PERCEPTIONS OF STRATEGIC ENROLLMENT MANAGEMENT IN SCHOOLS OF PUBLIC HEALTH: A LOOK AT GRADUATE PROFESSIONAL PROGRAMS

by

KARA BROWN ROBINSON

(Under the Direction of James C. Hearn)

ABSTRACT

This research examined the practice of strategic enrollment management in schools of public health (SPH) through an administrative orientation with a focus on admission and financial processes. While strategic enrollment management (SEM) has been studied at great length at the undergraduate level, much less attention has been paid to SEM in professional schools. A qualitative research study of SEM was undertaken to examine the prevalence of SEM plans, concepts adopted, organizational structure and perceived barriers to implementation. Semi-structured interviews were conducted with admissions representatives from 27 SPH.

The study yielded several conclusions that are important to university administrators. First, SEM is conceptualized through informal frameworks in SPH rather than through formal strategic enrollment management plans. Second, SPH organizational structures are centralized in terms of admissions and recruitment processes and decentralized in terms of decision-making authority and yield-to-matriculation efforts. Furthermore, admissions representatives in SPH see collaboration as essential for meeting matriculation targets. Finally, polarities exist regarding the impact of tuition and financial aid structures on enrollment management in SPH. SEM is complex, and there are contradictions between its aspirations and the day-to-day realities –
exemplified through schools’ commitment to diversity, an educated and representative public health workforce and a collaborative approach to strategic enrollment management within the context of a competitive and expanding market.

Inevitably, there were limitations to the analysis. Admission representatives from only 27 of the 51 Council on Education and Public Health (CEPH) accredited schools in the U.S. were interviewed, and other personnel from schools of public health – such as deans and faculty – were not interviewed. In addition, the study’s use of telephone interviews may have constrained data-gathering due to the impersonal nature of the interaction. Nevertheless, master’s degree programs are growing dramatically across disciplines, and future research is warranted to further examine graduate enrollment management models. Ideally, results from this study will inform SPH as they engage in conversations and undertake decisions regarding strategic enrollment management and pursue areas for prospective collaboration within their schools and institutions.

INDEX WORDS: Strategic Enrollment Management, Enrollment Management, Graduate Enrollment Management, Schools of Public Health, Admissions, Tuition and Finance
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PUBLIC HEALTH: A LOOK AT GRADUATE PROFESSIONAL PROGRAMS

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DEDICATION

This dissertation is dedicated to Kevin and Ryan. I love you to the moon and back.
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CHAPTER 1
INTRODUCTION

Schools of public health (SPH) are facing numerous challenges across higher education. With increasing competition and dependence on tuition as the primary source of revenue, how schools approach the management of enrollment is of timely interest. Enrollment management (EM) as a conceptual framework dates back to the mid-1970s at Boston College and is described by Hossler as a process of bringing discipline, integration, and intentionality to the process of achieving an institution’s enrollment goals (Kalsbeek & Hossler, 2008). Developed as a response to an admissions crisis, EM evolved as a method to bring a cohesive approach to enrollment; uniting disparate units across the campus (Bontrager, Ingersoll, & Ingersoll, 2012).

This new framework brought with it a variety of perspectives. The structural strategists Kemerer, Baldridge and Green (1982) introduced a strategic planning approach to EM that focused on linking the concept of enrollment with the “bigger picture” planning taking place at the university. Later, Hossler (1990) stressed the research component of EM, furthering the idea that enrollment management was a discipline to be studied and advanced through a theoretical framework, and Dolence (1993) expanded the definition of enrollment management to include the academic context and strategic goals and success factors as part of its core definition. It was from these diverse perspectives that Strategic Enrollment Management was born.

Strategic Enrollment Management (SEM) is an integral part of higher education; most two- and four-year schools use some form of enrollment management (Bontrager et al., 2012, p.3). However, much of the SEM literature is focused on the undergraduate level. As Williams
(2008) states in *Graduate Enrollment Management: Leading the Way to EM’s Future*, “Graduate enrollment management (GEM) has long suffered from the perception that it is trailing behind mainstream (undergraduate) enrollment management” (p.57). From this point of view, graduate enrollment is traditional in its methods and lacks the innovation and creativity found in more advanced and well-resourced undergraduate models (Williams, 2008). Thus, it is useful to understand more about graduate professional programs, and schools of public health in particular.

According to the Association of Schools of Public Health (ASPH), SPH are primarily composed of graduate professional degree programs (2013). ASPH reports approximately 74% of graduates earned master’s degrees and 26% were awarded research or professional doctorates as of 2010-2011 (ASPH, 2013, p.5). Tuition revenue is the second largest source of funding for schools of public health behind grant funding (Stephens, McElligott, & Kileff, 2011). Currently, schools of public health have an enrollment of more than 28,000 students, 43% of which are minority. SPH benefit from over $1 billion of federally funded research (ASPH, 2013), $850 million of which comes from federally supported research from the National Institutes of Health. However, Inside Higher Ed (Stratford, 2013) reports, “Sequestration this year cut the National Institutes of Health’s budget by $1.55 billion, forcing the agency to fund 703 fewer competitive research grants than it did in 2012.” As a result, external funding cuts are already in motion. Thus, enrollment management may become even more critical, as schools of public health face the unknown.

This study focuses on master’s degree programs at SPH, which account for the majority of enrollment and tend to be less funded. This study also seeks to contribute to the literature about SEM in graduate professional schools by examining perceptions of those on the front lines
– admissions representatives in SPH. Before proceeding further, a working definition of enrollment management must be established. A complete list of definitions is listed in Appendix A. Don Hossler, John P. Bean and colleagues defined enrollment management as "an organizational concept and a systematic set of activities designed to enable educational institutions to exert more influence over their student enrollments" (1990, p. 5). According to Kalsbeek, there are multiple SEM orientations: market-based, academic, student and administrative (2006a, 2006b). Administrative orientation is a way of organizing administrative processes related to student enrollment within institutions of higher education. This orientation conceptually includes areas of enrollment such as tuition, access, and affordability and financing options, and managing all of these areas poses a challenge for administrators. As Kalsbeek and Hossler (2008) note:

Campus leaders at private and public institutions must weigh how much tuition revenue they can and should commit to financial aid as a means to achieve wide-ranging goals of prestige, diversity, and net revenue with the context of their academic missions and institutional capacities and economies (p.3).

Schools of public health are among the institutions that must balance these priorities, struggling to achieve their lofty missions while facing the reality of a strained funding environment.

Questions about enrollment management in SPH are important part of broad discussions about how to ensure the U.S. has a cadre of well-trained public health professionals in the near and long term. In the 2003 Institute of Medicine Report, Who Will Keep the Public Healthy?, recommendations were made about the future of the public health workforce and the role of schools and community organizations, as well as local, state and federal agencies as partners in the effort to recruit, educate and provide continuing education resources (Gebbie, Rosenstock, &
Hernandez, 2003). Since that time, 50 accredited schools of public health have emerged, along with an increased interest in public health undergraduate programs and a centrally coordinated admissions process, the School of Public Health Application Service (SOPHAS) (Culbert, Foster, Harvey, & Johnson, 2006). According to the *American Public Health Association Issue Brief*, “There are inadequate numbers of public health personnel and students in training even to respond to the current demand…approximately 19% of state and local government public health jobs were lost between 2008 and 2010, and among state health agencies, 89% cut services during this time” (Perlino, 2006, p.2).

While we have seen tremendous growth and coordination of academic programs in public health, the Association of Schools of Public Health (ASPH) reported that more than 100,000 public health professionals (23%) were eligible to retire in 2012 and “by 2020, the nation will be facing a shortfall of more than 250,000 public health workers” (ASPH, 2008, p.1). This means that schools of public health will have to train three times the current number of graduates over 12 years in order to avert a workforce crisis, and if retention and recruitment do not improve, a shortage of public health workers is inevitable.

In 2008, ASPH issued a policy brief with recommendations for successfully developing a public health workforce (ASPH, 2008). In particular, ASPH stressed the need to build public health education capacity and for schools of public health to enroll and train more graduate students. The recommendations also noted the importance of a diverse workforce and the financial incentives that are critical to assist underrepresented groups in seeking graduate education in public health. “Increasing the number of health professionals from the groups with these poor health indicators will help to eliminate the disparities” (ASPH, 2008, p.6).
Fortunately, the field of public health education is seeing significant growth; the number of SPH increased 37% from 2001 to 2011 and the number of graduates almost doubled from 2001-2011 (ASPH, 2013). In addition to schools of public health, a number of accredited public health programs have been created, and in 2013, the Association of Schools of Public Health became the Association of Schools and Programs of Public Health (ASPPH). Clearly, public health education is on a growth trajectory.

**Statement of the Problem**

While there are positive trends, schools of public health are beginning to encounter issues found across higher education (Hartman, Kileff, McElligott & Stephens, 2011). There is an increase in dependence on tuition as a source of revenue (the second largest source of funding for SPH), and a tuition increase of over 143% in the last decade. At the same time, there has been rapid growth in the number of schools and students over the past ten years (Hartman et. al, 2011, Stephens et al., 2011), significantly increasing competition. Given that the financial stakes are so high, the competition is growing and the mission so critical, the questions become: Are schools of public health prepared organizationally to successfully manage enrollment? How have they incorporated strategic enrollment management strategies into their graduate admissions operations? SEM may provide a pathway for schools to navigate the unknown and assist SPH in meeting enrollment goals and fulfilling their missions. However, there are no widely accepted SEM programs in the schools. Therefore, prior to developing a model, we need to understand the strategies and actions in which SPH admissions offices are currently engaged.

**Purpose of the Study**

The purpose of the study is to examine the current organizational structures and practices of SPH as they relates to SEM with a focus on the areas of admission and finance. Do SPH
implement Strategic Enrollment Management within their organizations? How do administrators in SPH view the concept of enrollment management? What are the organizational structures in place in SPH? How does SEM assist schools of public health in managing access and affordability for the students who will become the public health workforce of the future? A qualitative research study is the first step in understanding how enrollment is managed in graduate professional populations at accredited schools of public health.

**Conclusion**

The following chapters of this study will seek to address the research questions examining how admissions representatives at SPH have adopted the core strategies and best practices of SEM. A literature review will provide background about the evolution of strategic enrollment management and schools of public health. It will also examine the current financial climate through the lens of net price and affordability while also addressing the contrast between undergraduate and graduate SEM concepts. The conceptual frameworks including resource dependency theory, the structural frame and the Enrollment Management Organization will also be described within this chapter. Chapter Three will detail the qualitative methods performed to conduct the study with an emphasis on sample selection, ethical considerations, data collection and analysis, validation strategies and potential biases. The next chapter will highlight the main findings, providing context through the data collected in the interviews and through document review. And finally, Chapter 5 will conclude the study with a summary of the findings, implications for practice, future research recommendations and the identification of study limitations.
CHAPTER 2
LITERATURE REVIEW AND CONCEPTUALIZATION

This chapter presents a review of the literature on strategic enrollment management and schools of public health. The topic of enrollment management is as diverse as the schools of public health in this review. The first half of the literature review looks at SEM and explores varied orientations to conceptualizing enrollment management. Current SEM research on the four orientations toward SEM and higher education related to tuition, financial aid, access and affordability are examined to provide context to the challenges and opportunities available to SPH admissions offices. While current research focuses primarily on undergraduate populations, the inherent issues are similar and even more serious for graduate professional programs (Sealey, 2008).

The second part of the literature review seeks to examine the field of public health and schools of public health in general. The literature regarding schools of public health is varied, including opinion pieces, policy analyses, descriptive data reports, and academic research. An emerging sector of professional education, schools of public health have a historical legacy that is relevant to their current mission and enrollment imperative. SPH are facing challenges found across higher education, including a decrease in federal funding and a reliance on tuition to support school infrastructure. Understanding SPH in the past and the present can help to frame the challenges admissions offices face.
Strategic Enrollment Management

Strategic enrollment management (SEM) is described in many ways, using terms such as goal-oriented, optimum enrollment, academic success, comprehensive and collaborative to characterize its all-encompassing responsibilities (Bontrager, 2004; Glenn, 2009; Kalsbeek, 2006a, 2006b). Some see SEM as a marketing and recruitment technique or concerned with academic retention (Kalsbeek & Hossler, 2009; Kalsbeek & Hossler, 2010). These are all accurate descriptions of SEM. Dolence describes SEM as “a comprehensive process designed to help an institution achieve and maintain the optimum recruitment, retention, and graduation rates of students, where optimal is defined within the academic context of the institution” (1993, p.5). In this definition, SEM is identified as a strategic tool used by the institution to manage enrollment throughout the student lifecycle.

Others describe SEM in the context of a more business oriented process with a marketing focus. For instance, Kalsbeek and Hossler define SEM as “the systematic evaluation of an institution’s competitive market position, the development of a research-based definition of the desired or preferred strategic market position relative to key competitors, and then marshaling and managing institutional plans, priorities, processes, and resources to either strengthen, or shift that market position in pursuit of the institution’s optimal enrollment, academic, and financial profile” (2009, p.10). For the purpose of this study, the admission and finance side of SEM will be examined.

Several questions arise from this review. Can SEM provide a framework for financial success that enhances the strategic position of institutions of higher education? How has the organizational placement of the admissions office matured over time, and what impact has this
had on the organization? Examining the evolution of SEM can help in understanding the current climate of enrollment management in schools of public health.

*Evolution of strategic enrollment management*

In the Journal of College Admission, Johnson (2000) describes the evolution of college admissions and its transformation into enrollment management. Beginning with the frontier spirit and idea of education meeting a practical need, there was rapid growth of schools during the mid to late 1800’s (Coomes, 2000, Johnson, 2000; Thelin, 2011; Altbach, 2011). Admissions personnel were primarily administrators who were also responsible for admissions work and welcoming students to campus. At the end of the 19th century and beginning of the 20th century, the idea of education as a right and the concept of access to education began to take hold. An increase in the number of students attending college from diverse backgrounds led to the standardization of admission requirements. As The College Board formalized admissions standards for the 20th century, admissions representatives took on more of the role of paper shufflers. As a result of the National Defense Education Act in 1958, and with the advent of loans and grants, revenue generated from tuition helped to provide for salaries for counseling personnel. These counselors became linked with incoming students and sought advice from admissions representatives. There was a strengthening of admissions requirements through standardized test scores and the College Boards Advanced Placement Program. Admissions representatives became known as gatekeepers (Johnson, 2000).

In the 1960’s and 1970’s, schools saw a decrease in enrollment, along with concerns from minority and other disenfranchised groups. According to Johnson, the prior role of admissions offices as gatekeepers drew scrutiny as the use of quotas to manage enrollment of different groups increased (2009). In the 1980s and 1990s, admissions moved to enrollment management
to balance quality versus quantity and data were used to guide decision making. Finally, Enrollment Management (EM) graduated to SEM, which involves the collaboration of many different areas, including financial aid, student affairs, academic affairs and admissions. Bontrager (2007) echoes the importance of the historical development of SEM while also promulgating about the future, stating, “While many institutions regained their enrollment equilibrium in the latter half of the 1990s, in the new millennium we face a fresh set of obstacles that threaten the well-being of not only our institutions, but American society as a whole” (p.3). Kimball (2011) in *College Admission in a Contested Marketplace: The 20th Century and a New Logic for Access* reviews the history of higher education since World War II and notes the impact of consumerism on access and equity in higher education. Kimball (2011) argues the increase in high tuition driven by marketplace ratings developed as part of a culture of credit. The notion that the United States government should provide access through loan programs not only to the lower class but also to the middle class has been part of this normalization of debt as part of the higher education experience and overall cultural landscape (Kimball, 2011). SEM developed along with the growth of higher education in the United States. It is no coincidence that new concerns emerged in regards to tuition, financial aid, access and equity. SEM offers a holistic viewpoint to understand the impact of the convergence of these areas on enrollment.

**SEM orientations**

Kalsbeek (2006a, 2006b) describes four orientations toward strategic enrollment management: administrative, market-centered, student-focused, and academic. The administrative orientation develops structures and strategies to achieve greater integration and intentionality in the processes that shape an institution’s enrollment. In other words, SEM seeks to establish more efficient, effective procedures and views the student as the consumer or
customer. This orientation relates to the core definition of Enrollment Management, which Kalsbeek (2006a) describes as “a way of organizing a wide range of administrative processes related to student enrollment in institutions of higher education” (p.6). In other words, the administrative orientation encompasses all of the pieces of the student lifecycle, from recruitment and financial aid to course scheduling and program completion. In this respect, the administrative orientation will be used to look at the topics of tuition increases, access and affordability, and financing options.

The student-focused orientation is synonymous with the term student affairs. This orientation focuses on the student’s experience as an individual, and the alignment of services to benefit the student is the primary goal. The academic orientation, on the other hand, focuses on the enrollment strategy as it relates to the size and target student population for a specific academic discipline (Kalsbeek, 2006a). The academic orientation also addresses the importance of linking the academic goals and programs with the enrollment process of the student.

**Financial Challenges in Higher Education**

Higher education is facing a number of financial crises coming from a variety of directions. Thelin (2011) summarizes some of these financial challenges in *A History of American Higher Education*:

Despite the achievements in American higher education since about 1900, the contemporary developments that surfaced by 2010 were crises that dampened enthusiasm for celebrating the heritage of higher education. The first decade of the millennium did not end well for American colleges and universities because they encountered a combination of financial problems as endowments, state appropriations, and donor contributions declined (p.363).
To add to those crises, there have also been higher levels of unemployment, weak state economies, pressure on budgets and student resources, increases in tuition, reduction of merit aid for those most in need, intense competition with tuition discounting to keep up with the competition, and threats of more reductions in federal funding – all indicators of a perfect storm brewing upon the higher education landscape (Mortenson, 2012; Baum, 2011; Chen & St. John, 2011; Pugh & Thompson, 2010). Institutions find themselves on a road to uncertainty, asking several questions. How can schools provide a high quality education in a more cost effective manner? How can schools stay affordable and attract the best and brightest while maintaining a diverse student body? SEM may be a tool to help higher education institutions navigate this path.

_Tuition as a source of revenue_

Increases in tuition and creative marketing by way of tuition discounting are a core part of the financial crisis facing higher education. It is critical to understand the role tuition increases have on demand, as well as access and affordability. In a 2010 study by Holley and Harris, a reliance on enrollment and tuition as a significant revenue source for public institutions was noted. In fact, public higher education institutions seem to behave more like private institutions because of an increased dependence on tuition revenue. For example, in Doti (2011), The National Association of College & University Business Officers (NACUBO) shows an increase in prices from $17,483 in 1998 to $33,094 in fall 2010 with an annual increase of 5.5% in tuition each year over a 12 year period. While tuition increases have recently leveled off, with the average increase in 2013 at 2.9% in public institutions, this smaller increase follows increases of 4.5% in 2012-2013 and 8.5% in 2011-2012, and a ten-year tuition change of 104% at public institutions (Baum, 2013). Four-year private institutions also showed increases of 3.8% for 2013 and a 60% change in tuition over a ten-year span (Baum, 2013). Barnes and Harris (2010) found
that increasing tuition revenue is one of the most significant means for gaining additional financial resources; institutions are relying more and more on tuition revenue to supplement diminishing resources from the state and federal governments.

**Net price**

The idea of economic rationality and how net price is interpreted by consumers is also curious. What happens when state subsidies are replaced by other types of aid? Hearn and Longanecker explain, “A significant unknown is how middle-income students will respond to an increased need for loans, as one alternative source, since loans, unlike grants represent a claim on future income in an uncertain economic climate” (1984, p.17). Data seem to suggest they are continuing to enroll and take on more debt. In *Student Aid*, Clemmit notes, “The big trend in college financing is the heavy reliance on loans, which make up about 70 percent of higher education financing today” (2008, ¶2). The *Project on Student Debt* has reported that the average student loan debt for the class of 2010 was $25,520, up 5% from the previous year, with the increase in debt similar to the average annual tuition increase (Reed, 2011). These rising prices for consumers are a great concern for higher education and raise questions about access and affordability.

**Access and affordability**

Along with tuition increases, there is increasing apprehension about both access to and the cost of higher education. Institutions are seeing decreased appropriations from state governments and more loans and fewer grants from the federal level (Doyle, 2010; Mortenson, 2012). According to Baum (2007), “Prices have dramatically outpaced family incomes for all but the wealthiest” (p.76). Additionally, incomes have not risen at the lower end of the income distribution (Baum, 2013). Baum (2007) explains that because tuition levels are so high, even
higher income students qualify for need-based aid at higher priced private institutions. This may mean less aid is available to lower and middle income students and may reduce access for those facing financial barriers not only to specific institutions, but to higher education in general. “Although average incomes for families in the middle quintile and above increased between 2011 and 2012, incomes remained lower (after adjusting for inflation) at all levels of the income distribution than they were in 2002” (Baum, 2013, p.30). Public universities have been enrolling a shrinking share of students from lower income families and have been competing for students who can pay higher tuition by attracting more out-of-state students and full-pay international students (Holley & Harris, 2010; Mortenson, 2012; Pugh & Thompson, 2008). In State Funding: Race to the Bottom, Mortenson (2012) projects that in 2146 appropriations for higher education will fall to zero in the state of Georgia, and average state support for higher education across all states will fall to zero by 2059. Without state appropriations for higher education in public institutions, the long-term outlook for maintaining access across all socioeconomic groups to post-secondary education is bleak.

Doyle (2010) makes the case that universities should pay special attention to institutional aid as much as state or federal aid, and that higher education should focus on access versus desired student characteristics. He also notes “Institutional grants--the funds provided directly from a postsecondary institution to the student--are the largest source of student grant aid in the United States” (p.789). While institutions are engaging in heavy tuition discounting to attract students to their programs, the question remains of whether they are attracting students with need or students based upon merit, or both.

Chen and St. John (2011) find that state financial policies do impact college student persistence, and there were gaps in persistence rates at first institutions by socioeconomic status
(SES) with high SES students having 55% higher odds of persisting than their low SES peers (p.652). Other studies have examined the impact of merit and need-based aid policies and impact on access. Griffith (2011) examines the push and pulls between offering more merit-based aid than need-based aid and found “the use of merit aid appears to have detrimental impacts on the socioeconomic and racial compositions of the student body” (p.1032). Furthermore, she states, “Merit Aid policies are associated with a decrease in the representation of both low-income and Black students at institutions in the top two tiers, and see only a slight increase in the representation of Hispanic students” (2011, p.1032). Merit aid does have an impact on the enrollment of diverse groups of students, but schools are also faced with the challenge of finding the right balance of the desired characteristics that drives rankings, while meeting the need for students with lower socioeconomic status – fulfilling the mission of many institutions.

In *Trends in Higher Education and Schools of Public Health*, Stephens et al. (2011) suggest that costs could impact the diversity of the student body as public health programs become less and less affordable for families who cannot contribute financially at a significant level. These concerns raise questions about the composition of the future public health workforce. Baum (2007) explores a contradictory theory by John Rawls. While not agreeing with Rawls, she points out “if too much is transferred from the top to the bottom, the disincentive effects will cause the size of the entire pie to shrink” (p.84). In this respect, Baum heeds a warning to take caution in paying attention to equity only. There are other competing issues that admissions representatives are faced with in balancing quality, quantity and access.

Tierney, Venegas and De La Rosa (2006) express the issue succinctly by saying, “If society philosophically believes that individuals should assume a debt burden to pay for college, for example, but low-income students are hesitant to assume debt, then access will not increase”
Schools are faced with the dilemma of maintaining their fiscal stability, as Baum explains it, but also have a higher calling to address issues of equity and access (2007). While some schools, such as Indiana University, have created a blend of merit and need-based aid, many schools may not recognize the impact of merit-based policies on issues of access and affordability. With heightened competition perpetuated by school rankings and increased scrutiny from accrediting bodies, schools walk a tightrope in meeting their enrollment targets while maintaining quality and fulfilling their lofty mission statements.

What are the best practices for strategic enrollment management and how can these practices help with mitigating tuition increases while promoting access, affordability and financing options for students? Are there barriers to implementing some of these practices that are inherent in institutions? How can schools work through these barriers to stay true to their mission? These are questions to be explored through strategic initiatives.

**Strategic Alignment**

Bontrager (2004) and Hossler (2009) discuss strategic alignment. Both agree that strategic enrollment should be aligned with the mission of the institution. Barnes and Harris (2007) examined three different public institutions moving toward a private model with increased focus on tuition as a source of revenue. These institutions expressed a strong interest in maintaining their connection to the mission of the university as a state institution, but also had to deal with the growing pains that come with competing with private models. The researchers explain the implications for these institutions: “As student revenue plays an increasing role in the financing of public higher education, enrollment management services will need to be strengthened so as to achieve the academic and financial goals of the institution” (Barnes & Harris, 2007, p.8). Expanding strategic enrollment management staffing, as well as expertise,
can help guide the university in the coming days as state appropriations are threatened and the university moves toward a less public model. The challenge for those in strategic enrollment management within these types of institutions will be holding true to the mission of the public university within a more privatized model.

What are the goals in regards to the student population or values around diversity that could help direct a school’s enrollment targets? While some may believe that admissions representatives are only interested in a market-centered approach narrowly focused on rankings through the use of merit aid and tuition discounting, strategic enrollment management can help ensure that access and affordability are included in an institution’s plans for the future. Bontrager (2007) examines the idea that strategic enrollment management should help bridge the gap in educational attainment for racial and ethnic groups and challenges admissions representatives to help bring these concerns to the forefront of recruitment and enrollment strategies. This call to action chides admissions representatives:

We have at times been schizophrenic, if not downright duplicitous, by on the one hand pledging our allegiance to access and equity, while on the other hand touting college rankings, institutional profiles, and budget outcomes that in many ways run counter to those same aspirations (Bontrager, 2007, p.5).

Admissions representatives have their work cut out for them and need to stay focused on the strategic goals of the institution in alignment with its core mission. While financial pressures may move an institution slightly left or right during times of economic hardship, the enrollment manager’s primary goal is to ensure the school does not veer too far one way or the other.

Institutional priorities should also be identified along with short and long term goals. An example of this is leveraging financial assistance by striking a balance between need and merit-
based aid. Kalsbeek and Hossler (2008) discuss the integration of admissions and financial aid units as a critical step in helping enrollment management become more of a holistic process. Glenn (2009) expands on the idea of a more comprehensive view of managing enrollment through the concept of a shared services delivery model for functions found under enrollment management.

While this integrative approach has benefits and drawbacks, Kalsbeek and Hossler (2008) point out four challenges: language, technique, market structures and subsidies, and mission clarity (2008). Shifting the perspective of financial aid administrators, business officers, and admissions professionals to a deeper understanding of tuition discounts and net revenues through better reporting mechanisms is just one example of overcoming language silos. While econometric techniques are synonymous with more businesslike functions, they are also part of the lexicon of enrollment management and can help with the projection of a given yield of a class or even a subset of a class. Kalsbeek and Hossler (2009) reiterate the importance of using these techniques in the context of the mission of the institution. Bontrager (2007) affirms these practices and recommends that SEM professionals use strategic enrollment management to promote educational opportunity, provide clarity on enrollment goals and priorities, redefine academic ability, potential and success, and realign institutional financial aid programs.

In promoting educational opportunity, SEM professionals need to mirror the change we desire to see in our own processes by “highlighting access as much as we tout standardized test scores” (Bontrager, 2007, p.5). SEM professionals tend to highlight their schools’ own achievements in quantity and quality by using standardized test scores and grade point averages, but they do not often discuss how many first generation students they have successfully served and how that may tie to their institution’s mission. Additionally, Bontrager (2007) says it is
important for SEM professionals to pay close attention to the numbers and mix of students. The use of alternative evaluation methods is another option for admitting qualified students, in addition to the standard practices that institutions currently employ.

The practice of strategic enrollment management allows institutions to be transparent, advances the cause of access and affordability and provides practical approaches to advising institutions in meeting their strategic goals and aspirations. While SEM is sometimes misunderstood as a threat to the academic life of the university, it has the potential to act in concert with the academic goals of the institution and support its values and mission. Many innovative techniques and tactics exist for enrollment managers, and they must keep in mind an overriding responsibility to provide leadership in times of growth as well as of economic crisis. As SEM matures as a field, so does the potential for support of institutions of higher education. Given this larger understanding of the landscape of financial challenges in higher education and the various SEM orientations that exist to inform the practice of enrollment management, how is SEM conceptualized for graduate professional programs, and why does it matter?

**Graduate vs. Undergraduate SEM**

SEM literature often refers to undergraduate models of enrollment management as the principle standard, looking at 2-year and 4-year programs alike. While this perspective is limited, it is understandable given the context and centralized orientation that is commonly found as part of SEM models. The development of professional schools was born out of the ethos of the extension model, that higher education should be accessible and provide relevant education to its citizens. Professional schools gradually replaced the old apprenticeship model.
According to Bontrager et al. (2012):

… professional schools promoted educational equalities that marked an era of new professionalism. This new professionalism blurred vocational and professional distinctions that had historically perpetuated meritocracy and educational privilege, in terms of educational access and career equity (p. 180).

The master’s degree, in particular, used to be thought of as an obsolete diploma that was only useful in certain disciplines. Kohl explains that this is no longer the case (Bontrager et al., 2012). The professional master’s degree is now viewed as an asset that improves professional practice and prepares students to be “leaders and change agents in their profession” (Bontrager et al., 2012, p. 181). If enrollment matters for graduate programs as it does for undergraduate programs, what does enrollment management look like for graduate professional programs? Williams (2007) claims graduate programs are actually leading the field of enrollment management. She explains they have always had to do more with fewer resources, are student-centered due their discipline-specific nature, and have faculty involvement even in the most centralized of graduate enrollment models (Williams, 2007). In this respect, graduate models are more integrated and decentralized in nature, covering multiple disciplines. While this may be true, Williams (2007) also notes that GEM models tend to lag behind undergraduate SEM models in the marketing orientation of their programs, reflecting a “build it and they will come” mentality. The underlying belief is that simply by offering a program, schools will find that students with the appropriate background and experience will apply and attend that program. This is a miscalculation to avoid when creating new programs.

Other challenges exist, such as complicated data analyses and variation in requirements and selectivity. Williams explains that graduate enrollment should find a balance between
centralization and decentralization to be effective (2008). Therefore, the organizational structure of SEM in graduate programs looks more like a matrix, potentially involving more complexities. Bontrager (2008) further explains that the utility of SEM as it links concepts and processes is based on the unique identity and footprint of each school or university. It can be argued that this unique and complex perspective could also be extended to the graduate program level.

Overlap exists between graduate and undergraduate choice in the admission selection process of students. However, several important characteristics exist that are unique on the graduate level, including the role of faculty in recruitment, matriculation, advising and retention of students, field of study and value of degree or reputation (Bontrager et al., 2012). The involvement of the academic component in SEM could also be explained through a learner-centered SEM orientation. This orientation speaks to the individual interested in developing employment stability through continuous learning (Bontrager et al., 2012). The essential component to this perspective is that individuals need to develop their skills and abilities in order to stay relevant in their places of employment. One example of this is the increasing relevance of the master’s degree. According to the Washington Post, “From 2000 to 2012, the annual production of master’s degrees jumped 63 percent, federal data show, growing 18 percentage points more than the output of bachelor’s degrees” (Anderson, 2013). The increase of master’s degrees also coincides with the growth of schools of public health (ASPH, 2013).

Perhaps this learner-centered SEM perspective that Bontrager has put forth, a combination of Kalsbeek’s (2006a) student-focused and academic orientations can be helpful in working with post-baccalaureate models (2012). However, he does explain that there is a burden of proof or outcomes for enrollment management in graduate programs, as savvy adult students seek “proof points” (Bontrager, 2012). For instance, do students who attend that program find
employment after graduation or what was their overall experience with faculty support? Success in GEM requires a collaborative effort of delivering on the brand promise throughout the SEM funnel, from point-of-inquiry through graduation and job placement, and as alumni.

While there are many external organizations and consulting groups focused on undergraduate enrollment management, only a few specialize in graduate enrollment management, such as the Council of Graduate Schools or the National Association for Graduate Admissions Programs (Bontrager et al., 2012, p. 187). Graduate admissions representatives in SPH and elsewhere may find support through discipline specific associations representing specific interests. As centralized application services in professional schools expand, these services may provide additional support for SEM efforts through administrative processes, but also through a learning-centered model with an emphasis on the unique aspects of the discipline.

**Centralized Enrollment Management Efforts**

In 2007, the Association of Schools of Public Health led efforts in collaboration with member schools to form the School of Public Health Application Service, a centralized application service for schools of public health. Unlike the downward trajectory of medical school applications and the leveling off of new schools of medicine, public health schools and applications increased dramatically between the years 2001 and 2006 (Culbert, 2006). With a strong market, schools and programs of public health have enjoyed steady growth and with that, a move to centralized efforts to provide some organization and technical support to individual schools.

The purpose of the centralized application service aligns well with the characteristics of SEM, including: “To streamline administrative processes in schools; to generate much needed aggregate data on SPH applicants; and to position ASPH and schools to more successfully
understand application patterns of underrepresented groups of students, such as minorities and males, so as to better recruit them as well as other student cohorts to schools of public health” (Culbert, 2006, p. 22). Throughout the development of the service and into the first cycles, SPH participated in biweekly conference calls discussing topics ranging from governance of the service to the development of collaborative marketing and recruitment events (Culbert, 2006). In many ways, the centralized application service leveled the technology playing field for schools of public health and produced a collaborative approach to recruiting students to the field of public health. SOPHAS also allowed schools to discuss and compare processes as they worked through the ground rules for the application service. Since the inaugural launch in July 2006, when only 23 schools participated, SOPHAS now represents most accredited schools of public health (SOPHAS, 2013).

Recent ASPH-sponsored workshops have focused on SEM topics, such as the integration of student services, career services, financial aid, and admissions. With annual meetings and workshops held in the fall and spring each year, school admissions representatives and representatives of SPH are beginning to have conversations around SEM topics. However, how these ideas manifest in SEM planning on the school level is unknown. SPH have witnessed a recent surge in popularity and students, but it wasn’t always that way. Understanding how these schools developed can help to better understand present day enrollment conflicts around strategic mission and purpose.

**Schools of Public Health**

Public Health is “the science of protecting and improving the health of communities through education, promotion of healthy lifestyles, and research for disease and injury prevention” (http://www.whatispublichealth.org/what/index.html). According to
What is Public Health.org, “Public health professionals analyze the effect on health of genetics, personal choice and the environment in order to develop programs that protect the health of your family and community” (http://www.whatispublichealth.org/what/index.html). It is also a field that is concerned with limiting health disparities, and a large part of public health is the fight for health care equity, quality, and accessibility (http://www.whatispublichealth.org/what/index.html).

Emergence of SPH and professional education

The Welch-Rose Report of 1915 reprinted in Fee (1992), established the blueprint for the development of professional schools of public health. Fee described the historical conditions of the industrial revolution that led to the development of a workgroup under the Rockefeller Foundation that involved early coordination by Abraham Flexner, who had been instrumental in establishing American medical education, and two individuals with distinct views on the formation of schools of public health – a scientific approach (Rose) vs. the practical needs of local communities (Welch). Rose advocated for a German scientific model, while Welch advanced the cause for a system of state schools to mirror models found in agricultural colleges. In the end, compromises were made and the first distinct school of public health, separate from a medical school, was established in Baltimore, Maryland at Johns Hopkins University. With an initial investment of $267,000 from the Rockefeller Foundation, the school was named for a hybrid of the approaches that created it, thus, the Johns Hopkins School of Hygiene and Public Health (Fee, 1992). The applicant pool evolved with the growth of schools. More schools developed, but:

“most of their applicants were either experienced older men who had worked in public health positions without specialist qualifications, or young scientists interested in
bacteriology, epidemiology, and other public health disciplines, but who lacked medical
degree now regarded as an essential qualification for public health leadership” (Fee,
1992, p. 28).

The incentives that drove physicians to public health during the early years no longer existed,
and this enabled schools of public health to admit “larger numbers of nurses, engineers,
statisticians, and biologists who sought public health training” (Fee, 1992, p. 28). The field of
public health education was established.

As these newly formed independent schools of public health formed outside the confines
of medical schools, so did the need to expand the profession of public health education. In 1941,
seven SPH formed the Association of Schools of Public Health (ASPH) (Rosenstock, Helsing, &
Rimer, 2011). The original mission of ASPH of “representing university faculties concerned
with graduate education of professional personnel for service in public health; to promote and
improve education and training of such personnel, and to such other things as may improve the
supply of trained personnel for all phases of public health activity” continues to this day
(http://www.aspph.org/). ASPH expanded over the years and now represents 89 programs and
51 accredited SPH, with more on the horizon (2013).

Funding landscape of SPH

In spite of the growth of public health schools, sources of support for SPH are still very
much in question. As Rosenstock et al. (2010) reports, SPH do not receive core federal funding
for education like their medical school counterparts (p. 52). Funding for SPH comes from
several areas, most notably tuition and federal sources, and state and city universities often
receive support from the relevant governmental level with support significantly declining in
recent years (Rosenstock et al., 2010). For example, at one University of California SPH, core
support decreased to about 10 percent (Rosenstock et al., 2010). SEM may become more important as these institutions compete for limited resources.

**Conceptual Framework**

The literature suggests the conceptual framework of strategic enrollment management can be a lens to explore the contemporary issues facing higher education today and within that context explore schools of public health as a subset of graduate professional education. While much of the literature about SEM finds its roots in undergraduate enrollment, the core concepts cross the various levels of graduate professional education within schools of public health and provide a context for making sense of the organizational structures that allow for successful planning and growth. Barriers to access and affordability may exist within these SPH whose core mission is to attract a diverse workforce. Resource dependency theory and the structural frame along with concepts found within the human capital framework provide context for understanding the role of SEM in the SPH organization.

**Resource dependency theory**

Resource dependency theory is the relationship between an organization and the external environment in which it operates (Pfeffer & Salancik, 1978). Trends in higher education suggest that institutions are finding themselves at the mercy of the external environment, in a perfect storm of decreasing federal and state support, along with intense competition for the best and brightest students. Toma (2011) explains the concept of pressures coming from those that institutions depend upon for resources – such as federal or state governments and accrediting bodies – and extrapolates about how institutions mimic market leaders. Pfefer and Salancik also support this idea, stating “Organizations could not survive if they were not responsive to the demands from their environments” (1978, p. 19). Furthermore, “resource dependency theory
tells us that organizations will devote considerable time, energy, and money to protect their market position and the resources that are valuable to them” (Pfeffer & Salancik, 1978, p.19).

Hossler explains the dependence of private institutions on tuition and fees and the decline in public funding, pushing public institutions to be more attentive to enrollments (2007). SPH and other professional schools need to be cognizant of these external forces.

**Structural frame**

Black (2004) describes the structural frame as “the skeleton upon which the enrollment management enterprise is built” (p.37). He also revisits Kemerer, Baldridge and Green’s (1982) four basic structures – the committee, the staff coordinator, the matrix system and the enrollment management division – to better understand how institutions may embed SEM into the organization (Black, 2004). Each comes with its own merits, authority levels and influence over organizational processes and policies. According to Black, the committee, referring to an admissions committee, is more advisory in nature; while it may increase involvement, it may lack ownership. The staff coordinator is charged with coordinating marketing or enrollment initiatives, and enrollment functions may be assigned under this single administrator. However, this position may lack political influence and authority. The matrix system is under the authority of a senior administrator and may cut across academic organizational lines. Both faculty and staff are involved, which may be more typical in a graduate level enrollment model. Black also points out that the success of this model is reliant upon the goodwill of others and depends upon the level of respect the faculty may have for the senior administrator. Finally, he reviews the enrollment management division, which could elevate the role of enrollment management as an institutional priority and commitment.
There are realistic concerns about Black’s model, however. Many times, immediate unrealistic results are expected, and emphasis tends to focus on the front end of admissions and financial aid, instead of the more holistic SEM philosophy, which advocates for a cradle to endowment relationship (Black, 2004). Schulze and Lucido (2011) also explore the impact of enrollment management structures and institutional priorities and conclude that centralization of instructional enrollment functions is trending forward.

The structural frame may provide insight into understanding the continuum of enrollment management found within SPH. As with the historical development of SEM, SPH administrative structures have evolved with the development of SPH over time. SPH vary greatly in the types of institutions and settings in which they reside. Some are found in academic health centers removed from a central university campus, while others are still in the shadow of a university’s school of medicine. The administrative structures may vary as well, with some units reporting to an associate dean of academic affairs and others reporting through a student affairs unit. Given that the primary applicants of SPH are graduate professional students and that schools typically use a discipline-focused, faculty populated committee model, the idea of centralization may not fit entirely within the structure of the SPH.

*The enrollment management organization*

Several studies have examined the optimal enrollment management organization. Popovic and Jonas (2000) extend the traditional Enrollment Management Division model through the lens of four domains: outcomes, cyclical self-assessment, organizational climate and environmental scanning. They advocate cyclical self-assessment as the cornerstone and entry point to develop effective enrollment management organizations (Popovic & Jonas, 2000). This idea of a continuous loop of process review and improvement is seen throughout the SEM
literature (Wallace-Huelecki, 2009; Black, 2008). In *Strategic Enrollment Management: Core Strategies and Best Practices*, Bontrager (2004) identifies the core concepts that form the infrastructure of successful strategic enrollment management organizations (2004). These concepts include: clear enrollment targets; promotion of academic success; achievement of optimum enrollment; delivery of effective academic programs; net revenue for the institution; effective financial planning; increased process and organizational efficiency; improved service levels to all stakeholders; the creation of a data-rich environment to inform decisions and evaluate strategies; and the strengthening of linkages with functions and activities around campus. Identifying how SPH navigate these concepts can provide an understanding of the role of SEM in the SPH institution.

The human capital framework can also be considered within this idea of an ideal enrollment organization. Human capital rests upon the notion that formal education is highly necessary to improve the productive capacity of a population (Becker, 1993). Human capital theory can be used to explain how individuals make decisions regarding the amount of education to acquire (DesJardins & Bell, 2006, p. 60). This idea relates to the well-studied area of college choice in undergraduates as well as institutional decision-making. Students identify choices and make decisions based upon the cost/benefit of educational options. Human capital theory may also help to conceptualize how graduate professional students make decisions, taking into consideration the concepts around admission, aid and pricing. The leveraging of financial aid along with tuition costs may exert a strong influence on the number and types of prospective students that consider attending individual colleges and universities (Hossler, 2006, p. 83). Aid leveraging through new analytical techniques such as predictive modeling is just one example of a tool that can be used to help institutions prioritize goals. The economic perspective says
individuals are rational actors and attempt to maximize their well-being. They also make many decisions based on the utility derived from different schooling options, and not simply based on the net financial benefits (DesJardins & Bell, 2006). DesJardins & Bell explain, “Knowing the determinants of demand can help institutional researchers identify important elements that might affect how students make college choice and continuation decisions” (p.62). Price elasticity (how sensitive quantity demand is to changes in price) and demand (quantity of a good that consumers are willing and able to buy at a given price) are a function of these options (DesJardins & Bell, 2006). Currently, SPH are enjoying a strong market and it could be assumed students are experiencing positive outcomes. In other words, the cost for an MPH degree may be higher than other master’s degrees, but there is positive net utility in the degree choice. With increasing competition (supply of schools and programs), however, the integration of aid, pricing and admission may become increasingly important to sustain position. Human capital theory can assist SPH in better understanding student choice and how to determine price and leverage aid in that decision-making process.

While much of the SEM literature is devoted to understanding SEM at an undergraduate level, little is known about how SEM is used in graduate and professional schools. This study attempts to contribute to the literature about SEM in professional schools by exploring the perceptions of admissions representatives about strategic enrollment management practices in schools of public health.

**Research Questions**

To better serve SPH, admission offices need to understand the organizational structures and strategies already in place. Studying SPH in aggregate provides a summary of common practices and helps to shed light on the barriers faced by many admissions offices in managing
enrollment through the SEM framework. This leads to the question, “How have admissions representatives at SPH adopted core strategies and best practices of SEM?” which will be explored through the following five research questions:

1) How prevalent are SEM plans in SPH?

2) What SEM concepts have been adopted by SPH?

3) What is the structure of the Enrollment Management model in SPH?

4) How effective is the SPH in managing enrollment and meeting enrollment targets?

5) What are the perceived barriers, if any, to successful SEM implementation in SPH?
CHAPTER 3
RESEARCH DESIGN

SEM is often interpreted by individual institutions within their own framework. This study sought to identify how admissions representatives at Schools of Public Health have adopted core strategies and best practices of Strategic Enrollment Management (SEM). Proponents of SEM see it as a valuable process that allows institutions to manage enrollments and is strategically integrated with the goals of the institution. Others argue bluntly SEM is ruining higher education through the repositioning of need-based aid for highly qualified, high achieving students and increasing and sometimes driving up the costs of recruitment, technology and financial support of students. Increased costs for “administrative” functions are thought to be syphoning off support and resources from academic programs. Additionally, critics point to the market-driven nature of SEM as being counterproductive to the culture of academia.

While both proponents and critics have their beliefs, the literature around SEM is implemented at the will of the institution to serve a more strategic integrated purpose. Admissions representatives often have the responsibility of bringing together disparate groups to find consensus in these arguments. My research focuses on the perceptions of admissions representatives at Schools of Public Health to better understand the adoption of SEM in graduate professional programs. I explored the topic through 5 basic research questions: 1) How prevalent are SEM plans in Schools of Public Health (SPH)? 2) What SEM concepts have been adopted by SPH? 3) What is the EM structure in SPH? 4) How successful are SPH in meeting enrollment targets? and 5) What are the perceived barriers to successful SEM implementation at
SPH? The emphasis of this study is on the admissions and finance side of SEM. Twenty-seven semi-structured interviews were conducted with representatives from 27 different accredited schools of public health which allowed for open discussion related to various topics. The participants were identified through the Association of Schools of Public Health¹. The study included participants who were responsible for admission functions within the SPH. However, due to the decentralized structure of one school, the individual interviewed represented a specific program at that institution but held enrollment management responsibilities and participated in school wide committees and implementation of admissions related functions.

A qualitative research design, or interpretive study was selected. Merriam (2009) defines a qualitative research study in terms of the meanings that are extracted from the interaction as part of the study. More specifically, Merriam (2009) explains qualitative researchers are interested in “1) how people interpret their experiences, 2) how they construct their worlds and 3) what meaning they attribute to their experiences” (p. 23). Cresswell (2013) explains qualitative research is used because a “problem or issue needs to be explored” (p. 47). A qualitative study was an appropriate design choice to examine SEM in schools of public health in order to understand how admission officers interpret the meaning of SEM as part of the institution’s organizational environment. Merriam goes on to explain, “Basic qualitative studies can be found throughout the disciplines and in applied fields of practice. They are probably the most common form of qualitative research found in education” (2009, p.23). The applied nature of this design is reflected through this study of higher education management.

¹ The Association of Schools of Public Health underwent a change in governance in 2013 and is now officially known as the Association of Schools and Programs of Public Health, www.aspph.org.
Sample Selection

A purposeful sample of admissions representatives at 27 accredited SPH were interviewed. According to Creswell (2013), purposeful sampling considers who to select as participants, the sampling strategy, and the size of the sample. Merriam (2009) explains purposeful sampling is “based on the assumption that the investigator wants to discover, understand, and gain insight and therefore must select a sample from which the most can be learned” (p. 77). I wanted to gain insight about SEM from those on the front lines of enrollment management within schools of public health, as they would be the most knowledgeable about practices in SPH. I also wanted to ensure that a broad range of SPH across the country was included in the study (see Appendix B). This could also be considered a criterion-based selection process since schools and those specifically knowledgeable about the practice of enrollment management were targeted.

The first tier of schools was identified by institution ranking. The first tier included the top 25 SPH as ranked in U.S. News & World Report. U.S. News & World Report ranks all health profession schools by peer assessment. Approximately 61% of accredited schools of public health responded to the survey in fall 2010 for the last rankings posted in 2011. Forty-four schools of public health were surveyed. School deans, administrators and select faculty from CEPH accredited schools of public health were mailed a standard number of surveys. While peer review is not the most statistically valid and reliable method to conduct rankings, the rankings presented are the only known national ranking of SPH. Some SPH who participated in the US News and World Report rankings may have fallen below the U.S. News & World Report score cut-off, so were not included in the published report. Twenty-five SPH admissions representatives out of the 29 schools of public health ranked in the top 25 responded to my initial
request for an interview. Some schools shared rankings, thus increasing the number of schools who could be considered top 25. Only one school declined to participate and the other school was excluded due to affiliation with the researcher for this study. The exclusion of Emory University Rollins School of Public Health from the study is addressed further under potential research bias and assumptions. SPH are ranked every three years by U.S. News & World Report. Two schools were added to the sample study. One participating school was added because it represented a newer school of public health, joining in 2009 and because of its geographic location. The school was located in a state with 5 accredited schools of public health, but with no school represented in the study. The second school was added because of its younger age, geographic location in the South and for its representation of schools within academic health centers. Both of these schools were included in the 2011 rankings, ranked #34 and #30 respectively. There was one interview conducted at each school of public health. In total, over half (approximately 53%) of all accredited schools of public health were included in the interviews.

Since the study commenced, the Association of Schools of Public Health changed its governance structure and became the Association of Schools and Programs of Public Health, representing accredited programs as well as accredited schools. 32 programs have joined the Association to date and are participating starting 2013 in the ASPPH managed centralized application service, SOPHAS. Due to the recent governance changes, accredited programs were not interviewed as part of the scope of this study. Additionally, because of time constraints all 51 SPH were not included in the study. This could have strengthened the findings as a census of schools would yield more reliable findings. Admissions representatives at SPH were specifically selected as part of the purposeful sample. Participants ranged from roles of admissions
coordinators to associate deans. However, all participants were responsible for enrollment management functions related to admission within their institution. The variation in participant titles reflects the variation in organizational structures of enrollment management functions at SPH. For instance, although most participants worked under an Office of Student Services, the organizational structures of those offices, size, scope and personnel roles varied greatly across SPH institutions.

**Ethical Considerations**

Procedures were used to ensure confidentiality and the informed consent process. The researcher underwent the CITI certification process, which is a web-based training process on human subject research protections. All modules were successfully completed. The researcher also submitted and received approval from the Institutional Review Board at the University of Georgia to conduct the research project. The review process ensures human subjects research is conducted in compliance with the applicable federal, state, and institutional policies and procedures (http://www.ovpr.uga.edu/hso/).

Once the Citi Certification and IRB approval was secured, the interviews commenced. Throughout the communication process, ethical guidelines were followed for the treatment of human subjects. Participants were provided with informed consent information which included study information, length and purpose of the study, so that participants were well aware of their rights and options as human subjects. The information contained in the interview protocol was not considered sensitive in terms of emotional or physical discomfort. Confidentiality was also critically important. Participants were informed the study was voluntary and they could stop at any time. They were also informed the information shared would not be directly attributed to them by name. The interviews were audio-recorded, and participants were asked for their
permission to tape the interview. The interviews were conducted over the phone and the researcher paid close attention to the responses of the participants and checked in to make sure they were aware of the time and how many questions were left. The comfort level of participants was monitored throughout the interview in terms of hesitations or other verbal queues. Participants were also provided with my follow-up contact information in case they had additional questions or concerns after the study or about the study.

**Data Collection**

Data for qualitative research studies are commonly collected through interviews (Merriam, 2009). Structured, semi-structured and open-ended questions were asked of participants. Open-ended questions allowed me as the researcher to listen and engage in understanding the complexities of responses from participants. I was also able to refine my questions as the interviews progressed in order to better understand and learn from the experiences of participants (Creswell, 2013). Structured interview questions were used to collect specific identifier and demographic information during the first part of the interview, including items like name, school, title, and reporting line. Approximately 10-12 open-ended interview questions were asked of participants and comprised the majority of the 30-minute interview timeframe (see Appendix C). The semi-structured questions allowed for flexibility while using an interview guide to ensure specific data was asked of all participants (Merriam, 2009). While semi-structured interviews do not necessitate a predetermined wording or order of questions, the majority of interviews followed the general interview protocol. Some questions were added or modified as the interviews progressed to elicit deeper information about topics raised by participants such as school priorities and authority. These emergent themes evolved throughout the interviews.
The next step in the process was to determine the mode of communication for the interviews. Selecting the type of interview is based upon practicality and what will ultimately result in the most relevant information to answer the research questions (Creswell, 2013). Thirty-minute interviews were conducted via phone due to the varied location of SPH across the country. The drawback to conducting the phone interview was that I, as the researcher, could not see the nonverbal communication of participants. I listened intently for verbal cues and long silences. While time and resources did not allow for face-to-face interviews, more interviews were conducted as a result of using the telephone method, enriching the data collected in response to the research questions. Each telephone interview was recorded. An adequate audio recording device was used and a back-up recording device was also used in preparation for technical failures. The researcher also kept notes during the interviews as a third back-up method.

The interview protocol was formulated from the research questions and by incorporating ideas from a modified version of a survey used in prior enrollment management studies. Williams (2001) first used the survey instrument in Administrator’s perceptions of enrollment management practice at the state technical colleges of Georgia. Abston (2010) used a modified version of the survey instrument in Administrators’ perceptions of the enrollment management practices at the comprehensive public associate’s Colleges in Alabama. However, the current survey did not follow the original survey verbatim. The survey was used to provide context to the formulation of the interview protocol. A sample interview protocol provided by Cresswell (2013) was used as a guide. As indicated previously, approximately 5 structured questions were asked followed by 10-12 semi-structured questions. The protocol was carefully crafted to allow for conversation and relevant follow-up questions. Due to my role as an Associate Dean of
Admission and Student Affairs at a School of Public Health, I assured participants this information would not be used to expose problems in their schools or to criticize their institution’s process, but to be objective in understanding how enrollment management is carried out in SPH. The questions asked were not intended to elicit sensitive information. However, in an effort to ensure confidentiality and to foster an open dialogue, I provided the option of anonymity to every participant in the study.

The interview protocol was created from research on prior studies about perceptions of enrollment management within various institution types. As a first step to considering an enrollment management model for professional schools, the questions selected were exploratory in nature allowing participants to discuss their perceptions about the purpose, opportunities and barriers to enrollment management within their institutional context and across the field of public health. The open-ended questions I asked of participants followed along the themes of these questions:

How prevalent are SEM plans in SPH?
What SEM concepts have been adopted by SPH?
How are financial aid functions structured and is it effective as currently implemented?
What is the organizational structure of the Enrollment Management model in SPH?
How effective is the SPH in managing enrollment and meeting enrollment targets?
What are the perceived barriers, if any, to successful SEM implementation in SPH?

The responses to the questions tended to cluster around certain themes that could foster further study about the opportunities and challenges of enrollment management in graduate professional programs. The tensions between decentralized and centralized structures were discussed in depth, along with the impact of the financial environment. In my role as the
interviewer, I attempted to be sensitive to the topics raised and to be aware of the biases I may have brought to the discussion given my occupation as an enrollment manager in a school of public health. Seidman (1991) as quoted in Merriam (2009) explains this dilemma:

“interviewing requires interviewers to have enough distance to enable them to ask real questions and to explore, not to share, assumptions” (p.108). During the interviews it was important that I remain objective and non-judgmental by employing sound interview techniques (Creswell, 2013). I achieved this, in part, by incorporating my literature review into my understanding of enrollment management. By the same token, participants appeared willing to speak and engage in the interview because it was a topic of which they had specific knowledge.

The telephone interviews were conducted in a private office. The speaker phone function was used along with an audio recorder in an effort to record the interviews. All participants were notified the speaker phone was being used and they were also being recorded. Appropriate informed consent procedures were followed. Participants were also informed their participation was voluntary and they could stop at any time or not answer questions. All participants answered all questions asked of them. Most of the interviews were finished within the 30 minute timeframe. To honor participant time commitments, participant interviews approaching the allotted timeframe were notified when 2-3 questions were left.

Access to this population was achieved through the principal investigators role as the immediate past Chair of the Association of Schools of Public Health Student Services Council and Advisory Board member for the School of Public Application Service. Participants were identified through the Association of Schools of Public Health Admissions Liaisons designee list. One email designated the Informational Letter and Informed Consent was sent to participants to request their participation in the study (see Appendix D). All schools confirmed
participation. One confirmation email message was sent to confirm the date and time of the interview and reiterate study information (see Appendix E). The confirmation message was read again to participants prior to the interview to reiterate confidential procedures and answer any questions or concerns participants may have had prior to commencing the interview.

**Document Review**

Document review is another form of data in a qualitative research study (Merriam, 2009, Creswell 2013). At least two validation strategies are recommended for qualitative research studies. This is also referred to as triangulation. According to Creswell (2013), triangulation “…involves corroborating evidence from different sources to shed light on a theme or perspective” (p. 251). In this study, document review was used to provide a second method for evaluating enrollment management in schools of public health.

Data sources that were evaluated included the annual data report available through the Association of Schools of Public Health which documents enrollment trends, tuition, financial position, student completion data and other relevant data points for schools of public health. This is a secondary data source which includes demographic data as well as general information for the analysis. ASPH Trend reports were also helpful in verifying and providing information about SPH from a macro level perspective. Other documents, such as journal articles were useful in this process. However, the lack of information or available information was also informative about the gaps that exist in creating graduate enrollment management models.

**Data Analysis**

Creswell (2013) describes data analysis in qualitative research as a process of “organizing data, conducting a preliminary read-through of the database, coding and organizing themes,
representing the data, and forming an interpretation of them” (p. 179). I followed this general process for analyzing the data in my study.

It has been said there is a thin line between data collection and data analysis in qualitative research. Patton (2002) notes “…the fluid and emergent nature of naturalistic inquiry makes the distinction between data gathering and analysis far less absolute” (p. 436). During my research, I began to see themes emerge as I was interviewing, but I also had to be cognizant of any preconceptions throughout the additional interviews I conducted.

Patton (2002) notes the researcher should organize the analysis from the research questions generated prior to the data collection process and from the emergent data, themes and information that occurred during the data collection process (p. 436). The organization of data was an important part of the study.

Interviews were scheduled with the assistance of an electronic Outlook calendar. The electronic calendar assisted participants in keeping their interview date and time or in a few cases allowed for easier rescheduling. Because of the number of interviews scheduled (27), the Outlook calendar allowed the researcher to keep the process organized. The interviews were recorded with a device that allowed for download through a USB port directly onto a secure laptop. The interviews were saved by school name and date and transcribed verbatim through a reputable transcription service. An alias or code for each school was assigned to allow school’s to be referenced confidentially. Once the transcriptions were received, I conducted quality control checks on the transcription vs. the audio recording to ensure authenticity and accuracy of transcripts. This process also allowed me to become more immersed in the data. Emergent themes were crystalized during this process and began to formulate the foundation for coding of the data.
I decided to use a computer assisted qualitative data analysis software (CAQDAS) product noted in several qualitative methods resources (Creswell, 2013; Merriam, 2009) called Hyper Research. The CAQDAS helped to make coding more organized by allowing me to sort information into categories (Merriam, 2009). I found this product user-friendly and affordable given the limited scope and data set for the study.

I then identified various categories or themes as I went through each individual transcript. I regrouped those areas that seemed to be in congruence with each theme or category. A constant comparative process was used. The software allowed for ease in pulling together data from the codes or themes. This was an iterative process and was quite tedious. However, the software package assisted me in keeping the process organized. The themes were then related back to the original research questions in an effort to create meaning.

**Validation Terms and Strategies**

Creswell (2013) advocates for the use of multiple accepted validation strategies as part of a qualitative research study. Several validation strategies were used as part of this study about enrollment management. Member checks and adequate engagement in data collection were selected based upon the nature of this study.

ASPH data reports and trends reports provide demographic information as well as trends about schools of public health. Data from ASPH were used to substantiate coding themes found through the data analysis process. This process helped to support the findings gleaned from the interviews. ASPH trends data and reports substantiated findings related to limited resources. ASPH demographic data was able to support findings around the topic of diversity.

A member check is the second validity strategy that was employed during this study. Merriam (2009) describes the member check technique as the “idea that you solicit feedback on
your emerging findings from some of the people that you interviewed” (p. 217). Member checks were conducted with several individuals representing various sizes and types of institutions. This helped to ensure, to an extent, that regardless of the variation in SPH, the concepts were captured and reflected accurately. More importantly, it provided the opportunity to find out what was overlooked or misinterpreted about the participant’s reflected experience.

Adequate engagement in data collection was the third strategy used. Through this concept, the researcher conducted interviews with over 50% of all accredited schools of public health. The interviews produced emergent themes. The interviews no longer presented additional information to the study. This was considered the saturation point. Through this process, the researcher also sought alternative frameworks of understanding for the concept. This was somewhat inherent in the field of study as literature and research in graduate enrollment strategy advocates for alternate approaches to traditional understanding of enrollment management concepts. Throughout the process, as in the literature, the notion of enrollment management was challenged and even seen as detrimental. Searching for data to support alternative explanations allowed for further validation of the study (Merriam, 2009).

Transferability is a term used by naturalistic research concerned with the reliability and validity of a study. Coined by Lincoln and Guba (1985) and explained in Merriam (2009) “the burden of proof lies less with the original investigator than with the person seeking to make an application elsewhere”. In other words, transferability speaks to the ways in which the researcher provides data to support the findings in the study. Maximum variation was used to provide external validity or transferability for this study.

Through purposeful sampling, the sample selection was diverse to allow for a greater range of application of the findings as Merriam suggests (2009). Cresswell (2013) goes on to
say “This approach is often selected because when a researcher maximizes differences at the beginning of the study, it increases the likelihood that the findings will reflect differences or different perspectives—an ideal in qualitative research” (p. 157). For this study, over 50% of SPH were interviewed. Schools varied in type (Public, Private), organizational structure (university model, academic health center), size of program (100 student to several thousand) and age of school (5 years old to 100 years). Initially, the top 25 schools were selected, which provided for a variety in size and type of institution. The second part of the sample allowed for other schools to be added, such as those newly accredited.

**Potential Research Biases and Assumptions**

As an Associate Dean of Admissions at a School of Public Health I hoped to understand how enrollment management was conceptualized and executed within SPH. Because of my position in an enrollment management capacity and as an Advisory Board member for the School of Public Health Application Service, a nation-wide service through the Association for Schools and Programs of Public Health, it could be argued I would advocate for SEM principles to be adopted by all SPH or to use the information provided to benefit my own institution’s admission process. While the interviews provided insight into other school’s processes and my own, my purpose for conducting the survey was to summarize information across SPH that could be helpful if enrollment is perceived as a more critical component of how schools operate.

My experience in the subject area was also another potential concern or bias. I attempted to modify this bias by exposing my role to participants. Throughout the study and in particular during the interviews and analysis, it was my intention to keep my own experience from impacting the true findings. For this reason, I did not interview my current institution, a top twenty school of public health. The inherent bias will be addressed through the rich description
of the results. Additionally, SEM is a process that is unique to each institution and one size does not fit all. SPH in this study represented various types, sizes and organizational structures.

As noted earlier, accredited programs were excluded from the study due to their recent addition to the national association. The specific differences between schools and programs were not a factor in this study. Future studies should include both schools and programs as part of the study design given the new governance and organizational factor of the Association for Schools and Programs of Public Health.

I worked hard during the initial process and during the interviews to ensure the participants’ confidentiality and my trustworthiness as a researcher. I acknowledged my dual role as both an administrator in a SPH and researcher. I also explained that I was not asking for detailed plans about their school’s strategy. Rather, I was inquiring about the process and how they interpreted their school’s approach to enrollment management. For the most part, participants seemed to establish trust in me as a colleague who was in a similar situation in terms of my position and role in enrollment management in a school of public health. This was evidenced by the rich information shared throughout the interviews.

My purpose was to establish an understanding of what schools are currently doing and to understand this phenomenon through the perceptions of those who are directly responsible for enrollment management functions at SPH. By nature of the discipline of public health, SPH are collaborative. There was great interest in learning about the outcomes of the study from all who participated and they seemed appreciative to learn the results of the study would be shared with all SPH at an association meeting once completed. As a researcher, enrollment manager and professional who is also engaged with SPH on a broader national level, my hopes were for all schools to benefit from the information collected.
Conclusion

Financial exigency, increased competition for quality student enrollments, and limited external resources shape the current landscape of SPH. Understanding the current role that SEM plays in these institutions may provide some insight into how SPH are making sense of the current trends and forces in higher education. SEM itself may provide practical steps forward in helping schools to manage enrollments, meet workforce shortages, and contribute to the growth of public health. Additional knowledge about SPH SEM organizations may help SPH to evaluate how to invest limited resources. Surveying those on the frontlines of SPH Enrollment Management can elicit valuable feedback about the current practices and future steps forward. This qualitative research study of SPH fills a gap in the literature about graduate professional education and the role of SEM in these types of institutions. While information abounds about undergraduate institutions and populations, there is often a void when discussing the optimal organizational structures and practices of graduate professional schools and graduate enrollment management. The current study represents the first step to building a SEM model for SPH.
CHAPTER 4

FINDINGS

This qualitative research study explored the perceptions of admission representatives about strategic enrollment management in schools of public health. The research questions focused on the structural, organizational and resource components of strategic enrollment management (SEM) within the SPH institution. Structural frame, resource dependency theory and the SEM organization were the frameworks used to conceptualize the study. In this respect, enrollment management processes including the recruitment and admission process, financial aid structure and tuition costs were a main focus of the study, but other areas of SEM also emerged in the findings. My research questions were exploratory in nature given the limited research on schools of public health as a subset of graduate professional degree programs. The questions I used to guide my study were 1) How prevalent are SEM plans in SPH? 2) What SEM concepts have been adopted by SPH? 3) What is the structure of the Enrollment Management model in SPH? 4) How effective is the SPH in managing enrollment and meeting enrollment targets? 5) What are the perceived barriers, if any, to successful SEM implementation in SPH?

Data condensation helped to streamline the focus into 4 main themes. Sub-themes also emerged. These themes and subthemes provide context for the findings. The themes are 1) How schools defined and identified the purpose and relevance of enrollment management, 2) The continuum of centralized vs. decentralized systems in terms of effectiveness and perceptions of leadership and authority, 3) Resources and financial impacts and 4) The unique aspects of schools of public health as related to enrollment management. To understand more about the
findings, it is helpful to understand some of the context and demographic information about schools of public health and the participant group in the study.

**Document Review: Enrollment Trends in Schools of Public Health**

There are 51 accredited schools of public health, 89 accredited programs of public health with 5 of those programs slated for the transition to school-status. The Council on Education in Public Health (CEPH) is the official accrediting body of SPH. CEPH explains the purpose of accreditation: “In general, specialized accreditation attests to the quality of an educational program that prepares for entry into a recognized profession” ([http://ceph.org/constituents/students/benefits-of-accreditation/](http://ceph.org/constituents/students/benefits-of-accreditation/)). For the purpose of this study, only accredited schools of public health were included. Schools of public health vary greatly in terms of number and type of degree programs offered, tuition charged and number of students enrolled. The masters of public health is the primary degree offered by SPH (Hartman et al., 2011).

The following trends in SPH are important to note in considering this study, based upon policy papers and trends documents reported by the Association of Schools of Public Health. The following documents were reviewed and cited:

- Trends in Higher Education and Schools of Public Health, October 17, 2011
- ASPH Annual Data Report 2011-2012
- ASPH Tuition Report 2011-2012
- ASPH Policy Statement Strengthening the Federal Partnership with Schools of Public Health, June 2013
- Graduate Enrollment and Degrees 2002-2012, Council of Graduate Schools
**Enrollment and student demographics**

SPH enrollment grew 57% from 2000 through 2010, along with a 59% increase in schools during the same period (Hartman et al., 2011). Current enrollment totals more than 28,000 students, with 43% of those minorities (ASPH, 2013). Additionally, applications increased by 147% and graduates increased by 44% in the same time period (Hartman et al., 2011). National trends saw a 47% increase in master’s degrees awarded between 2000-2009, while SPH noted a 33% increase in master’s degrees awarded in the same period (Hartman et al, 2011). In 2011, the Master of Public Health was the most common degree awarded by SPH, accounting for 61% of degrees awarded (ASPH, 2011-2012).

Student data related to gender, race and ethnicity was also examined in this most recent trends report. SPH have a majority female population of students with 69.4% female and 30.6% male (Hartman et al., 2011). New enrollments in SPH were fairly consistent with this trend as 71.5% were female and 28.5% reported as male. SPH students are also diverse. However, there have been minimal gains in minority populations since 2000, with the largest rise occurring in African American students at 1.2% (Hartman et al., 2011). As of the last ASPH Annual Data Report in 2011, African Americans represented 11.4% of public health students, fairly consistent with national averages of graduate students in the United States as reported by the Council of Graduate Schools at 12.5% (Gonzales, 2013).

**Tuition and net price**

Tuition for master’s degrees continues to rise and public health is certainly no exception. According to ASPH, tuition for a master’s degree in public health is more expensive than the average tuition for all graduate degrees nationally (Hartman et al., 2011). The ASPH Annual Tuition Data Report for 2011-2012 says the average annual tuition for in-state master’s degree
students was $16,344 and average out-of-state tuition was $26,236. ASPH also reported that although cost of attendance is rising, net price is not rising as quickly, suggesting additional support mechanisms may be in place such as scholarship support (Hartman et al., 2011).

**Financing of SPH education and federal programs**

The Association for Schools of Public Health does not collect information about how students finance their education. The only data collected from a small survey of 11 schools indicates average debt of $36,163.00 in 2008 compared to the national average debt for graduate students in the U.S. at that time of $26,800. ASPH also conducted a survey in 2011 and identified key financial aid information as noted on school websites. Information posted included tuition and fees, merit and need-based scholarships, teaching and research assistantships, work study opportunities, and basic information on federal loans and FAFSA (Hartman et al., 2011). The following programs were noted as identified resources for graduate student financing: The Direct Loan Program, the Perkins Loan Program, Federal Work Study, Graduate Plus Loans, School based aid, External Scholarship support and International Student Funding Agencies such as the Institute for International Education which funds the Fulbright program (Korevec & Stephens, 2012). The HEAL (Health Education Assistance Loan) program under the Direct Loan Program allows graduate students to borrow up to $33,000 per year in federal loans.

The landscape of financial aid has also changed in the past few years. Graduate students are now ineligible for the subsidized portion of loans under the Direct Loan program. This means that interest begins to accrue while in the program instead of post-graduation. The Public Loan Forgiveness Program was created in 2007. According to the Department of Education, “The PSLF Program is intended to encourage individuals to enter and continue to work full-time
in public service jobs. Under this program, borrowers may qualify for forgiveness of the remaining balance of their Direct Loans after they have made 120 qualifying payments on those loans while employed full time by certain public service employers” (http://studentaid.ed.gov/repay-loans/forgiveness-cancellation/charts/public-service#what-is-the-public). With many public health students going into public service employment post-graduation, this program may assist students with the financing of a public health degree.

Participants

27 school admission representatives were interviewed. Approximately 30% were from private and 70% were from public institutions. Of the 51 accredited SPH, approximately 74% are public, 20% are private and 6% are non-U.S. based institutions. Data was also collected regarding their titles and years of experience. Representation of professional titles of participants in the study was as follows: Associate/Assistant Dean (30%), Director (33%), Associate/Assistant Director (18%), Coordinator (15%) and Statistical Data Analyst (4%). The impact of position on the data collected was not explored, but could potentially impact some of the findings. Participants were engaged with the professional association, ASPH, and associated activities for admission and student services personnel in SPH through the Student Services Council and/or the S.O.P.H.A.S. Advisory Committee.

Finding One: SEM Conceptualized

SEM is conceptualized in parts rather than a blended approach across the organization. Participants were asked a series of questions related to strategic enrollment management plans, the purpose of SEM and the most important aspects or components of SEM. The interviews suggested Strategic Enrollment Management (SEM) was conceptualized in SPH through individual unit tactics, but not as a unified strategic enrollment management plan. When asked
about formal strategic enrollment management plans, 74% (20) of schools indicated they did not have a formal strategic enrollment management plan for their school. 26% (7) of institutions indicated they had a formal enrollment management plan in place. Some of the participants requested additional clarification on what was meant by a formal plan. All schools who did not indicate a formal strategic enrollment management plan were asked to explain their school’s general approach to strategic enrollment management. Here are a few examples of common approaches found throughout the interviews.

So, we have a recruiting plan that helps us with, recruitment. In terms of admissions and enrollment, we have a weekly workflow that manages the processes for admissions, and we have reporting that captures enrollment. So typically, what we do during the admissions cycle is run applicants and admission...admitted student reports, and matriculate reports to compare where we were at in the previous two years. And usually, that’s sort of the baseline to know if we’re on par, below or above, but there are no formal goals for each department or the school as a whole. (SPH17)

We determine admissions processes based on decisions made in our Education Committee in the College, which is comprised of the Academic Section Chairs so, all, details related to the process that involves it…involving deadlines, materials, desired for application, etcetera, goes through this committee. So the processes, determine the number of students, number of the target populations every year are discussed in the Education Committee. I wouldn’t say that we always have agreement or even if there is a specific target within certain sections because they simply refuse to be tied down to a number...or they refuse to commit to a target. (SPH12)

There are some goals for departments and programs and those goals will kind of differ. At one point there was a goal of trying to limit growth and now, the goals have kind of shifted a little bit. …but each program and department oversees their flow coming in or oversees the getting [of] students…Most of the yield plan sits in their ball. Much of what comes up to the point of admission comes from school-wide or from my office. (SPH24)

Participants clearly articulated a variety of enrollment management approaches including the use of data and benchmarking, establishing admission targets within academic committees, and yield approaches within decentralized models. Many of the participants explained their school’s recruitment process when asked about their school’s general approach to enrollment management. Schools made equivocations between a recruitment plan and admissions targets
with a strategic enrollment management plan. However, many also clearly articulated their thoughts about strategic enrollment management, defining it through the proverbial funnel. In other words, participants could discuss the cradle-to-grave process and defined SEM to include all parts of enrollment from recruitment through completion and alumni status when asked about the purpose of strategic enrollment management. When asked about strategic enrollment management approaches within their institutions, many schools articulated the recruitment or admissions plan. The following is an example of the funnel concept of strategic enrollment management:

I think enrollment management is probably one of the key areas of a University, right, since you don’t have the University without students. So, I think it’s, again, attracting students, showcasing why you are a great fit for them, and finding students who are a great fit for you. And then making sure they are successful throughout your program so that they graduate on time and with the skills that they need to be successful in their careers. So, I think enrollment management just really oversees the whole process of the students, from cradle to grave is what I think it should be. (SPH26)

Of interest, several schools voluntarily responded indicating why they did not have a plan. This question was not directly asked of participants.

When I initially came on board I wanted to try to create an enrollment management plan. It became clear to me it was going to be really difficult to earn agreement because the plan was just going to be a shell that’s filled in. (SPH22)

But I think the reason why it’s probably not been, front and center was because we’re about 85 percent funded through grants and outside funding sources, so tuition revenue was never considered really that important. So, I think as the sequestering comes through and it becomes more important, there is going to be more and more requests for better oversight of enrollment management, but I think it’s tied to the way our funding structure is, and that’s why it probably isn’t as formal...(SPH24)

I think School of Public Health has followed the rest of our campus’ elite perspective around admissions, and hence, enrollment management which is we are a top-tier R1 public institution. [SIC]…we’ve had this attitude of we are , they will come, and it’s just in the last year that I certainly have started to look at some data. But here at the school that’s very different because we have professional degree students, as well as those doctoral students, and those professional degree students ultimately pay their own bills and they pay many of our school’s bills and the State of and the recession and a variety of political factors have made it so that I believe and others are starting to
believe that our school just because we’re affiliated with Berkley must start to think about enrollment management as maybe many other institutions think about it. (SPH119)

Reasons for not having a plan clearly focused on dilemmas found throughout higher education institutions. These dilemmas speak to the tensions that exist within institutional frameworks, for example, budgetary constraints and academic mission, authority to implement strategy, faculty and staff roles as part of the admissions process and how priorities are determined in heavily funded research institutions. Several schools indicated concerns about external political and economic factors pushing the school to focus more on enrollment. It was also clear from the findings that some schools were now focused on enrollment when it was previously not a high level priority or concern. Still, there was a subset of the group who indicated they did have a comprehensive, enrollment management plan. One school discussed this plan in terms of the cradle-to-grave concept:

We get a budget just for recruitment and we set a plan in the beginning of the summer to the middle of the summer for what is going to happen during the recruitment season, how the money is going to be allocated, if we're going to spend less on traveling to places and more on website development, etc. Then it goes into the admissions process, getting students in, making sure that we follow up with contact, upon initial contact, making sure that those who were contacted during the recruitment or those who were familiarized with the program during the recruitment have been followed up with during the admissions process. Just making sure through every step of the way of the admissions process, there is someone accountable for each person who applies into the program. And then, of course, it goes onto orientation and making sure that those who promise to come, come and if they don’t, then we try to follow up with them to see why, what happened, things like that. Another part of the admissions process is to see those who decided not to come to our school why and we send, a survey every year for every cycle asking those who decided not to come to UGA, why they decided not to come. And we try to use that for further development of our recruitment. And then, of course, retention is trying to make sure that while they're here in the program that, their program goes smoothly, there's no conflict in scheduling, courses that they're required to take that they understand the internship and capstone process, the thesis, visitation process…all of the little things that are entailed in just sort of administratively getting them through the program. So, we make sure that things go very smoothly for them and if there are any problems we troubleshoot, of course. (SPH13)
SPH13 articulates EM as conceptualized by SEM theorists. Enrollment management encompasses the varied orientations introduced by Kalsbeek (2006a)(administrative, market centered, academic and student-centered approaches) and espouses the cradle to grave approach to SEM (Bontrager et al., 2012). Approximately seven SPH indicated they had a formal plan, but with more probing, about half of those verbalized a recruitment or admission plan without the cradle-to-grave process included in the definition. In this regard, most schools used enrollment management tactics without a comprehensive plan across the school. Admissions representatives may be aware of what is happening in other units, but there is not necessarily a coordinated effort across the school to bring those pieces together.

Perceptions of the most important SEM concepts varied throughout the SPH. The top three aspects of SEM represented phases of the SEM process. The most important aspect noted was customer service (30%), followed by matriculation, defined as yield recruiting (22%), and the recruitment process (22%). Communication and retention were also mentioned by several schools (11% each). Other important aspects mentioned were quality education, leadership, public health awareness, and the entire continuum of SEM. One could argue that some of the individual items could be collapsed under recruitment or customer service. However, given that schools were specific in their responses, it is important to keep the data as an accurate reflection of their voice.

These themes suggest that SPH are paying close attention to the care of the applicant pool and are focused, not just on applications, but on moving an applicant through the funnel to become a student. Specific terms used included “quality students”, “outreach in terms of diversity”, “pre-application focus”, “recruitment towards matriculation” and “human touch at yield point” and provided context to understanding the focus of these offices. While only a few
schools mentioned retention and quality education as the most important aspects, it is clear through the interviews that enrollment management throughout the funnel is on the minds of enrollment management officers at SPH.

The themes suggest various SEM orientations and tactics exist within SPH. Most notably, though, many schools do not have a formal enrollment management plan, which raises the question, does strategic enrollment management happen without a formal plan? Some indicated they are currently meeting the goals of the institution and therefore do not need to have a formal plan. Two schools, one private and one public, support this idea:

I won’t use the word barrier, I would just say that as long as the numbers look good, there’s probably no need to put that extra work into having a plan. If the numbers weren’t working very well, you’d probably see a stronger interest in having a plan, like if we weren’t getting the number of students coming in the door like we want to have coming in, then there might be more of an interest to seeing that, but what tends to happen here at least, the faculty, I’m not sure with other Schools of Public Health, they’re very mission focused, and so they’re just really interested in the bottom line. We could go in and just create this elaborate plan and share it with people, but it would probably just sit on the shelf. They’d say, oh, looks very nice and move on. (SPH24)

Maybe the barrier is that we just don't have that direction from upper administration. And so if they're happy with where things are and not having that plan in place, other than just all in our heads of what we want to stick to, then we don't really need to come up with something like that. (SPH115)

I think if we have a need for one, there wouldn’t be obstacles. I think our faculty and our governing councilors are very attuned to the importance of students in what we do. We went to them a few years and said we really need a more targeted admissions strategy and they said fine. We don’t have a retention problem, so I think that’s why we don’t have what I would call an enrollment strategy, but I think if we needed one, there wouldn’t be a problem. (SPH25)

Some SPH believe they do not need a formal plan if they are already successful in carrying out their goals. Furthermore, as indicated by SPH115, if leadership does not believe a plan is necessary, than perhaps the current approach is sufficient. These findings suggest that SPH, while not formal in carrying out SEM, are engaged in activities and tactics that support
SEM. SPH admission officers also expressed the importance of student-centered and market-centered orientations to SEM with a focus on customer service, yield and communication.

**Finding Two: Tensions Regarding Centralization and Decentralization**

Tensions exist between the concept of centralized and decentralized SEM organizational structures. SPH admission representatives seek collaboration to enhance SEM processes, but often face obstacles. The concept of a centralized vs. decentralized enrollment management process was a reoccurring theme throughout the interviews. This theme emerged when discussing effectiveness, organizational structure and throughout the discussion when topics of leadership or authority were expressed. In general, schools noted a few different SEM organizational structures. First, it is important to understand the general organizational structure of SPH.

According to the interviews, most SEM functions reside in a central office of student or academic affairs with the exception of two schools (both public institutions). The office names vary but for the most part fall into one of these four categories: Office of Admission and Student Affairs, Office of Student Services, Office of Academic Affairs, Office of Student and Alumni Affairs. These offices typically have reporting lines directly to the Dean’s Office, usually with reporting through an Associate Dean of Academics or Student Affairs or in one case an Associate Dean of Administration and Finance. For the most part, actual admission decisions are made at the department faculty level with the Office of Admission and Student Affairs serving as the umbrella for coordination of admissions related functions and in most cases other student related services such as orientation, financial aid, registration, career services and other areas.

Only two schools use a central admissions or enrollment committee in which a combination of representatives from the faculty and administration make the admissions
decisions. Departments within these schools have input into decision making, but for the most part, the admission process is structured as a school wide committee with a reporting line to central administration. At the other extreme, two schools do not have any centralized admissions functions on the school level. Rather, these decisions are executed at the department level.

Several public institutions indicated graduate division involvement in terms of setting enrollment targets or providing scholarships and other resources. Only one private institution indicated a centralized enrollment management division that was also responsible for decision notification.

The question of centralization and decentralization was not asked directly of participants. The topic emerged as participants began to speak about their schools. Typically, graduate enrollment management, conforms to decentralized models, where admission is managed within the academic department. In the case of SPH, it is clear there are both admissions and recruitment functions taking place on the school and department levels in most of the schools interviewed. This sets up a complex relationship between staff-run admissions offices and faculty-led admissions committees within departments in terms of responsibility and accountability for enrollment management functions. School enrollment representatives give voice to some of the complexity in centralized/decentralized format through recruitment, admissions and yield activities:

The yield and getting them in the door is a joint role because we’ll put the shell of a program together, but if departments come to admitted student visitor day and aren’t prepared, don’t look very well, or aren’t impressed with their students or, a faculty member doesn’t show up for whatever they have with a student, that’s not going to go over well. (SPH22)

We've absolutely expanded since then as far as incorporating our departments and making sure that they're involved, both for recruiting and maintaining our students whenever they're here. So, we have a lot of support from each department head as well as certain faculty members, often those that serve as faculty advisors. (SPH114)

Our school, it’s centralized/decentralized meaning that applications come in, so, they are managed mainly in admissions, and I see that departments get timely reviews and the
decision comes back to admissions from the department and then we finalize it with the Dean [who] has to concur with the departmental decision. (SPH21)

I think the greatest obstacle here is that there are five departments under one school umbrella, but it’s very decentralized in their processes. Every department has its own process, its own, concept of an admitted student, and its own concept of a full cohort. (SPH17)

If it starts to drop in a different direction, I think that’s when we’ll get people’s attention, but that’s certainly more reactive than we want to be. We want to be much more proactive than that. And I think the other piece is getting faculty buy-in who understand that this is a bigger issue than just tying it to their own program. It’s what we’re going to look like in five, ten, 15 years, and not just year to year. We’ve got to have a couple more, folks from around the divisions to convince faculty that this is also a really important thing to do. That the long-term outlook may not look as it does today, and so how do we prepare ourselves for that. (SPH11)

It’s decentralized, and we don’t have one place who manages enrollment management, and we have eight different ways of doing it. We are also going to create an ambassador program so that we can train faculty, staff, alumni on recruitment processes. We want everybody to be saying the same thing when we go out and recruit, and it’s kind of hard because we don’t have an Admissions Office, but we’ve become the Admissions Office kind of by default, so we’ve taken on that responsibility to make sure we train people that we’re all singing the same song, and we’re sharing the same information and accurate information when we go out and try to recruit students. (SPH18)

I think across the department, or divisions, and across the campuses, I’d say it’s the same thing. We have variations in the quality and the efficacy of the student contact from the point of recruitment up to matriculation. And then ultimately the student has to be satisfied with the “products” that they’re getting once they come here. But I think some of our departments do really, really well in staying in touch with the prospective student, getting them to apply, getting them here, getting them admitted and ones that we do admit, getting them to actually show up. I’ve got some other departments where it’s not as effective, and as a result their numbers are highly variable from year to year. (SPH19)

Several concerns are voiced through these discussions. One underlying concern speaks to the limitations of the Staff Coordinator EM model developed by Kemerer, Baldridge and Green (1982). Just like the issues brought forward by participants above, the disadvantages of the staff coordinator model is responsibility with little authority to actually fulfill the goals. With limited authority, the staff coordinator relies heavily on the goodwill of others. These findings are very much in sync with this enrollment management model. SPH also voiced concerns about
providing recruitment events with minimal cooperation from individual academic units, about poor performance with EM functions in some academic units without avenues for mediation, and about the lack of unity or school-wide vision for the future. These examples exemplify the limitations of EM within SPH.

Schools with Enrollment Management Matrix models, essentially the staff coordinator role with a senior administrator who has authority, speak to the concept of working within a decentralized model and the critical importance of faculty involvement and more broadly academic units in graduate enrollment management:

Now the tricky thing about that is it’s easy for the departments to say, “Oh, good, they’re doing enrollment. We don’t have to worry about it.” So we try to get the departments to participate. So we expect faculty to come to some events. We really, really try to use them. On a day student’s visit we have faculty to sit at the departments. So even though admission(s) is empowered, I don’t feel they can do it without the inputs from academic departments. (SPH25)

Faculty involvement in SEM as described above is mentioned several times throughout the findings. Faculty and academic units are close to the curriculum and a valuable resource in graduate enrollment management models. SPH are eager to engage faculty and academic units in the SEM process, but also understand the barriers. These thoughts capture some of these findings:

I’m not sure this is a barrier, but... the inability to articulate for the faculty the benefit of enrolling large numbers of students when they feel overworked. (SPH12)

I really believe at that stage it’s about faculty engagement and about students feeling wanted. So, I see improvement when each year I do believe that faculty are hearing my message that I brought with me to the school which is my office has done all we can, and now you’ve admitted some great students, go get them, and that means phone calling, that means writing direct emails, that means actually reading their application and remembering their names and their interests. (SPH119)

Centralization and decentralization alone are not articulated as barriers to effective SEM. Rather some SPH seem to struggle with how to maximize SEM within the confines of this complicated
structure, voicing a desire for leadership and key stakeholder participation. While lack of authority or positioning may be an underlying concern in these messages, the overall findings suggest that SPH are collaborative in nature and searching for ways to engage academic departments in the SEM mission of the school. Several SPH give voice to this experience:

One other good thing we have is faculty, participation. And I’m only saying this because I know another school was asking, “How do you get faculty to come on the weekend for an open house?” Well, our faculty don’t even question it. I mean, they kind of understand that that’s what they need to do so, I think that’s great. And our faculty are pretty accessible to our students which I think is huge. (SPH26)

We've absolutely expanded since then as far as incorporating our departments and making sure that they're involved, both for recruiting and maintaining our students whenever they're here, so we have a lot of support from each department head as well as certain faculty members, often those that serve as faculty advisors. (SPH114)

Enrollment management is really all-hands-on-deck from the Dean on down. So, it’s not just, the Student Affairs Office, its faculty, its other administrators, its people, its security guards, it’s the custodial staff, it’s really everyone on the same mission because each one of them potentially could have an impact on students. (SPH24)

These thoughts exemplify the strategic nature of SEM as a process that is not confined to one area of the school, but part of the school wide mission. This mission carries through across constituents involved as part of that process.

The findings suggest that SPH organizational structures are more or less centralized in terms of admissions and recruitment processes and decentralized in terms of decision making authority and yield-to-matriculation efforts. Even SPH with more centralized structures and in one case decision making authority, also relied on input from key stakeholders. SPH reported that barriers existed with these centralized/decentralized models, especially those lacking a clearly articulated vision from leadership. SPH also noted the importance of faculty and academic unit involvement. Overall, SPH seem to value collaboration across these complex organizational structures.
Finding Three: Strained Resources and Financial Impacts

SPH admission representatives are concerned about competition for top students in light of resource constraints in a competitive marketplace, but removed from decision making regarding tuition and financial resources. SPH admissions officers are knowledgeable about financial aid, but have less oversight and influence over those structures. SPH opinions about engagement with financial aid are split between those wanting more influence and those who believe this is not within their domain of oversight.

SPH are dependent upon tuition as a source of revenue. Then, how do SPH administrators understand tuition and its impact on enrollment and what are their thoughts about how financial aid is structured within their institution? While many doctoral programs provide funding for doctoral students, master’s students tend to pay tuition and associated fees. SPH are reliant on tuition from master’s degree students (Stephens et al. 2011). Admissions representatives are often on the frontlines of recruiting students and linking them with the financial resources within the institution and externally to make this possible. Managing tuition and financial aid processes are key components to the enrollment management funnel. Exploring how these ideas are conceptualized in SPH helps to gauge how front line administrators are engaged with this process.

Participants were asked several questions related to the resources and financial aspects of enrollment management. They were asked about the process for setting tuition, tuition impacts on enrollment, the effectiveness of financial aid structures within their institution and about financial resources available, whether internal or external to students. Given the difference in funds flow and tuition setting between public and private institutions findings from both public and private will be emphasized during this analysis.
All of the schools interviewed, whether public or private, had some conception of how tuition was set at their institution. Private SPH normally proposed tuition increases that were approved by the Health Sciences Center or Board of Trustees at their institutions. Public institutions usually had a few more steps involved due to the state legislature’s role in tuition setting. Public and private institutions both acknowledged impacts on enrollment. Public institutions were more extreme in their responses to tuition impacts. Some responded there was an absolute impact due to differential tuition and diminishing state support while others responded there was little or no impact because their state had low tuition to begin with, so any increases were mitigated. Here are responses from a few of the public institutions regarding the way tuition is set and how it impacts enrollment:

The State Legislature determines the tuition at each of the State schools “… with guidance from the school and from the University’s administration. And the overall tuition has increased tremendously over the last five years. So much so, that we used to be in the bottom third and I think we’re close to the top third, in terms of State schools. Each of the colleges and each of the programs within the University have been encouraged to establish differential tuition. Well, not wanting to burden our students or to affect the enrollment of those we’ve admitted very much, we’ve kept our differential tuition low. It’s the cost of the University tuition that has been particularly restrictive to applicants who didn’t come here. At least that’s what we’ve been told. (SPH12)

We have a differential tuition from the University of [ ] and graduate programs tuition. So, they set a benchmark and the College of Public Health increased that. I'm not sure what the percentage. I'm not sure how they came up with the formula to increase it. But it's a couple of hundred dollars more per student to meet the College of Public Health graduate tuition. And then that differential comes back to the college in basically the form of a check from the university. The increase in tuition and how it’s affected graduate programs. Across the board at [ ], every meeting that you go to, talking about enrollment at the graduate level at [ ] has been a matter of how do we keep enrollment from decreasing because there has been an annual decrease, over the past few years. I would argue that tuition increase does have an effect on enrollment but I would also argue that there is a plateau that you hit especially after you've gone through a recession where enrollment just can't keep increasing. I mean, you're already meeting a population need from the state level, so I'm not sure how much increase people are expecting annually… If you start to see a slight decline, then yes, it might be a tuition issue and ... It's like that all over the nation. (SPH13)
So many of these programs are professional degrees and they’re master’s degrees [and] comparatively speaking to the doctoral programs on campus, students pay for themselves. And not only do they pay the tuition and fees set by Office of the President and ratified by the Regents, but then they pay what’s also known as a professional degree, supplemental tuition, and that is a fee that’s also controlled by Office of the President, but our Dean and the other Deans of the professional school system-wide go annually to the Office of the President and say, we’d like to increase our professional degree fee by X percent, which in my experience has been a consistent seven percent. So, even the very few years that the system was not raising tuition or fees on students, the professional schools in many cases were because we were seeing our State funding support dropping and that’s how we’re keeping the doors open is by charging the students more in order to give them the student services they’re receiving. So, the impact, according to some, is that we at [redacted] are competing harder for students that are now finding it just as inexpensive to go to a private institution, elsewhere. That said, things have screeched to a halt in the last year, and in fact, we’re now seeing the other side of the coin where the Governor and the Regents and the President of the system decided no fee increases anywhere, nobody is getting fee increases. So, it’s like I think things are about to shift in [redacted] where no longer can [other competitor school name] say to their faculty, say to their students, don’t go to [redacted], that place is falling off a cliff of financial ruin because it’s really not true anymore. But that said, we’re still struggling against that perception, and we’re still struggling with pretty draconian budgets that we have to operate against or operate within. (SPH119)

Our tuition rates are set by the Regents Board and that’s enforced by the Registrar’s Office. And that has an enormous impact on our matriculation and our enrollment. We are a very expensive public school. (SPH17)

It has a huge impact on enrollment. People are reeling from the changes to tuition. In [redacted] state, and for the University of [redacted], the legislative body has underfunded this institution for the last four or five years, so that right now I think the legislative body is only paying 25% of what it used to pay for education. So that has meant that, programs have had to become self-sustaining. My program has been self-sustaining from the beginning, so it wasn’t a shock for us. But at the same time, the university system is undergoing a revolution and huge changes. And I do believe that there are a lot of ways that the institution is trying not to change. Its resisting change. I think it's probably similar to the 1950s, when there was the GI bill. In this case it's not the GI bill, it's a defunding. (SPH118)

Inherent in these messages is the dependence on differential tuition in public institutions, especially for professional programs, due to decreasing state support. Also, noteworthy is the struggle of public institutions to remain competitive with private institution peers, especially where out-of-state costs are concerned. This was an issue raised by several schools. Additionally,
the decline in graduate enrollment is being discussed within SPH13 and concern seems to be mounting over how to manage this trend. As one school indicated, the defunding of state support for higher education is a huge cultural shift in how the institution has operated. On the other hand, not all public institutions have witnessed these enrollment impacts. Two examples of this are below:

I think tuition and fees haven't hurt us. In fact we've been seeing somewhat of a shift in the numbers of students that we get from states where the tuition increases have been active. And we're getting students from outside the state that we might not ordinarily have gotten. I think the under-represented minority students have been hurt, perhaps not so much by tuition increases at our school, but just because of the economic downturn and not having resources even to come to a school as inexpensive as ours. (SPH19)

We are at a state school, so the tuition is dictated by our Board of Regents and increases are, set by them. Because we are a state school, our tuition has stayed lower than other, institutions, obviously. We have a lot of in-state applications, because of the attractiveness of the in-state tuition. Actually, we haven't seen until this year, the yield decrease and I don't think that's related. ...I don't know that's related to our tuition so much as it is the fact that there are more public health program options. We just haven't gotten to the bottom of that yet. (SPH115)

Some SPH in public institutions are reaping the benefits of high tuition at other institutions and are able to compete in part for applicants because of their lower tuition levels. Additionally, a decrease in enrollment is not necessarily directly related to tuition. It may be due to other factors such as the increased competition from the growth in public health programs.

Private institutions interviewed were more consistent in their belief that tuition at SPH had or may have impacts on enrollment.

That’s a huge problem for us. We do not control tuition. It’s a decision made by the board of trustees and the president. We have the same tuition as the undergraduates, which is problematic because students who are full time are charged full time semester tuition even if they pick fewer credits. We are expensive because our school has one tuition price for almost all of the schools and colleges. And, we try to change that and we haven’t got anywhere because the general philosophy is it’s one university, it’s one tuition charge and people haven’t even wanted to hear our logic for it. I think that our biggest challenge is persuading students, that attending a costly private university is worth it. (SPH25)
Tuition is set by the Board of Trustees. The school recommends tuition. When I first started we had some discussions about tuition and then I would say the divisional business officers and the finance people play a much greater role. I think the higher the cost goes the greater expectation, the more difficult it is to enroll, students, but, at one point there was a perception that if you had a high cost then people would think there’s a huge high value. I think that has changed. (SPH22)

It’s generally a three percent increase, but it definitely impacts our enrollment because we are one of, if not the most expensive School of Public Health, and we’re in a really expensive city. So, if all other things are equal, I think we lose out on students because of that. (SPH26)

However, as expressed above, there were outliers who believed that although their tuition was high, they hadn’t seen impacts to enrollment due to the reputation of the program. Some private institutions have more or less control over setting tuition. At one private institution, tuition is set at the university level with one tuition level for all programs from undergraduate through the graduate level. In other SPH, the school’s administration in concert with the upper level administration and the Board of Trustees, sets tuition levels. Similar concerns are voiced regardless of how the tuition is set, namely schools are concerned about staying competitive when tuition and cost of living levels are perceived to be high. It seems these programs have an adequate applicant pool, but are working against the realities of selling a costly degree. In other words, they have to explain to students why their program is worth the investment over another less expensive or comparably priced program is worth the investment. The concept of differentiation in terms of unique fit is evident. One school noted that, in the past, high pricing was associated with high quality, but that this phenomenon may no longer be the case. None of the SPH admissions representatives or admissions representatives interviewed were involved in tuition setting. The process tends to happen outside of their role.

As noted, there were a few private SPH that did not feel tuition had a huge impact on enrollment. Their sentiments are expressed here:
Okay, I’ll be honest with you, because [Redacted] is an Ivy League institution and it’s somewhat pricey, we tend to have less impact if we raise tuition because in most cases, people are coming here know they’re going to have to pay a lot of money. At other institutions that I’ve attended, the price factor has been much more, critical in enrollment management than it is here at [Redacted]. (SPH24)

We found out that the cost to get the MPH were a little bit below average and especially among our competitors in terms of the cost of attending, so two years ago, the tuition went up about two to three percent, but the MPH went up about nine percent because we wanted to be more in line with our competitors. So, we submitted that to the Board of Trustees and they approved it in February. And so we weren’t sure what was going to be the outcome of enrollment and it turned out there was no change in enrollment. In fact, it went up slightly even with the higher tuition. So, it didn’t seem to be a barrier whatsoever. We do try to keep the tuition within reason, like two or three percent. (SPH23)

Even with increases in tuition, some schools are not seeing a huge impact to enrollment. In fact, they are seeing the opposite trend, an increase in the matriculation of admitted students.

Further examination into the impact of tuition levels and prestige on enrollment in private SPH may shed light on the discrepancy between private SPH experiences.

Discussions about tuition naturally lead to conversations about how to pay for school. There are many external and internal factors that play into the impact of aid on enrollment. Federal financial aid, school-based aid and external scholarship funding are all part of the financial aid landscape for master’s degree students in professional schools. This study also looked at the effectiveness of the structure of financial aid within individual institutions. For example, was financial aid housed within or outside the SPH? How do admissions representatives and those on the front line understand financial aid or do they even perceive this as an important component to the enrollment management toolkit?

For many SPH there is the Office of Financial Aid at the central university level which may manage need based aid as determined by the FAFSA and perhaps some university level scholarship awards. Most aid that is managed at the school level was reported as merit-based aid
and some mission-specific scholarship support. This may vary a bit depending upon the
resources of the SPH. Some SPH, mostly private and some public, have their own internal
financial aid officers who work collaboratively with the central offices. Many of the schools also
noted merit aid was distributed at the department level. Some schools indicated they had very
little endowed scholarship support to distribute to students at all at the school level, but there was
some support available for some at the university level for graduate students including those in
professional schools. Many public institutions noted the constraints on providing funding for out-of-state students. Here are some examples of the financial aid structure:

So, the need-based money is awarded by the Office of Financial Aid, a central office on
campus. The merit-based awards are awarded by the school, however, they are decided
on by each department. So, each department has its own criteria, and they have its own
money, through endowments or donors that other departments may not have, so, it’s not
the same for each of the five departments. And each department decides the recipients.
And, it’s communicated through the department, and the central award that we do have is
communicated through our office, but it’s decided by the departments. It is not the most
effective process. (SPH17)

Federal financial aid is run through the University as a whole. And I think I would say
majority of our students do apply using the FAFSA for Federal aid that are eligible to do
so. We also have donor related and Dean’s Office related scholarships that we provide.
“…” We are working more so on figuring out, some more need-based scholarships and
also with our under-represented populations of students to be able to provide incoming
scholarship money. Unfortunately, it’s usually only for one year that we have funding,
and so year two, we really hope that students are finding other ways to support their
education. A lot of them do end up finding graduate assistantships in some way, but
they’re just not starting out there. (SPH11)

The structure of financial aid responsibilities varied, as the school’s knowledge and
interpretation of the process. Some schools believed financial aid was one of the least effective
parts of the enrollment management process while others knew very little about it and seemed
quite content to leave it to an external office. Still others had a very good working relationship
with their aid office and one school even managed it internally. Here are several examples that
speak to admissions representatives perceptions about their financial aid office and its role in that process:

I like that we have our own satellite Financial Aid Office located within our building and very accessible to students and I get lots of positive feedback for the staff that’s there, and they’re very agreeable to helping me with any type of recruitment. They’re willing to present at open house. They have held a lot of webinars already and they’re very cooperative in collaborating. (SPH21)

I’d say what we could do better as an institution would be to get a financial aid office that is more customer-oriented. (SPH25)

That happens outside the school. We have a representative from the University Financial Aid Office that works with our students and I think they do an excellent job. (SPH18)

I have very little to do with that and I’m not real comfortable responding about it just because I don’t know enough about the student loan process. It’s not something our office has ever really worked with. (SPH110)

Well, we try to keep our hands as far away from student aid as possible from the college level. We don’t have the administration employees to deal with financial aid. The financial aid office that is part of the University deals with financial aid, we do try to encourage students as much as we can to apply for merit based scholarships. (SPH13)

And Financial Aid has been a nightmare for us because it is not locally controlled within the school. Public health is controlled through the whole science center, the bigger university that we're a part of. And we’ve had real difficulty in getting financial aid disbursements out on time. So it’s a disconnect between what the institution as the university is giving out in terms of money and how they do the assessment and what we know is going on. We only hear about it when the students complain that their funds haven't been dispersed in a timely fashion or they don't yet know what they're going to get or not. And we’ve had numerous meetings with the Financial Aid Office, trying to get them to kind of move up and be more in sync with our admission's time line so it would help us out. It can be competitive. So for us, the downside is that there's a disconnect between the institution at the university level and the school in terms of Financial Aid. (SPH19)

Schools also discussed the types of aid they offer:

We do have financial aid available for everyone that comes, meaning government loans. So every student that is accepted is guaranteed to get enough government loans to support them throughout their academic career, but unfortunately with our school, we don’t have a lot of funding. Master’s students hope to be funded, and I would like if we had more
funding that we could offer to several master’s students rather than the small amount that we have.

…but anyways our financial aid is need-based. It’s all loans. It’s not like we have aid packages that we can give out from our office or from the school. So, I think that’s a huge detriment because my sense is that other schools are doing that. We have three levels of scholarships that we are able to give out, and they’re all merit based, so we don’t have any need-based scholarships. The University as a whole has some scholarships that are open to all grad students, but I don’t know how many of our students end up applying for them or receive them, so I don’t see that as an effective tool for us. (SPH13)

We offer a decent amount of merit aid. We offer no need-based aid at all. I think getting students on training grants is another opportunity where it’s not truly the same as financial aid or grants. But, if people work, they get the tuition dollars, I think that’s a great way to fund an education, training grants, but there’s no need-based aid at all. (SPH22)

The real aid is from the department and the most significant aid is the student assistantship which pays tuition, gives a living stipend, but requires some work in exchange for that. Mostly, the assistantships are almost always given to doctoral students. It does happen from time to time that a master’s student can be given an assistantship. And in theory, a student can get an assistantship anywhere at the University, but there’s no central listing of them and in these tough times departments naturally will award them to their own students in most cases. (SPH14)

Aid varied from institution to institution, but in general schools discussed the federal Stafford Loan (HEAL) program, merit based aid and some very limited need-based aid. Some public institutions mentioned the availability of assistantships. Assistantships tended to be highly competitive and in some cases were not readily available to master’s students.

Several schools discussed the competitive environment to recruit top students in light of the financial realities and resources available to schools.

Programs send nominations to my office. We sort through them, and somehow with a school-wide Faculty Committee, choose who should get those awards. Then we send out all these announcements. And then we sit for the month of March and half of April waiting for these top students to decide whether our money is going to lure them here. And I don’t think that’s the most effective way of spending our tax dollars because we like many Admissions Committees who want to admit top students who will be admitted everywhere else, we tend to fund top students who will be funded everywhere else, and so, I’m often advocating that we think about the second tier of students, the A minus
students, and that’s sometimes hard for Berkeley faculty to wrap their heads around. (SPH119)

What it comes down to in the end is sort of trying to get the same students to some extent. It’s a question of where are students going to fit in best, who has the education and who can meet an applicant’s educational goals. And the financial part of it is an important piece. (SPH28)

At the master’s level, most institutions will not provide you with a hundred percent institutional money, so you really need to look for outside funding sources. And because of my role in both Admissions and Financial Aid, I can help facilitate that, so we’ve been very good at educating students as to what their options are. And that could be outside options, so I have a whole list of links for various outside funding options. And we proactively let students know that these are things they should start doing. So, right now, I tell them in September, October, November or when the outside scholarship applications are due, I said, that’s before our December 1 deadline date, you need to start looking now, don’t count on the institution to do it. The budget is the budget. I can’t do too much about that. But by educating students as to what their other options are, and then putting some of the responsibility back on them, help with the financing of their own education, we usually can meet halfway, and it’s been very successful for us. So, I think the students appreciate the fact that rather than just telling them no, we’re providing them with options. (SPH24)

These sentiments expressed by several schools spoke to the competitive environment in which SPH are seeking to attract the top candidates with merit funding. Schools discussed several ideas whether that be assisting applicants to focus on institutional fit, reaching further into the scholarship pool to effectively use merit aid or advising students about the financial realities by encouraging them to also seek external funding.

Other topics that were raised throughout the interviews included changes to the financial aid landscape in general, and student outcomes. These topics were raised by the following SPH:

…with the changes in the loan process and the interest rates, it has impacted us a lot because we don’t have the type of money we would like to give students to be competitive to attend school here, but enrollment has not decreased. I can definitely see over the next couple years where it may. (SPH18)

I’ve really been trying to connect people into the Affordable Care Act piece where they can defer their loans or at least just pay the minimum and then in 10 years, because they’re public health employees or non-profit employees, they can possibly have it, forgiven at the end of 10 years. So, that has helped a little bit. But mainly it looks like we’re getting a different type of student. So, the people that we were getting before I
think will possibly dry up without federal financial aid. They can't do it without that. When federal financial aid goes up, when it's a higher percentage, then less people are able to do it because it will cost them so much more. For my program, the people who are coming in are younger… (SPH118)

When our applicants get their financial aid package, what it boils down to is can I afford to go there? How much financial aid are you going to give me? It’s a lot of money. And so where this then becomes important for us is talking about what is the pay off when they graduate in terms of careers, job opportunities, placements…What does it look like for our alumni when they leave? So it’s really a multi-faceted issue for admissions. (SPH28)

SPH are not immune to the external environment. Changes to the federal student loan program and increased interest rates could have future impacts for schools. Additionally, schools are attempting to link students with external resources. For instance, the above example discusses the Public Service Loan Forgiveness Program for graduates who go into public service. This program could help to mitigate the costs of a master’s degree for public health students. The external environment also includes the outcomes for students. What happens to students who earn master’s degrees in public health? Are they finding employment? SPH are thinking about the return on investment for students in the context of their enrollment management duties.

Schools are receiving decreasing federal and state support. They are also competing for the top students in a field of increasing competition. Schools are split between whether or not tuition is having an impact on enrollment. Some believe there is a tipping point and we could be upon that threshold, while others believe the tuition impacts are low because their institutions have either been able to stay competitive enough in their yields or keep their tuition reasonable, so students are continuing to enroll. Schools seemed concerned about the amount of merit aid they could offer to students to remain competitive.

Most of the schools acknowledged the reality of student loans. A very limited number of schools offered need-based scholarship support. Most scholarship support was offered through
merit aid. Assistantships offered through public institutions were frequently mentioned, but they were competitive in many institutions. Admissions representatives indicated that most aid available to master’s student was in the form of student loans and some merit-based aid. However, the majority of master’s level students would not come close to being fully funded for the durations of the two year program.

Many SPH admission officers expressed their comfort with the status quo in terms of financial aid structure. Most of them preferred the process to be centralized within the university with some departmental control over school-based merit aid. Others were very concerned about the effectiveness of their financial aid office and the ability of the financial aid office to act as extensions of the admissions office in terms of the customer service levels in working with admitted students. Some SPH were concerned about their own internal processes for managing merit aid.

There were definite polarities among the schools on the topic of tuition and financial aid. Some felt their financial aid office was collaborative and part of the SPH’s SEM efforts, while other SPH believed they had inadequate influence upon the financial aid process because of the current organizational structure of financial aid within their institution or school. Some schools believed tuition increases impacted their ability to matriculate students, while others believed they were more competitive with their peers because they had low tuition levels. This did not appear to be related to whether a school was public or private or competitively ranked. SPH admissions representatives seemed aware of the financial aid processes at their institution although they may not have been specifically knowledgeable about the intricacies of aid packaging. Some SPH seem to be seeking ways to help students navigate these financial discussions whether or not they are able to assist students with funding. The findings suggest
polarities in terms of the perceptions of tuition and financial aid impacts on SPH. SPH are paying attention to these issues whether they are feeling impacts or not, some more than others. All schools agreed they could use more scholarship support whether they felt they were adequately resourced or not.

**Finding Four: SEM Aspirations vs. Realities in Schools of Public Health**

SEM contradictions in SPH are evident through several themes: the value of diversity and the reality of SPH demographics, the role of SPH in fostering the public health workforce against the backdrop of being the gatekeeper for the profession, the SPH marketplace and the external environment, and the collaborative nature of schools in the wake of an increasingly competitive marketplace.

The fourth finding is an eclectic collection of distinctive SPH themes. However, all the subthemes in their individuality add to the overall finding for the study. These themes are critical components to understanding the complexity of enrollment management in SPH that emerged throughout the interviews. Findings suggest SPH have distinctive attributes that contribute to the challenges of SEM in this environment.

**Diversity recruitment efforts**

The first subtheme is diversity recruitment efforts of SPH. Diversity is a theme that is intrinsically linked with the concept of public health. SPH were asked about their perceptions of their school’s efforts to recruit a diverse student body and responded in favor of the value of these efforts. However, even though SPH seemed to value diversity efforts, SPH diversity numbers are consistent with graduate schools across the country. SPH admissions representatives were generally satisfied with diversity efforts at their institutions. This finding was supported by the following statements:
We also have an urban health and diversity program that's in all the health science colleges at [___] and they have an office in the school of public health as well. So they handle a lot of our recruitment activities from elementary school through the graduate programs, particularly, working with underrepresented populations. So, our main diversity efforts go through that office. I think, our [___] location gives us some advantages for racial ethnic diversity. We don't tend to have to worry about it as much as some other schools may just because of our location. But, it's definitely a primary focus of the school. (SPH113)

I think they’re great. We’ve always been very committed to diversity in the program, so we make a really big effort to try to recruit students from HBCU’s or attend conferences that are more geared toward diverse populations. We also have a research program here that trains students in health disparities research, so as a result, we get a lot of students, from diverse backgrounds that want to come here to do just that. And a lot of our faculty has a commitment to those populations within their public health research, so as a result, I think a lot of students from diverse backgrounds are drawn to the program for that reason. (SPH27)

Depending on how it's defined for our school and diversity, the state of [___] has grown within its own Hispanic population, so that's one that we are obviously very in tune to. For our program we have a good percentile of international students, so being able to capture it from that perspective as well. The other components for diversity for us is also looking at geographic location, looking at the actual student's background, the different types of majors or different types of institutions, if they're coming from private or nonprofit. So we try to consider all those things. For us it's another one of how much time do we have. I think for us the nice thing is we have a very diverse student body and those students help recruit other students and that we keep a good array of students based on ethnicity and educational background that make us a well-rounded student body. (SPH19)

I think we do a really good job in recruiting people. We have a minority, medical association that comes. Young students come to the university and they visit different schools and ours is one of them. We have usually about a half-day event planned for them where current students speak and we have alumni that will speak at that event and then other events too where we're trying to recruit people. I think we do reach out and try to get a diverse population. (SPH111)

So, while SPH enrollment trends in terms of diversity may reflect national graduate trends, SPH, by the nature of the discipline and organizational culture, seem to exhibit an appreciation for diversity within their student populations and embrace activities related to the recruitment of diverse populations.

Schools also defined diversity in broader terms beyond race:
We do everything in our power to recruit a diverse population in terms of all kinds of environments. It came up at this meeting today. Not just in underrepresented and students of color but also in students from different socio-economic backgrounds, students with disabilities, LGBT communities. Our male population is 30%, 70% are women. (SPH28)

So, we work with HBCU’s. We also have diversity fairs. We have a lot of rural areas in, so we have a lot of diversity with that. Diversity with non-traditional students, students that have come back. So, a very diverse program. Not only for what people typically think of as diversity, but also for our, non-traditional students. (SPH116)

These comments provide context to how SPH define diversity. While race and ethnicity was a primary focus of many of the interviews, other areas of diversity and inclusion were also noted by SPH including rural populations, those with disabilities, non-traditional students, socio-economic status, LGBT populations and for many school international students. International students were mentioned second only to URM in the discussions and are a growing percentage of SPH institutions (ASPH Data Report, 2011). SPH tend to have more female students and a varied international student population compared with other graduate programs nationally (Hartman et al., 2011). So, the distinctive features of public health diversity may be better reflected in its ability to attract groups beyond URM in terms of its makeup. Perhaps public health education could be considered more inclusive than it is diverse.

While overwhelmingly positive, admissions representatives also noted some of the limitations with diversity recruitment efforts.

We don’t do as well as we’d like. One thing is we don’t have special scholarships or an endowed scholarship for students from particular backgrounds. For some reason, which we don’t understand, our numbers are almost exactly the same as they are for the university overall, the number of African-American students, the number of international students. For some reason no matter how hard we’ve worked and they’re working hard too, we come in at the university levels and it’s not great. (SPH25)

I think that we do an outstanding job of attracting students who wish to prepare themselves in how to eradicate health disparities. There seems to be a lot of interest and we advertise ourselves to promote interest in health disparity eradication. So, therefore, I think we have a lot of interest in it and we do that really well. What we don’t do well is
we are not able to provide financial support to those students who we feel have the highest potential to excel at those things. So, in other words, we are extremely successful at attracting applicants for the age and size of our school. We are not particularly, successful at landing those students and we are told that the primary reason for that is lack of funding. (SPH12)

At the Dean’s level, I have a lot of respect for the school’s commitment and even though this got established well before I came along, I really support and agree with their mission, so I think at the Dean’s level and at the school-wide level there is a genuine commitment. I don’t think that’s true in every program, and I think there is active dissent and sabotage against diversity goals in some programs and concentrations. (SPH119)

Diversity recruitment efforts are apparently important to SPH. However, schools indicated limited resources to attract and support diverse populations. One school stated that while school leadership may value diversity, this does not always translate to all departments or academic units. Schools also discussed some of the methods they are employing to increase diversity:

There is a stigma against a place like [redacted]. So, first of all, diverse candidates are scared of [redacted]. They’re scared of the Ivy...they’re scared of cost, because [redacted] can be expensive. And thirdly, they’re also scared that if they have any academic blemish in their background, that there’s no way they’re going to get in. What I’ve tried to do is very aggressively try to eliminate that stigma. Have I been successful? The issue is this… We have people from your neck of the woods who’ve applied, and in some cases if we don’t get the strongest candidates, they get rejected, and then the message goes back to the institution that you shouldn’t even apply to [redacted] ‘cause you’re not going to get accepted anyways ‘cause I didn’t. So, it’s a question of getting the candidates who have the right background to be successful here. The other thing that I’ve been even more successful on is, I’ve been more aggressive, with local diversity recruiting because I want to make sure that those folks could potentially live at home, and they’re also aware of what the financial implications are of living in [redacted] City. And the other thing we’ve done is we’ve beefed up some of our pipeline programs, so that we prepare people in all respects, whether it be financial or academically or whatever or experience wise so that, as high school students or early college students, they’re already on the track so that they can be successful in gaining admissions. (SPH24)

So, there’s a committee of, administrators, staff, students, and faculty. They are looking at diversity at the student level, also a little bit at the faculty level and staff level, but the primary function is students. We have had an Office for Diversity for about five or six years now. And this has now been renamed the Office for Diversity and Inclusion, so we have a director, [redacted], who serves in that role and he helps to pull in all the different resources that are out there. He does a lot of interfacing with the students and, supports various programs that are underway. And we’re just sort of trying to improve our diversity. A third of our students are international, so that’s a number that we’re
pleased about, but the domestic front, it’s about, eight to ten percent are underrepresented minorities to include, multiethnic students. So, there’s a little room for improvement, and we’re having these various meetings to look at ways to reach out to various organizations. We have a faculty advisory committee as well which faculty travel to institutions that have a sizable URM population, so we’ve been doing that. (SPH23)

Each department is afforded a certain amount of money each year to give out, to those they think are the most promising or talented, underrepresented minorities in their application pool. So, we’ll try to draw a few students in that way with, money. Sometimes we’re outcompeted with money for underrepresented minorities because there are others that have more money and sometimes people say oh, no, what are you talking about, your Hopkins, you guys always have more money than anybody else. We don’t, we really don’t. It touches all the departments and all the programs. Some departments and programs are really creative with packaging that along with training grant where a student may be able to come in the first year on this underrepresented minority fund or maybe we’ll bring in three or four people on that and then transition them into a training grant and use that money for the next class to bring in. So, there are some creative things that are happening, not enough. (SPH22)

So it’s been about two years, they created a Diversity and Inclusion Task Force to focus on a lot of areas of diversity, and in my office we actually created a position and hired a coordinator for diversity programs and recruitment to focus on those initiatives. (SPH18)

SPH are working towards various frameworks for addressing issues of diversity in their schools. Some are creating positions within SPH that are tasked with this pursuit, others are mobilizing faculty with these interests, while others are using external funding to attract students to their programs. Through these interviews SPH expressed a value around diversity and inclusion. Some schools expressed their concerns about not doing enough and not having enough resources to attract diverse populations to their programs. Some noted their locations as a limitation while others believed their geographic locations were an attribute. Regardless of the concerns, all SPH interviewed voiced agreement that diversity efforts were important and if lacking, concern over how to improve them.

Public health workforce and enrollment management

Findings suggest admissions officer see a link between their role and preparation of the public health workforce. This suggests that public health admissions representatives are linked
with the mission of the discipline of public health, not just to their duties in enrollment management. However, SPH admission representatives also have a duty to ensure students who are admitted are qualified to succeed and in this respect may act as a gatekeeper for the profession.

I would say the bulk of that is really in pre-condition, it’s in giving people [the] idea that they want to come to school, they want to improve their situation either in their current job or maybe they want to find a different job, but they just don’t feel they have the tool set. You want to come and learn new tools and I think that we give them the confidence to plow through with that dream, to help them along, to say you can do it, we’re here to help you, here is something, you can do. (SPH112)

The indirect link is that we're successful in getting pools of students that represent the communities that we want to serve and we're successful in getting them into the program. When I talk to students who are thinking about our school I always tell them we’re not screening them to keep them out, we’re screening them to determine their potential for success because we feel an obligation to not admit somebody that we think is not going to be successful because we don't want them to incur debt, and not get out of here with a degree. So, we want to make sure we've got students who are going to be successful. And if we have a marginal student that we really want to get into the school we'd have to ensure that they have the support that they need to be able to do the course work and make it through the program successfully. So, enrollment plays a role in serving public health in terms of the larger picture with respect to identifying the student pool, getting the most qualified and representative students into the school and then ensuring they’re able to graduate in a timely fashion. (SPH19)

We have a responsibility to our community. I think it’s kind of a natural connection. I don’t think it’s one that there has to be too much force in it. So, for instance, our biostatisticians, we will have nonprofits, organizations that will come to us to help them, with their research design because they have limited resources… So, we have a lot of partnerships like that. I think the other reason why it comes naturally is because I find that people who are in public health, are not in it for the money. They’re in it because they’re very passionate about what they do, so the connections tend to come much more fluidly than they might, let’s say, in the business world or the legal world or the medical world. (SPH24)

We say having access to good health is the fundamental right of every human being, so we really practice what we preach and one of the things I say is, the various communities like to hear about public health issues and what they should be doing from people that are familiar with their culture, from their heritage and from where they’re from, so that’s all the more reason why we need to have a diverse student body to be out there to talk to these various constituency groups that will listen to them because they know from whence they came. (SPH23)
I think knowing just with the deficit in the public health workforce anticipated over the next 10 years, or even five years at this point, being able to recruit, successful students in the program is definitely a priority for all of us, encouraging students to pursue that master's degree, making sure they understand what they can do with that degree, and then any financial burden that they may take on as far as doing additional school after their undergrad, that we're able to help inform them and hopefully alleviate any of those concerns. (SPH114)

I think it's going to change our African-American population in a lot of ways and benefit them because they're going into healthcare and then many of them are then going on to doctoral degrees or, advanced studies. And they're really changing some of the trends that have been inequitable for years in our state. And so I think that, we provide great service and we're changing people's lives because they're going on and they're getting professional degrees. (SPH117)

…especially as it relates to diversity and getting the right people interested in public health understanding that public health is so multifaceted and people of all different gifts and talents and interests and skills and backgrounds could find something to do of value in the public health workforce. Balancing that with the need of my institution to conduct top tier-ROI research and you need the brightest brains regardless of background, so I think enrollment management has to see a really big picture and make sure that you’re always keeping in mind both the bench work and the practice work… So, I see enrollment management as just the first step of a multistage and multiyear process of building an effective public health workforce because there is no doubt that the public demographics of our country are changing, and so we must reflect that in our workforce whatever we’re trying to achieve, whether that’s healthcare or economic policy, we just have to have a diversity of viewpoints. (SPH119)

That’s part of what we assess in reviewing applications, that’s part of our admission criteria and we rank every applicant on their commitment to public health. So, is this somebody that really intends to pursue a career in public health and make some kind of impact in the world of public health? And without that we won’t take somebody. (SPH28)

SPH admissions representatives see the big picture of their role in helping to foster the public health workforce of the future. SEM functions are conceptualized by admissions representatives as part of their role and responsibility in an SPH. Enrollment management is linked to mission. Admission representatives also discuss the inherent responsibility in training students who can do the work and their responsibility to ensure they can move into a career in public health upon graduation. There is an appreciation for the unique aspects of public health that makes it
different from other disciplines, not only in terms of output, but also in terms of organizational culture.

*The SPH marketplace and enrollment management*

The SPH marketplace emerged as a topic of interest throughout the interviews. While not every school discussed the marketplace directly, comments about the external environment and threats to that market were acknowledged. Also mentioned was the unique identity of public health itself. Due to the broad and interdisciplinary nature of this field, it is not as easily identifiable as other disciplines. SPH voiced their understanding of this unique market:

…I think it’s really important that schools are thoughtful and strategic about enrollment. I think that we’re really lucky and you’re lucky you’re writing a dissertation in a market that’s strong. Because we’re surrounded by schools, the law school and the business school here are really rethinking everything because their applications have in law school especially have plummeted and so enrollment management is first really hard and second not fun in that environment. And, that’s not at all what we’re dealing with. We had more applications every year for the past six years than the year before. And, so it’s not that it’s easy to make your numbers or that you always get the students you want but we’re not scrambling for students or even scrambling for strong students. So enrollment management may vary depending on what’s going on in the external market. (SPH25)

Now that we are moving into a model with the sequester and research funding is coming under fire, let’s just say there’s a slightly different attitude towards being over-subscribed or over-enrolled than it was a couple of years ago. So, they viewed having 50 more students a few years ago as a negative thing and if that happened again, for instance, that perception may be a little bit different due to the financial situation. (SPH24)

It’s really identifying and helping students understand public health in general. Specifically, the challenge with that is being able to define it. I’ve noticed over the last couple years recruiting, more students are aware of what public health is; whereas when I first started, it seemed like hardly any students knew what they could do with a public health degree or what the career options may be. So, I think because public health is either in the news so much or more students are graduating with these degrees, it’s become more widespread as far as general public knowledge. But for us it's just making sure that they do the masters of public health to be able to then go into the workforce and hopefully help recruit for us when they're there. (SPH27)
Enrollment management was viewed as market dependent upon a variety of capacities. Public health is thought to be enjoying a strong market or at least stronger than it has in the past. Other professional schools at one university changed their enrollment strategy due to a down market for those professions. Schools noted more awareness about the discipline resulting in more prospective students with interests in pursuing the master’s degree. This was not always the case. SPH noted their former focus in recruitment efforts was to define public health for the public. Also, SPH discussed the cycle whereby students are prepared by the SPH, then graduates enter the workforce and recruit other students. Graduates are finding work in the field and in return able to recruit prospective students to public health. Threats to the external environment including the impacts of sequester and research funding was noted. With these threats, enrollment management strategies may change. One school noted former concerns about over-enrollment but with the financial situation changing, over-enrollment may actually be more welcomed than in the past. SPH may look to student enrollment to mitigate these market conditions.

**Collaboration vs. competition**

Schools of public health find themselves at an interesting point of time in history. As evidenced above, public health as a discipline is finding more popularity and generating interest from the public. This is reflected by the steady increase in applications. However, the growth of schools and programs in public health results in more competition for the increasing number of applicants. Research funding is being threatened. Research funding and tuition are both core revenue streams for public health. So how is this idea of competition for resources playing out on the enrollment management front? Admission officers discussed unique aspects of collaboration and competition for SPH.
Its years ago we didn’t use the centralized application service so fast. That was sort of a step to help our enrollment management process. (SPH115)

I would have to say that I find that my colleagues in public health are very collegial. We work together, we share ideas, we share information, so that we don’t have to reinvent the wheel. We also share students. I know that [insert name] is not right for this person, but [insert name] might be, or vice versa. Or we have students that might be interested in a program that one school offers that we don’t offer. And I think that makes for much easier enrollment management, not just within the institution, but I guess I’m looking at it even bigger because I think people in public health think of it bigger in terms of the public health profession, that we need good quality people in there to deal with some of the emerging issues. And so we work very well together in order to make sure that the pool to that career choice is as vibrant and as high quality as possible. (SPH24)

I think for a lot of public health schools, many of them are very new, at least at the SOPHAS group. Any collaborations or recommendations are generally very helpful especially for the newer programs. (SPH114)

You really just have to think out of the box and think about ways to try to attract students into your program because schools and colleges of public health are being added each year. (SPH116)

The School of Public Health Application Service (SOPHAS) was noted several times throughout these excerpts as well as the interviews as a site of collaboration. SOPHAS was discussed as an enrollment management tool itself. Additionally, as a collaborative effort among schools, it was also viewed by newer schools as a source of information from other more established SPH. Undergraduate programs of public health add a new component to enrollment management in SPH. With all of the newer schools coming online and with the addition of new types of programs, the ability to turn to other colleagues from other schools for assistance and ideas in attracting students to the field of public health was viewed positively. Furthermore, the idea of fit and enrollment management provides a shared platform for schools to work with each other. Rather than being competitive, schools acknowledge the focus should be on the fit for the student and the greater good of attracting students to the profession. This idea of collaboration
within what could be perceived as a highly competitive external environment is noteworthy and unique.

**Conclusion of Findings**

In summary, four findings were identified as a result of interviews with admission representatives in schools of public health.

1. **Finding One:** SEM is conceptualized through informal tactics in SPH rather than a formal strategic enrollment management plan. SEM tends to be implemented in units rather than a blended approach across the organization.

2. **Finding Two:** SPH organizational structures are centralized in terms of admissions and recruitment processes and decentralized in terms of decision making authority and yield to matriculation efforts. Admission officers in SPH value collaboration in order to be effective in this environment.

3. **Finding Three:** Polarities exist about the impacts of tuition and financial aid structures on enrollment management in SPH. Resources for student support are needed to attract quality students to SPH.

4. **Finding Four:** SEM in SPH is complex with contradictions and internal conflicts. Diversity, an educated and representative public health workforce and collaborative approach to enrollment management within the context of a competitive and expanding market provide a lens to understand the complex nature of public health education.
CHAPTER 5

DISCUSSION

This dissertation examined the perception of admissions representatives as it relates to strategic enrollment management practices in accredited schools of public health. In particular, the study examined the current organizational structures and practices of SPH related to SEM with a focus on the admission and finance aspects of graduate professional education. Data on the perceptions of admissions representatives concerning enrollment management in accredited schools of public health was presented. A summary of significant findings, limitations of the study, implications for practice and areas for further inquiry will be discussed. Finally, conclusions will be offered.

Summary of Findings

This study shows schools of public health engage in enrollment management practices and tactics, but the majority of those interviewed do not utilize formal strategic enrollment management plans. Recruitment plans and admission process plans were mentioned by some. Providing data reports for year-to-year benchmarking was mentioned by others. Many of the schools indicated they communicate about targets through a variety of different target setting methods. However, schools also noted that if targets are not met, there are few consequences. Only a few schools mentioned the repercussions from unmet targets, such as lowered budgets for departments.

SPH admissions representatives were involved in shorter term year to year planning, but not in long term strategic planning in regards to strategic enrollment management. Bontrager and
Green (2012, cited in Bontrager et al., 2012) summarize how this experience plays itself out in many institutions of higher education,

…the reality is that many institutions find themselves locked into a short-term planning cycle, attempting daily to respond to a steady stream of anecdotes of recruitment or retention shortcomings, along with a virtually endless list of strategies and tactics for correcting them. The result is often a conglomeration of initiatives, each of which has some merit, but that lacks cohesion and alignment. The result is staff overload, limited return on resource investments, and failure to meet enrollment goals (p. 274).

In the case of SPH, which find themselves in a stronger marketplace, many have been able to meet enrollment goals. Some schools noted enrollment is not a problem, so they had no need for a plan. Other schools mentioned their administration was paying closer attention and working towards the creation of school wide targets. However, many SPH have not instituted a SEM planning model, bringing together enrollment and financial planning to facilitate more effective strategic planning and to fulfill not only their budget outcomes, but also broader mission-driven goals (Bontrager, 2008). This is of special interest because many SPH discuss broader mission-driven goals as part of recruitment activities. The schools tend to operate in organizational silos rather than through one clearly articulated vision. This may be a result of the organizational culture, structure or both.

SPH are mostly organized through a centralized/decentralized model of enrollment management, which necessitates effective collaboration between administrative and academic units, but is also viewed as a barrier to effective enrollment management by some schools. Other barriers to implementing a formal plan that were noted include the absence of a clearly articulated vision by leadership, a lack of adequate resources to implement a comprehensive plan
and overall success in meeting current enrollment targets without formal strategic enrollment management planning.

There are as many organizational structures as there are colleges and universities (Bontrager, 2004). This was also true of SPH. SPH admission representatives are typically located in an Office of Student or Academic Affairs with reporting lines to the Dean’s Office. Recruitment and admission processes are managed by admission representatives with admission decisions occurring in academic units. This is a typical model for graduate programs in that enrollment functions also reside in the academic unit (Henderson, 2005). Poock & Love (2001, cited in Bontrager et al., 2012) found that faculty friendliness and positive engagement were contributing factors to selection of graduate program. Schools noted some disconnect over the lack of involvement from academic units in recruitment.

Some schools mentioned tensions between the goals of administration and the goals of the individual academic units concerning enrollment, without a mechanism for resolving those discrepancies. It is necessary in this kind of decentralized graduate enrollment model to ensure there is adequate communication. Bontrager (2004) discusses this organizational model and the challenges involved: “Where formal reporting lines do not exist, strong communication links must be established. These cannot be left to chance or good intentions. Formalized relationships must be established with the committee structure of the institution” (p. 15). Communication is paramount and linking EM functions with the academic ethos is also essential. Henderson (2005) explains the role of leadership in framing enrollment management in partnership with the academic mission of the institution, “this top down communication from the academic leadership articulates strategic educational aspirations, goals, needs, and strategies of the institution’s faculty and students” (p. 7). All members of the institutional community need to understand that
the academic well-being of the institution is tied inextricably to enrollment health (Henderson, 2005). Even with top leadership reinforcing the importance of healthy enrollment, Henderson (2005) says communication within the institution about the enrollment strategy must become a part of the culture.

Lack of resources to execute an effective enrollment management plan was another top barrier listed by schools. This was expressed mainly in the form of needing more merit aid through scholarship support to recruit top students. Schools are experiencing increased competition from other schools and programs of public health. For instance, without scholarship support, schools can’t recruit top students or meet enrollment goals. Consistent with resource dependency theory, schools must be responsive to the demands from their environments. If the environment is increasingly competitive, perhaps scholarship support is not the only mechanism for achieving optimal enrollment. SEM plans may enable schools to be more proactive, help to pinpoint unique strengths within their institution and enhance communication throughout the organization.

Divergent viewpoints exist about the impact of tuition increases and the effectiveness of the current organizational structure of financial aid on enrollment management. Links between prestige and price were noted although even higher prestige institutions voiced strong concerns about rising costs and reaching a tipping point. Other institutions believed they were fairly priced in the market and were now competing for students who would have formerly gone to higher priced institutions. Public institutions discussed the addition of differential tuition or a graduate fee that is added to state tuition to generate revenue for professional schools.

Understanding financial aid is a critical component to strategic enrollment management. Some schools seemed content with an external office handling those duties and wanted little
involvement. Others voiced frustration with the lack of SEM focused –customer oriented approach to aid. SPH were split over their response to this question which could mean 1) their schools were effective in delivering financial aid, so additional interaction was not necessary, 2) they did not understand or believe they had any influence on financial aid so were unable to articulate a link with enrollment management or 3) they did not see a link between the activities they carried out and those performed by financial aid. Regardless of the position, financial aid facilitates paying the bills for both students and institutions (Bontrager et al., 2013). Understanding financial aid as part of the larger SEM continuum will only enhance the positioning of SPH as they compete for students.

Findings also revealed a lack of integration or strategy around the integration of admission, student aid and pricing. While schools use tactical approaches such as tuition benchmarking with other similar institutions, an overall strategy for accomplishing this was not discussed or unknown by most enrollment managers in SPH. Strategic decisions about pricing and institutional positioning can be enhanced with multivariate analyses to help craft tuition policies and financial aid programs while meeting enrollment and budgetary goals (Hossler, 2000, p. 79). As is the case with many undergraduate institutions, matriculating professional students is becoming more difficult due to the numerous options they may have. SPH spoke to this increased competition, especially for high performing students. Human capital theory provides a framework for us to understand how individuals make decisions regarding the amount of education to acquire and enrollment managers on the graduate professional level could greatly assist their school administration with knowledge about price and elasticity of demand (DesJardins & Bell, 2006).
Merit aid was usually awarded at the school level and in most cases determined within the academic units. Need-based scholarship aid was rarely mentioned and when it was, SPH admissions representatives acknowledged the lack of or non-existence of it. SPH, while mission-driven to recruit diverse populations, did not always provide scholarship support in the form of need-based support to attract these applicants. The support they could offer was mostly described as merit-based or mission-based aid. While some of this aid is awarded to students with need or to increase diversity, often times these resources are given to high-scoring, well-resourced students and not often enough to needy students (Bontrager, 2008).

Unique aspects about schools of public health were identified and provided additional information about enrollment management practices. SPH compete for students but collaborate in leveraging technical assistance and resources. Through the centralized application service, SOPHAS, schools are able to manage applicants with the web-based management tool, web-admit, and also raise the profile of all SPH through this centralized mechanism for applications. SPH in this regard operate on a level playing field and contribute enhancements for the successful operation of the service. Schools also use data to support decision making. While sometimes constrained by complex, university-wide student information systems, SPH strategically leverage data for decision support in admission and recruitment operations.

SPH perceive a link between enrollment management and the creation of the public health workforce. Diversity beyond URM is a core goal for all schools, although many schools are constrained in their ability to attract students without adequate funding through scholarship support. SPH are verbally committed to the idea of a diverse public health workforce reflective of the constituents they serve and are engaged in recruitment efforts on that front. Schools acknowledge they could do better and there are limitations. While schools compete for top
students, they also collaborate in sharing experiences, assist newer schools or programs, and advise students about best fit. Unlike many other professional programs, SPH enjoy a robust market, but must be cognizant of the external threats that exist.

**Implications for Practice**

The findings of this study suggest implications for the practice of enrollment management:

1. **SPH embrace core concepts of strategic enrollment management although most schools do not have a formal enrollment management plan.** Whether or not schools engage in formal planning, this study can inform schools about the difference between SEM plans and admissions and recruitment plans that are more typically found in SPH.

2. **SEM is a process that involves constituents across the school, not just admissions.** Engaging all levels of stakeholders is critical for effective strategic enrollment management, especially in graduate enrollment management populations where academic units are integral to the process. Understanding some of the organizational barriers that exist will only assist some SPH to identify areas for collaboration. Schools could benefit from the creation of constructive conflict cultures where issues are handled in a functional manner and conflict is seen as a positive rather than negative where it pertains to SEM.

3. **SPH have limited scholarship resources to compete in an expanding, yet competitive marketplace.** SPH admission representatives may leverage resources with a stronger foundation and knowledge about the financial landscape. The financial aid process is an extension of recruitment and admissions functions within the SEM funnel. The findings suggest financial aid tends to live outside of the influence of SPH administrators. This can present barriers to effective SEM. While these functions may reside externally, schools tend to have more local control over merit aid. Awareness of financial aid
resources including external scholarship opportunities for students will assist SPH admission representatives in mitigating external pressures.

4. SPH are committed to a diverse and inclusive public health workforce. Continued funding of initiatives to support diverse student populations should be a priority for SPH. SPH should be cognizant of the impact of a high tuition master’s program on access for URM. While SPH may be inclusive in terms of their ability to attract a variety of populations, they should not let this overshadow their focus on URM groups and their ultimate responsibility for producing a diverse public health workforce of the future. Admissions representatives are on the front lines of this effort, but need school wide assistance. Some schools are making strides in these efforts through the hiring of personnel to address this concern. It remains to be seen what kind of impact this investment will have on enrollment.

5. Collaboration is a key part of enrollment management in SPH. Centralized enrollment management efforts support school efforts in expanding the market for master’s degrees in public health. While competing for top students, SPH are also focused on their school specific missions. Collaborative efforts benefit the expansion of public health as a professional degree choice.

6. SOPHAS, the centralized application service for public health, will continue to add institutions and impact enrollment management for SPH. With the increase in the number of programs joining the service, schools and programs will need to be proactive about managing the admissions process. Will there be more applicants as a result of this growth or will there be more schools and programs for students to select, thus diluting the pool? SPH may decide to focus more on the front end of recruitment by encouraging prospects
to select their name on the application. Counter to that argument, SPH may find themselves with even more applicants, but with questionable yield-to-matriculation rates. Admission representatives in SPH discuss these approaches individually, but not as a blended approach. The integration of the concepts around admission, aid and price explained under the human capital framework and practiced widely in undergraduate programs may be a next step for graduate professional programs in public health.

**Future Research**

This study provides information regarding the perceptions of admissions representatives in schools of public health as related to strategic enrollment management. Through qualitative interviews with 27 schools, it sought to contribute to the literature about graduate enrollment management in professional schools. Further research is warranted on this topic. The following recommendations provide a starting point for future exploration:

1. Future studies may focus on interviews with multiple members of each campus such as deans, faculty and staff responsible for admission within the academic units. A variety of perspectives would be helpful to provide balance to the experience of admissions representatives alone. Some admissions representatives served in senior administration while others reported through several layers of leadership. Additionally, it would be helpful to hear why schools are organized the way they are from senior administrators. Various models may have been implemented for reasons unknown to front line administrators. It would also be interesting to hear from senior leadership how they articulate their vision for enrollment throughout the organization and how they interpret strategic enrollment management planning. Understanding the perspective of faculty as it
relates to the central admissions organization would also provide some insight into optimal organizational structures and points for collaboration.

2. Future research should examine merit and need based aid in graduate professional schools. SPH acknowledged the desire to recruit a diverse pool of applicants including those URM and low socio-economic status. Understanding how SPH are leveraging financial resources to support mission critical efforts is valuable. Perhaps through increased competition, we are supporting those students who are more affluent instead of those with the most need. Additional study is necessary on this topic given the mission of SPH.

3. Further information about the links between prestige and tuition setting would be of great interest. One school noted that high price used to equate to high quality and prestige, but that this may be changing. It would be interesting to explore prestige factors as related to enrollment demand for public health degrees.

4. Additional studies about the impact of the addition of accredited programs to the centralized application service on accredited schools of public health would be of timely interest. How does the increase in competition impact enrollment? There is a growth of centralized application services across disciplines. What impact if any do centralized application services have on enrollment management practices?

5. Finally, future research should explore how SPH or other professional schools can mitigate the impact of a strained funding environment through other revenue streams and examine why public health programs tend to be more costly than other master’s degree programs.
Study Limitations

There were several limitations to the analysis. I interviewed 53% of SPH, with the majority selected ranked in the top 25 by *U.S. News & World Report*. *U.S. News & World Report* ranks SPH through reputational surveys by other SPH administrators. This method may not be considered the most scientifically valid. However, this is the only official ranking system of SPH. While the study sought to include a diverse group of schools in terms of geographic region, age, and size, the sample is not necessarily representative of all SPH. The sample in this study could be considered representative in terms of the number of public and private institutions represented in the population of SPH overall. Future research could include all fifty-one CEPH accredited SPH given the limited population. Also, accredited programs could be included in future studies with the recent change in governance structure of the Association for Schools and Programs of Public Health to now include accredited programs as members.

Although each of the individuals interviewed was identified as a school contact for admissions related functions, titles and responsibilities varied. Including personnel such as deans and faculty may have added more to the findings about enrollment management practices at SPH. The study’s use of telephone interviews may have constrained data-gathering in some respects. Face-to-face interviews could have yielded more descriptive information through non-verbal communication. Also, visiting a school provides additional context for understanding the culture of the institution. Furthermore, this study could incorporate a quantitative component. A mixed methods approach could yield a stronger study. Time and resources were limited in this respect.

To conclude, master’s degree programs are growing dramatically across the disciplines, and future research is warranted to further examine graduate enrollment management models. Ideally, the results of this study will inform schools of public health as they undertake
conversations and decisions regarding strategic enrollment management, and pursue areas for prospective collaboration within their schools and institutions.

**Conclusion**

Research on enrollment management practices sheds light on the larger issues facing higher education today. With rising costs, new threats to financial stability and increasing competition, enrollment management is a lens to view the dilemmas inherent in complex organizations. Organizational structure, authority, leadership, financial leveraging, merit-aid, differential tuition, diversity, student information systems are just some of the issues that emerged from this one study of admissions representatives in schools of public health. Some of the challenges identified in this study are reflected in any organization practicing enrollment management. Using economic concepts to inform enrollment management may assist schools in decision-making about price and aid and inform schools about how students make selection decisions. SPH currently find themselves in a strong marketplace, but increasing competition for students, as previously experienced by undergraduate institutions, may result in the expansion of the current organizational practices of SPH EM operations and force schools to consider admission, aid and pricing through an integrated approach. The distinctive and sometimes contradictory aspects of graduate enrollment management are also highlighted. Strategic enrollment management is uniquely fitted to the institution it serves. Schools of Public Health are organizations that are dedicated to preventing disease and promoting health. Public health is complex and collaborative, action oriented and synergistic. Strategic enrollment management in SPH is similar in its complex organizational structure, collaborative nature and tactical response. There is much more to learn about SEM as it relates to SPH and graduate enrollment management. Future models may be shaped from these humble beginnings, not only for the
benefit of admissions representatives but also for the future public health workforce waiting to be discovered and developed.
REFERENCES


doi: 10.1002/hrm.3930300406


http://www.ceph.org/pg_accreditedschools_search.aspx


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APPENDIX A

DEFINITION OF TERMS

Accredited SPH (Schools of Public Health)
These schools prepare students for entry into careers in public health. The primary professional degree is the Master of Public Health (MPH), but other master’s and doctoral degrees are offered as well. Source: CEPH, Retrieved on October 19, 2013 from http://ceph.org/about/

ASPPH (Association of Schools and Programs of Public Health), formerly ASPH (Association of Schools of Public Health)
The Association of Schools and Programs of Public Health (ASPPH) is the voice of accredited public health education, representing member schools and programs accredited by the Council on Education for Public Health (CEPH). CEPH, an independent agency recognized by the U.S. Department of Education, accredits schools of public health and public health programs to assure that the school or program has been evaluated and has met accepted standards established by and with the public health profession. ASPPH is the membership organization for these prestigious academic institutions. Source: Association for Schools and Programs of Public Health, Retrieved on October 20, 2013 from http://www.aspph.org/

CEPH (Council on Education in Public Health)
An independent agency recognized by the U.S. Department of Education to accredit schools of public health and public health programs outside schools of public health. CEPH assures quality in public health education and training to achieve excellence in practice, research and service, through collaboration with organizational and community partners. Source: Council on Education in Public Health, Retrieved on October 19, 2013 from http://ceph.org/about/

EM (Enrollment Management)
Enrollment management is defined by Hossler as “an organizational concept and a systematic set of activities designed to enable educational institutions to exert more influence over their student enrollments” (1990).

GEM (Graduate Enrollment Management)
An extension of enrollment management, but with shared responsibility, stretching across units, levels and roles, dependent upon committees and informal relationships for effective implementation. (Kristin Williams, 2008).

SEM (Strategic Enrollment Management)
A comprehensive process designed to help an institution achieve and maintain the optimum recruitment, retention, and graduation rates of students, where ‘optimum’ is defined with the academic context of the institution. As such, SEM is an institution-wide process that embraces virtually every aspect of an institution’s function and culture. Source: Michael Dolence (1993)

SOPHAS (School of Public Health Application Service)
The Centralized Application Service for accredited schools of Public Health.
## APPENDIX B

### PARTICIPATING SPH & RATIONALE FOR INCLUSION

<table>
<thead>
<tr>
<th>School Name</th>
<th>Rationale for Inclusion</th>
<th>Year Accredited</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston University School of Public Health</td>
<td>Top 25 School</td>
<td>1981</td>
<td>North</td>
</tr>
<tr>
<td>Columbia University Mailman School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>North</td>
</tr>
<tr>
<td>Drexel University School of Public Health</td>
<td>Top 25 School</td>
<td>2004</td>
<td>North</td>
</tr>
<tr>
<td>Emory University Rollins School of Public Health</td>
<td>Excluded</td>
<td></td>
<td></td>
</tr>
<tr>
<td>George Washington University School of Public Health and Health Sciences</td>
<td>Top 25 School</td>
<td>1999</td>
<td>Mid Atlantic</td>
</tr>
<tr>
<td>Harvard University School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>North</td>
</tr>
<tr>
<td>Johns Hopkins Bloomberg School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>Mid Atlantic</td>
</tr>
<tr>
<td>Ohio State University</td>
<td>Opted out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Texas A&amp;M Rural Public Health School of Public Health</td>
<td>Top 25 School</td>
<td>2004</td>
<td>South</td>
</tr>
<tr>
<td>Tulane University School of Public Health and Tropical Medicine</td>
<td>Top 25 School</td>
<td>1947</td>
<td>South</td>
</tr>
<tr>
<td>University of Alabama at Birmingham School of Public Health</td>
<td>Top 25 School</td>
<td>1978</td>
<td>South</td>
</tr>
<tr>
<td>University of Albany SUNY School of Public Health</td>
<td>Top 25 School</td>
<td>1993</td>
<td>North</td>
</tr>
<tr>
<td>University of Arizona -Mel and Enid Zuckerman Arizona School of Public Health</td>
<td>Top 25 School</td>
<td>2008</td>
<td>West</td>
</tr>
<tr>
<td>University of Arkansas for Medical Sciences Fay W. Boozman College of Public Health</td>
<td>Newer School-Ranked #30</td>
<td>2004</td>
<td>South</td>
</tr>
<tr>
<td>University of California at Los Angeles School of Public Health</td>
<td>Top 25 School</td>
<td>1960</td>
<td>West</td>
</tr>
<tr>
<td>University of California at Berkeley School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>West</td>
</tr>
<tr>
<td>University of Georgia College of Public Health</td>
<td>Newer School-Ranked #34-Regional</td>
<td>2009</td>
<td>South</td>
</tr>
<tr>
<td>University of Illinois at Chicago School of Public Health</td>
<td>Top 25 School</td>
<td>1972</td>
<td>Mid West</td>
</tr>
<tr>
<td>University of Iowa College of Public Health</td>
<td>Top 25 School</td>
<td>2008</td>
<td>Mid West</td>
</tr>
<tr>
<td>University of Kentucky College of Public Health</td>
<td>Top 25 School</td>
<td>2005</td>
<td>South</td>
</tr>
<tr>
<td>University of Michigan School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>Mid West</td>
</tr>
<tr>
<td>University of Minnesota School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>Mid West</td>
</tr>
<tr>
<td>University of North Carolina at Chapel Hill School of Public Health</td>
<td>Top 25 School</td>
<td>1946</td>
<td>South</td>
</tr>
<tr>
<td>University of Pittsburgh Graduate School of Public Health</td>
<td>Top 25 School</td>
<td>1950</td>
<td>North</td>
</tr>
<tr>
<td>University of South Carolina Arnold School of Public Health</td>
<td>Top 25 School</td>
<td>1977</td>
<td>South</td>
</tr>
<tr>
<td>University of South Florida College of Public Health</td>
<td>Top 25 School</td>
<td>1987</td>
<td>South</td>
</tr>
<tr>
<td>University of Texas School of Public Health</td>
<td>Top 25 School</td>
<td>1969</td>
<td>South</td>
</tr>
<tr>
<td>University of Washington School of Public Health</td>
<td>Top 25 School</td>
<td>1970</td>
<td>West</td>
</tr>
<tr>
<td>Yale University</td>
<td>Top 25 School</td>
<td>1948</td>
<td>North</td>
</tr>
</tbody>
</table>
APPENDIX C
INTERVIEW PROTOCOL

1. Name_________________________

2. Telephone Number______________

3. Email__________________________

4. Date of Interview_______________

5. Location of Interview_____________

6. Previous Position________________

7. Current Position_______________

8. To which position does your area report? ________________________________

9. What is the title of the person with primary direct responsibility for enrollment management at your institution? __________________________________________________________

Interview Guide

1. Does your institution have a formal strategic enrollment management plan?
   a. Without getting into specific details, can you describe the general components contained in the plan and general aspects of enrollment management that currently exist at your school?
   b. If you have an unofficial plan or no plan, please describe your general practices, philosophies around managing enrollment in your school.
2. What do you believe is the purpose of strategic enrollment management in your own words?

3. What do you believe are the most important aspects of enrollment management at your school and why? The role of leadership in enrollment management?

4. What part of the organization or in which particular offices do you believe enrollment management functions reside in your school? Were they always in this part of the organization? Does this office have the authority to implement enrollment strategies? If so, how so?

5. Tell me about how enrollment targets are set at your school and how effective your school is in meeting those goals? What happens if enrollment targets are not met?

6. In your professional opinion, can you describe the most effective and least effective components of enrollment management at your institution?

7. What may be a barrier to developing and or implementing a comprehensive enrollment management plan at your institution?

8. What else would you like to share about enrollment management at your institution?

9. Tell me about how tuition is set within your school/institution. Can you talk about the impact of tuition increases on enrollment?

10. Tell me about financial aid at your institution as it relates to need-based or merit aid. Can you talk about tuition discounts? How is financial aid structured at your institution? Do you believe the organization of financial aid within your school/institution is effective?

11. What is your perception of your school’s efforts to recruit a diverse student population?

12. What is your school’s role in preparing the public health workforce?

Closing

Thank you for participating in this interview. I am happy to share the results of my analysis with you and will be presenting the results of this study at the SOPHAS Annual Meeting in April should you attend. Please feel free to contact me if you have additional questions or comments.
APPENDIX D

STUDY INFORMATION AND INFORMED CONSENT

8/22/2013

Dear :

I am a graduate student under the direction of James Hearn, Professor and Associate Director of the Institute of Higher Education at The University of Georgia. I invite you to participate in a research study entitled Strategic Enrollment Management in Schools of Public Health: A look at graduate professional education that is being conducted for a dissertation as part of the requirements for the Executive EdD program at the University of Georgia.

What is this study about?
The purpose of this study is to identify to what extent admissions officers at Schools of Public Health have adopted core strategies and best practices of Strategic Enrollment Management.

Why have I been asked to participate in this study?
Participants are Admissions/Student Services administrators in CEPH Accredited Schools of Public Health or Programs.

Why is this study important?
The findings from this project may provide information on strategic enrollment management in graduate and professional schools.

How many other people will be in this study?
There will be approximately 15-20 participants interviewed within the accredited schools of public health.

What will I be asked to do in this study and how much time will I spend?
Your participation will involve answering approximately 5 background/demographic questions and no more than 10-12 open-ended questions. The interview will take approximately 30 minutes of your time.

What are the risks of being in this study?
There are no known risks or discomforts associated with this research.

What are my rights as a participant? Will my confidentiality be protected?
Your involvement in the study is voluntary, and you may choose not to participate or to stop at any time without penalty or loss of benefits to which you are otherwise entitled. Direct identifiers such as name and institution will be collected as part of the interview process to ensure only one response per school as part of the study design. This study poses no risk to the participants. If you choose to participate, reasonable efforts will be made to keep the personal individually-identifiable information in your research record private and confidential. Standard confidentiality procedures will be employed. Unless
you would prefer to be mentioned by name, your confidentiality will be maintained using a pseudonym both in the study and in the research records. With your permission, an audio record of the interview will be saved to help me remember what was said at the interview. The files will be destroyed once they have been transcribed.

While conducting the study only my faculty adviser and I will have access to the interview transcriptions. All information will be stored on a password-protected computer. The results of the research study may be published, but your name will not be used. In fact, the published results will be presented in summary form only. Your identity will not be associated with your responses in any published format. I would be happy to provide you with a preliminary draft of the report for your approval. If you decide to withdraw from the study, the information that can be identified as yours will be kept as part of the study and may continue to be analyzed, unless you make a written request to remove, return, or destroy the information.

What are the benefits of being in this study?
There may also be no potential benefits for you personally from this study. However, the potential benefits to science and humankind may include a better understanding of strategic enrollment management in graduate professional populations. Information obtained through this study will be shared at future Association for Schools of Public Health and School of Public Health Application Service annual meetings and may be used to enhance enrollment management practices at your institution.

How do I confirm my participation?
If you would like to participate in the study, please contact me at 404-272-1042 or klbrow2@uga.edu to schedule an interview time. Otherwise, I will reach out to you via email or phone in the next week to check on your interest.

Who do I call if I have questions or problems?
If you have any questions about this research project, please feel free to call me, Kara Robinson, 404-272-1042 or send an e-mail to klbrow2@uga.edu. Questions or concerns about your rights as a research participant should be directed to The Chairperson, University of Georgia Institutional Review Board, 629 Boyd GSRC, Athens, Georgia 30602; telephone (706) 542-3199; email address irb@uga.edu.

Thank you for your consideration! Please keep this letter for your records.

Sincerely,
Kara Robinson, MS
Doctoral Candidate, Executive EdD Program
Institute of Higher Education, University of Georgia
APPENDIX E

EMAIL CONFIRMATION

Dear ______,

Thank you for agreeing to participate in this research study about strategic enrollment management in schools of public health. The interview is voluntary and you may decide to terminate at any time. I am conducting this study as part of the requirements for the Doctorate of Education through the Institute of Higher Education at the University of Georgia under Professor James Hearn, PhD.

I have confirmed your interview for (sample date) at (sample time). Please call the following conference line number________ and use the following confirmation code______________ .

Background of the Study

Enrollment management is defined by Hossler as “an organizational concept and a systematic set of activities designed to enable educational institutions to exert more influence over their student enrollments” (1990). For the purpose of this study, I will utilize the administrative orientation to understand the admissions and financial aspects of strategic enrollment management in schools of public health (SPH). The administrative orientation is best understood as a way of organizing a wide range of administrative processes related to student enrollment in institutions of higher education (Kalsbeek, 2006).

I am interested in learning about your perceptions of strategic enrollment management as it relates to your institution and the organization of your admissions office within the school of public health and more broadly graduate programs in schools of public health. This study will provide information about the value and barriers to developing an effective enrollment management model in a graduate professional program.

Interview Logistics and Informed Consent Procedures

I anticipate the interview will take no longer than 30 minutes of your time.

This interview is being recorded unless you choose not to. I will keep all recordings secure and will destroy them after they have been transcribed. I will also take some notes as well.

I can assure you that in any publically available material your comments will not be attributed to you by name. I am also providing you with my electronic business card, for you to use should you have any follow up comments or questions.
Kara Robinson, Doctoral Candidate
The University of Georgia, Institute of Higher Education
Executive EdD Program
Contact Information: 404-272-1042, klbrow2@uga.edu
Study Title: Strategic Enrollment Management in Schools of Public Health