MODULE HANDBOOK
(Modulhandbuch)

Master of Science in International Health (MScIH)

Academic year 2017/2018

Institute of Public Health
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Praeambel

Qualification Profile Heidelberg Graduates

In the tradition of its statutes and mission Heidelberg University pursues technical, multidisciplinary and professional goals in all its educational programs for a comprehensive academic education and future career of its students.

The following competency profile applies to all disciplines. It is included in the respective module handbooks of individual degree courses and reflected in their respective curricula and modules.

- Development of professional skills with a strong research orientation;
- Development of transdisciplinary dialogue competence;
- Construction of practical problem-solving skills;
- Development of personal and social skills;
- Encourage the perception of social responsibility on the basis of acquired skills.

1. Introduction to the MScIH programme

The Institute of Public Health’s MSc. in Community Health and Health Management in Developing Countries (MScCHHMDC) was one of the first programmes of its kind in Germany and the first programme focusing on International Health to be taught in English. The programme ran successfully for over 20 years and has approximately 400 graduates.

Building on the strengths and success of the MSc. in Community Health and Health Management in Developing Countries the Institute of Public Health instituted a new modular structure in 2005/06, and renamed the Master’s programme: Master of Science in International Health (MScIH). The new modular structure was developed in response to student feedback and EU initiatives (the “Bologna Process”) to expand post-graduate education and enhance student mobility between fields of study, universities and nations. It includes three principal components (modules): a three-month core course providing the necessary foundations in International Health, a series of advanced modules dealing with advanced topics in International Health, and finally a research project in the form of a thesis and a final exam.

In the academic year 2006/07, a two-track system was adopted. In the two track system, students could choose to either participate in a one-year, full-time (continuous) residential programme, completing all of the coursework at Heidelberg University (called the “Residential Track”) or in an up to five-year flexible part-time (intermittent) programme, completing all the coursework at Heidelberg University and other tropEd partner universities (called the “European Track”).

Since the academic year 2015/16 the MScIH programme can either be studied full-time or part-time. In contrast to the previous two-track system, full-time students may choose to complete part of their coursework at other tropEd partner universities and part-time students may complete all their coursework at Heidelberg University.
2. MScIH overall programme objectives

The MSc in International Health (MScIH) focuses on poverty-related health problems in low- and middle-income countries.

In order to make health services accessible to the people who need them most, there is a need in many developing countries to improve health policy, to make organizational structures, planning and management more efficient at all levels of the health system, and to ensure sustainable financing. The MScIH programme Heidelberg University was developed with these factors in mind.

The overall aim of the MScIH programme is to provide students with a solid foundation in international public health principles and to build competency in using the tools and methods necessary to initiate and run programmes that improve the health of poor populations in an efficient, sustainable and equitable way.

**General Learning Objectives of the MSc. in International Health Programme**

Upon successful completion of the MScIH programme, participants should be able to:

- Critically collect, analyse and appraise qualitative and quantitative data relevant for the improvement of health and health care in low and middle income societies.
- Identify and analyse interrelated determinants of health and major health problems of populations in a cross-disciplinary perspective in low- and middle income societies.
- Plan sustainable improvements of health systems considering the diverse intercultural settings as well as social and ethical responsibilities.
- Clearly communicate and work professionally in a multi-disciplinary team.

Aligned with tropEd’s guidelines, 2005.

3. MScIH programme structure

The MScIH is a modular programme consisting of three major parts:

**Core Course ➔ Advanced Modules ➔ Thesis & Oral Exam**

20 credits - equivalent to 600 hours of Student Investment Time (SIT) in the European Credit Transfer System (ECTS) - must be earned in each part.

Student Investment Time includes not only formal teaching hours, but also group work, self-study and home assignments, i.e. all the time the student is expected to ‘invest’ in the study. The core course and advanced modules must be successfully completed before moving into the thesis & oral exam module. The study and exam regulations governing the MScIH programme are given in Annex II.

There are two modes of study available in the MScIH programme. Students can choose to study full-time or part-time in order to complete their Master’s degree within one year or up to five years respectively. Both modes of study have the same course components, credit requirements and lead to the same final degree. Nevertheless, they do differ in terms of time and flexibility, especially with
regards to the advanced modules that students can take at Heidelberg University and other partner institutions within the tropEd network.

TropEd is a network of worldwide institutions, which provide post-graduate education in International Health. TropEd’s innovative approach has been the establishment of a common standard in education and training in International Health and the creation of the foundation necessary for the exchange of students and lecturers among its member institutions. Please refer to tropEd’s website at www.tropEd.org for more information about the tropEd network, its member institutions and the courses offered.

Before entering the MScIH programme, students should decide whether they want to study full-time or part-time.

3.1 Core Course: Fundamentals of International Health

The core course has to be taken by all MScIH students. It consists of 6 units of study, each covering specific topics within International Health. The core course is offered once a year, starting in October. The 6 units of the core course must be taken sequentially in the same semester.

Core Course Unit 1: Creating a Learning Community

In this unit of study, students become familiar with the facilities and services of the Institute and University of Heidelberg necessary for their course of study, including computer and library resources. Students are also introduced to the basic concepts of self and time management, as well as group dynamics. Lectures on the History and Scope of International Public Health help to create a common understanding of essential terms and perspectives. An orientation is also given to living in Germany and the city of Heidelberg, supporting students in their transition.

Core Course Unit 2: Introduction to International Health and Health Systems

This unit introduces students to the health systems approach which includes identification of the elements, structure, and essential services of health systems in low and middle income countries and the roles and responsibilities of various stakeholders in International Health. Students learn about major endemic infectious and non-communicable diseases and how to appraise their impact on the health of populations. Current global initiatives for eradication of disease are presented and strategies are explored which promote cooperation at the international, national and local level.

Core Course Unit 3: Determinants of Health

Health care services are essential for treating the sick and thus make a direct contribution to the health of individuals. However, the health status of a population is determined to a large extent by factors which lie outside the direct influence of health care, such as gender, nutrition, culture, and environment. This unit of study provides students with an overview of these determinants and reflects on the potential tools to address them. Special attention is given to medical anthropology, reproductive and infant health, the integrated management of childhood illnesses and environmental health issues.
Core Course Unit 4: Qualitative and Quantitative Research Foundations in International Health

This unit first familiarises students with quantitative research methods. Students are introduced to epidemiological thinking and the basics of biostatistics and learn how to critically appraise epidemiological findings in literature. Study design issues are discussed with the aim to enable students to write appropriate applied research proposals, to analyse determinants and/or risk factors of health and disease, or to assess the impact of a given intervention. Special emphasis is placed on how to use research findings for better planning and management of health interventions. In addition, tutorials are offered to effectively use statistical software for data management and analysis (e.g. STATA).

Based on the understanding of socio-cultural factors developed in Core Course Unit 3, this unit of study then looks at qualitative research methods such as observation, interviews and focus group discussions used to study and explain a community’s view on health, illness and health care seeking behaviour. Students will practise how to design, analyse and present qualitative studies. In addition, ethical issues in research are discussed.

Core Course Unit 5: Health Policy and Economics

In this unit of study, the relationship between health policy and the health status of a population is explored with the aim to enable students to identify policies that discriminate against certain sectors of a population, to do a stakeholder analysis, and to propose modifications that would improve access to disadvantaged population groups. Emphasis is placed on health economic principals and economic evaluation methods.

Core Course Unit 6: Health Planning and Management

Health planning and management are central in getting improved health programmes to work. Drawing on knowledge and skills acquired throughout this core course, this final unit covers the basics of organizational behaviour and communication in managing International Health systems and organisations, methods to appraise organisational performance using the fundamentals of budgeting and financial analysis, as well as methods and tools of planning, assessment, monitoring and evaluation (project cycle management). It also explores opportunities and methodologies for quality improvement initiatives within a variety of health care settings, leading students to be able to plan realizable and sustainable programmes aimed at the improvement of the health and health systems of low and middle income countries.

3.2 Advanced Modules – Full-Time

Students must gain a total of 20 ECTS to complete the advanced modules component successfully. Full-time students must complete a set of four mandatory advanced modules at Heidelberg University accounting for 12 credit points. These mandatory advanced modules have been selected from the overall portfolio of the Institutes’ tropEd accredited advanced modules with the aim to provide students with the knowledge and skills needed to work in managerial positions in International Health.

Based on their needs, interests and professional development goals, students then may choose courses from the elective advanced modules to earn the outstanding 8 credit points to pass the advanced modules component of the Master’s programme.
Mandatory Advanced Modules (12 ECTS)

AM 1 Disease Control: Policies and Strategies
AM 2 Public Health Anthropology
AM 3 Global Challenges in Reproductive Health: Evidence and tools for Programme Implementation
AM 4 Improving the Quality of Health Care Services

Elective Advanced Modules (8 ECTS)

AM 5 Consultancy Skills: Evaluation of Health Facilities, Programmes and Projects
AM 6 Proposal Writing as a Consultancy Skill
AM 7 Decision Making in Public Health: Evidence, Politics or Diplomacy?
AM 8 Financing Health Care: Concepts, Challenges and Practices
AM 9 Public Health and Disasters
AM 10 Leadership and Change Management
AM 11 Global Mental Health: Public Health Approaches

All advanced modules offered at Heidelberg University are open to students enrolled at other universities of the tropEd network, as well as health professionals wanting to update their knowledge in a given field.

Opening the advanced modules to tropEd students and health professionals exposes students to varying professional and cultural backgrounds, increases their intercultural awareness and communication skills, and enhances their understanding of international health problems and solutions.

3.3 Advanced Modules – Part-Time

Students must gain a total of 20 ECTS to complete the advanced modules component successfully. Part-time students may complete any of the mandatory, elective and additional advanced modules in order to meet the credit requirements. Hence, part-time students can undertake advanced modules at Heidelberg University or any other partner institution within the tropEd network. Studying part-time allows students to combine work and study and to focus on a specific area of expertise within International Health. Furthermore, this mode of study exposes students to a variety of learning institutions.

As the courses offered by tropEd change over time, students are not expected to finalise their choice of advanced modules by the end of their core course, yet each advanced module needs to be approved by the Heidelberg IPH tropEd coordinator. Students should remain in contact with their academic
mentors and tropEd coordinator throughout the duration of this course component in order to receive assistance where necessary.

Please refer to the tropEd website for a current overview of partners and courses offered (www.troped.org).

Student Assessment Procedures in the Core Course and Advanced Modules:

Assessment of the students’ achievement of the learning objectives takes place throughout the core course and advanced modules. In general, students are not asked for rote repetition of facts, but to synthesise knowledge obtained within a given module and in progression through the modules.

Assessment methods include written in-class exams with essay-style and short-answer questions, as well as group projects, individual take-home assignments and presentations.

The core course contributes 25% towards the final grade for the MScIH programme. The weighted average of the grades of the individual advanced modules contribute to the final grade, proportional to their ECTS credit points, for a total of 25% of the final grade for the MScIH programme.

3.4 Thesis and Oral Exam

To complete the degree programme students have to gain 20 ECTS in the final module “Thesis and Oral Exam”. Under the supervision of an academic adviser, participants will write a thesis on an important health issue, based on qualitative and quantitative information from a literature review or primary study. Once the thesis has been completed and submitted, students also have to take a final oral exam covering content from the core course, the advanced modules and their thesis.
4. Module Descriptions

4.1 Core Course

<table>
<thead>
<tr>
<th>Core Course - Foundations in International Health</th>
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<tbody>
<tr>
<td><strong>Course Coordinator</strong></td>
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</table>
| **Duration and dates** | 14 weeks  
September 18 – December 22, 2017 |
| **Credit points and SIT** | 20 ECTS  
600 (630) hours SIT  
483 contact hours (60% lectures, 40% group work);  
147 hours self-study |
| **Module** | Core Course |
| **Status** | Mandatory |

**Learning Objectives:**
The core course is broken down into 6 units with the following specific objectives:

**Unit 1: Creating a Learning Community**

*Objectives*
At the end of this unit, students should be able to:

- Describe the objectives, content and structure of the Master of Science in International Health programme at the University of Heidelberg
- Access the facilities and services of the University of Heidelberg, including information and library sources
- Discuss the basic concepts of group dynamics and be able to apply them effectively when working in teams

**Unit 2: Introduction to International Health and Health Systems**

*Objectives*
At the end of this unit, students should be able to:

- Identify the elements, structure, and essential services of health systems in various countries
- Discuss historical perspectives in International Health
- Analyse the impact of political and economic factors on the health status of individuals and populations
- Discuss the roles and responsibilities of various stakeholders in International Health and explore strategies to promote cooperation at the international, national and local levels
- Identify and appraise the impact of endemic infectious and non-communicable diseases in their own country and in other countries of low and middle income
• Explain the impact of the demographic change on community health
• Explain the ranking of health systems and the differences between them

Unit 3: Health Problems and Determinants of Health

Objectives
At the end of this unit, students should be able to:
• Discuss the health challenges faced by individuals at different stages of life and within diverse and evolving community structures
• Identify issues specifically related to reproductive health and infant morbidity and mortality
• Identify issues specifically related to poverty, equity and gender in low and middle income countries
• Assess the situation of non-communicable and chronic diseases as well as cancer in low and middle income countries
• Explain basics of drug policy and drug supply in various health systems
• Discuss the principles of medical anthropology
• Explain how a group’s culture influences their health status and health behaviours
• Explain the health impact of exposure to biological and chemical agents, water, noise and air pollution
• Appreciate the impact of globalization on the health status of low income workers
• Discuss the role of proper nutrition in preventing diseases and in maintaining health

Unit 4: Research Foundations (Epidemiology, Bio-Statistics, Qualitative Methods)

Objectives
At the end of this unit, students should be able to:
• Recognise the importance of epidemiology, bio-statistics and qualitative methods for health management
• Dispose of appropriate epidemiological knowledge to cope with key epidemiological questions within their working environment
• Select and apply statistical tests appropriately to collect data, analyse scientific papers and design research proposals
• Use computers and statistical software for data management and analysis (e.g. Epi Info)
• Carry out qualitative research on selected questions related to International Health
• Design research programs with appropriate sensitivity to the target community and with adequate protection for the human subjects involved
• Report on qualitative research findings and to present these to an audience using effective methods of presentation
• Design and implement survey instruments for evaluation of health programs
• Assess the quality of data provided by health information systems and indicators
Unit 5: Health Policy, Health Economics, Evaluation

Objectives
At the end of this unit, students should be able to:

- Describe key milestones of international health policy development of the last decades
- Explain the relationship between health policy and the health status of a population
- Identify major stakeholders in policy development for low and middle income countries
- Explain basic health economic principles and understand more complex economic concepts and evaluation methods
- Discuss the fundamental concepts of health care financing including health insurance systems
- Identify situations where it is appropriate to use market-based or public/collective systems to provide health care services
- Explain the financial management cycle

Unit 6: Health Planning, Health Management, Quality Management

Objectives
At the end of this unit, students should be able to:

- Explain the principles of health planning including the development of indicators
- Contribute actively to planning of health related programs
- Identify opportunities and methodologies for quality improvement initiatives within a variety of health care settings
- Discuss principles of health management and apply health management-related soft skills like leadership, communication and conflict management.

Learning Methods:
The following learning methods are applied:

- Interactive lectures with plenary discussions = 48%
- Group work with group discussion = 32%
- Seminars and workshops = 5%
- Tutorials = 5%
- Role plays = 2%
- Individual presentations with visualization = 3%
- Participatory and cooperative experiences = 5%
- Home assignments with individual studies (in total 4 days)
- Sharing and cross fertilization of knowledge among participants (cross-cutting)

Due to the fact that students have different professional backgrounds, we encourage the students to share their experiences with one another.

We take care that lecturers continuously change the learning methods they use and pure theoretical input is limited, though in general every topic is introduced first by a lecture. Clear group work assignments facilitate group work, the result of which is always presented in plenary.
Assessment Procedure:

The main assessment tools are exams lasting 4 h.

There are 3 individual (closed books) exams out of which
- the first covers units 2 and 3,
- the second unit 4, and
- the third one units 5 and 6.

Each exam consists of 8 – 15 questions. The type of questions are different:
- short case scenarios with answers in essay style (from ~5 lines up to 1 page)
- short case scenarios with small calculations
- Multiple choice questions
- “yes” – “no” statements

For the correct answer the students can get a certain number of points.

The students are informed beforehand how many points are allocated to a specific question. The sum of all points equals 100 points; 60 points are needed to pass the exam.

For the assessment of units 5 and 6 the procedure is slightly different. For these two units, a group exercise (establishment of a planning matrix) is part of the assessment, which counts for 30 points, whereas the written exam counts for 70 points.

We expect students to achieve a minimum of 180 points (3 x 60) by the three written exams. The final grade is the average of the three individual exam results = every exam counts the same towards the final grade of the core course.

If this figure is not achieved, the chance of a fourth written exam (4h) covering the content of the whole core course is given to the student. The result of this exam is their final grade.

If the student fails this exam he/she cannot be admitted to the final oral exam.
4.2 Mandatory Advanced Modules

<table>
<thead>
<tr>
<th>Disease Control: Strategies and Policies</th>
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<tr>
<td><strong>Course Coordinator</strong></td>
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<td><strong>Duration and dates</strong></td>
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<td><strong>Module</strong></td>
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**Learning Objectives:**

After successful completion, participants should be able to:

- Explain the composition, distribution, determinants and future projections of the global and regional burden of major diseases and to draw implications for disease control programmes
- Apply different surveillance systems in disease control
- Explain the differences between control of diseases and elimination/eradication of diseases
- Critically analyse the application of disease control principles using different strategies and approaches such as Primary Health Care, inter-sectoral collaboration, multi-disciplinary approaches, and community participation
- Distinguish strengths and weaknesses of recent policies and developments in the control of a number of endemic and epidemic diseases
- Examine policies and developments in the eradication of selected diseases
- Critically apply new strategies for health promotion and disease control
- Analyse the role of formal and informal health services in disease control

**Content:**

- Introduction to principles and strategies of disease control and disease eradication programmes
- Introduction to the Global Burden of Disease
- Communicable disease control and the role of health promotion in control strategies
- The application of surveillance systems, monitoring and evaluation in disease control programmes
- Outbreak control
- Dengue control: Clinical and vector control strategies
- Polio eradication: The last mile
- Helminth control
- HIV/AIDS control: Pattern of the epidemic, case studies on HIV prevention from Asia and sub-Saharan Africa, and disease management strategies and their application in sub-Saharan Africa
- Rabies control: Addressing a complex zoonosis
- Malaria control: Clinical and vector control strategies
- Human African Trypanosomiasis control
- Tobacco control
- Diabetes control in sub-Saharan Africa
- Case studies in communicable and non-communicable disease control from the home countries of course participants
- The impact of the epidemiological transition for disease control programmes in developing countries
- Disease control and human resources, the role of formal/informal health services in the health system

**Learning methods:**

- The course aims to initiate an active participatory learning process. It uses a mixture of input lectures, case studies, group work, literature review and individual assignments.

**Assessment procedures:**

Class attendance (90%) is mandatory. Participants are expected to contribute actively to class discussions and group work.

The final grade will be based on:

- 20% group work (group mark based on 15 minutes presentation) and
- 80% written exam (resit possible)
Public Health Anthropology: Concepts and Tools

Course Coordinators
PD Dr. Aurélia Souares
Dr. Verena Keck

Duration and dates
2 weeks
January 22 – February 02, 2018

Credit points and SIT
3 ECTS
90 hours SIT
70 direct contact hours (56 hours of lectures and 14 hours of facilitated group work) and 20 hours self-directed learning

Module
Advanced Module

Status
Mandatory

Learning Objectives:
At the end of the module the participants should be able to:

• Discuss the concept of public health anthropology and its role in research, policy, and practice in public health
• Identify the impact of cultural paradigms and practices related to illness and to health care provision in different cultural settings
• Employ an anthropological perspective in identifying problems and finding solutions to public health problems encountered in the field
• Apply anthropological methods to identify cultural paradigms and practices related to health and illness
• Critically contextualize and evaluate medical and policy issues in public health from an anthropological perspective

Content:
The main topics to be covered in this module are:

• Introduction to Public Health Anthropology
• Cultural ideas and practices relevant to health and disease, as a key to understanding people’s behaviour
• Overview of medical systems as cultural systems
• Explanatory models and health seeking behaviour
• Research methods in public health anthropology
• Defining a public health anthropology research question and the appropriate methods
• Overview of tools used for data collection
• Preparing and conducting in-depth interview
• Methods and procedures for qualitative data analysis
• Analysing qualitative data
• Application of anthropological approaches to public health care provision
- Case studies of malaria control, HIV/AIDS, community empowerment, chronic and lifestyles diseases and cultural factors in doctor patient interactions in the West

**Learning methods:**

Teaching methods will include a combination of lectures, group discussions, and group exercises on concepts, methods and data analysis followed by class presentations as well as case studies to illustrate the practical application of anthropological approaches to public health issues. Participants will work individually and in groups. Students will be divided in groups of maximum 4 people.

**Assessment procedures:**

Course participants are expected to attend teaching sessions and participate regularly in discussions and group work.

Assessment of the participants’ achievement of the learning objectives will be determined by:

- Group presentation on selected case studies: 40%
- Individual written summary of data analysis: 60%.
### Global Challenges in Reproductive Health: Evidence and Tools for Programme Implementation

| Course Coordinators | Prof. Dr. Albrecht Jahn  
<table>
<thead>
<tr>
<th></th>
<th>Dr. Malabika Sarker</th>
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</table>
| Duration and dates  | 2 weeks  
|                     | February 05 – 16, 2018 |
| Credit points and SIT | 3 ECTS  
|                     | 90 hours SIT  
|                     | 75 contacts hours (30h lecture, 45h group work/participatory learning) + 15h self-study |
| Module              | Advanced Module |
| Status              | Mandatory |

#### Learning Objectives:

At the end of the module students should be able:

- To analyse Sexual and Reproductive Health (SRH) policy in its historical context
- To critically assess the global challenges through the evaluation of evidence from RH programmes and policies
- To apply the tools such as log frame required for reproductive health programme implementation
- To critically discuss neglected topics of the reproductive health agenda

#### Content:

- The changes and adaptation of sexual and reproductive health program implementation it has undergone since 1948 (establishment of Maternal Child Health programme by World Health Organization) and its evolution as MDGs
- The human rights approach to reproductive health.
- Public private partnership or demand based financing relevant to reproductive health and its challenges
- Strategies, frameworks and tools (developed e.g. by WHO, UNAIDS; UNFPA) for improving and managing reproductive health in the health system with a particular focus on appropriate indicators, planning processes and service provision
- The neglected SRH agenda like infertility, new family planning methods, male sexual health, health of vulnerable groups e.g. sex worker.
- Specific lecture topics:
  - Reproductive and Sexual Health and Rights; Maternal Mortality and Morbidity; Adolescent Sexuality: Case Study Bangladesh; Male Sexual Health: Importance within RH; Circumcision and HIV/AIDS; Family Planning (FP); FP Case Study: China; Abortion: A Controversial Journey; Infertility: Socio Cultural, Economic and Emotional Consequences; Prevention of Mother to Child Transmission (PMTCT); Anti Retroviral Therapy (ART); Gender Based Violence; Political Economy of HIV/AIDS: Sex Worker; Debate: RH Rights / Prioritisation within RH.
### Learning methods:

The strategy of the course focuses on participatory learning process

- Lectures
- Individual case study
- Participatory learning process: Debate, role play, and movies with discussion
- Group project: Presentation of a reproductive health problem in a specific country context

### Assessment procedures:

Class attendance (90%) is mandatory. Participants are expected to contribute actively to class discussions and group work.

The final grade will be based on:

- 50% Individual written assignment on case study: 1000 words with a bibliography
- 20% Quiz: On three reproductive health articles published in an international journals
- 15% Debate (on reproductive right): Individual mark through two coordinators review using a predefined check list
- 15% Group project: Group mark based on Presentation on a reproductive health topic selected by the coordinators by the group. Each group will be consisting of 5-6 students. Each presentation will take 15 minutes followed by discussion for 30 minutes.

Marking of essay, debate and group presentation by both coordinators. In case of significance difference in marking, both coordinator will discuss and reassess.

Passing mark is 60%. If a participant fails the assessments he/she will be given another essay question (2000 words) to submit at a given time.
## Improving the Quality of Healthcare Services in Resource Poor Settings

<table>
<thead>
<tr>
<th>Course Coordinators</th>
<th>Dr. Sylvia Sax</th>
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<tbody>
<tr>
<td><strong>Duration and dates</strong></td>
<td>2 weeks</td>
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<td>February 19 – March 02, 2018</td>
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<td><strong>Credit points and SIT</strong></td>
<td>3 ECTS</td>
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<td></td>
<td>90 hours SIT</td>
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<td>Lectures: 28 hours</td>
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<td>Group work and presentations: 30 hours</td>
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<td>Independent study: 32 hours</td>
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<td>Advanced Module</td>
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<td><strong>Status</strong></td>
<td>Mandatory</td>
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### Learning Objectives:

By the end of the module the participants should be able to:

- Critically analyse current mechanisms to improve quality of healthcare services in resource poor settings.
- Examine, in a resource poor health service, the opportunities and barriers for initiating and sustaining internationally accepted quality improvement principles and mechanisms.
- Describe current human and other resource challenges to improving health services quality and current initiatives to overcome these.
- Design and defend a quality improvement program for a health service in a resource poor setting.
- Develop personal and team skills in quality improvement tools and mechanisms.

### Content:

- Major steps and trends in the healthcare quality and patient safety movements
- Challenges to improving quality in resource poor settings with a focus on human resources
- Health services quality improvement principles, mechanisms and tools and their relevance in resource poor settings
- Using quality improvement tools individually and in teams
- Implementing healthcare quality improvement mechanisms and tools in resource poor settings including skills development
- Evaluation of health services quality
- Team and individual skills development in evaluating the quality of healthcare services
- Field visit to critically analyse quality improvement mechanisms in a healthcare service
- Debate on opportunities and barriers to health services quality improvement in resource poor settings
- Designing a sustainable health improvement program in a resource poor setting
### Learning methods:

- Searching the internet and internet resources for health services quality improvement publications and grey literature
- Use quality improvement literature critically to inform individual and team exercises
- Two x 60 minute interactive lectures to introduce key subjects of trends in healthcare quality and patient safety movements with two group exercises on these subjects
- 60 minute interactive lecture to introduce key quality improvement principles and two x 2 hour guided team exercises on using principles in different contexts
- 45 minute interactive lecture and two exercises on patient safety and evidence based practice and their relevance in a resource poor
- Three x 30 minute lecture on teams and five x 30 to 45 minute individual and group exercises on team building and using quality improvement tools and mechanisms
- 45 minute lectures and 1.5 hour group exercise to analyse two case studies on introducing and/or improving health services quality
- 2 hour guided and self-study exercise in searching the internet and internet resources for quality management
- Two day (16 hours) healthcare surveyor training using case-study, interactive lectures, individual and group exercises
- day (14 hour) interactive field visit to a healthcare service including design and use of a healthcare quality assessment tool, analysis of findings, role play and debate
- Four hour exploration of patient rights and responsibilities in healthcare using short lectures, role plays and design of patient charter
- 20 hour assignment on an agreed topic in health services quality improvement in a resource poor setting with optional presentation and defence of their approach.

### Assessment procedures:

Two options: 2000 word essay (100%) on an agreed topic in health services quality improvement in a resource poor setting using a minimum of three key publications

**OR** 1000 word essay (50%) and PowerPoint presentation (50%) to defend a quality improvement approach in a resource poor setting.

Failure of either option requires a 2000 word essay on a healthcare quality improvement topic using a minimum of 3 key references, negotiated between the student and the coordinator.
### 4.3 Elective Advanced Modules

<table>
<thead>
<tr>
<th>Consultancy Skills in International Cooperation in Health: Evaluation of Health Facilities, Projects and Programmes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course Coordinators</strong></td>
</tr>
</tbody>
</table>
| **Duration and dates** | 2 weeks  
March 05 – 16, 2018 |
| **Credit points and SIT** | 3 ECTS  
90 hours SIT  
20 hours lectures,  
15 hours case studies,  
30 hours evaluation reports and tools,  
4 hours discussions with international consultants,  
11 hours individual and group exercises and plenary discussions,  
10 hours individual study |
| **Module** | Advanced Module |
| **Status** | Elective |

### Learning Objectives:

The overall objective of this course is to enable health professionals and managers to understand and apply the concepts and principles of evaluation when evaluating facilities, projects and programmes in the health sector and to improve their personal and technical skills in evaluation and consultancy.

At the end of the course the participants will be able to:

- Describe basic principles and processes for evaluation of health facilities, projects and programmes
- Identify, adapt and use tools within an evaluation
- Apply the principles of effective writing in evaluations
- Write an evaluation report for an identified recipient.
- Use team building and team management skills
- Use the analysis of personal skills to develop a consultancy career plan

### Content:

The course includes the following topics:

- Evaluation and Consultancy: The Basics
- Evaluation: Key Principles, Methods and Tools
- Using Quantitative and Qualitative Methods in Evaluation
### Basic Skills of an Evaluator as an Individual and as a Team Member including team role play session
- Planning an Evaluation in a low or middle income setting
- Effective Writing Techniques, including Report Writing
- Critical Review of Evaluation Reports
- Designing and Providing Effective Feedback to Different Stakeholders
- The Consultants Reference Points: Client Requirements and Regulations
- Terms of Reference in your Consultancy Practice
- Planning a Consultancy Career
- Cultural and Ethical Aspects of Consultancy
- The Consultant: Expectations and Experiences

### Learning methods:
Each session has specific objectives and one or more short key readings which are included in the course reader. Further readings are suggested, however, they are not mandatory for the course. These documents are available for reading and can be copied in case of interest. We request participants to bring their laptop for the course; some computers and laptops are available for the participants.

### Assessment procedures:
- 60 % of the grade is assessment against specified criteria of group presentations of an evaluation exercise: facilitator (70%) and peer (30%)
- 40 % of the grade is facilitator assessment of an individual Consultancy Plan exercise
  Failure requires a 2000 word proposal on a topic negotiated between the student and the coordinator.
# Proposal Writing as a Consultancy Skill

<table>
<thead>
<tr>
<th>Course Coordinator</th>
<th>Dr. Sylvia Sax</th>
</tr>
</thead>
</table>
| **Duration and dates** | 1 week  
March 19 – 23, 2018 |
| **Credit points and SIT** | 2 ECTS  
60 hours SIT  
Lectures: 15 hours,  
Group work and presentations: 30 hours,  
Individual study: 3 hours;  
Pre-reading, collection of material: 12 hours |
| **Module** | Advanced Module |
| **Status** | Elective |

## Learning Objectives:

The overall objective of this course is to enable health professionals and managers and students to understand and apply the concepts and principles of proposal writing within international health and to improve their personal and technical skills for in proposal writing.

At the end of the course the participants will be able to:

- Develop and write a proposal targeting international health donors / clients
- List key steps and common mistakes in a proposal application process
- Use analytical and design tools necessary for proposal development
- Define and apply the principles of effective proposal writing
- Analyse the team approach to developing a proposal
- Develop and use criteria for assessment of proposals

## Content:

The course includes the following topics:

- Consultancy and Current Trends in International Cooperation
- Proposal Writing
- Effective Proposal Writing Techniques
- Essential Elements of Proposal Development
- Proposal Formulation According to the Rules of an International Donor
- Using Analytical and Design Tools such as Situational Analysis and Log Frame
- Case Studies Gates Foundation and Global Fund Proposal Development Based in Low and Middle Income Countries
- Criteria for Proposal Evaluation
- Peer Assessment of Project Proposal Documents
Learning methods:

The course uses case studies, proposal documents and experience from middle and low-income countries, with contributions from participants of the course to demonstrate the universal applicability of the concepts and principles.

Participatory learning based on lectures (15 hours), individual reading and exercise (15 hours), plenary discussions and group exercises (4 hours), facilitated proposal writing exercise (20 hours) and peer assessment (6 hours).

The participants are expected to use some of their evenings for writing and peer review. Moreover, it would be helpful to have access to a laptop with a CD-ROM drive for the course.

Assessment procedures:

Two facilitators and peers assess group proposals using agreed criteria relevant to the international donor context. Weighting is facilitators 70% and peers 30%.

Failure requires a 2000 word proposal on a second topic negotiated between the student and the coordinator.
## Decision-making in Public Health: Evidence, Politics or Diplomacy

<table>
<thead>
<tr>
<th><strong>Course Coordinator</strong></th>
<th>Dr. Olaf Horstick, FFPH (UK)</th>
</tr>
</thead>
</table>
| **Duration and dates** | 1 week + pre-reading  
April 09 – 13, 2018 |
| **Credit points and SIT** | 2 ECTS  
60 hours SIT  
40 hours contact (16h lectures, 24h group work, panel and tutored exercises) and 20h self-study (10h reading, 10h essay assignment) |
| **Module** | Advanced Module |
| **Status** | Elective |

### Learning Objectives:

At the end of the course, students will be able:

- to develop evidence-informed concepts and define the advantages of this approach compared to other approaches
- to critically discuss the different approaches for defining health policies (evidence-informed, driven by political arguments or by diplomacy)
- In order to reach these overall objectives, students will learn:
  - to develop pertinent evidence-informed decisions on a given problem in the field of health, including prioritisation of information, critical appraisal and synthesis of information
  - to identify different approaches for health policy decisions
  - to identify and involve stakeholders influencing health research, policy and practice
  - to develop strategies to influence decision making based on evidence

### Content:

This course aims to provide students with the necessary tools to develop and to successfully implement evidence-informed decisions in health.

- **First** - the module aims to equip students with the skills to systematically assess and critically appraise existing information (literature, reports, websites, databases - building on simple searches for high level authoritative evidence, or (if this is not available) developing concepts how to establish evidence-informed technical overviews). Students learn to provide evidence for their own managerial decision-making, but also for communicating and translating such evidence into the process of changing and improving policy and practice.
- **Second** - With case studies other approaches of decision-making in health, as often applied in practice, such as political or diplomacy-driven approaches will be identified. This aims to raise awareness of students to the different motives of stakeholders in decision-making.
- **Third** - strategies for ensuring the use of evidence-informed decisions will be discussed, with a focus on:
  - synthesis and presentation of evidence-informed analysis
- methods and tools that increase evidence relevance for practice, e.g.: involving decision-makers and communities, using effective communication strategies, action research case studies (current examples are given)

**Learning methods:**

The course aims to initiate an active participatory learning process. It uses a mixture of interactive lectures, individual assignments, case studies, group work and presentations, and a panel debate.

- Key facts and concepts are addressed in the interactive lectures, which amount to 16 hours of the coursework.
- 10 hours of individual reading assignments deepens this knowledge.
- Development of related skills is supported by tutored individual practical exercises during the course (10 hours) and individual written assignments (10 hours) to be submitted after course end.
- Case studies are used for better understanding and analysing processes at work in the dynamics between evidence, policy and practice. These form the basis for group work (max 6 participants per group) followed by group presentations (10 hours).
- A panel debate and plenary discussion is used to synthesize the contents at the end of the module (4 hours)

**Assessment procedures:**

- 60% individual written assignment Essay: critical synthesis of retrieved information (2500 words) on selected topics.
- 40% oral presentation based on group work

Assessment based on standard criteria, which are made available to the students; If a participant fails the assessments he/she will be given another essay question (2500 words) to submit at a given time.
## Financing Health Care: Concepts, Challenges and Practices

| **Course Coordinators** | PD Dr. Manuela de Allegri  
Dr. Stephan Brenner |
|-------------------------|-----------------------------|
| **Duration and dates**  | 2 weeks  
April 16 – 27, 2018 |
| **Credit points and SIT** | 3 ECTS  
90 hours SIT  
Lectures: 45 hours, Group work and presentations: 25 hours, Independent study: 20 hours |
| **Module** | Advanced Module |
| **Status** | Elective |

### Learning Objectives:
- At the end of the course, participants should be able to:
- Explain the positive and normative foundations of health care financing, with specific reference to the discourse on universal health coverage and equity.
- Compare and analyse the basic features of health care financing mechanisms in high, middle, and low income countries, as well as their comparative strengths and weaknesses.
- Critically appraise the roles of the public and private sector in health care financing in different contexts.
- Identify the tools used in development and assessment of financing mechanisms and evaluate their strengths and weaknesses.
- Apply the knowledge acquired to inform the development of viable health financing mechanisms.

### Content:
- Health care and health care financing markets: mechanisms and market failures.
- The positive and normative foundation of health care financing.
- Options and innovations in health care financing.
- Historical perspective on health care financing reforms.
- Basic features of health care financing arrangements: resource collection and risk pooling, benefit package, provider contracting, and quality assurance.
- Universal health care coverage: concepts and practice.
- Tax-based systems: concepts and practice.
- Insurance concepts and practice: private insurance, social health insurance, and micro health insurance.
- Out-of-Pocket payments and alternative financing methods.
- User fee abolition: concepts and practice.
- Performance-based financing: concepts and practice.
- Mixed models of health care financing.
- Evaluation of health care financing interventions.
- Comparative analysis of health financing policies in high, middle, and low income countries using country case studies from all continents

**Learning methods:**

The course uses a combination of interactive lectures, facilitated group work, and self-study to expose participants to both the theory and practice of health care financing in high, middle, and low income countries.

The group work comprises both structured exercises set around specific case studies proposed by the lecturers and participant-initiated reflections on the peculiarities of health care financing in their country of origin. Group work is always guided by specific instructions. The objective of such an approach is to facilitate knowledge acquisition through continuous exchange among the participants.

Participants will work individually or in groups of 3-4 students on selected case studies from low or middle income countries.

**Assessment procedures:**

Class attendance (90%) is mandatory. Participants are expected to contribute actively to class discussions and group work.

There is a 1.5 hour written exam at the end of the course, including short essay questions covering all content.

The final grade will be based on
- 20% group work (group mark based on 15 min presentation) and
- 80% written exam (short fact and essay questions)
Public Health and Disasters - Assessing and responding to health care needs in natural disasters and complex emergencies

| Course Coordinator         | Prof. Dr. Michael Marx  
|                           | Dr. Revati Phakey     |
| Duration and dates        | 2 weeks               
|                           | April 30 – May 11, 2018 |
| Credit points and SIT     | 3 ECTS                
|                           | 90 hours SIT          |
| Module                    | Advanced Module       |
| Status                    | Elective              |

Learning Objectives:

The course aims at improving participants understanding of the health systems and health care needs in both natural disasters (e.g. floods, earthquakes) and complex emergencies (i.e. armed conflicts).

It aims:

- to sensitize participants to the health and health systems impacts of disasters.
- to create awareness about the relief and development context in which international organisations work.
- to illustrate the aspects and importance of preparedness of health care systems for disasters.
- At the end of the module participants should be able to:
  - explain the health and health systems impacts of disasters
  - explain the importance of addressing gender based violence and mental health impacts
  - differentiate between natural disasters and complex emergencies in terms of health impacts and needs
  - apply rapid needs assessment methods and prioritization in disaster situations
  - use strategic and operational planning and health management tools in disasters
  - apply epidemiological methods in disaster situations
  - explain the driving forces and determinants of inter-agency coordination in the field
  - develop a concept for development-oriented humanitarian aid and mainstreaming preparedness in development policies
  - identify methods for quality assurance and minimum standard setting in humanitarian aid
  - handle socio-cultural aspects in the field appropriately

Content:

The content of the course reflects up-to-date knowledge and experience with the management of complex disasters, complex emergencies and post-conflict situations in the health sector:

- disaster situations
- disaster preparedness
- development programmes
- cross-cultural awareness
- gender based and sexual violence
- working relations in the field, donor coordination
- relief to development continuum
- applied epidemiology in needs assessment and
- relief planning for natural disasters and complex emergencies

**Learning methods:**

We stress participatory learning based on discussions, group work, presentations and self-directed studies.

**Assessment procedures:**

Final examination using short essay questions and multiple choice based on the learning objectives (70%) (individual mark) and Group work presentation on selected topics (30%) group mark).
# Leadership and Change Management in International Health

<table>
<thead>
<tr>
<th>Course Coordinator</th>
<th>Dr. Norma Lange-Tagaza</th>
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<tbody>
<tr>
<td>Duration and dates</td>
<td>2 weeks</td>
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<tr>
<td></td>
<td>May 14 – 25, 2018</td>
</tr>
<tr>
<td>Credit points and SIT</td>
<td>3 ECTS</td>
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<tr>
<td></td>
<td>90 hours SIT</td>
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<tr>
<td></td>
<td>40 hours lecture time, 25 hours of directed group work, 25 hours self-directed learning</td>
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<tr>
<td>Module</td>
<td>Advanced Module</td>
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<tr>
<td>Status</td>
<td>Elective</td>
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## Learning Objectives:

The overall objective of this module is to explore advanced topics in leadership as it pertains to change management in dynamic health care environments found in low and middle income countries. Through participatory learning exercises, students will be taught the skills necessary as an organisational leader to assess, plan, and implement organisational change under conditions of uncertainty and complexity.

Upon completion of this course, participants should be able to:

- Critically discuss different leadership styles and their components
- Identify cultural and global aspects of leadership
- Identify the internal and external drivers of change for health care organisations,
- Assess organisational barriers to change, and
- Plan and implement organisational change strategies, while ensuring essential services are maintained

## Content:

- Leadership and Change Management
- Mission and Vision
- The Eight Steps to Leading Change (Kotter)
- Personal Traits and Leadership
- Conflict Management for Leaders
- Organisational Culture and Change Motivators/ Drivers
- Influence Without Authority
- Leadership and Shared Responsibilities Teams
- Corruption and Health Policy: The Role of Leadership
- Emotional Intelligence
- Leadership in the Global Context
- Culture Sensitive Issues of Leadership and Decision Making (e.g. in Africa and Asia)
- Change Towards Maximising Customer Satisfaction and Profit
<table>
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<tr>
<th><strong>• Case Study from low or middle income country</strong></th>
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**Learning methods:**

The course uses participatory exercises, role playing, and case studies from low and middle income countries to facilitate the students’ achievement of the learning objectives and demonstrate the applicability of the concepts and methods. Each session has specific objectives and short key readings which are included in the course reader. Further readings are suggested, however, they are not mandatory for the course.

<table>
<thead>
<tr>
<th><strong>Assessment procedures:</strong></th>
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<tbody>
<tr>
<td>Course participants are expected to attend teaching sessions and actively participate in class discussions and group work.</td>
</tr>
<tr>
<td>Assessment of participants’ achievement of the learning objectives will be determined by the following formula:</td>
</tr>
<tr>
<td>• 30% for case study presentation (group work)</td>
</tr>
<tr>
<td>• 70% for written action plan (individual work)</td>
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</tbody>
</table>
# Global Mental Health: Public Health Approaches

| Course Coordinators | Dr. Silvia Runge-Ranzinger  
<table>
<thead>
<tr>
<th></th>
<th>Dr. Florian Ruths</th>
</tr>
</thead>
</table>
| Duration and dates  | 1 week  
|                     | May 28 – June 01, 2018 |
| Credit points and SIT | 2 ECTS  
|                     | 60 hours SIT  
|                     | 31 contact and 29 self-study hours |
| Module              | Advanced Module |
| Status              | Elective |

## Learning Objectives:

This course aims to provide students with the necessary tools to develop and to successfully implement evidence-informed decisions in GMH. At the end of the course, students will be able to:

- Critically analyse the epidemiology and social determinants of mental disorders globally and identify strategies to address the burden of disease
- Critically appraise examples of research and treatment/intervention models at regional level given different levels of resources

## Content:

- GMH epidemiology and burden of disease
- GMH policy, strategy and service development
- Cultural aspects of GMH with a perspective on case definitions
- Needs assessment for GMH in crisis situation
- GMH and its manifestations: clinical cases
- Therapeutic approaches in GMH
- Anthropological concepts of GMH
- GMH case studies (from participants’ home countries)

## Learning methods:

The course uses a mixture of interactive lectures, individual assignments, case studies, group work and presentations, and a panel debate.

- Pre-course preparation of case study (5 hours)
- Pre-course preparation of case study (5 hours)
- Preparatory reading (10 hours)
- Interactive lectures (16 hours)
- Facilitated group work (5 hours)
In preparation for the course, participants are expected to prepare a five-minute presentation (not to be assessed) on a GMH topic of their choice. This can be a presentation of the situation of GMH in a region/country/district or in a particular population/sub-population.

**Assessment procedures:**

- 60% individual written assignment. Essay: critical synthesis of retrieved information (2500 words) on topics selected by participants with agreement of the course coordinator. The essay must be delivered within 1 week of the end of the course.
- 40% group presentation (15 minutes + discussion) (peer assessment using a standard form accounts for 10% and two facilitators’ assessment using a standard form account for 15% each)

If the student fails to reach the passing grade of 60% (average from both assessments), s/he will be able to re-submit the individual written assignment not later than 2 weeks after receiving coordinator’s comments.
4.4 Additional Advanced Modules (part-time students only)

<table>
<thead>
<tr>
<th>Quality Management in International Health</th>
</tr>
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<tbody>
<tr>
<td><strong>Course Coordinators</strong></td>
</tr>
</tbody>
</table>
| **Duration and dates** | 2 weeks  
June 11 – 22, 2018 |
| **Credit points and SIT** | 4,5 ECTS  
135 hours SIT  
37 hours lectures, 47 hours group work and presentations, 8 hours field visit, 43 hours independent study |
| **Module** | Advanced Module |
| **Status** | Additional (part-time students only) |

**Learning Objectives:**

By the end of the module the participants should be able to:

- Identify challenges and current developments for improving healthcare quality in low and middle income countries.
- Critically analyse international healthcare quality management mechanisms and their global transferability.
- Describe the roles of different stakeholders in healthcare quality improvement initiatives and activities both locally and globally.
- Design a framework for strengthening healthcare quality in their country or region using key quality improvement principles and mechanisms.
- Develop personal and team skills to lead the use of quality improvement tools and mechanisms in their setting.

**Content:**

- Resource poor setting quality improvement case study and assessment tool to critically evaluate quality in a resource poor setting
- Internet resources for healthcare quality management publications and grey literature
- Major steps and trends in the healthcare quality and patient safety movements
- Quality improvement principles, mechanisms and tools and their contextual relevance
- Leadership in healthcare quality improvement
- Leading teams to use quality improvement tools
- Implementing healthcare quality management mechanisms and tools in low and middle income countries
- Healthcare quality evaluation mechanisms in low and middle income contexts
- Skills development in healthcare quality evaluation
- Practical exercise in critically analyzing quality improvement mechanisms in a German healthcare facility
Designing and sustaining a healthcare quality improvement framework in a low or middle income country or regional context.

**Learning methods:**

- Use quality improvement literature critically to inform individual and team exercises
- 3 day self-study exercise including reading and analysis of Nanda Devi Case Study and completion of quality assessment tool
- Six hours critical readings and pre-course completion of healthcare quality improvement history exercise based on key readings
- Two x 60 minute interactive lectures to introduce key subjects of major steps and trends in history of healthcare quality movement with two group exercises on these subjects
- 60 minute interactive lecture to introduce key quality improvement principles and two x 2 hour guided team exercises on using principles in different contexts
- Three x 30 minute lecture on teams and five x 30 to 45 minute individual and group exercises on team building and using quality improvement tools and mechanisms
- Four x 30 – 45 minutes lectures with three 15 – 45 minute team and individual exercises on leadership in healthcare quality improvement
- 30 – 45 minute lectures and 30- 45 minute group exercises to analyze three country case studies on introducing and/or implementing healthcare quality management mechanisms
- 2 hour guided and self-study exercise in searching the internet and internet resources for quality management
- Two day (16 hours) healthcare surveyor leadership training using critical reading, interactive lectures, individual and group exercises and Nanda Devi case study
- 1.5 day (14 hour) interactive field visit to a healthcare facility including design and use of a quality assessment tool, analysis of findings and role play presentations to key stakeholders
- Two hour exploration of patient rights and responsibilities in healthcare using short lectures, role plays and debates
- Six hours to design and present a country or regional healthcare quality framework using quality improvement principles

**Assessment procedures:**

2 –hour closed book examination using multiple choice (40%), short definitions (20%), and one 2 page essay question (40%). Failure requires a 2000 word essay on a healthcare quality improvement topic using a minimum of three key references, negotiated between the student and the coordinator.
Consultancy Skills in International Cooperation in Health: Evaluation of Health Facilities, Projects and Programmes

<table>
<thead>
<tr>
<th>Course Coordinators</th>
<th>Dr. Sylvia Sax</th>
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</thead>
<tbody>
<tr>
<td>Duration and dates</td>
<td>2 weeks</td>
</tr>
<tr>
<td></td>
<td>June 25 – July 06, 2018</td>
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<tr>
<td>Credit points and SIT</td>
<td>3 ECTS</td>
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<td></td>
<td>90 hours SIT</td>
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<td>20 hours lectures,</td>
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<td>15 hours case studies,</td>
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<td>30 hours evaluation</td>
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<td>reports and tools,</td>
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<td>4 hours discussions</td>
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<td>consultants,</td>
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<td>11 hours individual</td>
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<td>and group exercises</td>
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<td>and plenary discussions,</td>
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<td></td>
<td>10 hours individual</td>
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<tr>
<td>Module</td>
<td>Advanced Module</td>
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<tr>
<td>Status</td>
<td>Additional (part-time</td>
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<td>students only)</td>
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**Learning Objectives:**

The overall objective of this course is to enable health professionals and managers to understand and apply the concepts and principles of evaluation when evaluating facilities, projects and programmes in the health sector and to improve their personal and technical skills in evaluation and consultancy.

At the end of the course the participants will be able to:

- Describe basic principles and processes for evaluation of health facilities, projects and programmes
- Identify, adapt and use tools within an evaluation
- Apply the principles of effective writing in evaluations
- Write an evaluation report for an identified recipient.
- Use team building and team management skills
- Use the analysis of personal skills to develop a consultancy career plan

**Content:**

The course includes the following topics:

- Evaluation and Consultancy: The Basics
- Evaluation: Key Principles, Methods and Tools
- Using Quantitative and Qualitative Methods in Evaluation
- Basic Skills of an Evaluator as an Individual and as a Team Member including team role play session
- Planning an Evaluation in a low or middle income setting
- Effective Writing Techniques, including Report Writing
- Critical Review of Evaluation Reports
- Designing and Providing Effective Feedback to Different Stakeholders
- The Consultants Reference Points: Client Requirements and Regulations
- Terms of Reference in your Consultancy Practice
- Planning a Consultancy Career
- Cultural and Ethical Aspects of Consultancy
- The Consultant: Expectations and Experiences

**Learning methods:**

Each session has specific objectives and one or more short key readings which are included in the course reader. Further readings are suggested, however, they are not mandatory for the course. These documents are available for reading and can be copied in case of interest. We request participants to bring their laptop for the course; some computers and laptops are available for the participants.

**Assessment procedures:**

60% of the grade is assessment against specified criteria of group presentations of an evaluation exercise: facilitator (70%) and peer (30%)

40% of the grade is facilitator assessment of an individual Consultancy Plan exercise

Failure requires a 2000 word proposal on a topic negotiated between the student and the coordinator.
Neglected Tropical Diseases: A Public Health Issue

<table>
<thead>
<tr>
<th>Course Coordinator</th>
<th>Dr. Olaf Horstick, FFPH (UK)</th>
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</thead>
<tbody>
<tr>
<td><strong>Duration and dates</strong></td>
<td>1 week</td>
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<tr>
<td></td>
<td>July 09 – 13, 2018</td>
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<tr>
<td><strong>Credit points and SIT</strong></td>
<td>2 ECTS</td>
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<td>60 hours SIT</td>
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<tr>
<td></td>
<td>36 hours contact time and 24 hours self-study</td>
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<tr>
<td><strong>Module</strong></td>
<td>Advanced Module</td>
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<tr>
<td><strong>Status</strong></td>
<td>Additional (part-time students only)</td>
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</table>

**Learning Objectives:**

At the end of the course the participants should be able to:

- To understand the different underlying concepts of population based health approaches for NTDs
- To identify different approaches for health policy decisions for NTDs
- To develop evidence-informed concepts for the control of Neglected Tropical Diseases (NTDs) and define the advantages of this compared to other approaches
- To develop NTD control programmes for a defined population

**Content:**

This course aims to provide students with the necessary tools to develop and to successfully implement programmes with evidence-informed decisions for the control of NTDs.

- First: It looks at the historical background of NTDs including the basic bio-medical concepts.
- Second: It considers the landscape of organisations dedicated to control NTDs – information necessary to support local NTD programmes.
- Third: It examines the evidence-informed concepts and approaches for the control of NTDs on a population level, specifically Mass Drug Administration, and Vector Control, including community participation.

**Learning methods:**

The course aims to initiate an active participatory learning process. It uses a mixture of interactive lectures, individual assignments, case studies, group work and presentations, and a panel debate.

It consists of preparatory reading (16 hours) Interactive lectures (16 hours); tutored individual practical exercises (4 hours); group work based on case studies and presentations (12 hours); panel debate and plenary discussion (4 hours).

**Assessment procedures:**

Course participants are expected to attend teaching sessions and actively participate in class discussions and group work.
- 60% individual written assignment. Essay: critical synthesis of retrieved information (2500 words) on selected topics.
- 40% oral presentation based on group work

Assessment based on standard criteria, which are made available to the students
Health Systems Strengthening

<table>
<thead>
<tr>
<th>Course Coordinators</th>
<th>Dr. George Shakarishvili</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration and dates</td>
<td>1 week</td>
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<tr>
<td></td>
<td>July 16 – 20, 2018</td>
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<tr>
<td>Credit points and SIT</td>
<td>2 ECTS</td>
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<tr>
<td></td>
<td>60 hours SIT</td>
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<td></td>
<td>36.5 contact time and 23.5 self-study hours</td>
</tr>
<tr>
<td>Module</td>
<td>Advanced Module</td>
</tr>
<tr>
<td>Status</td>
<td>Additional (part time students only)</td>
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Learning Objectives:

This course aims to provide students with the necessary tools to develop and to successfully implement Health systems strengthening (HSS) interventions in low/middle-income countries (LMICs), in order to maximize impact of national disease-control programs. At the end of the course, students will be able to:

- Critically discuss theoretical and practical aspects of HSS in the context of LMICs, including multiple conceptual frameworks, strategic approaches to HSS, and political and economic aspects that determine health policy choices
- Apply operational aspects of HSS, including diagnosing the gaps in health systems performance, designing high-impact interventions and measuring performance of health systems strengthening programs
- Examine the global health landscape relevant to HSS, including global health funding architecture, partnership mechanisms and technical support mechanisms

Content:

- Overview of health systems and health systems strengthening in LMICs
- Comparative health systems and reforms in LMICs
- Diagnosing gaps in health systems performance
- National health strategy as the entry point for health systems strengthening programs
- How does the health system deliver healthcare? Understanding the supply factors that are necessary for healthcare delivery
- Resources for an effectively performing health system: Human resources, money, data
- How does health systems strengthening maximize the impact of national disease programs?
- Creating enabling partnership environments for health systems strengthening at the national and global levels
- Health systems strengthening in challenging operating environments
- Monitoring and evaluation of HSS programs
## Learning methods:

The course aims to initiate an active participatory learning process. It uses a mixture of interactive lectures, individual assignments, case studies, group work and presentations.

- Interactive lectures 21 hours
- Group work (incl. case studies): 21 hours
- Assessed group presentations 3 hours
- Preparatory reading 8 hours
- Written assignment 7 hours

## Assessment procedures:

- (i) 40% Group-work Power Point presentation: The group work consists of a 20 minute group presentation on a topic the groups decide on together with the coordinator at the first day of the course. Presentations will be delivered on the 5th day.
  Topics could include for example:
  1. Comparative analysis of health systems in two low/middle-income countries.
  2. Comparative analysis of strengths and weaknesses of two National Health Systems Performance Assessment reports.
  3. Analysis of strengths and weaknesses of a National Health Sector Strategy based on JANS review (Joint Assessment of National Strategies).

- (ii) 60% individual written assignment: Essays will be between 1500-2000 words. For the essay, participants choose a topic together with the course coordinator from a list of topics provided by the coordinator. Participants will have the opportunity to discuss the outline and structure of their essays with the course coordinator throughout the week. Essays are to be submitted the latest one week after the course end.

If the student fails to reach the passing grade of 60% (average from both assessments), s/he will be able to re-submit the individual written assignment not later than 2 weeks after receiving coordinator’s comments.
## 4.5 Thesis & Oral Exam

<table>
<thead>
<tr>
<th>Master’s Thesis and Final Oral Exam</th>
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<tbody>
<tr>
<td><strong>Thesis Coordinator</strong></td>
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<td><strong>Duration</strong></td>
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<td><strong>Credit points</strong></td>
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<td><strong>Module</strong></td>
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<td><strong>Status</strong></td>
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### Learning Objectives Thesis & Oral Exam:

By the end of the module students should be able to:

- Work independently, within a given period of time and using academic methods, to address a problem from the field of international public health
- Find, analyse, evaluate, select and integrate information using various sources
- Formulate research questions and hypotheses, and operationalise them.
- Develop a research plan
- Conduct systematic scientific research applying qualitative and quantitative research methods as well as public health theory
- Consider ethical aspects of public health research
- Demonstrate the ability to analyze and critically evaluate different methodological and theoretical approaches in public health research in written and spoken English
- Present and discuss the findings of their research in written and spoken English

### Learning Methods:

There are three possible ways to complete a thesis research project:

1. **Secondary Data Analysis**: students may conduct an analysis of already existing data sets, such as DHS data or Living Standard Measurement Study (LSMS), household surveys or other kind of data collected to answer a specific research question. This includes a critical analysis of the quality of the data and the methods applied in during the data collection.

2. **Field Study**: students may conduct a primary data collection study during a stay in a field site. Study questions are normally provided by or developed in conjunction with a partner institution in the host country.

3. **Literature Review/Systematic Literature Review**: students may conduct a literature/systematic literature review by using, analysing and discussing theoretical texts related to their research question and/or research reports from empirical studies conducted by third persons. In this case, the emphasis of the thesis lies on the critical analysis and discussion of the literature selected. Students must explain and justify the criteria for their selection of texts.

Learning and Teaching Methods: thesis market, thesis week (workshops, lectures, individual and ‘public coaching’, group work, self-study), thesis supervision, thesis presentations
Assessment Procedure:

(1) Master’s Thesis:

The Master’s thesis has to be submitted in form of a written research paper. The thesis will be assessed by two examiners, one of whom must be a professor or a junior professor. The first examiner should be the supervisor of the thesis. The grade of Master’s thesis weighs 25% of the final MScIH grade. The examination is considered passed when the candidate’s performance is graded as “sufficient” (4.0) or better by the two examiners.

(2) Oral Exam:

The final oral examination of 30 minutes is carried out by three examiners, including one external examiner. Contents cover the candidate’s thesis topic, the Core Course Modules and Advanced Modules. The grade of the oral exam weighs 25% of the final MScIH grade. The examination is considered passed when the candidate’s performance is graded as “sufficient” (4.0) or better by the three examiners.