

# **PROGRAMME SPECIFICATION**

# 1. Overview

Academic Year (student cohorts covered by specification	2024-25
Programme Title	Public Health for Development
Programme Director	Hannah Blencowe, Simon Cohn and Daniel Chandramohan
Awarding Body	University of London
Teaching Institution	London School of Hygiene & Tropical Medicine
Faculty	Interfaculty
Length of Programme (months)	MSc: full time - 12 months; part time - 24 months
Entry Routes	MSc
Exit Routes	MSc/PGDip/PGCert
Award Titles	MSc in Public Health for Development (180 credits)  Exit Awards:  PGDip in Public Health for Development (120 credits)
	PGCert in Public Health for Development (60 credits)
Accreditation by Professional Statutory and Regulatory Body	Curriculum validated by the Agency for Public Health Education Accreditation (APHEA). Please refer to the LSHTM Accreditation register for the period of accreditation.
Relevant PGT QAA Benchmark Statement and/or other external/internal reference points	N/A



_	MEDICINE (495)			
Level of programme within the Framework for Higher Education Qualifications (FHEQ)	Masters (MSc) Level 7			
<b>Total Credits</b>	<b>CATS:</b> 180			
	<b>ECTS:</b> 90			
HECoS Code	101317			
Mode of Delivery	This programme is based at LSHTM in London and delivered by predominantly face-to-face teaching modes.			
Mode and Period of Study	Full time (12 months) or part time/split study (24 months)			
<b>Cohort Entry Points</b>	Annually in September			
Language of Study	English			
Re-sit Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-08a.pdf			
Extenuating Circumstances Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-07.pdf			
Programme Description	The programme is structured to accommodate the needs of students who come from a range of professional backgrounds and who intend to develop different professional skills.  In term 1 students study core public health research skills: epidemiology, statistics, health economics, social research and health policy. In term 2 we offer an extensive choice of modules and students are guided			
	in their choice by their personal tutors to build a coherent package to suit their career needs.  Public Health for Development students have at least one year's experience of working in public health, of public health teaching or of research in a low- or middle-income country. We see this experience as a rich resource and in term 1 a series of seminars is			



	WEDICINE (1955)
	organised in which students learn from one another through presentations and themed discussions on their professional experience. They reflect critically on public health achievements in light of material they study on the programme.
	Towards the end of the teaching year, Public Health for Development students take a unifying module 'Applying Public Health Principles'. They also write a research report which addresses a research question relating to public health in a low- or middle-income country, through primary research, the analysis of data, a literature review, a policy report or by writing a research proposal.
	The student body is a key resource on this programme. We enhance group identity by organising two over-night stays away from London, one at the beginning and one at the end of the programme.
Date of Introduction of Programme	September 1978 (as MSc Community Health in Developing Countries)
(month/year)	September 1994 (title changed to MSc Public Health in Developing Countries)
	September 2016 (title changed to MSc Public Health for Development)
Date of production / revision of this programme specification (month/year)	June 2023



#### 2. Programme Aims & Learning Outcomes

#### **Educational aims of the programme**

The aim of the programme, consistent with LSHTM's mission to improve health worldwide, is to equip students with skills needed to appreciate and analyse public health concerns in low-income countries, and to design and evaluate actions to improve public health. The programme considers issues of health and the provision of health services from a multidisciplinary perspective. Public Health for Development students have previous experience of planning or implementation of public health programmes, of teaching or public-health-related research in low-income countries. We complement formal teaching with peer-to-peer learning that builds on this professional experience.

### **Programme Learning Outcomes**

By the end of the programme, students will able to:

- 1. demonstrate knowledge, understanding and skills in core public health disciplines including epidemiology, statistics, social science research, health economics and health policy;
- 2. demonstrate knowledge and understanding of a range of current issues and topics related to public health in low- and middle-income settings;
- 3. apply public health knowledge and skills to identify and assess public health problems in low- and middle-income countries;
- 4. formulate appropriate public health policies and strategies to control health problems and promote health in low- and middle-income countries;
- 5. evaluate actions designed to improve public health in low- and middle-income countries;
- 6. frame knowledge of public health within a development context.

#### **Teaching and Learning Strategy**

The programme is taught using a variety of teaching methods including: lectures, small group seminars, practicals, and group-work with peers. All elements of the programme have specific learning objectives, with content designed to help students achieve these outcomes. Students are expected to learn through both directed and self-directed study.

In addition, on the MSc Public Health for Development programme, we build on the group's professional experience through peer-learning seminars in which students are asked to present and reflect on their public health



experience in light of the material they are covering on the programme and, an overnight retreat at the start and end of the programme.

#### **Assessment Strategy**

The programme is assessed through individual module assessments (which may include essays, other written coursework, short written exams, practical exams, group-work, presentations or other methods), and a project report. Such tasks are designed to assess, using the most appropriate method, whether learning objectives have been met.

# 3. Programme Structure and features, modules, credit assignment and award requirements

Full-time Masters	Term 1	Term 2	Term 3	<b>Total Credits</b>
Compulsory Modules	5		1	75
Elective Modules*		4		60
Project			1	45

<sup>\*</sup>One elective module can be chosen for each of the Term 2 time slots (C1, C2, D1, D2) from the list of recommended elective modules below.

Module information is correct at the time of publication, but minor amendments may be made subject to approval as detailed in <a href="Chapter 3">Chapter 3</a> of the LSHTM <a href="Academic Manual">Academic Manual</a>. Elective modules listed are indicative and may change from year to year. <a href="https://www.lshtm.ac.uk/study/courses/changes-courses">https://www.lshtm.ac.uk/study/courses/changes-courses</a>

Term	Slot	Module Code	Module Title	Module Type (compulsory or recommended)	Credits (CATS)
1	AB1	1103	Introduction to Health Economics	Compulsory	10
1	AB1	1104	Principles of Social Research	Compulsory	10
1	AB1	1117	Health Policy, Process & Power	Compulsory	10
1	AB1	2007	Extended Epidemiology	Compulsory	15
1	AB1	2021	Statistics for EPH	Compulsory	15
2	C1	1400	Health Care Evaluation	Recommended	15
2	C1	1501	Economic Evaluation	Recommended	15
2	C1	1803	Sociological Approaches to Health	Recommended	15



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Term	Slot	Module Code	Module Title	Module Type (compulsory or recommended)	Credits (CATS)	
2	C1	1807	Health Promotion Approaches and Methods	Recommended	15	
2	C1	2400	Study Design: Writing a Study Proposal	Recommended	15	
2	C1	2423	Research Design & Analysis	Recommended	15	
2	C1	2440	Maternal & Child Nutrition	Recommended	15	
2	C1	3195	Malaria: From Science to Policy and Practice	Recommended	15	
2	C1	3457	Designing Disease Control Programmes	Recommended	15	
2	C2	1401	History & Health	Recommended	15	
2	C2	1402	Conflict and Health	Recommended	15	
2	C2	1457	Alcohol, Tobacco and other Drugs	Recommended	15	
2	C2	1700	Qualitative Methodologies	Recommended	15	
2	C2	1808	Health Systems	Recommended	15	
2	C2	2401	Family Planning Programmes	Recommended	15	
2	C2	2402	Statistical Methods in Epidemiology	Recommended	15	
2	C2	2417	Design & Analysis of Epidemiological Studies	Recommended	15	
2	C2	2436	Population, Poverty and Environment	Recommended	15	
2	D1	1127	Evaluation of Public Health Interventions	Recommended	15	
2	D1	1403	Organisational Management	Recommended	15	
2	D1	1504	Economic Analysis for Health Policy	Recommended	15	
2	D1	1802	Medical Anthropology and Public Health	Recommended	15	
2	D1	2407	Epidemiology of Non- Communicable Diseases	Recommended	15	
2	D1	2451	Nutrition in Emergencies	Recommended	15	
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Term Slot Module		Module	Module Title	Module Type	Credits
		Code		(compulsory or	(CATS)
				recommended)	
2	D1	2459	Current Issues in Maternal & Perinatal Health	Recommended	15
2	D1	2472	Social Epidemiology	Recommended	15
2	D1	3135	Spatial Epidemiology in Public Health	Recommended	15
2	D1	3192	Control of Sexually Transmitted Infections	Recommended	15
2	D1	3434	Water, Sanitation and Hygiene, and Health	Recommended	15
2	D2	1301	Environmental Epidemiology	Recommended	15
2	D2	1503	Globalisation & Health	Recommended	15
2	D2	1701	Reviewing the Literature	Recommended	15
2	D2	1804	Sexual Health	Recommended	15
2	D2	2342	Design & Evaluation of Mental Health Programmes	Recommended	15
2	D2	2437	Epidemiology of Infectious Diseases	Recommended	15
2	D2	3189	Ethics, Public Health & Human Rights	Recommended	15
2	D2	3461	Global Disability and Health	Recommended	15
3	E	3198	Applying Public Health Principles	Compulsory	15

#### **Contact Time**

Student contact time refers to the tutor-mediated time allocated to teaching, provision of guidance and feedback to students. This time includes activities that take place in face-to-face contexts such as on-campus lectures, seminars, demonstrations, tutorials, supervised laboratory workshops, practical classes, project supervision and external fieldwork or visits, as well as where tutors are available for one-to-one discussions and interaction by email. Module contact time will be defined in the individual module specifications and provided to students at the start of their programme.



This definition is based on the one provided by the <u>Quality Assurance Agency for Higher Education (QAA) Explaining contact hours (2011) guidance document.</u> Student contact time, together with time allocated for independent study and assessment, determines the total student study hours for a module or programme. Although there are separate hours allocated for each of these activities, they should always be clearly linked together to support effective learning. The London School of Hygiene and Tropical Medicine (LSHTM) defines high quality contact time as structured, focused, purposeful and interactive.

## **Entry Requirements**

Please refer to the programme's entry requirements <u>here</u>.