

# **IDPH Internship Project Description**

## **Organization Information**

**Name of organization:** Iowa Dept. of Public Health  
**Type of organization:** Government  
**Street address:** 321 E. 12<sup>th</sup> Street  
**City, State, Zip Code:** Des Moines, IA 50319  
**County:** Polk

## **Contact Information**

**Name:** Janice Edmunds-Wells  
**Title:** Executive Officer 2  
**Office:** Multicultural Health  
**Phone:** 515-281-4904  
**Fax:** 515-242-6384  
**Email:** jwells@idph.state.ia.us

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**Project title:** Multicultural Health Program Internship

## **Brief description of project(s) available:**

- Participate in meetings of the Multicultural Health Advisory Council.
- Assist in the development of resource documents related to health issues and concerns of the diverse minority, immigrant, and refugee populations within the state of Iowa.
- Provide logistical information and resources related to meetings, assist with agenda preparation, notices, resource documents, and minutes for assigned multicultural health work groups.
- Provide data research and analysis related to prevalent health-related issues.
- Assist with activities, programs, and duties associated with reporting related to statewide multicultural health concerns.
- Attend various community and agency meetings both locally and statewide. Statewide meetings will be accompanied by the department's multicultural health executive officer and intern. Intern may be required to represent program staff at local meetings.
- Final project of the intern choosing. Develop, implement, and complete a final project which will address an issue related to current minority, immigrant, or refugee health in the state of Iowa.
- All related duties as assigned.

## **Responsibilities (project objectives):**

This list may be negotiated, depending on the requirements of the students' academic institution.

- An intern student will gain valuable in the field experience in observing and working on projects which are collaborative endeavors between private and public entities related to prevalent health issues.
- Provide needed research in the area of health-related issues which are specific to the state of Iowa.
- Provide needed data collection in areas of minority, immigrant, and refugee health which are specific to the state of Iowa.
- Allow the intern to network with professionals within the diverse arena of public health and gain additional expertise, knowledge, and skills related to eventual educational goals.
- Provide an opportunity to coordinate with state institutions of higher education and the Multicultural Health Program of the Iowa Department of Public Health to develop projects which will expedite the knowledge base and progress of enhanced understanding of prevalent health-related issues and concerns.

Internship start/end date: Ongoing

Application deadline: Ongoing

Project identified for an:

\_\_\_\_\_ Undergraduate student: (Freshman \_\_\_\_ Sophomore \_\_\_\_ Junior \_\_\_\_ Senior \_\_\_\_)

\_\_X\_\_ Graduate student

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**Materials Student Must Submit to Preceptor at IDPH**

Cover letter	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Resume	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Writing sample	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
IDOP application required (if paid)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No (submit with required letter to DAS/HRE)
IDPH application completed and on file:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No (submit to Personnel at IDPH)

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**Interview Information (IDPH Preceptor decision)**

Advance interview questions	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Essay to submit prior to interview	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Phone interview	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Interview at IDPH	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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**Term(s) of experience**

Average hours/week desired: Negotiable

Compensation:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Benefits:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Mileage reimbursement:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
On-site:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Off-site:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Computer provided:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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