The UNC Department of Maternal and Child Health’s Expectations for Promotion and Tenure

PREAMBLE
The Department of Maternal and Child Health (MCH) informs public health practice through scholarly research, practice and teaching. MCH is a multidisciplinary profession that incorporates the traditional fields of public health (epidemiology, health behavior, health policy, etc.), along with more practice-oriented professions (medicine, psychology, nursing, nutrition, social work, etc.).

In 1912, as the Flexner report was stimulating the reorganization of medical training, federal legislation established the Children’s Bureau to promote MCH as a focus for public health practice. In 1947, the Children’s Bureau funded the first MCH training grant in schools of public health. Four universities – Harvard University, the University of California at Berkeley, the University of North Carolina at Chapel Hill, and Johns Hopkins University – received grants from the Children’s Bureau to establish MCH departments within their Schools of Public Health. The primary goal of these departments was to train administrators with a public health and child/family focus for the new programs being developed in the states under Title V of the Social Security Act.

After that, MCH training programs proliferated across the country. While remaining true to their original mission to train public health practitioners, MCH departments and programs have strengthened their academic training for students interested in careers in research, evaluation, and teaching.

As a result, the UNC Department of Maternal and Child Health appointment and promotion guidelines reflect our ongoing departmental emphasis on a scholarly approach to research, practice and training. Our standards are high and commensurate with our Department’s commitment to being the best of its type in the country.
PROMOTION OF TENURE-TRACK/TENURED FACULTY

In accordance with the SPH policies, UNC MCH faculty members on the tenure-track and those who have tenure may be promoted on the basis of either research or practice.

Scholarly Products: The following applies for promotion of both research and practice oriented tenure-track/tenured MCH faculty.

The Department expects an approximate annual average of 4 or more scholarly products.

- Scholarly products include peer-reviewed publications in scientific journals that are highly regarded in the field, as well as technical reports, book chapters, software, digital media, or similar products. Faculty should demonstrate that this work has had, or has the potential to have, an important impact on MCH research, teaching, practice, or state, federal, or international policies (e.g., reports for government agencies concerning how best to organize MCH services, etc.).
- Scholarly products that promote the public good and are directed at persons or groups outside of UNC-Chapel Hill are greatly valued. Moreover, work across disciplinary lines is valued in light of the multidisciplinary nature of the field of maternal and child health.
- In light of the variability of publication/product schedules, the Department considers the average number of scholarly products over the time period under consideration. For example, the average number of products over a 5-year period would be “4.8 per year” for a faculty member with 3 scholarly products during year one, 7 scholarly products during year two, 5 scholarly products in year three, 4 scholarly products in year four, and 5 scholarly products in year five.
- For approximately half of these scholarly products, the faculty member should be the first or lead author. For example, for many journals, this would be denoted by being first author, while for other journals, it would be denoted by being the last author. First authorship by a student of the faculty member (with the faculty member as a co-author) is considered equivalent to a first-authored publication by the faculty since the faculty member mentored the student through the publication.

Funding: The following applies for promotion of both research and practice oriented tenure-track/tenured faculty.

Faculty should demonstrate a history of funding for her or his projects. The Department values:

- All funding mechanisms:
  - Grants
  - Contracts
  - Gifts
- All funding sources allowed by the university:
  - Federal sources, such as CDC, HRSA, NIH, USAID, etc.
  - State sources, such as the Governor’s Crime Commission, NCDHHS, etc.
  - Foundations (WT Grant, Z Smith Reynolds, RWJF, Kellogg, etc.)
  - Private industry

Faculty should have served as the PI (or lead investigator) on at least one multi-year grant or contract, regardless of funding source.

Faculty should have a high probability of continued funding in the future (demonstrated by having multi-year grants/contracts that extend into the future and by having new grant/contract proposals under review).
Faculty should generally have an annual average of approximately 50% or more of his or her salary funded through research, practice and/or other sources of funding. However, faculty with substantial administrative responsibilities would be expected to have less external support. In light of the variability of funding, the Department considers the average percentage of salary funded over the time period under consideration. For example, if during a 5 year period, the faculty member was funded by a combination of research, practice and other funds for 70% for year one, 50% for year two, 60% for year three, 40% for year four, and 50% for year five, the annual average funding would be 54%.

**Teaching/Mentoring:** Tenure-track/tenured MCH faculty in either research or practice tracks are expected to engage in both classroom teaching and student mentoring. This includes:

Generally, teaching the equivalent of one 3-credit course per year as lead instructor, or two 3-credit courses per year as co-instructor. However, the number of courses taught per year and the number of credit hours taught per year may vary from this guideline in response to class size and the research/practice/administrative load of the faculty member as determined by the Department Chair.

Advising students. It is recognized that more time is generally needed to advise doctoral students. If the faculty member advises more doctoral students, they would be expected to advise fewer master’s students. For example, if the faculty member advises an average of 1 doctoral student each year, (s)he should advise an average of 6 or more master’s students each year; if (s)he advises an average of 2 doctoral students, (s)he should advise an average of 4 master’s students each year; if (s)he advises 3 doctoral students each year, (s)he should advise 2 master’s students each year; etc.

Mentoring. Mentor at least some students whom they do not advise by serving as readers for master’s papers and by serving on doctoral committees for MCH and/or non-MCH students.

**Service:** Consistent with MCH traditions, tenure-track/tenured MCH faculty members being considered for promotion on the basis of either research or practice are expected to engage in service activities. This may include service to:

- The Department, School, and University (committees, etc.)
- The profession of MCH research/practice (being on the editorial boards for journals, serving on grant review committees, etc.)
- Professional associations (leadership roles in organizations such as American Public Health Association, the Association of Teachers of MCH, Society for Adolescent Health and Medicine, American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, the Society of Perinatal Epidemiologic Research, etc.)
- Non-profit organizations related to MCH (e.g., March of Dimes, Allan Guttmacher Institute, NC Smart Start, Save the Children, etc.).

Engagement with the public is valued and encouraged.

**Faculty Mentoring:** All associate professors and full professors who are tenured or on the tenure track are expected to engage in mentoring of other MCH faculty members who are junior to themselves. Faculty members are expected to serve on at least two mentoring committees (assuming there are sufficient junior faculty members to create such a demand).
PROMOTION OF FIXED-TERM FACULTY

In accordance with the UNC SPH policies, MCH fixed-term faculty members include Research faculty, Clinical faculty, and Professors of the Practice. UNC MCH fixed-term faculty members are expected to be involved in research, teaching and service activities, but the mix may be different for research versus clinical faculty and Professors of the Practice.

Promotion of Research Faculty

Scholarly Products: For promotion of MCH fixed-term research faculty, expectations for scholarly products are qualitatively similar to those of MCH tenure-track/tenured faculty. More specifically: The Department generally expects an annual average of 4 or more scholarly products. This expected number of publications takes into consideration that MCH research faculty very often have teaching responsibilities.

- Scholarly products include peer-reviewed publications in scientific journals that are highly regarded in the field, as well as technical reports, book chapters, software, digital media, or similar products. For scholarly products other than peer-reviewed manuscripts, faculty should demonstrate that this work has had, or has the potential to have, an important impact on MCH research, teaching, or practice, or state, federal, or international policies (e.g., reports for government agencies concerning how best to organize MCH services, etc.)
- Scholarly products that promote the public good and are directed at persons or groups outside of UNC Chapel Hill are greatly valued. Moreover, work across disciplinary lines is valued in light of the multidisciplinary nature of the field of Maternal and Child Health.
- In light of the variability of publication/product schedules, the Department considers the average number of scholarly products over the time period under consideration. For example, the average number of products over a 2-year period would be “5 per year” for a faculty member with 3 scholarly products during year one and 7 scholarly products during year two.
- For approximately half of these scholarly products, the faculty member should be the first or lead author. For example, for many journals, this would be denoted by being first author, while for other journals, it would be denoted by being the last author. First authorship by a student of the faculty member (with the faculty member as a co-author) is considered equivalent to a first-authored publication by the faculty since the faculty member mentored the student through the publication.

Funding: In contrast to tenure-track/tenured faculty, research faculty members are expected to generate a greater degree of funding (generally 80% or more) to support their salaries. To be considered for promotion, the research faculty member should:

Demonstrate a history of funding for her or his projects. The Department values:

- All funding mechanisms
  - Grants
  - Contracts
  - Gifts
- All funding sources allowed by the university
  - Federal sources, such as CDC, HRSA, NIH, USAID, etc.;
  - State sources, such as the Governor’s Crime Commission, NCDHHS, etc.;
  - Foundations (WT Grant, Z Smith Reynolds, RWJF, Kellogg, etc.);
  - Private industry
Currently serve as PI, Investigator, Evaluator, or in some other responsible capacity on one or more multi-year grants/contracts

Have a high probability of continued funding in the future (demonstrated by being the lead or collaborator on multi-year grants/contracts that extend into the future and by having new grant/contract proposals under review)

Generally, have 80% or more of his or her salary funded annually through research, practice, teaching, and/or other sources of funding.

**Teaching/Mentoring:** MCH research faculty members being considered for promotion are typically expected to engage in classroom teaching, and are encouraged to participate in student mentoring. However, they are typically involved in these activities at a lower level than tenure-track/tenured MCH faculty (e.g., fewer courses, fewer mentees). This includes:

Teaching one 3-credit course per year as instructor or two 3-credit courses per year as co-instructor is generally expected but is at the discretion of the Department Chair in light of the level of external salary support. The balance of teaching load and expected salary coverage will be determined by the Chair. In general, if the research faculty member has no teaching responsibilities, the expectation would be to have 100% of his or her salary funded annually.

Advising master’s and/or doctoral students is encouraged, but not mandatory.

**Service:** Consistent with MCH traditions, MCH research faculty members are encouraged to engage in service activities; if they do this, they would likely do so at a lower level than do tenure-track/tenured MCH faculty. This may include service to:

- The Department, School, and University (committees, etc.)
- The Profession of MCH (e.g., being on the editorial boards for journals, serving on grant review committees, etc.)
- Professional associations (leadership roles in organizations such as American Public Health Association, the Association of Teachers of MCH, American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, Society for Adolescent Health and Medicine, the Society of Perinatal Epidemiologic Research, etc.)
- Non-profit organizations related to MCH (e.g., March of Dimes, Allan Guttmacher Institute, NC Smart Start, Save the Children, etc.)

Engagement with the public outside of UNC-Chapel Hill is valued and encouraged.

**Faculty Mentoring:** Although research full professors and research associate professors are encouraged to act as mentors to other MCH faculty members, it is not required for promotion.
Promotion of Clinical Faculty

UNC MCH has two categories of fixed-term clinical faculty, those who emphasize teaching and those who emphasize practice. Members of both categories are expected to be involved in teaching and/or public health practice and/or service activities. The amount of time dedicated to these activities will likely vary widely depending on which category of clinical appointment the individual faculty member is in and the needs of the Department.

Scholarly Products: For promotion of MCH clinical faculty, expectations for the number of annual scholarly products are lower than those for MCH tenure-track/tenured faculty or the MCH research faculty.

The Department generally expects an annual average of 2 or more scholarly products.

- Scholarly products include peer-reviewed publications in scientific journals that are highly regarded in the field, as well as technical reports, book chapters, software, digital media, or similar products. For products other than peer-reviewed manuscripts, faculty should demonstrate that this work has had an important impact, or has the potential for impact, on MCH teaching, practice, or state, federal, or international policies (e.g., reports for government agencies concerning how best to organize MCH services, etc.). Unlike tenured/tenure-track faculty or research faculty, all of the scholarly products for clinical faculty could be high-impact products other than peer-reviewed journal publications.

- Scholarly products that promote the public good and are directed at persons or groups outside of UNC Chapel Hill are greatly valued. Moreover, work across disciplinary lines is valued in light of the multidisciplinary nature of the field of maternal and child health.

- In light of the variability of publication/product schedules, the Department considers the average number of scholarly products over the time period under consideration. For example, the average number of products over a 2-year period would be “3 per year” for a faculty member with 2 scholarly products during year one and 4 scholarly products during year two.

- For at least one of these scholarly products, the faculty member should be the lead or first author. For example, for many journal articles this would be denoted by being the first author, while for other journals, it would be denoted by being the last author. First authorship by a student of the faculty member (with the faculty member as a co-author) is considered equivalent to a first-authored publication by the faculty since the faculty member mentored the student through the publication.

Funding: In contrast to tenure-track/tenured faculty, clinical faculty members are expected to generate a greater degree of funding (consistent with research faculty) to support their salaries and their projects, with the percentage required dependent on relative effort devoted to teaching versus practice, and the discretion of the Chair. Most clinical faculty would generally be expected to generate 80% or more of their support from their practice or other activities if they had limited teaching responsibilities. Some, however, may have a large teaching load and such faculty would be expected to have less external support – with the level of support being inversely related to the teaching responsibilities. Thus, to be considered for promotion, most clinical faculty members should:

Demonstrate a history of funding for their teaching or practice projects. The Department values:

- All funding mechanisms allowed by the university
  - Grants
  - Contracts
  - Gifts
All funding sources allowed by the university
- Federal sources, such as CDC, HRSA, NIH, USAID, etc.
- State sources, such as the Governor’s Crime Commission, NCDHHS, etc.
- Foundations (WT Grant, Z Smith Reynolds, RWJF, Kellogg, etc.)
- Private industry

Currently serve as PI, Investigator, Evaluator, or in some other responsible capacity on one or more multi-year projects

Have a high probability of continued funding in the future (demonstrated by being the lead or collaborator on multi-year projects that extend into the future and by having new proposals under review)

Generally have 80% or more of her or his salary funded through practice, if effort focuses on practice activities

**Teaching/Mentoring:** For MCH clinical faculty members emphasizing teaching (e.g., < 25% external support from research or practice), those considered for promotion are expected to engage in both classroom teaching and student mentoring. This includes:
- Leading three 3-credit courses per year or the equivalent combination of courses led or co-instructed
- Advising an average of 7-8 master’s students annually, or 5-6 master’s students and one doctoral student annually, or 3-4 master’s students and two doctoral students annually, etc.
- Mentoring at least some students whom they do not advise by serving as readers for master’s papers and/or serving on doctoral committees.

For MCH clinical faculty members emphasizing practice, and having most of their time supported via practice activities, those considered for promotion are expected to engage in both classroom teaching and student mentoring, but to a lesser extent. The level of teaching and student mentoring is determined by the Chair, based on considerations of external support.

**Service:** Consistent with MCH traditions, MCH clinical faculty members are expected to engage in service activities. This may include service to:
- The Department, School, and University (committees, etc.)
- The Discipline of MCH (being on the editorial boards for journals, serving on grant review committees, etc.)
- Professional associations (leadership roles in organizations such as APHA, the Association of Teachers of MCH, American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, Society for Adolescent Health and Medicine, the Society of Perinatal Epidemiologic Research, etc.)
- State and local public health departments and community-based MCH-related organizations involved in MCH practice and/or teaching
- Non-profit organizations related to MCH (e.g., March of Dimes, Allan Guttmacher, NC Smart Start, Save the Children, etc.)

Engagement with the public outside of UNC-Chapel Hill is valued and encouraged.
**Faculty Mentoring**: Although clinical full professors and clinical associate professors are encouraged to act as mentors to other MCH faculty members, it is not required for promotion.

**Appointment of Professors of the Practice**

The Department does not have guidance in addition to that in the School’s APT Manual for appointments of Professors of the Practice.