any instance, a*

candidate may provide information regarding the scholarly work (e.g., circulation, awards, invited work, prominence of organization, etc.) to justify its consideration for higher quality placement. While we value scholarly work across these categories, in most cases a successful candidate will have a majority of her or his publications in the "most important contribution" level.

Most Important Contributions
- Research published in peer-reviewed journals in print or electronic form (see Appendix A for journal list).
- Theory/review articles published in peer-reviewed journals in print or electronic form
- Academic textbooks published by nationally recognized publishers (i.e., as opposed to self-published works)
- Edited academic textbooks published by nationally recognized publishers

Important Contributions
- Book chapters in edited texts
- Technical reports

Other Contributions
- Non-refereed articles published in in proceedings or organized by a nationally/internationally recognized society

4. **Research Collaboration, Relative Contribution, and Order of Authorship**

The fields within Public Health embrace broad-based collaborative strategies as a means of improving quality of research. Such an approach allows for effective blending of expertise from many different fields, often improving the quality of the overall research product. This is necessary as research in Public Health-related fields may involve a complex web of relationships among psychosocial, demographic, sociological, environmental, biomechanical, and physiological variables. Naturally, research questions involving such a broad array of potential influences are complicated to the degree that no single individual, entity, or professional discipline can hope to effectively address them without assistance. For this reason, Public Health faculty frequently engage in research, program development, and community service projects that involve a wide array of research collaborators, professionals, and community volunteers, all of whom may be critical partners in the effort. In fact, because these collective efforts are so critical for success, many government-sponsored and foundational grant-funding sources only approve proposals that represent broad-based collaborative efforts. In short, lists of multiple authors are commonly found on Public Health publications, grants, and other projects. This is a natural outcome of the broad-based efforts in

which Public Health researchers are commonly engaged.

In this context, there is an argument to be made that taking the lead role on a collaborative project can be of equal value as working as a solitary investigator (i.e., leading to sole authorship). Multiple-authorships in Public Health are valued and highly encouraged. In many cases, the first author does signify the lead role and highest level of contribution; however, in many cases, beyond the first author, it is not possible to distribute the weight of contribution. In some situations, alphabetical listings are used, particularly when the contribution is equally divided among the authors. For journals in some of our fields, the author who made the most significant contribution may be listed last. Consequently, individual faculty members must be able to document the level of contribution made to coauthored articles. ***For this reason, each Public Health faculty member should provide a brief description of her or his amount and type of contribution to any project within all annual performance, tenure, and promotion documents. Candidates for tenure and/or promotion should regularly be taking a lead role on collaborative projects, though solitary efforts (i.e., sole authorship) may be substituted in this respect as well.*** Faculty members are encouraged to discuss issues related to contributions and order of authorship upon initiating collaborative scholarly efforts.

In many instances, faculty members may have mentored students through the research process. This mentoring process is highly valued within Public Health. In addition, because there are many difficult ethical issues surrounding order of authorship, particularly as it pertains to student-faculty interaction and the potential for abuse, Public Health encourages faculty members to list students first when appropriate. *Consequently, when considering relative contribution to publications, presentations, and other scholarly works, faculty members who list students' names before their own name on a publication should be acknowledged to have made an approximately equal contribution as in the instance when they are listed first on a publication. However, this is only the case if the faculty member has made a substantial contribution to the scholarly work.*

5. Value of Longitudinal, Community-Based, and Other Research and Related Publication and Productivity Issues

When Public Health researchers engage in necessary long-range collaborative efforts, difficulties can arise in university-based performance evaluations for tenure and promotion. The individuals outside the department who are called on to make these evaluative decisions may be from other disciplines in which research and publication rates can move at a faster pace. Some research efforts are only successful after long months of community interaction to establish trust and commitment, assess community-specific needs, develop population-

specific survey instruments for data acquisition and strategies, train and monitor volunteer participants, foster community empowerment through inclusion in decision-making processes, and document long-range outcomes. To bypass these critical steps would, in essence, equate to abandoning the broad, multifaceted approach that, when patiently applied, has proven to effect long-range health-enhancing changes in our society. Community-based research takes time, yet such efforts are often the most impactful in our respective fields.

Faculty members in Public Health are expected to document continuous progress in the areas of successful publication and grant procurement. We recognize, however, that the rate at which these two important areas progress will be, in part, dependent upon the nature of the research project (e.g., longitudinal vs. acute, clinical vs. field-based). Each faculty member is strongly encouraged to describe tasks accomplished and progress made within each research and grant-related project, and to include information that demonstrates how current research/grant procurement efforts are contributing to long-range research goals. As community-based and longitudinal research is greatly valued by our department, faculty members should identify work (i.e., publications, grants, etc.) in these areas.

B.   Teaching Expectations (Teaching & Related Scholarly Work)

Faculty members are expected to document a consistent record of quality teaching and development in teaching. Documentation should include peer and/or department chair evaluations, student course evaluations, and artifacts of instruction (such as syllabi, class assignments, instructional development, student work; student course evaluations, formal and informal), and evidence of reflection and growth in teaching through curriculum and instructional development and professional development. Evidence of teaching quality, as required by university policy, must include a systematic assessment of student opinion and peer teaching evaluations.

1. Quality of Teaching

Indicators of teaching quality, either in classes involving groups of students or in work with individual students, *may* include, but are not limited to:
- Goals and learning objectives are stated. These goals and objectives take into consideration the disciplinary curriculum of which the experience is a part and are relevant to accreditation and licensure guidelines.
- Teaching shows responsiveness to information gathered from student course evaluations and peer teaching evaluations.
- Teaching shows constant incorporation of recent scholarship in content and pedagogy, including appropriate application of information technology.

- Teaching shows responsiveness to student diversity and to the differing prior knowledge, needs, and interests of students.
- Teaching leads to student learning which gives evidence of critical and creative thinking and is consistent with the goals of the learning experience.
- Student mentoring encourages their success in achieving program goals and objectives, student educational goals and career aspirations, and results in increased student retention, when appropriate.
- Student mentoring and advising leads to their demonstration of professional leadership and development through presentations, publication, professional recognition, and/or other indicators appropriate to their level.
- Faculty members implement professional programs that are indicative of best instructional practices (e.g., following practices advocated by national accrediting bodies or other similar organizations).

2. Development of Teaching

Indicators of growth or development in teaching may include, but are not limited to:

- Faculty members stay current with best practices and trends within their disciplines in order to meet requirements for licensure and adhere to professional standards.
- Growth in teaching is supported by effective participation in program decision-making processes about curriculum, instruction, and assessment.
- Growth in teaching is promoted through refinement and development of curricula, including preparation of new courses, active participation in Professional Development Schools, revision of existing courses, and engagement in scholarly strategies such as action research or publications and presentations about teaching practice.
- Growth in teaching is promoted through innovation in methods of instruction such as team teaching and engaging in scholarly strategies that involve innovative methods of teaching.
- Mentoring and advising of students leads to products (such as portfolios, dissertations, examination results, grant submissions, publications, presentations, and teaching) of recognized quality.

3. Evidence of Participation in Graduate Education

Candidates are expected to demonstrate evidence of providing guidance and leadership to graduate students through one or more of the following activities.

- Service on dissertation and thesis committees
- Service on internship and/or comprehensive exam committees
- Mentoring graduate capstone projects
- Teaching graduate courses
- Joint authorship or joint presentations

- Collegial research agendas
- Student advising and mentoring progress toward graduation

4. Department Peer Review Guidelines

In accordance with Baylor University tenure policy requiring submission of peer reviews of teaching over a period of at least three years as part of a candidate's tenure notebook/supporting materials, the Public Health Department requires adherence to the following guidelines for the peer review process:

- Completion of at least one peer review, preferably two peer reviews, per year resulting in 3-6 peer reviews, upon submitting materials for tenure consideration.
- Peer reviews should be conducted using the Public Health Peer Teaching Evaluation form (see **Appendix B**).
- Information from peer reviews should be shared with the Public Health tenured faculty members at the candidate's annual tenure review meeting. Copies of the Peer Teaching Evaluation forms should be kept in the candidate's tenure notebook and made available for review.

C. <u>Service Expectations</u> (university, profession, community, and church)

A crucial element of the faculty member's responsibility is a service program responsive to the larger society that sustains the university. Thus, service is principally understood as the identification, development, and rendering of educational and technical service to individuals, communities, organizations, and public agencies. To a great extent, service involves the application of the faculty member's professional training and competence to issues and problems of significance to constituencies. Service is also related to the achievement of academic program objectives of the units to which the faculty member is appointed.

Faculty members are expected to be contributing members, in a variety of ways, both of the University community and of the larger academic, civic, and religious communities as well. The Public Health Faculty is also asked to provide evidence of active religious service.

Major service contributions can occur at any level of the university, as well as beyond the institution. Highly productive professional service may be documented by a strong record as a contributing member, coordinator, leader, and initiator on campus committees, in campus or community initiatives, and within administrative positions, professional associations, etc. Faculty

members are expected to engage in service activities in each of the following areas:

1. Service to the Profession

Public Health encourages such activities because they serve the interests of learning, because they are important forms of faculty development and scholarly participation in their own right, and because they are a source of pride and recognition for the University. Examples of service to the discipline or profession may include, but are not limited to:

- Membership and participation in professional organizations.
- Collaboration with field practitioners.
- Collaboration with private and public, profit and non-profit organizations in which members apply their academic expertise to enhance the efficiency or effectiveness of the organizations served.
- Membership on civic, corporate, philanthropic, professional, or other academic boards or commissions.
- Participation in and maintenance of accreditation activities; and
- Elected officer positions or key committee assignments within professional organizations at the local, state, regional, or national level.

2. Service to the Institution

Academic programs, departments, the College, and the University require the participation of faculty in their administration and governance. Public Health expects responsible participation of all faculty members in the academic community. Examples of institutional service may include, but are not limited to:

- Faculty governance activities, including providing meaningful contributions toward meeting the goals and objectives of program, department, School, or University committees, task forces, or governance bodies as an appointed or elected member, serving as a committee or task force chair, serving as a program coordinator, graduate director or assistant department chair, etc.; and
- Program, Department, and College support activities, including participating in student recruiting activities, commencement ceremonies, and faculty meetings, providing workshops/seminars.

3. Service to the Student

Student service involves assistance to individual students and groups of students that goes beyond the normal teaching/mentoring obligations of every faculty member. It may involve support for both academic and social activities and organizations. Examples of student service may include, but are not limited to the following.

- Assisting students in the transition from school to professional life through formal and informal career counseling, job seeking assistance, and providing letters of recommendation and referral

- Serving as a faculty advisor for a student chapter of a professional organization
- Serving as a faculty mentor for a student, student club, or other non-professional activity which may have both academic and social components
- Providing extracurricular seminars or workshops to students on topics such as ways to improve study habits, writing and speaking skills, and preparing for job interviews, preparing for entrance or exit exams, etc.
- Being available to consult with students on campus and/or via other appropriate means

4. Service to the Community

Faculty members serve the community in a variety of ways, including developing relationships with schools, organizations, businesses, and public agencies; developing and participating in outreach programs that apply and disseminate knowledge and creative work beyond the confines of the university; and developing and participating in partnerships (such as professional development schools and internship programs) between academic programs and external agencies. Activities such as these are legitimate extensions of scholarship and teaching, because they enrich academic programs and help to prepare students for lives of service and leadership. *It should also be noted that service to the community can also involve a transactional relationship that follows a fee-for-service model that helps enhance revenue streams, though this is not required.* Examples of community service may include, but are not limited to:

- Providing services to the public through involvement in professional development schools, clinics, hospitals, laboratories, centers, etc.
- Making research understandable and useable in specific professional and applied settings and the broader community.
- Government and agency-related activities, including, for example, participating in meetings or on panels, testifying before legislative committees, acting as an expert witness, etc.
- Engaging in activities that address public-interest problems, issues, and concerns, aimed at either general or specialized audiences; and
- Involvement in communications directed toward popular and non-academic publications including newsletter, radio, television and magazines.

Tenured and tenure-track faculty members after their third probationary year are expected to serve on at least one and no more than three University committees. Faculty members are expected to serve consistently at the departmental, college and university levels. Promotion and tenure require evidence of significant departmental committee involvement. Finally, as part of the tenure evaluation, faculty members are asked to provide evidence of active

religious service as part of a local congregation and evidence of one's commitment to Baylor's distinctive Christian mission.

D. Collegiality

Public Health faculty members are expected to treat their colleagues and students with respect. In their personal activities and relationships, faculty members should maintain a level of ethical and moral behavior that is supportive of and consistent with the Christian mission of Baylor University. Civil resolution of disagreements is expected.

II. Promotion to the Rank of Professor

Standards related to attainment of tenure and promotion to the rank of Associate Professor generally apply also to promotion to the rank of Professor. Additionally, the candidate's work should show outstanding evidence of achievement in scholarship and research, teaching, and administration. It is expected that the candidate will have achieved national leadership and/or national professional recognition as evidenced by peer reviews of scholarship in the faculty member's specific discipline. The candidate should also have assumed leadership roles and demonstrated effective leadership in interactions with students and other faculty, and in service to Baylor University and the candidate's profession.

The timing for applying for promotion to the rank of Professor is individual and may vary by discipline. It is not likely that an Associate Professor will achieve the level of prominence and leadership expected of the rank of Professor earlier than six years past the receipt of tenure. University policy does not allow an Associate Professor to be promoted to Professor sooner than four years after the granting of tenure. In some cases an Associate Professor may pursue promotion to Professor before the sixth year after tenure was granted; however, such an action must be approved by the majority of departmental Professors, the Dean, and the Provost.

A. Teaching Expectations (Teaching & Related Scholarly Work)

Promotion to the rank of Professor requires continued evidence of growth in teaching and attention to the provision of high-quality instruction. Evidence of teaching effectiveness and growth may be demonstrated through responses to student course evaluations/comments, peer evaluations, and teaching artifacts (e.g., syllabi, class assignments, video teaching logs, graded student work, other evidence of teaching/professional development). Mentoring and advising of students that leads to products (such as portfolios, dissertations, examination results, grant submissions, publications, presentations, and teaching) is also expected.

B. **<u>Scholarship Expectations</u> (Research & Scholarly/Creative Contributions)**

Promotion to the rank of Professor requires evidence of advanced and focused scholarly activity that is recognized nationally/internationally through peer review and impact. An important indication of such reputation is the opinion of external reviewers from the candidate's specialty/expertise area. Candidates for promotion to the rank of Professor are expected to have continued, as Associate Professors, the level of research and scholarship productivity described in section I of this document (*I. Tenure and Promotion to Associate Professor*).

Recognizing the University's support of interdisciplinary and collaborative scholarship, associate professors are encouraged to take advantage of the freedom afforded by tenure to pursue their scholarly interests whether they fall within or across traditional disciplinary boundaries. An associate professor may also have more opportunities for productive collaboration than would a candidate for tenure, though it continues to be expected that the individual's contribution should be significant.

Though working with undergraduate students in research is appreciated and acknowledged, the candidate should have strong evidence of working with graduate students in scholarship/research.

1. **Grant Procurement**

Submitting grant proposals to and obtaining funding from external funding sources as an Associate Professor is required for promotion to the rank of Full Professor. On-going efforts to secure external funding are expected unless the faculty member is under grant-related restrictions or has already obtained grants for which time is needed to complete those funded projects before applying for more funding. Evidence of having led research groups and/or mentored others (students, post docs, visiting scholars, or other faculty members) should be in place. ***Promotion candidates should provide evidence of consistent effort to seek, obtain, and manage the use of external funding over the length of their time as an Associate Professor. All proposals should reflect a clear and focused research agenda.***

2. **Productivity in Publications and Presentations**

The minimum standard productivity rate in Public Health is an average of three peer-reviewed journal publications per year and two presentations per year at national or international conferences. It is expected that associate professors will continue on a trajectory of averaging three publications and two presentations a year post tenure and promotion to associate professor. Mentoring students and other faculty as co-authors and co-presenters is expected. ***Scholarly output should reflect a clear and focused research***

agenda that is recognized nationally/internationally.

It is the responsibility of the candidate to communicate the quality of publication outlets with respect to factors such as impact factor, circulation of journal, reputation, rejection rate, eigenfactor, article influence score, size of circulation, number of peer reviewers, etc. It is the responsibility of full professors within the candidate's public health specialty area to provide guidance and assessment of the quality of publication outlets. External reviewers also address such factors. A candidate for promotion will count articles with evidence as being "accepted" and "in press" toward the total number of publications. It would be expected that candidates would provide data supporting the impact of their research through such factors as h-index, i-10 index, citations, and other means of demonstrating impact.

C. **Service Expectations** **(university, profession, community, and church)**

Service to the department, college, university, and community/non-profit organizations are highly important considerations for promotion to the rank of Professor. Candidates for this promotion (and tenured faculty members as a group) also have special responsibilities for mentoring junior faculty members and for leadership in service and governance on the departmental, college, and university levels. Additionally, however, it is important for candidates for promotion to the rank of Professor to have exhibited service efforts that receive attention across the College or University, in national/international professional organizations, and/or in the broader community. Such noteworthy service could include, but is not limited to: serving as an elected or appointed official for national/international professional organizations, departmental and/or college leadership roles, leading and/or initiating committees or task forces for professional organizations, or taking a major role in community projects or organizations.

III. Department External Peer Review Guidelines

In accordance with Baylor University Tenure and Promotion Procedures as outlined in the Baylor University Faculty Handbook, the Public Health department uses the following policy for selecting external reviewers for tenure and/or promotion and processing the external review.

Process for External Review for Public Health Candidates for Tenure and/or Promotion:

A. The candidate shall submit to the Department Chair a list of three names (including telephone numbers, addresses, nature of professional relationship, and brief professional profile) of potential external reviewers prior to the

academic year in which he or she will be reviewed for tenure and/or promotion. Outside evaluators must hold a rank in an academic institution that is at least equal to the rank that the candidate is seeking or have comparable professional standing in a non-academic setting. The ideal evaluators should come from highly reputable programs at respected peer and/or aspirant universities. In addition, except in rare cases (e.g., highly specialized fields with relatively low numbers of scholars), external evaluators should not include individuals for whom a close academic or personal connection with the candidate (e.g., dissertation advisors, former professors, graduate school colleagues, co-authors, fellow faculty members, friends, former students of the candidate, etc.) that may compromise their ability to evaluate the candidate's work objectively. Finally, it should be noted that letters from co-authors regarding the contributions of a candidate to co-authored work could in some circumstances provide useful information regarding the record of a tenure candidate, so departments may choose to submit letters of this nature as an additional part of the tenure and/or promotion review process. In no circumstance, however, shall a letter from a co-author be considered an "external review letter" with respect to the other recommendations in this report (see Tenure Procedures at Baylor University, p. 13).

B. The Chair, upon consultation with the departmental faculty members holding the rank being pursued by the candidate, will add names to the candidate's list. The candidate's list, along with the names added by the Chair and/or other faculty members, will be forwarded to the faculty within the department that currently hold at least the rank being pursued by the candidate. These faculty members, and any other Baylor faculty member appointed to serve in this capacity, will meet and rank-order the potential reviewers and forward the list of names to the Chair. Reviewers will be recognized for their scholarly contributions to the candidate's field of academic endeavor and should ordinarily be employed in a higher education setting at a peer and/or aspirant university. Every effort will be made to minimize biases for or against the candidate when selecting qualified reviewers.

C. The Chair will subsequently write to the top three reviewers (with others on the list serving as ranked alternates), requesting a confidential, written assessment of the candidate's scholarly activity. The three reviewers will receive a candidate packet from the Chair. This packet will include a "letter to external reviewers" (written by the candidate) that summarizes research foci and accomplishments, a current curriculum vitae, five representative publications, Baylor University's guidelines for tenure and/or promotion, and review instructions. The external reviewers' letters of assessment will be included as part of the candidate's professional portfolio at all levels of university consideration.

D. Candidates will not be told the identity of the reviewers who are chosen, or be allowed to read the original reviews. If tenure is granted, the candidate may

request a written summary of the reviews from the department chair or dean. Confidentiality is granted to the external reviewers by the department, college, or school through the tenure process. The external reviews, however, may be discoverable if legal action is taken by a candidate who is unsuccessful in the tenure process.

At a minimum, the letter of invitation to review should request that the reviewer:

    a. Detail his or her acquaintance or familiarity with the candidate and the candidate's scholarly work.

    b. Review and critique of the candidate's scholarly activity on the basis of standards in the specific discipline or sub-discipline.

    c. Provide an assessment of the candidate's recognition and standing among his or her peers.

    d. Indicate whether his or her scholarship has had an impact on the discipline or advanced the discipline in meaningful ways, and, if it has done so, describe how it has affected the discipline.

    e. Indicate whether it has earned for the candidate a national reputation.

    f. Indicate whether the candidate's collective work/program of research is likely to yield further significant advances in knowledge.

The letter of invitation should provide a statement addressing confidentiality such as: Your letter will be provided to departmental, college and university review committees and appropriate administrators. Candidates will not be told the identity of the reviewers who are chosen, or be allowed to read the original reviews. The letters will be kept confidential to the extent allowed by Texas law, although a candidate who successfully obtains tenure may request and obtain a general written summary of the reviews from the departmental chair or dean.

    E. The Chair (or the chair's designate) is responsible for ensuring the following are completed:

    1. Securing names of potential reviewers by April 1st.

    2. Contacting external reviewers and securing their agreement to participate by June 1st.

    3. Securing reviews by Sept 1st.

    4. Placing reviews in the candidate's file.

    5. Summarizing the qualifications of the external reviewers and placing this summary in the candidate's file.

    6. If needed, placing in the file any justification for why the external review process was not conducted in accordance with the stated criteria.

Appendix A
List of Approved Publication Journals

Public health researchers often collaborate with professionals in a wide variety of disciplines (e.g., health care, psychology, sociology, social work, exercise physiology, recreation/leisure, education, religion, business) to address public health-related problems and initiatives. Research projects and their subsequent results are often published in a variety of highly reputable journals that may target a specific profession (e.g., doctors, counselors, practitioners, political leaders) or segment of the population (e.g., school, worksite, or community populations).

The Public Health faculty highly values publications in a wide variety of high-impact, quality journals. The faculty also supports and recognizes as valuable and appropriate a wide scope scholarly works and niche-specific publications that inform practitioners and community leaders whose perspectives and actions can impact the health of the populations they serve. Thus, the faculty also values scholarly work in a variety of other forms (e.g., books of scholarly significance, book chapters, refereed monographs, non-refereed articles).

The publication journals listed in this document are presented as a general guide for understanding publication strength from within the context of the five journal rankings indicated below. Due to the broad scope of publication possibilities and foci in public health research, these lists should not be viewed as exhaustive. Our researchers are encouraged to publish in journals that will effectively disperse findings and recommendations to those who will benefit from the information in research and practice settings. Other journals not listed here can and should certainly be considered in publication efforts. Candidates for tenure and promotion are expected to provide in their submission materials information about each journal (e.g., impact factors) in which they have published so that reviewers can more readily determine publication strength.

Five Journal List Rankings
(highest ranking = 1)
    1-Outstanding Recognition in Field, Highly Prestigious, Refereed
    2-Highly Respected in Field and Related Fields, Refereed
    3-Good Reputation, Selective in Publication, Refereed
    4-Average, Fairly Easy to Publish In, Typically Refereed
    5-Special publication, important to field in terms of influence and impact to practitioners

1-Outstanding Recognition in Field, Highly Prestigious, Refereed

Acta Psychologica
Addiction Journal
Addictive Behaviors
Adolescence
Advances in Nutrition
AIDS and Behavior
Alcohol and Alcoholism
American Heart Journal
American Journal of Cardiology
American Journal of Clinical Nutrition
American Journal of College Health
American Journal of Epidemiology
American Journal of Health Behavior (formerly Health Values)
American Journal of Health Education
American Journal of Health Promotion American Journal of Human Biology
American Journal of Hypertension

American Journal of Industrial Medicine
American Journal of Kidney Diseases
American Journal of Managed Care
American Journal of Medicine
American Journal of Nephrology
American Journal of Nursing
American Journal of Occupational Therapy
American Journal of Physical Medicine & Rehabilitation
American Journal of Preventive Medicine
American Journal of Public Health
American Journal of Respiratory and Critical Care Medicine
American Journal of Surgery
American Psychologist
Annals of Behavioral Epidemiology
Annals of Family Medicine
Annals of Global Health
Annals of Internal Medicine
Annals of Nutrition and Metabolism
Annals of Surgery
Annals of the New York Academy of Sciences
Annual Review of Nutrition
Annual Review of Public Health
Anthrozoos
Appetite
Applied Psychological Measurement
Archives of Environmental & Occupational Health: An International Journal
Archives of Internal Medicine
Archives of Physical Medicine and Rehabilitation
Arthritis Care and Research
Arthritis Research & Therapy
Arthroscopy
Atherosclerosis
Behavioral and Brain Sciences
Biochemical and Biophysical Research Communications
Biological Cybernetics
Biological Psychiatry
BMC (including all sub-types, some noted below)
BMC (Biomed Central) Public Health
BMJ (British Medical Journal) - including all sub-types of BMJ (e.g., BMJ Global Health)
Brain, Behavior and Immunity
British Medical Journal
Bulletin of the World Health Organization
Cardiovascular Research
Child Abuse and Neglect
Childhood Obesity
Circulation Research
Clinical Nephrology
Clinical Nutrition
Clinical Orthopedics and Related Research
Clinical Science
Diabetes
Diabetes and Metabolism
Diabetes Care
Diabetes-Metabolism Research and Reviews
Diabetic Medicine
Diabetologia

Drug and Alcohol Dependence
Drug and Alcohol Review
Educational and Psychological Measurement
Emerging Infectious Diseases
Environmental Health Perspectives
Epidemiologic Reviews
Epidemiology
European Journal of Public Health
Exercise and Immunology Reviews
Exercise and Sport Sciences Reviews
Gerontologist, The
Health and Place
Global Health: Science and Practice
Global Health Action
Health Affairs
Health Care Financing Review
Health Care Management Review
Health Economics
Health Education and Behavior
Health Education Research
Health Policy and Planning
Health Promotion and Practice
Health Psychology
Health Services Research
HIV Medicine
Hypertension
Infection Control and Hospital Epidemiology Inquiry
International Health
International Journal of Behavioral Nutrition and Physical Activity
International Journal of Environmental Research and Public Health Drug Policy
International Journal of Epidemiology
International Journal of Health Policy Management
International Journal of Obesity
International journal of preventive medicine
International Journal of Public Health
International Quarterly of Community Health Education
JAMA-Journal of the American Medical Association (all associated network journals)
Journal of Acquired Immune Deficiency Syndromes
Journal of Adolescent and Family Health
Journal of Adolescent Health
Journal of Acquired Immune Deficiency Syndromes
Journal of Affective Disorders
Journal of Aging and Physical Activity
Journal of Allied Health
Journal of the American Board of Family Medicine
Journal of American College of Cardiology
Journal of American College of Nutrition
Journal of American Dietetic Association
Journal of Applied Behavioral Science
Journal of Autism and Developmental Disorders
Journal of Behavioral Medicine
Journal of Bone and Joint Surgery
Journal of Cancer Education
Journal of Clinical Endocrinology and Metabolism
Journal of Clinical Epidemiology
Journal of Clinical Investigation

Journal of Clinical Psychology
Journal of Community Health Nursing
Journal of Environmental Health
Journal of Epidemiology and Community Health
Journal of General Internal Medicine
Journal of Gerontology
Journal of Global Health
Journal of Health Politics, Policy, and Law
Journal of Infectious Diseases
Journal of Internal Medicine
Journal of Interpersonal Violence
Journal of the International AIDS Society
Journal of Medical Internet Research
Journal of Nephrology
Journal of Neurology
Journal of Neurophysiology
Journal of Neuroscience
Journal of Nutrition
Journal of Occupational Health
Journal of Personality and Social Psychology
Journal of Physical Activity and Health
Journal of Physiology and Biochemistry
Journal of Public Health
Journal of Rural Health
Psychiatric Research
Journal of the American Medical Association
Journal of the American Society of Nephrology
Journal of the American Statistical Association (JASA)
Journal of Global Health
Journal of the National Cancer Institute (JNCI)
Journal of Transport and Health
Journal of Urban Health
Journal of Women's Health
Lancet (all associated network journals)
Lipids
Medical Care
Medicine
Medicine & Science in Sports & Exercise
Military Medicine
Morbidity and Mortality Weekly Report
New England Journal of Medicine
Nicotine & Tobacco Research
Nutrition
Nutrients
Obesity (formerly known as Obesity Research)
Obesity Reviews
Obesity Research and Clinical Practice

Pediatrics
Perspectives on Sexual and Reproductive Health
Physical Therapy
Plos One
Preventing Chronic Disease
PLOS (including all sub-types, some noted below)
PLOS One
PLOS Neglected Tropical Diseases

Preventive Medicine
Proceedings of the National Academy of Sciences
Progress in Lipid Research
Pediatric Obesity (formerly known as Internal Journal of Pediatric Obesity)
Psychological Bulletin
Psychological Reviews
Psychology Bulletin
Psychology of Addictive Behaviors
Public Health Reports
Public Health
Public Health Reports
Research Quarterly for Exercise and Sport
Review of Religious Research
Revista de Saude Publica (Internationally read journal based in Brazil)
Science
Social Science and Medicine
Statistics in Medicine
Trauma, Violence, & Abuse
Surgery
Vaccine
Women's Health Issues
Work and Stress
World Journal of Surgery

2-Highly Respected in Field and Related Fields, Refereed

Active Learning in Higher Education
AIMS Public Health
African Journal of Pediatric Surgery
American Behavioral Scientist
American Journal of Drug and Alcohol Abuse
Applied Psychology-International Review
Behavior Research Methods, Instruments, and Computers
Behavioral Neuroscience
Cancer Causes and Control
Community, Work, & Family
Contemporary Business Readings of the Academy of Business Administration
Current Reports
Educational and Psychological Measurement
Epidemiology and Infection
European Journal of Pediatric Surgery
Evaluation and Program Planning
Field Methods (formerly Cultural Anthropology Methods) Frontiers in Psychology
Global Public Health
Globalization and Health
Haematologica
Health Behavior and Policy Review
Health Behavior Research
Health Communication
Health Services Research
Hormone and Metabolic Research
Hormone Research
Human Performance
Human Animal Interaction Bulletin
International Journal for Equity in Health

International Journal of Interdisciplinary Social and Community Studies Health Services
International Journal of STD and AIDS
Internet Journal of Allied Health Sciences and Practice
International Journal of Child Health CareSurgery
Journal for Civic Engagement Journal of Addiction Medicine
Journal of Agricultural Health and Safety
Journal of Community Psychology
Journal of Environmental Education
Journal of Health Care for the Poor and Underserved
Journal of Healthy Eating and Active Living
Journal of Hypertension
Journal of Interactive Learning Research
Journal of Interprofessional Care
Journal of Neurophysiology
Journal of Prevention, Assessment, & Rehabilitation
Journal of Public Health Management and Practice
Journal of Public Health Policy
Journal of School Health
Journal of Studies on Alcohol and Drugs
Journal of Substance Abuse Treatment
Journal of Student Affairs Research and Practice
Journal of Public Health
Journal of Youth & Adolescence
Maternal and Child Health Journal
Medical Education
Nutrition Metabolism and Cardiovascular Diseases
Pan American Journal of Public Health
Patient Education and Counseling
Perception and Psychophysics
Pediatric Surgery International
Population Health Management
Population Health Metrics
Progress in Community Health Partnerships: Research, Education, and Action
Rural Remote Health
Quest
Society & Animals
Seminars in Pediatric Surgery
Substance Use and Misuse
The Journal of Midwifery and Women's Health
The American Journal of Addiction
World Journal of Pediatrics

3-Good Reputation, Selective in Publication, Refereed

Christian Journal for Global Health
College Teaching
Community Development Journal: An International Forum
Community Mental Health Journal
Development in Practice
Education for Health: Change in Learning & Practice
Educational Technology Research and Development
European Journal of Physical Medicine and Rehabilitation
Evidence Based Healthcare and Public Health
Fitness Matters - American Council on Exercise

International Electronic J. of Health Education
International Journal of Stress Management
Journal of Applied Social Psychology Alcohol and Drug Education
Journal of Behavioral Health Services & Research
Journal of Bodywork and Movement Therapies
Journal of Cardiopulmonary Rehabilitation
Journal of Computer Assisted Learning
Journal of Christian Nursing
Journal of Educational Research
Journal for Experiential Education
Journal of Family Violence
Journal of International Development
Journal of Nursing Education
Journal of Occupational and Environmental Hygiene
Journal of Occupational and Environmental Medicine
Journal of Occupational Medicine
Journal of Pediatric Surgery
Living Knowledge Journal of Community Based Research
Medical Teacher
Obesity Society
Physiotherapy theory & Practice
Preventing Chronic Disease
Public Health Nutrition
Progress in Development Studies
Scandinavian Journal of Public Health
Stress and Health
Teaching and Learning in Medicine

4-Average, Fairly Easy to Publish In, Typically Refereed

American Journal of Health Studies
Journal of Religion and Health
Journal of Technology and Teacher Education
Perceptual and Motor Skills
Strategies
The Health Educator (Eta Sigma Gamma)

5-Special publication, important to field in terms of influence and impact to practitioners

Christian Education Journal GLOBAL HEALTH NOW
Texas Public Health Association Journal

Appendix B
PUBLIC HEALTH PEER REVIEW OF TEACHING
Instructional Assessment Form

Date:_____Presentation:_____
Instructor:_____Rater:_____

Directions: This instrument consists of seven sections and twenty-four statements intended to serve as a guide for assessing instruction in lecture and lab settings. After attending an instructional period, please respond to each statement by circling the number that best corresponds to your observations. The scale is as follows: **(1) Poor; (2) Fair; (3) Average; (4) Good; (5) Excellent: and NA (Not Applicable)**

A.   **DEMONSTRATES EXPERTISE IN SUBJECT AREA AND SKILL IN KNOWLEDGE TRANSFERENCE**

1. Specifies purpose of the instructional period — 1 2 3 4 5 NA
2. Sets general ground rules for audience participation and evaluation — 1 2 3 4 5 NA
3. Relates the main body of information to the introductory purpose — 1 2 3 4 5 NA
4. Makes transitions between different segments of the instructional content — 1 2 3 4 5 NA
5. Uses clear, relevant examples to demonstrate ideas — 1 2 3 4 5 NA
6. Clarifies technical terminology — 1 2 3 4 5 NA
7. Summarizes most important points of ideas of the instructional period — 1 2 3 4 5 NA
8. Develops a conclusion related to the purpose and body of the instructional period — 1 2 3 4 5 NA
9. Cites appropriate authorities to support statements — 1 2 3 4 5 NA
10. Presents divergent viewpoints for contrast and comparison — 1 2 3 4 5 NA
11. Separates fact from opinion — 1 2 3 4 5 NA
12. Can illustrate theory through practice models — 1 2 3 4 5 NA
13. Provides resources for further investigation of subject — 1 2 3 4 5 NA

B.   **DEMONSTRATES SKILL IN USE OF VOICE AND BODY MOVEMENTS DURING INSTRUCTIONAL PROCESS**

1. Speaks at a volume suitable for audience — 1 2 3 4 5 NA
2. Speaks at a suitable pace for presentation — 1 2 3 4 5 NA
3. Varies rate, pitch, and force of voice for emphasis — 1 2 3 4 5 NA
4. Speaks in a conversational manner — 1 2 3 4 5 NA
5. Uses eye contact with entire audience — 1 2 3 4 5 NA
6. Uses a variety of appropriate facial expressions — 1 2 3 4 5 NA
7. Uses hand and arms appropriately — 1 2 3 4 5 NA
8. Moves purposefully — 1 2 3 4 5 NA

C.   **DEMONSTRATES SKILL IN THE USE OF INSTRUCTIONAL SUPPORT MEDIA (ie. over-heads, PowerPoint, dry erase board, slides, videos, demonstration, etc.)**

1. Coordinates support media with verbal presentation — 1 2 3 4 5 NA
2. Uses support media to enhance understanding of subject matter — 1 2 3 4 5 NA
3. Uses support media which are easily visible and audible to all students — 1 2 3 4 5 NA

D.   **GENERAL COMMENTS (Any score below a rating of "3", requires a comment)**

E.   **STRENGTHS**

F.   **AREAS FOR IMPROVEMENT**

G.   **STRATEGIES FOR IMPROVEMENT**