# TROPICAL INSTITUTE OF COMMUNITY HEALTH AND DEVELOPMENT (TICH) in Africa

# MASTERS IN COMMUNITY HEALTH AND DEVELOPMENT

# STUDENTS' HANDBOOK

JANUARY 2012

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# 1

# INTRODUCTION AND BACKGROUND

The Tropical Institute of Community Health and Development (TICH) is non-profit, voluntary institution registered in the republic of Kenya as an International Community Based Development, Research and Training The Trust brings together academicians. professionals and practitioners in Community Health and Development of diverse backgrounds to pool skills, expertise and experience in developing concerned leaders, managers and professionals in Community Health. It aims at providing a sound research evidence base for policy development as well as decision making in management of Community Health and Development Programs, implementing Community Based Programs, as well as providing technical services to interested customers in the areas of program development, evaluation and operation research. TICH was launched on the 30<sup>th</sup> of April 1998 when the first meeting of the International Academic Board took place. The academic program started with a group of 7 students from Kenya, Congo and Malawi.

# 1.1 Core philosophy, principles and values

TICH believes that all people and communities have inherent capacities to undertake, sustainable, collective, co-operative and collaborative actions to solve their own problems. In this regard, the philosophy and principle of partnership lies at the core of TICH academic, professional and practical institutional value system. TICH thus fully subscribes to a partnership model that recognizes, affirms and builds on the strengths of every stakeholder and partner engaged in health and development. To TICH, this forms the basis for combating both common and individual problems in our society. TICH is therefore committed to:

- Promoting justice in health and development
- Upholding the dignity of all peoples and communities, promoting respect across socio-economic divides, team spirit, respecting of everyone's rights
- Maintaining high standards of integrity through mutual trust, transparency, accountability, selfless and sacrificial attitude

- Inclusive community participation where all people have space and voice
- Mutual respect in diversity where strengths are encouraged and weaknesses minimized irrespective of gender, position, race or religion.
- Responsible stewardship and accountability for the intangible and tangible resources and existing capacities
- Building healthy, healing communities
- Targeting the most disadvantaged people through their own efforts, building on locally available capacities, assets and investments.

# 1.2 TICH Strategic identity

TICH's strategic identity encompasses:

- Serving the ecumenical movement in health, healing, wholeness and strategic development
- Creating a focal point for capacity building and information sharing in community health and development in the Africa region.
- Enhancing its profile as a voice of the civil society and academia on the Health for All policy, focusing on justice, equity and sustainable development.
- Creating an effective link between communities (strengthening the civil society), governments, and international community at all levels in community health and development.
- Serving as a center of academic and professional excellence in action research, training, policy analysis focused on community health and development, bridging academics with practical living in community and institutional contexts.

# 1.3 The vision, mission and goals

#### 1.3.1 Vision

To be an international center of academic, professional and technical excellence in community health and development in the African region bridging academic training with

practical community and institutional development through the partnership approach to enable households enjoy essential elements of dignified living.

In this way TICH hopes to make a meaningful contribution towards a healthy, just, prosperous, and sustainable society in which individuals, families and communities are equipped with the necessary practical capacities to cope with the demands in daily life.

#### 1.3.2 Mission

Developing effective, concerned managers/leaders with a vision for the transformation of health and development situations through practical, high quality academic and professional training programs; developing, testing and replicating alternative models of community health and development through networking.

TICH exists to build on and strengthen the potentials, actions and capacities of individuals, families, communities and institutions in order to develop sustainable leadership and programs building a bridge into a sustainable and secure future, beyond the year 2000.

# 1.3.3 The Goals

- Train and develop practitioners in Community Based Health and Development (CBHD).
- Train and develop leaders/managers/policy makers in and/or for CBHD
- Strengthen/develop/sustain Community Based Programs
- Develop/document sustainable Community Based models in partnerships.
- Develop/test/document and publish effective models in health and development.

# 1.4 The Partnership's approach to teaching/learning

TICH courses are oriented towards community-based approaches to Health and Development. Students take responsibility in TICH partner communities or agencies to manage program activities determined and driven by the partners themselves. They are encouraged to use evidence based methods in facilitating effective action

for change at the agency or community level to promote improvement in the state of well-being for all. The Partners engage in policy analysis, advocacy, negotiation and political / socio-economic action to address underlying causes of ill health.

There is an extensive exploration of integrated approaches to equity in health and development. This training initiative introduces a major paradigm shift from the Institutional Community Health and Development Training to a practical Community / Problem Based model. Where as the course has an institutional resource base and support much of the learning takes place within partner communities and agencies, focusing on their priorities and capacities; focusing on the development of the competencies and skills necessary for the management / leadership of Health and Development programs.

Such skills can only be developed in the context of operations, where the learner has technical and professional coaching, guidance and support, within or as close as possible to the targeted communities or agencies in which students are assigned as workers with well defined job descriptions. Therefore the teaching methods are based on adult learning techniques and consist of:

- Discussions
- Demonstrations
- Field visits and exercises
- Laboratory practice
- Lectures
- On-the-job training and coaching at work situation during follow-up / supervisory visits.

# 1.5 The TICH Students

Educational experience is further enriched by the diversity of the student body. TICH students are a heterogeneous group, coming form different parts of the world. Students range in age and experience from recent college graduates to mid-career changers, or community health workers seeking new contemporary skills and academic experience to enhance their role as bridge builders into a more secure and sustainable future.

# 1.5.1 The Advantages of the Course

The programs managed by the students are closely evaluated, and experiences documented and

disseminated to promote replication and policy impact. The participating facilitators, mentors and graduates become part of an international network of Community Based Health and Development experts involved in specific programmes all over the world. The training program is dynamic and will constantly be reviewed to ensure relevance to the emerging issues and concerns in health and development. Students have opportunities to transfer credits earned at the Institute to partner universities.

# 1.5.2 The Uniqueness of the Course

The on-the-job aspects of training at TICH in which students are engaged as workers not observers or researchers are the unique parts of the course. To support this vital element the training approach emphasizes:

- Community and Problem Based Learning
- Participatory Action Research
- Partnership/Leadership Development.

#### **GENERAL INFORMATION**

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#### **TICH location**

TICH is located in Kisumu municipality, Nyanza province, in Kenya. It is about 500Km. To the West of the Capital, on the shores of Lake Victoria, close to the Uganda boarder. The climate is warm all the year with an annual rainfall of 1,260 mm per annum. It has two rainy seasons: between March to May and between September to October. Mean annual maximum temperature ranges from 9 °C to 18 °C with an altitude of 1,144m above sea level. There is intense transmission of malaria all the year round. Students coming to the Institute need to take appropriate precautions including chemoprophylaxis prescribed by a medical doctor.

# 2.1 Certification of the Courses

The Institute within GLUK is accredited by the Commission of Higher Education to confer Certificates, Diplomas and degrees. In addition to this, TICH has an International Advisory Group composed of representatives of MacMaster, John Hopkins, as well as Moi University. Currently the external examiners come from Nairobi, Makerere and Dar es Salaam Universities. These linkages ensure international standards of our programmes and qualifications through the International Academic Board (IAB).

# 2.2 Admission requirements

To be admitted to the Master's Program, an applicant must have a recognized university degree with second class honors Upper division or Second class honors Lower division with at least two years working experience, or equivalent such as the Higher Diploma Certification. Applicants with a BCHD from GLUK will be exempted from Block I and II. Those with extensive involvement or a strategic position in Community Based Development or Service Management or Delivery are given preference.

# 2.3 Required Documents for Application:

All applicants must provide:

- A completed application form
- A curriculum vitae
- Passport photos
- Letters of recommendation from either educational institution staff and/or persons with whom the candidate has worked. Letters from relatives are not acceptable
- Indication of source of funding
- An application processing fee of US\$ 30 or Kshs 1000

A candidate cannot be given a letter of acceptance to any course offered until the Institute has received ALL this documentation.

# 2.4 Application Procedures

Applications are accepted on a rolling basis. Applicants are encouraged to submit their applications three months prior to the intended start date. The normal intakes are January and September each year. Applicants interested in any cluster(s) of modules offered should submit their applications at least one month prior to the start of the cluster in which they are interested. Application forms are available on request from the office of the Registrar.

# 2.5 Fees

Tuition fees are to be paid up in full at the time of registration. Pre-registered students must pay by the deadline indicated on their tuition bills. Bankers Cheques should be made payable to Tropical Institute of Community Health and Development (TICH) in Kenya shillings, US dollars, Euro or sterling pounds. It is the policy of TICH to withhold all diplomas, degrees, official transcripts, and other official

recognition of work done at the Institute from the students with outstanding debts owing to the Institute until all current obligations to the Institute are paid in full.

payments are preferred as this fits well into our annual planning cycle. Application processing fee USD 30(Kshs 1,000) (non-refundable)

Fees can be paid per cluster, block or year according to the convenience of students or their sponsors. Annual

Payments in Ksh. to be made directly to our account whose details are given below:-

A/C Name : TICH-TRUST A/C No. : 0102093484600

Bank Name : Standard Chartered Bank

Branch : Kisumu P.O. Box : 354, Kisumu

Payments US Dollars to be made directly to our account whose details are given below A/C Name :TROPICAL INSTITUTE OF COMMUNITY HEALTH AND DEVELOPMENT

A/C No. : 240593 505

Bank Name : Commercial Bank of Africa Ltd Branch : Westlands Nairobi Kenya

Swift Code :CBAFKENX Currency :US DOLLARS

Students can be introduced to a bank if they want to open accounts of their own while at TICH.

# 2.6 Other Costs:

Airfare, airport taxes and local travel expenses to and from the Institute including accommodation while on transit must be paid for directly by the student. This includes excess baggage if any at the completion of the course or any other time. Out of pocket allowance, a flat rate of USD 250 per month is recommended.

Any breakage to or loss of property of the Institute are assessed and charged to the student at actual cost. The Librarian assesses and levies library fines.

# 2.7 Financial Aid and Higher Education Loans Board

The Institute is currently unable to offer scholarships for tuition and / accommodation to students. Students who funding from external donors receive channeled through the Institute for the period of their study are provided with a basic living allowance of Ksh 15,000 per month if they opt to manage their own accommodation and meals.

Students are highly encouraged to apply for the Higher Education Loans Board (HELB) as GLUK is approved for this assistance

#### 2.8 Accommodation

Accommodation at the Institute is optional. We have taken the liberty to arrange accommodation and meals in the TICH compound for new international students to facilitate their settling in process. Students can consider making alternative arrangements at their own discretion. The administrator in charge of students' affairs will be available to assist you in this matter.

# 2.9 Clothing etc

Kisumu has warm climate all the year round and can be very wet at times. There can also be plenty of mosquitoes. Light long sleeved clothing is advisable in the evenings. Rubber or canvas shoes are necessary for fieldwork in addition to open shoes.

# 2.10 Library Services

All students are encouraged to use the TICH resource center located on campus. Students are also expected to use other major libraries like the British Council Library, and KEMRI Libraries in Kisumu. More information may be obtained from the office of the Deputy Director, Academic Affairs.

# 2.11 Computer and photocopy Services

Limited services are available on campus for fully paid up students. The software collection includes word processing, spreadsheets, database, graphics, and statistical package, SPSS. However only required class work specified by a lecturer should be reproduced using these limited services.

It is expected that all computer users will make use them in a manner which is efficient, ethical, legal and not to the detriment of rights and property of others. Photocopying arrangements should be made through the Administrative Assistant.

Students are encouraged to bring their own Laptops with them.

# 2.12 Medical Care

Students are eligible to receive outpatients' and inpatients services at TICH clinic as well as selected clinics and hospitals in Kisumu town, arranged through Institutional Development and Management Department upon payment of the medical fee.

Kisumu has the highest transmission rate of many communicable diseases (malaria, typhoid, and HIV/AIDS), in the country. We advice all students to take extreme care to prevent infection. Make arrangements to discuss health issues with the GLUK clinic. It is also important to note that each student is required to have a medical examination report before they are admitted to the course.

In general, all students require anti-malarial

chemoprophylaxis. Students must ensure that water is boiled before drinking. Drinking only hot water is a good practice. Tap water is unsafe. Avoid raw foods (e.g. salads or vegetables) unless you have prepared them yourself.

# 2.13 Security

Security at the TICH compound has been excellent so far. It is advisable to carry identification documents in the evenings to avoid embarrassment by the police.

The Directors, Administrators and the rest of our support staff as well as senior students are willing to discuss any issues that might bother you at any time. Please do not hesitate to ask questions. All of us will be delighted to assist you within our means and the laid down procedures.

# THE ACADEMIC PROGRAMME

The course is organized into eight core clusters based on a credit system. Each cluster may be taken independently according to the convenience of the student in terms of ability to pay and time off form duty. A student is required to take the 7 clusters offered in Blocks I and II. Elective courses are offered as indicated in Block III and can be taken as is required by the students. They are required only for students pursuing a Master in Community Health and Development (MCHD) degree.

For a Masters Degree, a combination of the SIX core clusters, ONE selective, three electives in Block III and research (thesis) or project dissertation is required. Students who have a BCHD from GLUK are exempted from Block I and II. The student's work must make a good contribution to learning and demonstrate a capacity to relate to the research done by the student to the broader framework in community partnerships approach in health and development while meeting internationally recognized standards.

Each new class starts with an orientation week

during which the partnership practice program is introduced, reviewed and planned. At the end of the orientation week new students are matched to willing partners while old students are confirmed by old partners or moved to new ones according to the needs of partners.

Partnership practice continues throughout all the blocks (192 hrs during blocks I and II), including two attachment periods of 3 months each for program management (120 hrs) and research/project dissertation (120 hrs).

#### 3. THE ACADEMIC PROGRAMME

# **BLOCK I**

# CLUSTER 1 CHD 100: CONCEPTS AND TRENDS IN HEALTH AND DEVELOPMENT (120 hours/3 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD

Core Facilitators: Prof Richard Muga, Dr.George Ngatiri, Dr. Benard Abong'o, Rose Olayo, Charles Wafula,

Beverly Ochieng, Eveline Mandela, Millicent Jaoko, Dominic Mogere

#### **Modules:**

CHD 101 Theory, Principles and Practice of Partnership for Development

CHD 102 Concepts and Trends in Health and Development

CHD 103 Global Health Policies (Primary Health Care and Community Based Health Care)

CHD 104 Critical Reading and Scientific Writing (linked to seminars

CHD 105 Factors Affecting Health Status, Health Care and Development

CHD 106 Health Policy Analysis and Development

CHD 107 Program Planning and Management

# CLUSTER 2 CHD 200 : MANAGEMENT, ENTERPRISE, ECONOMICS, INSTITUTIONAL DEVELOPMENT IN HEALTH AND DEVELOPMENT

# (120 hours/3 units)

**Convenor:** Prof Muga (MBS) MBChB, MMed (Paeds) Dip Health Systems Management;

**Core Facilitators:** Dr. Samule Tororei, Dr.Pamela Juma, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, Dr. Hazel Mumbo, Oscar Mori, Charles Oyaya, Charles Wafula, Evans Nyagol, Stephen Kungu, Dominic Mogere,

#### **Modules:**

CHD 201	Institutional Developments and Management
CHD 202	Health Systems Development and Management
CHD 203	Financial Resource Generations and Management
CHD 204	Human Resource Developments and Management
CHD 205	Introductions to Health Economics and Financing
CHD 206	Health and Development Information Systems

# CLUSTER 3 CHD 300: MEASUREMENTS IN HEALTH AND DEVELOPMENT 1 (80 hours/ 2 units)

Cluster Convenor: Prof. J. Otieno Oteku, PhD.

Core Facilitators: Prof Stephen Okeyo, Prof James Oloo, Dr. Mabel Nangami, Dr. Willis Osoo, Dr. James Ouma,

Henry Oyugi

#### **Modules:**

CHD 301 Demography and Population studies

CHD 302 Principles of Epidemiology

# CLUSTER 4 CHD 400: MEASUREMENT IN HEALTH AND DEVELOPMENT 2 (80 hours/ 2 units)

Cluster Convenor: Prof. J. Otieno Oteku, PhD.

Core Facilitators: Prof Stephen Okeyo, Prof James Oloo, Dr. Mabel Nangami, Dr. Willis Osoo, Dr. James Ouma,

Henry Oyugi **Modules:** 

CHD 401 Biostatistics

CHD 402 Essentials of Computing

#### **BLOCK II**

# **CLUSTER 5 CHD 500: BUILDING HEALTHY, HEALING COMMUNITIES**

(120 hours/3 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD.

Core Facilitators: Mitch Odero, Rose Olayo, Rev Boniface Obondi, Jane Wesonga, Jack Buong

**Modules:** 

CHD 501 Health Healing and Wholeness, Building Healing Communities

CHD 502 Communities Based Counseling

CHD 503 Advocacies and Communication

CHD 504 Negotiations and Peace Building

CHD 505 Curriculum Development

CHD 506 Community Based Education, Problem Based Learning, Competency Based Training Curriculum

Development

# CLUSTER 6 CHD 600: INTRODUCTION TO RESEARCH METHODS (1200 hours/ 30 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD

Core Facilitators: Prof. J. Otieno Oteku, Prof John Alwar, Dr. Constantine Loum, Dr. James Ouma, Mr.

Henry Oyugi, Rose Olayo, Dr. Willis Osoo

**Modules:** 

CHD 601 The basics of Research CHD 602 Quantitative Methods

CHD 603 Qualitative Research Methods

CHD 604 Literature Review and scientific writing

# SELECTIVES CHD 700A OR CHD 700 C

# CLUSTER 7A CHD 700: ENVIRONMENT, FOOD SECURITY, COMMUNITY NUTRITION AND INDUSTRIAL DEVELOPMENT (120 hours/ 3 units)

Cluster Convener: Emmanuel Ariga BSc, MSc, PhD;

Core Facilitators: Dr. Augustine Afullo, Prof Leo Ogallo, Dr. Jame Mumma, Caroline Musita, Isaac Ogwayo,

George Oele, Shadrack Oiye

**Modules:** 

CHD 701 Community Water Supplies and Sanitation

CHD 702 Community Nutrition

CHD 703 Agro forestry and Food Securities

# CLUSTER 7B CHD 700: HEALTH ECONOMICS AND FINANCING (120 hours/ 3 units)

Convenor: Prof Muga (MBS) MBChB, MMed (Paeds) Dip Health Systems Management;

**Core Facilitators:** Dr. Samule Tororei, Dr.Pamela Juma, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, Dr. Hazel Mumbo, Oscar Mori, Charles Oyaya, Charles Wafula, Evans Nyagol, Stephen Kungu, Dominic Mogere,

#### **Modules:**

CHD 708 Economic Analysis of user and provider behavior

CHD 709 Methods of Economic Evaluation

CHD 710 Economic Dimensions of terminal illness/death and living

CHD 711 Health Sector Financing

# CLUSTER 7C CHD 700C: COMBATING ILL-HEALTH (120 hours/ 3 units)

Cluster Convenor: Prof John Alwar: MBChB, MMed (Paeds), MPH

Core Facilitators: Prof Dan Kaseje, Prof Steven Okeyo, Dr. Andrew Otieno, Dr. Pamela Juma, Prof Richard Muga,

Dr. Peter Gisore, Leila Geteri, Norah Nyanga

**Modules:** 

CHD 704 Integrated Maternal and Child Health

CHD 705 Reproductive Health CHD 706 Disease Control

CHD 707 Essential drug management in District Health Systems

# RESEARCH AND THESIS WRITING/ PROJECT PLAN DEVELOPMENT, IMPLEMENTATION, EVALUATION AND DISSERTATION

This Block is six months, instead of four with two options.

#### **Option 1: Research and thesis writing:**

Students collect field data (two months or 320 hours), write their thesis (two months or 320 hours) and undertake two electives as course-work (two months or 240 hours). The electives consist of topics offered at an advanced level permitting a degree of specialization consistent with the background, interest, and career possibilities of the student. During this period the students will be expected to develop practical tools, frameworks, models or programmes that they will use or implement upon return to their places of work. They are expected to write a case study based on their work for publication. This process is driven by the student, guided by a facilitator, in consultation with the home institution / agency to ensure practical appropriateness and usefulness. The student is allowed to work on a maximum of three electives for which they have to attend classroom lectures or tutorials, but they are examined on two

# Option 2: Development of a project action plan, Implementation, Evaluation, Project writing and Dissertation

Students develop a project action plan, execute a baseline, implement the project plan, conduct a mid term or end term evaluation, write up the project effectiveness, submit the project report and conduct the dissertation (four months or 640 hours), hesis (two months or 320 hours) and undertake two electives as course-work (two months or 240 hours). The electives consist of topics offered at an advanced level permitting a degree of specialization consistent with the background, interest, and career possibilities of the student. During this period the students will be expected to develop practical tools, frameworks, models or programmes that they will use or implement upon return to their places of work. They are expected to write a case study based on their work for publication. This process is driven by the student, guided by a facilitator, in consultation with the home institution / agency to ensure practical appropriateness and usefulness. The student is allowed to work on a maximum of three electives for which they have to attend classroom lectures or tutorials, but they are examined on two.

The specialized centers of GLUK include:

**Community Partnerships, Healing and Development** (*Prof. Dan Kaseje, Prof Richard Mug, Prof John Alwar, Dr. Doreen Othero, Rose Olay, Beverley Ochieng, Millicent Jaoko, Rev. Boniface Obondi*)

#### The centre offers:

- Advanced Courses in Counseling
- Advanced Courses in Advocacy and Communication
- Advanced Courses in Community Based Education and Leadership Development\*
- Advanced Courses in Building Healthy, Healing Communities.
- Advanced courses in Alternative Medicine
- Advanced Courses in Primary Health Care and International Health

**Combating Ill Health :** Prof Richard Muga, Prof Stephen Okeyo, Prof John Alwar, Dr. Joyce Owino, Dr. Peter Gisore, Dr. Pam Juma, Dr. Steve Mutwiwa, Dr. Andrew Otieno)

#### The centre offers

- Advanced Courses in Reproductive Health
- Advanced Courses in Community Based Management of Chronic Illnesses
- Advanced Courses in Community Based Management of Communicable Diseases
- Advanced Courses in Management of Epidemics and Health Care in Emergency.
- Advanced Courses in Health Policy, Planning and Management

**Health Systems Management** (*Prof Dan Kaseje, Charles Wafula, Dr. Hazel Mumbo,Dr. Willis Obura, Evans Nyagol, Stephen Kungú*)

# The center offers:

- Advanced courses in Enterprise Development and Management
- Advanced courses in Economics in Health and Development
- Advanced Courses in Accounting and Financial Management

**Research and Knowledge Management in Health and Development** ( Prof. Joseph Oteku, Dr. Constantine Loum, Rose Olayo, Dr. James Ouma, Careena Otieno, Henry Oyugi,, Dr. Willis Osoo)

#### The centre offers:

- Advanced Courses in quantitative methods
- Advanced Courses in qualitative methods
- Advanced Courses in Operations Research
- Advance Courses in Computing
- Advanced Courses in Information Systems including Evaluation

# **Community Nutrition and Environmental Health**

( Prof. Emmanuel Ariga, Prof Leo Ogallo, Dr. Jane Mumma, Caroline Musita, Oyata Bala)

#### The centre offers:

- Advanced Courses in Environmental Health and Development.
- Advanced Courses Food Production, Management and Security
- Advanced Courses in Appropriate Technology
- Advanced Courses in Industrial Development and Management
- Advanced Courses in Urbanization in Health and Development
- Advanced Courses in Community Nutrition

# ASSESSMENT FOR CLUSTERS 1-7 AND BLOCK III

#### 4.1 Cluster Assessment

The following framework summarizes the assessment, examination processes and marking for the taught clusters. Clusters 1, 2, 4, 5, and 6 are considered Core Clusters

#### **BLOCK I**

# **Cluster 1: Concepts in Health and Development**

The students will be required to give:

- A term paper on seminar topics (30 marks)
- A seminar presentation (10 marks)
- A Continuous Assessment test (10 marks)
- An end of Block written examination: The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

# **Cluster 2: Management**

- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

#### **Cluster 3: Measurements 1**

- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

#### **Cluster 4 Measurements 2**

- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

#### **BLOCK II**

# **Cluster 5: Building Healthy Healing Communities**

- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)

• Partnership practical's

#### **Cluster 6: Research Methods**

- Written examination consisting of 10 short answer questions (40 marks)
- Submission of a research proposal at the end of the block that may serve as the basis for thesis research (60marks)

# Cluster 7a: Community Environmental and Health Concerns

- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

#### OR

# Cluster 7b: Community Environmental and Health Concerns

- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

#### OR

# **Cluster 7c: Combating Ill Health**

- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

#### **BLOCK III: ELECTIVES**

- Applied Research for Option 1: Thesis or Project implementation and evaluation for Option 2: Project dissertation
- Fieldwork
- Data analysis and report writing / Project evaluation and report writing
- Electives: The assessment is based on a written exam (70%), oral seminar (10%) and written seminar report (20%). An elective will constitute 10 days course work, 3 days practicals, 1 day seminar, 1 day exams.

# BLOCK IV THESIS WRITING AND DEFENSE / PROJECT DISSERTATION

- Thesis writing/ Project dissertation writing
- Electives: The assessment is based on a written exam (70%), oral seminar (10%) and written seminar report (20%). An elective will constitute 10 days course work, 3 days practicals, 1 day seminar, 1 day exams.
- Thesis defense/Project dissertation

# THE PARTNERSHIP ACADEMIC PROGRAMME

The students are required to conceptualize and facilitate the formulation of a realistic partnership project based on existing capacities and available resources but with the potential to create meaningful opportunities for the most vulnerable members or transform the situation of people being cared for. Students are required to facilitate / manage a partnership project, documenting the specific steps taken and the partnership level based on the four levels defined by TICH (parasitic, neutral, synergistic, symbiotic). The assessment is based on weekly process reports submitted by **Monday or Saturday** of the week following the field visit, observation of practical assignments, and written assignments / outcomes.

# 5.1 Management of Partnerships Practical and Academic Assessment Procedures

This is a major component of the TICH curriculum since it directly links with partner communities and agencies. In general, each practical exercise (or step) consists of *a plan*, *a practical activity*, *and a report*. All of these elements are supervised and assessed. The students are expected to use their own workbooks while in the field before final report writing. All assessments must be given a passing mark in order for credits to be awarded. The student is expected to demonstrate skills in:

- Partnership development and strengthening,
- Partnership program planning, implementation, monitoring and evaluation
- Information management
- Problem based learning and Leadership development
- Building /strengthening sustainable healing communities
- Communication, advocacy, negotiation and counseling
- Qualitative and quantitative action oriented research
- Documentation, writing and publishing
- Providing requested problem based technical inputs.

The partnership program Objectives: -

#### The aim of the program is to develop managers of Health and Development programs that are able to:

- Conceptualize, plan, implement and evaluate community health and development programs
- Provide technical services to interested partners in the areas of program management and action research
- Facilitate the initiation or strengthening of sustainable district / community based programs
- Provide sound research evidence base for policy development as well as decision making in management of community health and development programs
- Facilitate the building / strengthening of healing communities.

#### **5.2 The Learning Methods**

Central to the partnerships academic program is self-directed problem based learning. Students are expected to engage in the development / management of a partnership program in real life, from the beginning of first block to the end of the course. No doubt the students will face a multitude of problems as they enter into the partnership context. However, this experience is vital in triggering the learning process, each student recognizing own learning

needs, knowledge and skills required to confront problems encountered in the partnership context. Colleagues and supervisors support the students in this entry and learning process.

All partners (Supervisors, Students, Communities, Service providers and all other Stakeholders involved) are learners and teachers at the same time. Implied in this learning attitude for all partners is the need for timely feedback whether negative or positive. Feedback is crucial for learning to be consolidated. Learning sites / activities include the classrooms, the libraries, during briefing for partnership site visits / activities (based on an activity plan drawn by the student and shared with the supervisor); during partnership practical activity which is observed against the student's plan; during debriefing following the site visit / activity with individuals or groups; during debriefing with the whole Block attended by all supervisors together and, finally, the marking and discussion of reports and other written assignments submitted by the students.

#### **BLOCK I**

# Specific learning objectives:

#### At the end of Block I students will demonstrate skills in (and will be assessed on):

- Carrying out rapid Community or Institutional assessment as a basis for program planning
- Providing feedback to the partners and facilitating participatory identification of strategic partnership action
- Facilitating participatory program planning
- Facilitating participatory proposal development
- Assessing Community / Institutional Based Information System
- Facilitating a baseline community survey as a basis for program monitoring, evaluation and feedback.
- Facilitating partnership development, backed by the signing or agreeing on a partnership agreement
- Developing Management Information System / Health Information System/Geographical Information Systems

# The learning process / activities / steps:

**Step 0 (week 0): Introduction** 

Introduction to partnership concepts, sites, methods, and assessment as well as partner selection.

Step 1 (week 2): Situation Analysis or program review Program review (using situation analysis tools and methods taught during weeks 0 to 3), students submit a plan, are observed on the process and submit a report. The situation analysis can either be an **initial assessment** of a new

partnership situation or a **review of progress** in an existing one.

At this point the students are expected to identify their area of interest which are under the following categories

- Health systems
- Household Vulnerabilities

The tasks for the student include carrying out an entry process into the partnership area as well as a rapid assessment of the situation, essentially for self information of the student as a new comer:

- Outline of steps (process), methodology
- Carrying out actual situation analysis exercise
- Compile the entry and Situation analysis process for the Situation Analysis, Feedback Participatory Planning report. (NO REPORT DUE)

# **Assessment:**

Students are assessed on:

• A plan for situation analysis developed (including a tool/checklist/framework for situation analysis and a tool / framework for institutional assessment), (10 marks).

**Step 2** (weeks 4-8): Feedback Workshop and Participatory Planning

This step involves two parts: a partnership feedback and priority setting workshop and a participatory planning process in which a

master plan is produced or revised. In some partnerships, the main need would be for the development or review of an operational plan. In the first part, feedback is given to the partners and priority areas of strategic action identified, based on strengths and opportunities highlighted. Following this, interest groups and partners engage in the planning process as appropriate. The interest areas are often based on current involvement, skills or needs peculiar to the group. Some partnerships need or have a coordinating body to put together the plans developed by the various groups. The master plan would normally include essential elements in Institutional and program development. The main focus is to plan an improvement project through partnership.

Specifically the students have the following tasks:

Organizing and managing a partnership workshop to give feedback and decide on strategic partnership actions for improvement with the community members and other stakeholders. In this exercise the student helps the partners to pause and take stock as to where they are, achievements, strengths, opportunities as well as limitations in order to plan a new or review an existing plan for improvement of their situation.

- Partnership feed back workshop plans
- Partnership feedback workshop process
- Partnership feedback workshop report highlighting identified strategic partnership action (next steps).for improvement.

Organizing or reviewing the partnership structure for effective action, as an institution:

- A theoretical partnership framework for the implementation of the strategic partnership objectives
- A legal partnership framework (detailing operational guidelines, procedures, regulations, expectations, roles, inputs, benefits and conditions).
- A partnership agreement detailing signed by all partners (detailing operational guidelines, procedures, regulations, expectations, roles, inputs, benefits and conditions).

Developing a new or revising an existing partnership project description or plan (a master or operational plan).

The students follow-up and facilitate the planning process with individual groups, providing information and technical inputs as requested. They assist in putting together the common partnership plan, bringing together the parts developed / reviewed by each interest group. The students are advised to test the sustainability of each activity based on the sustainability grid. They are also expected to carry out a cost analysis exercise to assist the groups in their choices of activities. The participatory planning tools are outlined in the TICH tools kit for use (as deemed appropriate) by the student and supervisor (see draft partnership management manual).

#### **Assessment:**

Students are assessed for each of the two elements the workshop / meeting and the plan. The student has to book with the TICH office: Academics Coordinator a week before the date of feedback workshop and hand in a summary of the Situation analysis objectives, methodology, list of findings and workshop program. The students are instructed to use the partnership program day schedule as follows:

- 1. Mondays (None regular partnership program districts)
- 2. Tuesdays (Partnership meetings at Main campus. MUST attend for lecturers and students)
- 3. Wednesdays (Bondo, Rarieda, Kisumu East, Nyando/Nyakach, All Rachuonyos)
- 4. Thursdays (Siaya, Gem, Ugenya, Kisumu West, All Kisii Districts, Butere, Mumias)
- 5. Fridays (Homabay, Suba, All other districts)

The feedback and planning workshop is assessed on the following criteria:

- A plan for a partnership workshop / meeting (20 marks)
- Organization of the workshop (20marks)
- The partnership workshop process (30 marks)
- Process of building consensus (20Marks)
- Setting the next step (20Marks)

A Situation Analysis, Feedback workshop and participatory planning report is submitted for marking as indicated in the partnership deadlines schedule for the semester based on the following outline:

- The executive summary, 10 marks
- Introduction and background (the context, including the institutional / partnership base), 10 marks
- Summary of the Situation analysis findings, highlighting strengths and opportunities, 5 marks
- Identification of strategic actions / tasks and prioritization 10 marks
- Cost analysis/ viability assessment of alternative possibilities for action (to assist in differentiating: what needs to be done, what can be done and what will be done), 10 marks
- Program goal (s), **5 marks**
- Program objectives, 5 marks
- Program activities, 5 marks
- Overall summary description laid out based on the logical framework (Narrative statement, OVIs, MOV, and assumptions), **20 marks**.
- The budget (by sources of income and expenditure line items), 10 marks
- Institutional / partnership development/strengthening activities (partnership legal base, structure, agreement detailing roles, expectations, benefits and conditions) based on the essential elements a well functioning partnership, **10 marks**.

This is the FIRST REPORT (1) and should be typed, single spaced Times New Roman font size 12, Justified alignment and stapled. Binding is not necessary.

Step 3 (weeks 10-13): Establishing MIS, HIS The students are expected to develop familiarity with various sources of information in their District, their quality, relevance and usage. The students are also expected to plan and conduct a survey to describe the existing situation both qualitatively and quantitatively.

The students establish or review a system for program monitoring and evaluation, (MIS/HIS/GIS), including baseline or follow up survey. This step also consists of two elements: assessment of the existing community or institutional based information system undertaken in every partnership area and conducting a Baseline or Follow-up survey which is undertaken only in partnership sites where it is necessary. Both elements are assessed together.

For the first aspect the students submit a report of their findings including a participatory mapping of partnership resources, assets and investments. The report should also present recommendations for establishing or strengthening the Partnership based information system.

For the survey, students work in groups. Thus teamwork is part of the learning process. They are then assessed as groups for the process but each student is expected to submit a plan, analyze data, and prepare a report, individually for marking. A complete survey report is submitted by the group by the baseline survey excersize as indicated in the semester partnership schedule.

Students are assessed on:

- Assessment of Community or Institutional based information system, its collection, reliability, processing, storage / retrieval and usage, report submitted end of week 10, (20 marks)
- Baseline survey plan developed (methodology and instruments), submitted at the beginning of week 10, (10 marks)
- Baseline survey process, carried out (week 11), (20 marks)
- Baseline survey report linking the findings to the situation analysis, where applicable, is written fed back to partners.

This is a major report (REPORT 2) typed, single spaced pages, Times New Romans fonts size 12, justified alignment and should include an outline for MIS, HIS, GIS for the program area, submitted as per partnership

# PARTNERSHIP PRACTICE PROGRESS REPORT 1

In this report the student documents the specific steps taken during the block, their results and the partnership level reached based on the four levels defined by TICH. The report may have the following sections:

- Background / Introduction / partnership context (5 Marks)
- Partnership objectives / essential elements of the program plan (20 Marks)
- Description of the process and methods of work (20 Marks)
- Achievements, strengths, opportunities, gaps and threats (10 Marks)
- Emerging or developed model (10 Marks)
- Personal growth as a manager / leader (5 Marks)
- Factors which have helped learning (5 Marks)
- Factors that have hindered learning (5 Marks)
- Recommendations for improvement (10 Marks)
- List of documents used during the block (5 Marks)
- Plan of action for field attachment : for full time students and Plan of action for BLOCK 2 partnership for part time students(5 Marks)

#### SUMMARY OF ASSESSMENT FRAMEWORK AND LINKAGE TO CLUSTERS IN BLOCK I

Steps / Weeks/	Learning Activities /	Partnership/Activities	Assessment items
Clusters	Objectives (students able to	<b>F</b>	
Step 0: Orientation	-Follow course structure -Outline partnership concepts and methods -Identify a partner	-Introductory Lectures -Partnership workshop at TICH	-
Step 1:	-Outline partnership Entry steps	-Introduction to partners (exploration/discovery visits)	-Feedback workshop
Cluster 1	-Outline methods of situation analysis and Institutional	-Carry out a situation analysis using a variety of Methods:	
Concepts, methods	assessment	LLL, KII, FGD	
and trends in Health	-Carry out situation analysis	-Analyze information	
and development,	using outlines for S.A. and	- Prepare partnership workshop	
Policy, Planning	Institutional assessment	plan	
	- Plan and manage a partnership workshop -Prepare and present results of S.AIdentify areas of strategic action and initiate a partnership planning / development process -Outline a partnership	-Conduct partnership workshop -Write partnership workshop report & plan of action - Carry out cost analysis and viability study -Prepare partnership program plan	
	agreement -Develop a program plan		

Step 2:  Clusters 2  Enterprise and  Management in  Health and  development	-Outline a partnership agreement -Develop a program plan	- Carry out cost analysis and viability study -Prepare partnership program plan	- Situation Analysis, Feedback workshop and participatory planning report
Step 3:  Cluster 3 and 4	-Assess Information Systems -Facilitate community survey/feedback.	-Examine information system and write report -Carry out survey and write	-Baseline survey report -Partnership progress
Ciusier 3 ana 4	-Develop MIS/HIS/GIS	report	report 1
Measurements in		-Write program proposal	
Health and			
Development			

# Note:

- 1. The three main reports expected at the end of Block I field practice are:
  - i) Planning report highlighting the situation analysis review, feedback and participatory planning processes and the PLAN
  - ii) Baseline survey report
  - iii) Progress report I

These must be handed in before admission to exams and as guided by the partnership schedule handout.

2. Block I continuous assessment of partnership practice must receive a passing mark before a student proceeds to Field attachment otherwise a candidate repeats Block I field practice, once, at own expense, not part of fees already paid.

#### **BLOCK II**

Partnership Practice during block II is a continuation of activities initiated in Block I, concentrating on review, consolidation and management of the relevant partnership and programs activities. During the first five weeks the students are involved in introducing Block I students, who are engaged in partnership entry and situation analysis, to the community while they carry out their own reviews to enable adjustments and action, in the spirit of team work. Specifically, the students undertake a rapid review of their partnership / program in order to determine areas of emphasis. Consolidation of work started during Block I is a priority but students must also undertake practical exercises relevant to the specific learning objectives of Block II outlined below. In addition students are assessed on 10 weekly reports (out of 10 marks) describing the experience of each week and assessing their progress in implementing their action plan, submitted at the beginning of week 1, based on field notes.

# Specific learning objectives

#### At the end of Block II students will demonstrate skills in:

- Program review and re-planning, completing the planning / implementation cycle
- Facilitating Community Based / Problem Based Curriculum development
- Developing a lesson plan and Conduct a problem based learning session
- Assessing a learning session and training program.
- Building / strengthening healing communities
- Negotiation and Peace Building
- Counseling
- Qualitative and quantitative essential, action oriented research
- Documentation, writing and publishing
- Providing requested technical inputs.

# **Step 4: Program review or evaluation**

A rapid review of partnership development and management focusing on relationships, rights and opportunities for joint action based on characteristics of a well functioning partnership. The

students also spend some time guiding the new students (where they exist) towards what areas they could pay more attention to in their situation analysis, working as a team for the benefit of the host partner. In this step the student is expected to identify opportunities to practice the core objectives of Block II (Healing communities, peace building/negotiation, counseling, communication, and alternative healing practices).

#### Students are assessed on:

- ◆ Preparing a plan of work to guide Block II partnership activities including that of partnership/project review submitted at the end of week 1 (10 marks)
- ◆ A plan for carrying out a partnership and program review (including a tool/framework testing the relevance, appropriateness and viability). The students are expected to use the project assessment grid and the SWOT analysis, among other tools learnt in program management. (20 marks).
- ◆ Carrying out a rapid review of the partnership process focusing on essential elements of a well functioning institution / partnership. The student should highlight opportunities for partnership practice (Healing communities, peace building / negotiation, counseling, communication, alternative healing practices) (30 marks).
- ◆ A rapid review report, submitted at the end of week 4, highlighting opportunities for partnership practice around week 4 including recommendations for action to improve the partnership / program (30 marks)

Step 5 : Community/Problem Based Learning

This step is made up of three practical elements that are linked to the classroom taught concepts and skills: Learning needs assessment,

curriculum development, lesson planning and conducting a learning session. The students are expected to practice all of these steps during the cluster. It is assumed that by the time of Cluster 4 students will have identified groups requiring some training. In this way the practical exercises become useful for both the student and those to be trained at the partnership sites. Thus the students submit plans for the exercises. Students are examined on process and, finally they submit the training program report with sections covering: Training needs assessment, the curriculum outline, lesson and session plans developed, conducted and assessed.

#### Students are assessed on:

- Learning needs assessment carried out (following the same format of plan, process and the report) and report submitted, (20 marks)
- A community/problem based curriculum developed, lessons plan/sessions plan copy submitted during booking for assessment as indicated in partnership schedule for the semester. (40 marks)
- The student has to book with the TICH office: Academics Coordinator a week before the date of feedback workshop and hand in a summary of the A community/problem based curriculum, lessons plan and sessions plan. The students are instructed to use the partnership program day schedule as follows:
- 1. Mondays (None regular partnership program districts)
- 2. Tuesdays (Partnership meetings at Main campus. MUST attend for lecturers and students)
- 3. Wednesdays (Bondo, Rarieda, Kisumu East, Nyando/Nyakach, All Rachuonyos)
- 4. Thursdays (Siaya, Gem, Ugenya, Kisumu West, All Kisii Districts, Butere, Mumias)
- 5. Fridays (Homabay, Suba, All other districts)
- Lesson/session plans developed and field training conducted as per the partnership schedule (40 marks).
- All submitted as one report as guided by partnership schedule

This is a major report (REPORT 4) typed, single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

Step 6: Building Healing Communities

Based on the findings of the rapid review the students identify specific groups within the project area that are committed to improvement to work with, building or strengthening them as healing communities.

# Students are assessed on:

- Recognition of alternative healing, practice of healing, building relationships, a written paper, including application of scripture traditional or other religious models. A written report based on an experience in the community, describing a group or institution that the student works with, focusing on relationships, which can be used for seminar presentation or media article (based on characteristics of a healing community), attached to partnership II (25 marks)
- A case study describing a process of negotiation for partnership building: managing conflict, facilitating the release of bitterness and resentment, and building peace. The student prepares a written report describing the issues, the process (methodology) and results, attached to partnership II (25 marks)
- A descriptive report on a counseling session in the community or partner institution which is planned, undertaken and reported on, attached to partnership II (25 marks)
- An advocacy issue identified and the group or institution facilitated in taking appropriate action. The
  students submit written plans, are examined on process, and are assessed on a report describing the
  strategies used, the process, the results and recommendations for future action attached to partnership II (25
  marks).

Supervisors use a common list of the Characteristics of a healing community, outline for negotiation / peace building as well as guidelines in other technical areas to guide supervision and assessment).

The above mentioned 4 reports under Building Healing Communities are presented as annexes to the Final progress report or as individual reports submitted as per the partnership schedule for the semester.

Students should carry out a final vulnerability capacity assessment in their partnership site to document improvement.

Step 7a: Final Environmental Health and Vulnerability and capacity assessment.

Students are assessed on:

Conducting a follow-up assessment that has been realized based on the planned activities.

- Summary of Environmental health, food security etc, issues identified during Situation analysis/Rapid assessment (20 mks)
- Summary of activities instituted towards addressing the gaps identified in households is written and could be in the areas listed below (10 Marks)
  - Environmental Health issues (food and nutrition security, Water and sanitation, agro forestry, etc)
  - School / education
  - Livelihood security
  - Social capital
- Follow up assessment using the VCA tool is carried out and a report written (40marks)

This is a major report (REPORT 5) typed, single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

Step 7c: Final Facility Assessment performance assessment.

Students are assessed on:

Conducting a follow-up assessment on the improvement of the activities that had been realized based on the planned activities.

- Summary of health systems issues identified during Situation analysis/Rapid assessment (20 marks)
- Summary of activities instituted towards addressing the gaps identified towards strengthening health systems, at Level 1, 2 and 3 (10 Marks)
- Follow up assessment using the Health Systems Assessment tool will be carried out and a report written (40marks)

(Supervisors use session plans for student supervision and common guidelines for student assessment.)

This is a major report (REPORT 5) typed, single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

# THE FINAL PARTNERSHIP PROGRESS REPORT (100 marks)

The students prepare the second partnership progress report including handing over notes documenting the specific steps taken, the outcomes and the partnership level reached based on the four levels defined by TICH. A final report is submitted two weeks before the next Block opens. The report may have the following sections:

- Background / Introduction / partnership context (5 Marks)
- Partnership improvement objectives (5 Marks)
- Description of the process and methods of work, emphasizing new methods learnt, new revelations and concepts to be explored further (30 Marks)
- Progress in building / strengthening partnership practice (institutional and program), highlighting achievement of objectives (40 Marks)

- Description of an emerging or developed model (10 Marks)
- Lessons learnt in terms of personal growth as a manager / leader (5 Marks)
- Annex 1 (25 Marks)
- Annex 2 (25 Marks)
- Annex 3 (25 Marks)
- Annex 4 ( **25 Marks**)
- List of documents / references used during the Block (5 Marks)

(Annexes of Rapid assessment reports and Building Healing Communities case studies are attached to the Final progress report submitted as per the partnership schedule for the semester.)

This is a major report (REPORT 6 with 4 annexed reports ) typed, single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

# SUMMARY OF ASSESSMENT FRAMEWORK AND LINKAGE TO CLUSTERS IN BLOCK II

Steps/	Learning Activities	Partnership/Activities	Assessment items/
Weeks/Clusters	Objectives, students:		marking
Step 0	-Participate in introduction & Orientation of Block 1	-Introduction to Partnership program and sites Carry out rapid review of partnership development and management	-Plan of action
Step 4:  Cluster 5A	-Develop Community Based / Problem Based Curriculum	-Carry out learning needs assessment and write report -Develop curriculum	- CBE training workshop - CBE training report
	-Develop a lesson -Conduct a problem based	-Prepare lesson plans	- CBE training report
Community/	learning session	-Conduct learning session	
Problem Based	-Assess a learning session	-Assess learning	
Learning	Assess a training program	session/program	
Step 5:	-Identify healing communities	Describe healing community -Identify issues, document and	- Communication and advocacy case study
Cluster 5B	-Describe healing community	disseminate (article or seminar)	-Peace building and
(Building Healing	-Document, write and publish	/facilitate advocacy	negotiation case
Communities)	-Facilitate community	- Build/strengthen partnership /	study
	advocacy, negotiation and peace building -Facilitate community based counseling	peace through negotiation -Identify a counseling need and conduct a counseling session	- Counselling case study - Healing Community case study
Step 6	-identify researchable issue in your partnership site	Write a research proposal	Research proposal
Cluster 6 Basic Research			

Selective Step 7 (Wks 11-13) Cluster 7a Environmental health	-Carry out a follow up assessment of activities on Household Vulnerability situation	-Carry out assessment of Household resilience capacity to Vulnerability situations and write a report	-Vulnerability Capacity Assessment report
OR	-Demonstrate latrine construction, water purification, nutritional assessment	- Demonstrate and write a on Environmental Health report and submit (annex to Progress report II)	
Step 7 (Wks 11-13) Cluster 7c Combating ill health	-Carry out follow up assessment of health systems  -Demonstrate the importance of health facility data analysis and presentation for decision making.	-Carry out health systems assessment by level and write a report  -Demonstrate the importance of health facility data analysis and presentation for decision making	- Health Facility Assessment report

#### Note:

- 1. The three main reports expected at the end of Block II field practice are:
  - i) Training report with- training needs assessment, curriculum, session plan and practical training session report
  - ii) Vulnerability capacity assessment report OR Health systems assessment report
  - iii) Final progress report with annexes on the rapid review and Building Healing Communities case studies (A healing community report Negotiation and peace building, Advocacy material and Counselling session report)
- 2. A passing mark of 50% in partnership practice is required in order to pass block II before proceeding to Research attachment. Otherwise a candidate must repeat Block II field practice (96 hours and be assessed) at own expense. Students can only repeat field practice once.
- 3. A plan for Research / project Evaluation and work schedule should be included in the Research proposal presented, marked and approved by the TICH Research Committee (TRC)

#### **BLOCK III AND IV**

A research protocol developed during Block III or a Project Plan is presented to the Research Committee and marked as a written assignment. It must be passed before the student proceeds to fieldwork. However the plan of action for the Research/ Project Dissertation is required before the end of block exams are taken. The supervisors (at least fortnightly or monthly) follow up the research or project activities. However no marks are awarded, as this experience would be marked in the dissertation that results from it.

During the third and final block of the partnership program the students continue involvement in partnership activities concentrating in their areas of interest, specialization and career development. The students work alongside their supervisors as teaching or research assistants and get involved in every activity in which the supervisor is involved (teaching, seminars, field supervision, consultancy assignments). It is also expected that the students will carry out a final review of their partnership site and write up a final report, describing the model that has emerged (if any) which they would take back home. Finally, each student prepares a re-entry plan.

# Specific learning objectives

By the end of this Block the students will demonstrate ability:

- To carry out an evaluation of a partnership program (process, results, models)
- To develop a partnership model for implementation and a re-entry plan and proposal.
- To manage the program areas covered in electives
- To lead seminar discussions on topics relevant to their areas of specialization
- To supervise and coach students in Blocks I and II in their areas of interest in partnerships.

# Specific steps and activities:

Students return from the second field attachment devoted to research. They spend the first 8 weeks concentrating on writing in order to present the first draft to their supervisor by the end of the first four weeks and a second draft by the end of the 8<sup>th</sup> week. Partnership activities start from the 9<sup>th</sup> week, relating closely with the mentors / supervisors:

The leadership aspects of the work of the student is assessed based on examples given in reports and weekly discussion sessions by at least two facilitators (on a scale of 0 to 5):

- Demonstration of conviction and commitment to the partnership approach
- Taking Initiative
- Team-work, knowing when to lead and when to follow
- Motivating, handling different personalities in area of work
- Building consensus at discussions and meetings
- Being an example in integrity, discipline, consistency, transparency, volunteering
- Listening, asking questions to promote learning
- Recognizing others, affirming others, winning people rather than arguments
- Providing honest and constructive critique with options for correction, concentrating on solutions not just problems
- Being assertive not aggressive.

# 6.1 Procedures for completing designated course of study

- The content of the academic programmes consists of Block 1-4 and the community Partnership Practice.
- One or more of the following three instruments examines all Clusters: written examinations, papers/reports and practical examinations. The Partnership Practice is assessed on a continuous basis as outlined below.
- In Block I the student must receive a passing mark in Clusters 1, 2, 3 and 4. During Block II, they must receive a passing mark in Cluster 4, 5, 6 and 7 in order to proceed to the next Block. Supplemental examinations will be offered once.
- Students are required to pass Block I and Partnership Practice (with a mark of 50% or above) before the student can proceed to the next Block. They are required to pass Block II and the Partnership Practice before doing thesis research for the Masters degree. Field research for the Masters degree must be completed before a student can begin Block III.
- A student who fails three out of four Clusters in a Block will be discontinued but may receive a certificate of attendance. A student who fails three or more Clusters in a Block but completes the Partnership Practice including the 4 months field attachment may receive a Certificate of Partnership Practice from the Institute.
- All assessments must be given a passing mark in order for credits to be awarded.

# 6.2 Procedures for understanding research for the Master degree

A research protocol developed and presented or project plan for dissertation developed and presented to the Research Committee and must be passed before the student proceeds to fieldwork. This process takes place within the first month after completion of Block II. The supervisors follow up the research activities or project activities on a regular basis. However no marks are awarded, as this experience will be marked in the thesis that results from it.

#### **Assessment summary**

	MCHD	
AWARD		
ASSESSMENT		
Written examination	30%	
Partnership Practice	25%	
Advanced Electives	15%	
Thesis/Project dissertation	30%	
TOTALS	100%	

Students also need to have completed field research or project baseline before moving to Block IV.

# 6.3 Awarding marks

The pass mark will be 50%. Any assessment marked less than 50% will be deemed as failed. Distinction will be awarded to candidates receiving over 75%.

If a student feels that a mark, which has been given, is unfair, he/she can request a review by the external examiner. Request must be directed through the Institute Director or Deputy Director, Academic Affairs.

# 6.4 Admission to and the Final Examination

To be granted admission to the final examination, candidates must complete each block with a passing mark. All candidates must obtain passing marks for the Partnership Practice at the end of Blocks I and II.

If a candidate's work and assessment receives a fail mark, the assessment may be taken one more time. A re-sit must be arranged with the relevant cluster convener or a member of the TICH academic staff.

The final examination will be discussion between the candidates and the Board of Examiners. Although all material, which had been presented during the period of study, can be examined, the discussion will focus on the application of the course of students to future work.

# TICH THESIS AND PROJECT EVALUATION GUIDELINES

These guidelines have been prepared for all students who will be presenting thesis and project dissertations as part of the examinations.

#### **Chapter 1:** The Thesis/Project Dissertation

# a. Plan for project dissertation/ Research Proposal

Before you leave TICH for your field site for research/evaluation, you are expected to prepare a research/evaluation plan. This plan should be brief, no longer than 3 pages. It must be presented to and approved by the research or project evaluation committee. One copy should be given to the field study co-ordinator; one copy should be given to your thesis/evaluation tutor in preparation for the meeting. Below is an outline for this research/project evaluation plan. It might be helpful to follow this in preparing your own study. It will be useful to take some copies of your research plan with you for initial discussions with people at your research field site.

An outline of your research plan covering the following topics should be given to the thesis co-ordinator and your thesis tutor before you leave for the field.

# b. Outline for a Research and Project Evaluation proposal

# i) Outline for research proposal

- 1. Title of the Thesis
- 2. Summary a very short description of what your research is about
- 3. Approach
  - Hypothesis or a very brief outline of the descriptive study
- 4. Research question and also include the major study objectives (Either)
- 5. Prior research in the area
  - Three or four paragraphs summarizing the most important findings to date. This is probably a brief summary of your literature review.
- 6. Probable methodology to be followed.
  - Description of the methodology attaching protocols such as questionnaires if they are to be used.

# ii). Outline for a project evaluation proposal

- 1. Title of the Project
- 2. Summary a very short description of what the project is about highlighting the project objectives
- 3. Approach
- 4. Improvement project objectives
- 5. Implementation strategies and process
- 6. Activities by objective
- 7. Log frame
- 8. Ghant chart
- 9. Expected outputs/outcomes
- 10. Monitoring and evaluation methodology and process.

#### c. Format for the final documents

The precise contents of the thesis/ Evaluation report will determine the format and presentation. In this section we suggest a format that might be of use for presenting your work. However, do not feel restricted by this format. If you wish to use another please do discuss this with your tutor, before you make a final decision.

#### Proposed thesis format

We suggest that you present your thesis in seven sections plus Bibliography and annexes in the following order. In the next chapter we give a brief description of each section to you:

- 1. Executive summary
- 2. Introduction to the topic being studied
- 3. Literature review
- 4. Methodology (project description) for monitoring and evaluation.
- 5. Results (findings)
- 6. Discussions (of the results and their implications)
- 7. Conclusions and recommendations
- 8. Bibliography
- 9. Annexes

# Proposed format for project evaluation dissertation

- 1. Executive summary
- 2. Project summary
- 3. Methodology (methods used in the project evaluation)
  - Desk review
- 4. Results (findings)
- 5. Discussion
- 6. Conclusions
- 7. Bibliography
- 8. Annexes

The rigid restriction is that of the length of the thesis/ project dissertation. The body of the thesis/ project dissertation consists of the sections 1-7. This part of the thesis/ project dissertation should not be more than 60 pages. The bibliography and the annexes are not considered to be part of the body of the thesis/ project dissertation

# The following regulations for the layout are compulsory for both thesis and dissertation:

- 30-35 lines per page
- left and right margin 1.3 inch (ca.3 cm) each
- 10 or 12 characters per inch (2.5 cm)

The thesis/dissertation should be typed or printed on A4 paper. All pages must be numbered either at the top (centered) or (bottom). The text of this handbook uses such a layout as an example for you. It is essential that your information is presented clearly and is easy to read.

The bibliography should go at the end of the text.

Other information to supplement the text should be placed in the annexes. This includes information such as country description, map of the area, training materials used, the complete questionnaires etc.

The name of author, title of the thesis and the year must be on the page which can also be the cover of the thesis. This also should have the names of all tutors who have assisted you in the work. Annex 1 is an example of a title page.

The thesis/dissertation must also contain a statement concerning the fact that this is your own work. We suggest that you use the statement in Annex 2.

# **Chapter 2:** Explanation of each section

#### a. Executive summary

The executive summary is the very brief description of your whole study. It should summarize:

- Your study(s) or hypothesis and its/their importance to health care.
- The methods used to investigate the questions your results/findings
- Your conclusions and your recommendation, if any.

The executive summary is a very important part of the thesis. It is the only part of which those who want a quick overview of your work will read. It might be the only part read by the client who suggested the research topic. It therefore is crucial that you present this summary clearly and with the correct degree of emphasis on conclusions/recommendations (if any). Because it is a summary of your work, it is by necessity the last part of the thesis to be written. It should be no longer than 4 pages.

# b. Introduction and Project summary

# (i) Introduction

The introduction contains a description of the context within which the study took place including a statement concerning:

- The reasons why you selected the topic (the purpose of the study);
- The local and global context of your study question(s);
- A brief description of the country and its major health problems with special reference to the research topic.
- The location of the study;
- The appropriateness of this location for the study question;
- The persons and/or organizations with whom the study was undertaken and their work.

The introduction should also include the exact study question; which you want to ask. This question should be stated clearly and simply. It is the basis of the data which you seek and which you will include and analyze in the final document. You should also state the objectives of your research.

The objectives outline how you will approach your study question.

Here is an example:

Study question: What are the beliefs of mothers about childhood diarrhoea in East Alego?

Objectives:

#### To identify:

- Types of beliefs that exist
- Beliefs about causes
- Beliefs about cures
- Attitudes about using the modern health services.

It also includes a description of your study approach that is whether you have chosen to test a hypothesis or do a descriptive study.

If you seek to test a hypothesis, remember that a hypothesis is an unequivocal statement that will be proved or disproved on the basis of your study.

Because you have a short time to undertake your research, it is important that you limit your study so that it can be completed. This means that any hypothesis testing must by necessity be limited. Therefore, you must make sure that your hypothesis is clear and exact. Remember not to state an obvious hypothesis.

This section should be no more than 6 pages.

# (i)Project summary

The project summary contains a description of the project being implemented.

- Project background
- The purpose and objective of the project
- problem statement
- The rationale
- The location and its appropriateness and relevance
- Project duration
- The stakeholders involved and their role

It also includes a description of the approaches and strategies employed in the project

This section should be no more than 6 pages.

#### c. Literature review/ Desk review

#### (I) Literature review

The literature review presents to your reader the past work done on your study question(s). It includes the published literature, the unpublished or 'gray' literature and personal communications you have had. Its purpose is:

- To review what is known about the problem you are studying
- To review what is known about the research methods you have chosen (including strengths and limitations).

In the literature review you have an opportunity to share information with your reader, to identify document where more in depth information can be sought and provide background material for your study. You also have the opportunity to give your own opinion on the work of others.

As you will read a number of pieces relevant to your topic, you must be very careful to write the literature review so that the reader can easily see how each citation related to your work. The works you review must be related to a theme or themes which you are going to highlight in your study. When you write your review you should be sure that it is relevant to the questions that you are examining in your overall study.

In writing your review, you should refer to the guide for critical reading. The questions for critical reading may also serve to help you write this section. Concerning citations of references in your text, the reference should be placed in brackets with the name and date of reference as it appears in the Bibliography, for example:

(Casley, L. and Lury, M., 1987)

Here are some hints for writing your review:

- Do not include everything you have read. Only those documents which are related to themes which you have identified for your study.
- Start the literature review with a brief description of the themes that you identify in your reading and do make sure you stick to those themes.
- Do include all references in this section that you will use in the following sections. No new references should be cited in later sections of the thesis.

This section of the thesis should be more than 15 pages in length. Reviews can be much shorter and still be of high quality.

# d. Methodology

The objective of this chapter is to inform the reader about all material and methods used, their adaptation to specific objectives and conditions in this actual study. If a more general introduction to methodology is necessary, this should go in the literature review. A good guideline when writing this chapter is the idea that the reader must be able to repeat the study in details in the same or similar setting - and to be conscious about the limitations and strengths.

The following steps should be included:

- 1. Restate your study question(s) or hypothesis and what was already stated in the introduction and literature:
- Review in terms of:-
  - The problem
  - The context
  - The location
  - The logistics
  - The study population
- 2. This should lead immediately to a restatement of the study question and the restatement of the objectives. Describe methods used to examine your study question(s) the following major aspects must be covered:
- Descriptions of how people or objects studied were selected.
- Definitions, the criteria of selection and eventual sampling procedures are included here.
- Statement of what type of study you have chosen. If it is qualitative, describe all methods used. Remember it is important in qualitative research to overcome bias. Therefore, triangulation that is using more than one method is nearly always important. If the study is only or also quantitative identify whether your study is cross-sectional, a retrospective or a prospective one, a cohort study or a case-control?
- 3. Describe all the instruments for data collection

All instruments should be described. In the case of questionnaires or data collection sheets, the forms should be presented as an annex. In interview studies, the following descriptions should be included:

- Guidelines for selection and training of interviewers procedure and result of pilot testing validation
- Data collection procedure
- Notification of data
- Data-entry procedure to computer (if used)
- "Cleaning" of data (how many sets of data were not considered and why?)
- Data-analysis with standard procedures applied, software packages used and other pre-formatted procedures.

#### 4. Discuss the limitations

Discuss the limitations to the material and methodology like accuracy of tools, validity of documents available, biases produced by sampling, communication, notification problems, etc, ethical issues that did not allow the use of theoretically superior methods, time constraints. But remember this is no excuse. One objective of the entire field study is to carry out research in the time period given.

This short discussion is limited to the material and methods. Warning: In this chapter no results are to be presented. The only possible exception may be preliminary results of a pilot or testing that explains properties of the methodology and/or the development of the methods.

This section should be no longer than 12 pages.

# e. Results (Findings)

In this section, you will present the results that you obtained in examining your study question(s). This section should describe:

- The data you collected and the results that you obtained from analyzing these data
- The phenomena or trends these data reveal.

If you have chosen to undertake a quantitative study, then the conventional presentation is most appropriate. This means that you present the data that address the question(s) and hypotheses with which you started. Use tables and graphs to give the clearest picture of data analysis but only use them if it is appropriate.

If you have chosen a descriptive, qualitative study then you will want to present your data around the main themes of the study that you have identified in your introduction and methodology. In this type of data presentation, quotations from interviews are very useful. Tables can also be used to summarize similarities and differences in groups of people. These tables are more likely to contain words than numbers. Again use only tables when it helps to clarify data presentation.

Do remember it is possible to combine quantitative and qualitative methods. In this case, the presentation most appropriate for the data should be chosen. Choose tables only when they clarify this presentation. The presentation of results is a difficult section. Here are some hints that might assist you:

#### In this section:

- Present only data relevant to your hypothesis or your study questions.
- Do not feel that you must present all the data you have collected. But remember: do not omit data that do not agree with your preconceived views.
- Clearly identify your main points in an introductory paragraph and check again for logical flown of arguments.
- Make sure any graph or table is clearly understood, correctly labeled and stands by itself without any need of contextual explanation.
- Make sure all your numbers to add up to the totals you present.
- Do not express your opinion about the findings in this section. Only present the data analysis.
- Do not complicate the presentation by statistical analysis that are not relevant and only complicate the results.

This section should be no longer than 18 pages.

# f. Discussion

In this section of thesis, you will present your opinions about your results and analyze the implications of the findings for your study question(s). This section should not contain any new results; only interpret what you have presented in the previous section. To do this it is best to refer back to the issues you raised in your introduction and highlight what you did and did not find out in your study.

This section should also discuss the limitations of your study design and the way in which it was carried out; the ways in which data was obtained and how these limitations influence your final conclusion.

In the presentation you should identify where your results support or contradict findings, of others who have investigated the topic, highlighting similarities and differences in the findings of others. References to these studies, however, should have been reviewed in your literature review.

This section should be no longer than 15 pages.

# g. Conclusions

The conclusions are the final part of your study. In this section, you will draw together the various parts of your thesis and discuss the implications of your study for your study question(s). They, therefore, must come logically

from the other parts of your presentation. The reader must be able to see that your conclusions are a summary of the arguments that you have developed throughout your work. In this section, you can identify hypotheses that have arisen in the course of your study and/or areas for further research.

Some thesis will undertake a specific study at the request of the host institution. In these cases, host institutions often request recommendations based on your findings. You should be very careful about making recommendations on the basis of a very short study in a situation with which you are most probably unfamiliar.

It is realistic to expect that the most you can recommend is areas for further research or a further testing of your hypothesis in order to check its possibility to be generalized. If you do finally decide to make recommendations do be sure that your recommendations are supported by your findings, are practical and feasible. Do not recommend more study if they really are not needed.

The conclusion (including recommendations, if any) should be no more than 5 pages.

# h. References

The References contain all the references you have used in writing your thesis. References include books, articles, grey (unpublished literature), personal interviews, newspaper reports, official government documents, proceedings of meetings, conferences, etc, WHO reports.

References are not counted within the 80 pages of the main body of the text. Each citation is listed alphabetically and separately. The surname of the first author or the title of the article indicates the alphabetical placing of the reference. The following are examples of the form citations should take.

# Book:

Casley, D.J. and Lury, D.A., 1987, Data Collection in Developing Countries, Oxford, Claredon Press.

#### **Article**

Green, A. and Barker, C. 1988, "Priority setting and economic appraisal: whose priorities - the community or the economist?" <u>Social Science and Medicine</u>, Vol. 26, No.9 pp 919-929

# Chapter in Book

Saoke, P., Mutemi, R. and Blair, C. 1996, "Another Song begins: children orpahed by AIDS" in Forsythe, S. and B. Rau Aid in Kenya USA: Family Health International/AIDSCAP, pp.45-64

(Then you must put the original publication in the Reference List. The example above in Forsythe, S. and Rau, B. Aid in Kenya, 1996, USA: Family Health International/AIDSCAP, pp.45-64)

# Personal Communication:

Friend, F., 1995, Personal Communication

#### Government Report:

Harare, Zimbabwe, City of, 1984, Annual Report of the City Department of Health

# World Health Organisation Report

World Health Organisation. 1978, Primary Health Care, Health for All series, No 1. Geneva: World Health Organisation.

# **Proceedings of Conferences:**

Second International Symposium on public health in Asia and Pacific Basin, 1986, <u>Proceedings</u>, Bangkok, Thailand, 7-11 January,

# Newspaper Reports

International Herald Tribune, 1990. "People or Progress?" February 12,

#### i. Annexes

The body of your report should contain all the necessary information as described above. Because the body of your text cannot be more than 60 pages, supportive material should be included in the annexes. This material might include:

- A country profile including maps which describe the economical, political and social situation.
- Descriptions of the cultural traditions of the people in your study area.
- The questionnaires which you used to carry out the study.
- Checklists.
- Letter of Ethical Approval
- Your study protocol including your fieldwork timetable.
- Long descriptions of conditions of the country by other people which are too long for your text but relevant to findings.
- Records of illnesses, outpatient attendance, etc, only if relevant.
- List of drugs, equipment, facilities, etc, only if relevant.

Include material in the annexes only if it supports the points you make in your thesis. Do not include material if it adds nothing to your work. If you include material as an annex, you should refer to it in the main body of your text (e.g. see Annex 3).

# **Chapter 3: Assessment**

# a. Assessment of the Thesis/ Project dissertation

# **General Assessment and marks**

Two members of the Institute staff do the marking of the thesis separately. In case of no obvious disagreement, an average of two marks is taken. If the thesis is marked "pass" by one and "failed" by the other or in case of obvious disagreements the thesis will be sent to the *External Examiner who will make the final decision*.

The thesis will be assessed on the following basis:

•	Overall approach and consistency	5%
•	Technical Issues	5%
•	Introduction	10%
•	Literature review	15%
•	Methodology	15%
•	Result, findings	15%
•	Discussion	15%
•	Conclusion, Recommendations	10%
•	Executive Summary	10%

#### b. Overall Approach

As you see from above, 10% is awarded for "Overall Approach". The mark is based on a consideration of the entire thesis as well as a consideration of each chapter.

# Consistency

A consistent thesis is one that follows a single line of argument or a single theme. This can be illustrated by that fact that the contents of each chapter and section clearly relate both to the questions and the purpose which have been identified for the study.

The introduction therefore is an extremely important chapter. It should clearly state the objectives of the study, arguments which will be presented and the way in which the study is pursued. Consistency also means following an argument to a conclusion.

Examiners will reflect whether your conclusions are made based on the evidence presented. They will not be impressed by conclusions and/or recommendations that cannot be supported because of the limitations described or cannot be traced by the evidence presented.

# Logic

A thesis is considered to be logical if it does not stray off the topic chosen and present information that does not relate to the argument. (This tendency to wander is particularly present in the literature review). The methods for study, data collection, data analysis and result presentations are considered logical if they are appropriate to the circumstance under which the study was done. It is important to consider the logic of an argument in choosing a topic that can be completed in the short time allowed. The decision to reject material is as important as the decision to include it.

# **Appropriate Methodology**

It is very important that the methodology that has been chosen is appropriate to the subject understudy. You should state very clearly why you choose your methodology and discuss its limitations. Be careful that you do not choose a quantitative methodology for a qualitative question and vice-versa.

# Clarity

One of the most difficult tasks of writing is to clearly state your ideas so that others understand them. What is very clear in your head is often more difficult to share with others. This is particularly challenging when you write in a language other than your native language. You need to remember that it is likely to take you some time to write down your ideas.

And after they have been written, they may have to be revised many times in order to convey exactly what you want to say. You will spend time drafting and re-drafting parts of your thesis, moving sections about and reworking your explanations. However, it is well worth the effort as examiners are most impressed by a clearly written thesis.

# **Chapter 4: The Final Product**

# a. Analysis and Writing

After return to TICH you have approximately four weeks to finish analyzing your data and write your final document. During these weeks there will be very few scheduled classroom activities. The weeks are booked for you to meet your thesis tutor to seek advice before finalizing your thesis. All tutors will be available during this period for appointments with their tutees. In order to make the most of these tutorial sessions, we strongly suggest

that you prepare a written draft (it could be handwritten but legible) of your thesis as a basis for the tutorials. It is preferable that you give your tutor the draft before you meet so he/she has already read the work. Tutors are available to provide guidance. It must be clear that the thesis is your responsibility and tutors are available only to assist you n the processing of your final work.

# b. Thesis Presentation / Project dissertation

It is your responsibility to organize the typing and providing the required number of copies of the thesis. While the course Team is willing to help you locate people who can undertake the typing, it is not a team responsibility to see the work is completed by the time required. The team is not involved in typing these theses unless by private arrangement. You must cover the costs for typing and photocopying.

All theses must be handed in to the Course office at the time specified by TICH. If it is not presented by this time, the thesis is considered to be marked as "failed". Therefore, a submission after the deadline is considered as a resubmission.

You should submit your thesis/project dissertation in 4 copies, the original should be submitted unbound in order to ease the procedure of making further photocopies. The other 3 copies must be bound. After these copies have been submitted there is no chance to make changes. Copies, which hosts have requested, should be made only after the thesis has been passed by the examination Committee.

# **ADMINISTRATIVE POLICIES**

#### 8.1 Transfer of Credit

The TICH Academic Board will consider requests for transfer of credit for the TICH degree/diploma on an individual basis. Only courses taken within five years of the date of the request for transfer will be considered. No students may transfer credits from other schools or institutions. Students who wish to take a course within another institution and who plan to use that course towards a TICH degree must get approval prior to enrolling in the course. No more than one-third of total credits may be transferred from courses taken from other institutions outside TICH. A minimum grade of B (60-65%) is required.

# 8.2 Transcripts

To request an academic transcript of grades and course work, a student should submit a transcript request form to the GLUK Academics Registrar office. Letter requests will be honored if they are signed and give complete information about attendance, including enrollment dates and degree(s) earned. Official transcripts are mailed approximately one week after receipt of mailed request. Result slips are offered at the end of each semester exams by the Deputy Director Academics.

# 8.3 Withdrawals, leave of Absence and Refunds

Students who find it necessary to withdraw or take a leave of absence must notify the Institute Administration in writing. Mere absence from classes does not constitute an official leave nor does it reduce the student's financial obligation or remove a final grade if the student is pre-registered for that period. Students may request up to one-year leave of absence. All withdrawals and leaves of absence are subject to the Institute refund policy listed below.

Students who withdraw from a course after the fifth week of class will receive a grade of 'W' (Withdrawn) on their permanent record card. Students may withdraw from a course at any time up to two weeks before the start of final examinations. After that point no course may be dropped. Depending on the date the official withdrawal from the Institute is received by the Administration, the students account will be credited as follows:

- Before the start of classes: 100 percent of tuition fees
- During the first two weeks of classes: 80 percent of tuition fees
- During the third week of classes: 60 percent of tuition fees
- During the fourth week of classes: 40 percent of tuition fees
- During the fifth week of classes: 20 percent of tuition fees
- After the fifth week of classes: 0 percent

Note: Tuition payments will not be refunded after the start of classes; rather, a credit will be made to the student's account. Registration fees and deposits are nonrefundable.

# 8.4 Suspension, Dismissal or Discontinuation

TICH through its appropriate committees, reserves the right to suspend or dismiss any student for failure to maintain a satisfactory academic record, acceptable personal behavior, or satisfactory standards of health.

# 8.5 Educational Rights and Privacy of materials

Educational Rights and Privacy of materials ensures confidentiality of students educational records and restricts disclosure to or access by third parties, except as authorized by law. The Institute will not release personally identifiable information contained in student's records. However, students have the right to inspect their educational records, with certain exceptions. If they believe the records are inaccurate, they may request an amendment and if denied have the right to a hearing.

# 8.6 Equal opportunity policy

TICH prohibits discrimination against any individual on the basis of race, colour, religion, sex, age, national origin, physical or mental disability, marital, parental status. This policy extends to all rights, privileges, programs, and activities, including admissions, financial assistance, employment, housing, athletics and educational programs.

# **8.7 Intellectual Property**

The results of the TICH research should be published and made generally available, but continues to be prepared to protect the Institute intellectual property and encourage its commercial development when this should be of economic benefit to the Institute, its partners and Kenya. Intellectual property protection includes patenting inventions, securing trade marks Designing registration, Copyright and 'know-how' secrecy agreements. The Director of the Institute has powers to act for and on behalf of the Institute in any Intellectual property matter.

#### 8.8 Grievance and Arbitration

The Institute recognizes that it is in the interests of both student and the Institute to have procedures to deal in a simple and effective manner with the personal grievances of students which have arisen in their relationship with the Institute. The procedures are intended to prevent personal conflicts becoming entrenched, to the detriment of the student's academic progress, and to resolve disputes without delay and in a conciliatory and efficient manner. Under normal circumstances, it is expected that students will first raise matters about which they are aggrieved with the person concerned. If the student feels unable to approach the person directly or if such an approach does not solve the grievance, the Director should be consulted. The Director should take appropriate action to ensure that, wherever possible, the grievance is resolved. Such action may involve the use of an independent advisory body to assist in the resolution of any grievance.

# TICH PARTNER INSTITUTIONS

# 9.1 Service Institutions

The Government Ministries (Kisumu, Nyando, Siaya, Suba and Bondo Districts).

Anglican Church of Kenya (Ng'iya and Saradidi Health Centres, Dioceses of Maseno South, West and Southern Nyanza)

Roman Catholic Church, Arch Diocese of Kisumu

Christian Health Association of Kenya

# 9.2 Community Based Organizations (CBOs)

Lambwe East community

Reach Out community

Kadibo Community

Maseno Division communities (8 sublocations)

Gem Rae, Nam and St Alloys Communities

**Boro Community** 

East Alego Community

South East Alego Community

**Abom Community** 

Saradidi, Majango Communities

East Asembo Community

West Asembo Community

# 9.3 Training Institutions

Department of management and Health Economics, Moi University Institute of Public Health, Moi University

# 10.1 The Founders of TICH.

TICH founder members are those who have paid pay KShs. 20,000 to be used to purchase the piece of land for the construction of the physical facilities of the Institute. Founder membership is still open.

# 10.2 Trustees

- 1. Dr. Nyambura Githagui
- 2. Bishop Joseph Otieno Wasonga
- 3. Bishop Francis Mwai Abiero
- 4. Bishop Haggai Nyang'
- 5. Ms. Penina Ochola
- 6. Rev. Dr. Dan Owino Kaseje
- 7. Dr. Richard Muga

# 10.3 The Council

- 1. Prof. Miriam Were (Chairperson)
- 2. Dr Willis Owino-Ong'or (Vice Chairman)
- 3. Prof. Gilbert Kokwaro
- 4. Prof. Dan Kaseje
- 5. Rt. Rev. Francis Mwai Abiero
- 6. Prof. Gilbert Kokwaro
- 7. Prof. Wilson Odero
- 8. Prof. Richard Odingo
- 9. Dr William Otiende Ogara
- 10. Dr Mary Hlalele
- 11. Dr. Mabel Nangami
- 12. Dr.Doreen Othero
- 13. Mrs. Getrude Lwanga
- 14. Mr. William Otiende Ogara
- 15. Mr. Samuel Tororei
- 16. Mr. James Odaga
- 17. Mrs. Elizabeth Usagi
- 18. Mrs. Jane Adewa
- 19. Mr. Charles Oyaya
- 20. Mr. Mark Oloo
- 21. Mr. William Otiende Ogara
- 22. Mr. Samuel Tororei

- 23. Mrs Elizabeth Usagi
- 24. Mrs. Jane Adewa
- 25. Mr. Charles Oyaya
- 26. Mr. Mak'Oloo

# 10.4TICH International Advisory Group

- 1. Prof. Stan Foster (Emory School of public Health)
- 2. Prof. Carl Taylor, John Hopkins School of Public Health
- 3. Prof. Henry Mosley, John Hopkins School of Public Health
- 4. Prof. Paget Stanfield
- 5. Prof. Vic Neufield (McMaster University, Canada)
- 6. Dr. Charles Boelen (WHO, Geneva)
- 7. Henry Mosley (John Hopkins University, USA)
- 8. Jack Bryant (Consultant, USA)
- 9. David Morley (School of Child Health, UK)
- 10. Frits Van der Hoeven (MCS, Holland)
- 11. Basi Wessel (Orange Free State University, South Africa)

#### **10.5 TICH Examiners**

#### **External**

1. Dr. Mabel Nangami (Moi University, School of Public Health, Kenya)

#### **Internal**

- 1. Prof. Dan Kaseje
- 2. Prof. Owino Okong'o
- 3. Prof. Joseph Otieno Oteku
- 4. Prof. Richard Muga
- 5. Prof.Stephen Okeyo
- 6. Henry Oyugi
- 7. Dr. Pamela Juma
- 8. Dr. Linette Nyapada
- 9. Silvenus Ochieng
- 10. Jack Buong
- 11. Maureen Kimani
- 12. Caroline Musita
- 13. Rose Olayo
- 14. Dr. Joyce Owino
- 15. Joyce Mbugua
- 16. Dr. Margaret Nduta
- 17. Dr. Constantine Loum
- 18. Dr. Peter Gisore
- 19. Dr. James Ouma
- 20. Prof. Oloo
- 21. Prof. John Alwar
- 22. Dr. Jane Mumma
- 23. Isaac Ogwayo
- 24. Nancy Madigu
- 25. Charles Wafula
- 26. Dr. Jackton Opiyo
- 27. Prof. George RAburu
- 28. Prof. Jack Kamiruka

- 29. Irene Obago 30. Careena Otieno
- 31. Dr. Hazel Mumbo
- 32. Dr. Andrew Otieno
- 32. Dr. Andrew Otieno
  33. Oyatta Bala
  34. Prof. Leo Juma Ogallo
  35. Dr. Willis Obura
  36. Alice Mwayi
  37. BeverleyOchieng
  38. Willis Osoo