#### GREAT LAKES UNIVERSITY OF KISUMU



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

# BACHELOR OF SCIENCE IN COMMUNITY HEALTH AND DEVELOPMENT UPGRADERS

#### STUDENTS' HANDBOOK

JANUARY 2014

#### **CONTACT ADDRESS:**

P.O BOX 2224 P.O BOX 60827 KISUMU NAIROBI Tel. 254-715702676 Tel. 254-723686443

E-mail: <a href="mailto:decorate: 125%">tichnbi@africaonline.co.ke</a>

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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 from 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 Bachelor's degree program, an applicant must have obtained:

The Kenya Certificate of Secondary Education (KCSE) or equivalent with a minimum mean grade of C+ and must have in addition, obtained grades C+ in the following clusters: English/Kiswahili; Biology/Biological sciences; and C in Maths/physics for **direct entry admissions (Year 1)** 

Or

Kenya Advanced certificate of Education (KCE) with 2 principle passes (Biology and maths) and one subsidiary pass **direct entry admissions** (Year 1)

Or

Diploma in: Environmental Science, Social Science, Clinical Medicine, Nursing, Community Health and Development or Medical Laboratory and equivalent from approved Colleges **upgrading admissions (Year 3)** 

Or

Higher Diploma in Community Health and Development **upgrading admissions** (Year 4)

Students who attain a BCHD from GLUK and wish to proceed for MCHD, will be allowed with an aggregate of Second Class Honors (Upper Division) or Second Class Honors (Lower Division with at least two years work experience after attaining the degree) The BCHD holder will be exempted from the Year 1 of MCHD.

#### Transfer of Credit

The senate will consider requests for transfer of Credit for the GLUK degree on an individual basis. Only courses taken within five years of the date of request for transfer will be considered.

No more than one-third of total credits may be transferred from courses taken from other institutions. A minimum grade of B (60-65%) in a course similar to the ones offered in this course is required for a credit transfer to be considered.

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.

Fees can be paid per cluster, block or year according to the convenience of students or their sponsors. Annual payments are preferred as this fits well into our annual planning cycle. Application processing fee USD 30(Kshs 1,000) (non-refundable)

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 or accommodation to students. Students who receive funding from external donors 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. 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 arranged through town. 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. In general, all require anti-malarial students 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. Each student is required to submit a medical assessment form at the time of registration.

#### 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

#### THE ACADEMIC PROGRAMME

The course is organized into 62 units based on a credit system for direct entry students. Each unit may be taken independently according to the convenience of the student in terms of ability to pay and time off from duty. Students in **direct entry** will be required to take the 62 units and partnership practice starting from Year 3 to Year 4. Students upgrading from Year 3 will be required to take 26 units and undertake the partnership practice while students upgrading from Year 4 will be required to undertake 12 units including partnership practice. 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 Year 3 (192 hrs)

#### 3. THE ACADEMIC PROGRAMME

The students are required to undertake the following:

#### YEAR 3

	COURSE CODE	COURSE TITLE	Contact	Credit
			hours	hours
1.	CHD 114	Introduction to Computer Sciences	45	3
2.	CHD 115	Introduction to Community /Public Health	45	3
3.	CHD 116	Anatomy and Physiology	45	3
4.	CHD 121	Introduction to Sociology	45	3
5.	CHD 122	Introduction to Psychology	45	3
6.	CHD 123	Organic chemistry & Biochemistry	45	3
7.	CHD 124	Medical Microbiology & Parasitology	45	3
8.	CHD 131	Infectious Diseases I	45	3
9.	CHD 132	Epidemiology I	45	3
10	CHD 134	Biostatistics I	45	3
11	CHD 135	Medical Entomology and Vector Control	45	3
12	CHD 136	Occupational Health and Safety	45	3
13	CHD 221	Economics of Public Action	45	3
14	CHD 233	Politics of Economic Development	45	3
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#### YEAR 4

Third Year Courses: Trimester 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: Dr. George Ngatiri, Dr. Rose Olayo, Dr. Margaret Kaseje, Charles Wafula, Beverly Ochieng,

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:** Mr. Charles Wafula

Core Facilitators:, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, , 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: Mr. Henry Oyugi.

Core Facilitators: Prof James Oloo, Mr. Kevin Acholla, Carolyne Akinyi

**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: Mr. Henry Oyugi.

Core Facilitators: Prof James Oloo, Mr. Kevin Acholla, Carolyne Akinyi, Careena Otieno,

**Modules:** 

CHD 401 Biostatistics

CHD 402 Essentials of Computing

#### **Third Year Courses: Trimester I1**

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

(120 hours/3 units)

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

Core Facilitators: Dr. Rose Olayo, Rev Boniface Obondi, Denis Owino, Evelyne Aseyo, Edith Akunja, Carolyne

Ayuya

**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, Mr. Henry Oyugi, Dr. Rose Olayo, Dr. Pertet

Anna, Carenna Otieno,

**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, 700B OR CHD 700 C

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

Cluster Convener: Dr. Jane Mumma

Core Facilitators: Caroline Musita, Dr. Jane Mumma, Damaris Nelima, Kevin Acholla, Michelle Aleso, Prof Leo

Ogallo, Mr. Bala

**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 Dan Kaseje, MBChB, MPH, PhD

Core Facilitators: Charles Wafula, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, 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, Leila Geteri,

**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

#### ASSESSMENT FOR UNITS

#### 4.1 Units Assessment

#### Year 1:

For all Units in Year 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%.

#### Year 2:

For all Units in Year 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%.

#### Year 3:

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

#### Year 3: Trimester 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

#### Year 3: Trimester 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: Health Systems Management**

- 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

#### Year 4:

For all Units in Year 4

- 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%.

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#### 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.

#### Year 3: Trimester 1

#### **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).

<u>Step 2 (weeks 4-8): Feedback</u> 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 schedule for the semester.

#### 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 Trimester I

Steps / Weeks/	Learning Activities /	Partnership/Activities	Assessment items
Clusters	Objectives (students able to	- u. v	
Step 0:	-Follow course structure	-Introductory Lectures	
Orientation	-Outline partnership concepts	-Partnership workshop at TICH	
	and methods	1	-
	-Identify a partner		
Step 1:	-Outline partnership Entry	-Introduction to partners	-Feedback workshop
	steps	(exploration/discovery visits)	
Cluster 1	-Outline methods of situation	-Carry out a situation analysis	
	analysis and Institutional	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	-Conduct partnership workshop	
	partnership workshop	-Write partnership workshop	
	-Prepare and present results	report & plan of action	
	of S.A.	- Carry out cost analysis and	
	-Identify areas of strategic	viability study	
	action and initiate a	-Prepare partnership program	
	partnership planning /	plan	
	development process		
	-Outline a partnership		
	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:	-Assess Information Systems -Facilitate community	-Examine information system and write report	-Baseline survey report
Cluster 3 and 4	survey/feedbackDevelop MIS/HIS/GIS	-Carry out survey and write report	-Partnership progress 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.

#### Year 3: Trimester 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 Trimester II

Steps/	Learning Activities	Partnership/Activities	Assessment items/
Weeks/Clusters Step 0	Objectives, students: -Participate in introduction &	-Introduction to Partnership	marking -Plan of action
Step 0	Orientation of Block 1	program and sites	-1 fail of action
		Carry out rapid review of	
		partnership development and	
		management	
Step 4:	-Develop Community Based	-Carry out learning needs	- CBE training
Cluster 5A	/ Problem Based Curriculum -Develop a lesson	assessment and write report -Develop curriculum	workshop - CBE training report
Cluster 5A	-Conduct a problem based	-Prepare lesson plans	- CDE 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	Describe healing community	- Communication and
Cluster 5B	communities -Describe healing community	-Identify issues, document and disseminate (article or seminar)	advocacy case study -Peace building and
(Building Healing	-Document, write and publish	/facilitate advocacy	negotiation case
Communities)	-Facilitate community	- Build/strengthen partnership /	study
ĺ	advocacy, negotiation and	peace through negotiation	- Counselling case
	peace building	-Identify a counseling need and	study
	-Facilitate community based	conduct a counseling session	- Healing Community
	counseling		case study
Step 6	-identify researchable issue in	Write a research proposal	Research proposal
	your partnership site		
Cluster 6			
Basic Research Selective			
Step 7	-Carry out a follow up	-Carry out assessment of	-Vulnerability
(Wks 11-13)	assessment of activities on	Household resilience capacity	Capacity Assessment
Cluster 7a	Household Vulnerability	to Vulnerability situations and	report
Environmental	situation	write a report	
health			
	-Demonstrate latrine	- Demonstrate and write a on	
OR	construction, water	Environmental Health report	
	purification, nutritional	and submit (annex to Progress	
	assessment	report II)	
Step 7	-Carry out follow up	-Carry out health systems	- Health Facility
(Wks 11-13)	assessment of health systems	assessment by level and write a	Assessment report
Cluster 7c		report	
Combating ill health	-Demonstrate the importance	-Demonstrate the importance of	
	of health facility data	health facility data analysis and	
	analysis and presentation for	presentation for decision	
	decision making.	making	

#### Note:

<sup>1.</sup> 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)

#### Year 4

A *Project Evaluation Plan* for evaluating the partnership site which the student executed the year three partnership is presented to TICH and marked as a written assignment. It must be passed before the student continues with field work. This one accounts for 20% of the overall year 4 partnership.

In this, the student will be required to concentrate 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).

Key to this final review is that the student is expected to 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 to their workplace.

#### Specific learning objectives

By the end of this year 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 lead seminar discussions on topics relevant to their areas of specialization

#### **Specific steps and activities:**

The students are expected to undertake this assignment consistently with the semester and complete in the third trimester of Year 4. 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 Year 1-4 and the community Partnership Practice as applies to the admission criteria's where relevant.
- All units are examined as the Partnership Practice is assessed on a continuous basis as outlined below.
- In each unit including partnership practice, the pass mark is 50%. Any score below 50 % is considered as a fail and a student will be required to do supplemental examinations which are offered once.
- Students are required to pass an academic year before moving to the next academic year.
- A student who fails five out of six units in a trimester will be discontinued but may receive a certificate of attendance. A student who fails five or more units in a trimester 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 Assessment summary

The assessment summary is as follows:

	BCHD
AWARD	
ASSESSMENT	
Written examination	60%
Partnership Practice	40%
TOTALS	100%

#### 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.

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.

#### FINAL PARTNERSHIP PROJECT EVALUATION GUIDELINES

#### **Chapter 1: Final Partnership Evaluation Report**

#### a. Evaluation plan for partnership project

Before a student starts the final partnership evaluation, he/she is expected to prepare an evaluation plan. This plan should be brief, no longer than 3 pages. It must be presented to and approved by the project evaluation committee. One copy should be given to the field co-ordinator; one copy should be given to the evaluation tutor in preparation for the meeting. Below is an outline for project evaluation plan. It will be useful to take some copies of your final partnership project evaluation plan with you for initial discussions with people at your field site.

#### b. Outline for a Final Partnership Project Evaluation proposal

#### i). Outline for a project evaluation proposal

- 1. Title of the Project
- 2. Summary a very short description of what the project was about highlighting the project objectives
- 3. Approach
- 4. Improvement project objectives
- 1. Implementation strategies and process
- 2. Monitoring and evaluation methodology and process.

#### c. Format for the final documents

The precise contents of the 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 format for project evaluation dissertation

- 1. Executive summary
- 2. Project summary
- 3. Methodology (methods used in the evaluation)
  - Desk review
- 4. Results (findings)
- 5. Discussions (of the results and their implications)
- 6. Conclusions
- 7. Bibliography
- 8. Annexes

The rigid restriction is that of the length of the project evaluation plan . The body of the final partnership evaluation repots consists of the sections 1-7. This part of report should not be more than 60 pages. The references and annexes are not considered to be part of the body of the report

#### The following regulations for the layout are compulsory for the report:

- 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 report 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.

#### Chapter 2: Explanation of each section

#### a. Executive summary

The executive summary is the very brief description of your partnership activities. It should summarize:

- Your are of interest for improvement in the partnership.
- The methods used to conduct the evaluation
- Your conclusions and your recommendation, if any.

The executive summary is a very important part of the report. It is the only part of which those who want a quick overview of your work will read. 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 report 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 project took place including a statement concerning:

- The reasons why you selected the topic (the purpose);
- A brief description of the country and its major health problems with special reference to the project.
- The location of the project;
- The appropriateness of this location for the project;
- The persons and/or organizations with whom the project 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.

The objectives outline how you will approached the project implementation.

#### Objectives:

To identify:

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

#### (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. 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 project evaluation. 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 project objectives 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 beneficiaries were selected.
- Definitions, the criteria of selection and eventual sampling procedures are included here.
- 3. Describe all the instruments for data collection for the project evaluation

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?)

#### **Desk review**

#### (I) Literature review

The literature review presents to your reader the past work done on your project. 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 had tried to solve
- To review what is known about the problem you have chosen (including strengths and limitations).

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 referencing, 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. Results (Findings)

In this section, you will present the results that you obtained in your final partnership project evaluation This section should describe:

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

The presentation of results will be guided as follows:

- Present only data relevant to your evaluation objectives .
- 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.

This section should be no longer than 18 pages.

#### e. Discussion

In this section of report, you will present your opinions about your results and analyze the implications of the findings for evaluation objectives. This section should not contain any new results; only interpret what you have presented in the previous section.

This section should be no longer than 15 pages.

#### f. Conclusions

The conclusions are the final part of your evaluation report. In this section, you will draw together the various parts of your report and evaluation objectives. 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.

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

#### g. 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. <u>Aid in Kenya</u>, 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,

#### h. 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 evaluation.
- Checklists.
- Your evaluation plan 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.

#### **Chapter 3: Assessment**

#### a. Assessment of the Final Partnership Evaluation report

#### **General Assessment and marks**

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

The report will be assessed on the following basis:

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

#### 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 report.

#### **Chapter 5: The Final Product**

#### **Final Partnership Evaluation Report**

It is your responsibility to organize the typing and providing the required number of copies of the report. 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 reports unless by private arrangement. You must cover the costs for typing and photocopying.

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

#### **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. Constantine Loum
- 8. Prof Anne Pertet
- 9. Prof Willis Owino-Ong'or
- 10. Prof Willis Obura
- 11. Prof Jack Kamiruka
- 12. Jack Buong
- 13. Caroline Musita
- 14. Dr. Rose Olayo
- 15. Dr. Joyce Owino
- 16. Dr. Peter Gisore
- 17. Dr. James Ouma
- 18. Prof. Oloo
- 19. Prof. John Alwar
- 20. Dr. Jane Mumma
- 21. Isaac Ogwayo
- 22. Nancy Madigu
- 23. Charles Wafula
- 24. Dr. Jackton Opiyo
- 25. Prof. George RAburu
- 26. Prof. Jack Kamiruka
- 27. Irene Obago
- 28. Careena Otieno
- 29. Dr. Hazel Mumbo
- 30. Dr. Andrew Otieno
- 31. Oyatta Bala
- 32. Prof. Leo Juma Ogallo
- 33. Alice Mwayi
- 34. BeverleyOchieng
- 35. Willis Osoo
- 36. Damaris Nelima