HHS Public Access

Author manuscript

Ann Epidemiol. Author manuscript; available in PMC 2020 February 05.

Published in final edited form as:

Ann Epidemiol. 2018 September ; 28(9): 655. doi:10.1016/j.annepidem.2018.07.007.

Reply: "Building the pipeline: programs to introduce middle school, high school, medical, and veterinary students to careers in epidemiology and public health"

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Keywords

Curricula; Education; Epidemiology; Public health; Teaching

We appreciate the author's support for the movement to introduce epidemiology into middle and high schools. The author provides great insights into the opportunities and benefits of bringing epidemiology and public health sciences (EPHS) education into classrooms nationwide. They also appropriately emphasized the importance of using evaluation data to drive program development and enhancement.

As we continue to implement the programs described in our report, we rely on evaluation data to guide our activities. For example, we have identified important patterns and trends over the last decade, including those the author mentions, such as who is being served by our national Science Ambassador program and an increased interest in teaching EPHS in middle and high school. These data have guided modifications of our recruitment and outreach strategies to expand our overall program reach to now include teachers and educational leaders representing 46U.S. states and territories and five countries in 2018. It also led to the 2018 piloting of 2-day regional training programs to reach over 120 additional teachers representing schools in targeted geographic areas, including those that are underserved. Furthermore, the transition of the national Science Ambassador program from a week-long workshop to a year-long fellowship in 2017 will enable us to evaluate how and to whom our curricula are taught in schools over the course of the following academic year. We look forward to sharing such information in the near future to guide additional efforts beyond our programs.

We agree with the author that much work in forging direct partnerships between epidemiologists and secondary school educators remains to be carried out. Although we can

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provide expertise in public health content and training, the development and dissemination of challenging, innovative EPHS curriculum requires partnerships with educational leaders and organizations. Partnerships such as those CDC has with the Science Olympiad and with Science Ambassador program participants serve as examples of how public health organizations can work with educators to develop and improve EPHS curriculum. In turn, having this curriculum supports educational leaders as they work with their state departments of education to incorporate EPHS-based standards into their state science and career and technology standards, as was the case with Washington and California.

We also agree with the author's comments on student involvement and community engagement. It is our hope that all of our programs lead to participants and their students becoming more engaged with their local public health departments and other local organizations to address important public health issues in their communities.

Acknowledgments

The findings and conclusions in this reply are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention (CDC).