

THE MASTER OF PUBLIC HEALTH (MPH) PROGRAMME

AN INSTRUCTIONAL MANUAL FOR ACADEMIC STAFF

DEPARTMENT OF SOCIAL AND PREVENTIVE MEDICINE FACULTY OF MEDICINE, UNIVERSITY OF MALAYA

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l. HISTORY

In March 1973, ten years after the establishment of the University of Malaya Medical Centre (consisting of the Faculty of Medicine and the University Hospital), a decision was made by the Cabinet to start post-graduate courses in the Faculty of Medicine. One of the courses proposed was in the field of Public Health.

By September 1973, a post-graduate programme leading to the degree of Master of Public Health (MPH) was inaugurated and the first class (1973/74) started with seven doctors.

Up to August 1991, 18 classes of doctors have undergone training in the MPH programme and a total of 174 candidates have graduated with the degree of Master of Public Health. _____ 2. MISSION AND OBJECTIVES ___

MISSION The mission of the MPH programme is to produce public health specialists appropriate for the needs of Malaysia.

> The programme, however, is also suitable for candidates from other countries with similar health problems and needs.

OBJECTIVES The instructional objectives of the MPH programme is to:

- a. equip the candidate with technical competence in the broad field of Public Health, and to
- b. equip the candidate with management and leadership skills

so that he/she may function efficiently and effectively at the district, state and central levels of the national health care services and in the preventive as well as the hospital environment.

3. ACTS AND REGULATIONS _____

(These Acts and Regulations are cited for information only and are not to be used for legal purposes.)

MASTER OF PUBLIC HEALTH

ACT VII, PART 7 (Amended)(1991)

- 1. For admission as a candidate for the degree of Master of Public Health, a person shall:
 - (a) have the degrees of Bachelor of Medicine and Bachelor of Surgery of the University of Malaya or equivalent qualifications approved by the Senate;
 - (b) have at least one year of general medical experience after full registration; and
 - (c) have passed the Entrance Evaluation conducted by the Faculty of Medicine, University of Malaya.
- 2. Notwithstanding sub-section 1(c) above, applicants residing outside Malaysia and Singapore shall be evaluated for entry according to the procedure set out in section 3 below and any such other test as may be prescribed.
- 3. Admission to the course shall be by resolution of the Senate whose decision shall be final. The Faculty of Medicine (hereinafter referred to as "the Faculty") shall, prior to making its recommendation on an application to the Senate, scrutinise the applicant's qualifications, experience and transcripts and the confidential reports of his former supervisors to assess his suitability for admission as a candidate for the degree.
- 4. (a) Subject to sub-section (b) of this section, a candidate shall after admission pursue a full-time course of advanced study and training as prescribed in the Regulations under this Act to the satisfaction of the Faculty.
 - (b) The Senate may, on the recommendation of the Faculty, admit a full-time employee of the University who meets the requirements specified in section 1 to the course. Such a candidate shall, after admission, pursue a parttime course of advanced study and training as prescribed in the Regulations under this Act to the satisfaction of the Faculty.

- 5. A candidate shall be awarded the degree of Master of Public Health provided that he has:
 - (a) satisfactorily completed the prescribed course;
 - (b) satisfied the Board of Examiners in the examination for the degree of Master of Public Health; and
 - (c) paid all the prescribed fees.

MASTER OF PUBLIC HEALTH REGULATIONS VII, PART 7 (Amended)(1991)

- 1. Every application for admission as a candidate for the degree of Master of Public Health shall be made on the prescribed application form obtainable from the Office of the Registrar. The course shall be advertised from time to time.
- 2. Every candidate shall be required to pay the prescribed fees and complete the prescribed Enrolment Form on admission. Failure to comply with the provision of this section may render the candidate having his candidature terminated or being refused admission to the examinations of the course.
- 3. The course of advanced study and training shall extend over approximately twelve months for a full-time candidate or approximately twenty-four months for a part-time candidate.
- 4. The course shall include:
 - (a) studies in the following subject areas:

Epidemiology Biostatistics Community Research Methods Management Studies Social Science and Health Education Environmental Sciences Family Health

and any other subject areas which may be deemed necessary from time to time;

- (c) the preparation of a dissertation on an approved subject.
- 5. A candidate shall not absent himself from the course and shall carry out such assignments as are given to him unless the candidate has been given sick leave or maternity leave or has been granted leave of absence by the Dean of the Faculty.
- 6. The Senate may, on the recommendation of the Faculty, terminate at any time the candidature of a candidate whose progress is not satisfactory.
- 7. No candidate shall be admitted to the examination for the degree of Master of Public Health unless he has:
 - (i) satisfactorily completed the course;
 - (ii) submitted his dissertation by an appointed date; and
 - (iii) paid all the prescribed fees.
- 8. (a) The examination shall be taken as a whole at one and the same time.
 - (b) The examination shall consist of written papers, a dissertation, coursework performance and a viva-voce examination and such other test as the Board of Examiners may prescribe.
- 9. A candidate who fails to satisfy the Board of Examiners in the examination may, on the recommendation of the Faculty be permitted by the Senate to take a subsequent examination after repeating satisfactorily such parts of the course as the Faculty may decide.
- 10. A candidate who does not satisfactorily complete any part of the course and is not admitted to the examination at the end of the course may be permitted by Senate, on the recommendation of the Faculty, to repeat such part or parts and may, on satisfactory completion of such part or parts, be admitted to a subsequent examination.

MASTER OF PUBLIC HEALTH REGULATION XIII, PART 8D (Amended)(1991)

In the exercise of the powers conferred by sections 5 and 13 of Act XIII, the Senate of the University of Malaya makes the following Regulations:

Citation

 These Regulations may be cited as the University of Malaya Examination (Master of Public Health) Regulations (Amended 1991) and shall be read together with Act XIII, Regulations XIII, Part I - General, and the Acts and Regulations governing the degree of Master of Public Health.

Identity of Examination Candidates

- 2. A candidate shall only enter his index number and not his name on his answer scripts.
- 3. Names of candidates shall not be revealed to examiners except at meetings of examiners which are convened to finalise the marks to be awarded.

Secrecy of Examination Proceedings and Marks

4. All examination proceedings and marks shall be secret and shall not be revealed to any candidate or unauthorised persons.

Release of Examination Results

5. Candidates shall be notified of their examination results by the Registrar's Department. The results of the Examinations shall be indicated by "Pass with Distinction", "Pass" or "Fail".

Repeating the Course

6. No candidate shall be allowed to repeat any part or parts of the entire Master of Public Health course unless this is approved by the Senate. Examination Components and Allocation of Marks

7. Components of the Examination

The Examination shall consist of written papers, a dissertation, coursework performance, a viva-voce examination and such other tests as may be determined by the Board of Examiners.

8. Allocation of Marks for Components of the Examination

A total of 800 marks is allocated to the whole Examination and is distributed as follows:

- (1) 200 marks for the dissertation.
- (2) 200 marks for coursework performance.
- (3) 400 marks which are allocated to the following written papers:
 - (a) Paper I : Multiple choice questions (100 marks)
 - (b) Paper II : Short-answer type questions (100 marks)
 - (c) Paper III : Essay-type questions (100 marks)
 - (d) Paper IV : Problem-solving questions (100 marks)

Provided that the Senate may, on the recommendation of the Faculty of Medicine, vary the proportions of marks to be allocated to the various components of the Examination.

(4) Every candidate shall be required to present himself for a viva-voce examination which shall form part of the Examination. The overall results of the candidate may be adjusted by up to +5% depending on the performance of the candidate at the viva-voce examination.

Marking Scheme and Grades

9. Each component of the Examination shall be examined and awarded a numerical mark which shall be converted into a percentage and an equivalent grade in accordance with the following scheme:

Percentatge	Grade	Meaning
75% & above	A+	Pass with distinction
70 - 74%	A	Very good pass
60 - 69%	B	Good pass
50 - 59%	С	Pass
45 - 49%	D	Redeemable failure
Below 45%	F	Fail
0	X	Absent from Examination

- 10. The overall assessment for the Examination shall be based on the percentage of the aggregate marks obtained from all the components of the Examination and shall be graded in accordance with the marking scheme mentioned in Regulation 9.
- 11. A candidate may be awarded a Pass with Distinction in the Examination if he has obtained a percentage of 75 or more in the whole Examination provided that no candidate shall be eligible for this award if he is a repeat candidate.

Re-examination

- 12. A candidate who has failed the Examination may be permitted a Re-examination after having repeated and completed satisfactorily for a period of six months such portions of the course as may be determined by the Faculty of Medicine. If he fails the Re-examination, he may be permitted a second Re-examination after repeating and completing satisfactorily for a period of another six months such portions of the course as the Faculty of Medicine may determine.
- 13. A candidate who has passed the Re-examination or the second Re-examination mentioned in Regulation 12 shall be deemed to have passed the Examination. In the event that he has failed the second Re-examination, he shall be deemed to have failed the Examination and shall not be permitted to repeat the course except in special circumstances and on the recommendation of the Faculty of Medicine.

Award of Degree

14. No candidate shall be recommended for the award of the degree of the Master of Public Health unless he has successfully completed all parts of the course and has passed all the prescribed examinations. Subject to Regulation 11 a candidate may be awarded the degree with Distinction.

- 4. PROGRAMME CONTENT

- 1. The programme content is divided into four interlocking areas namely:
 - (a) Coursework
 - (b) Field work
 - (c) Dissertation
 - (d) Evaluation system

The programme does not allow for a choice of elective courses at this point in time, thus all courses and field work are obligatory. The programme is conducted in English with the use of Malaysian terminology where necessary.

Brief details of courses are given in ANNEX A to this document.

2. Coursework

The coursework content of the programme is divided into a number of "blocks of studies". These consist of one or more "courses". For ease of conduct, these courses are in turn divided into "modules" which may consist of one or more "units". Each unit may consist of one or more teaching-learning "sessions".

The following are the blocks of studies and their associated courses:

BLOCK	COURSE
Biostatistics	- Statistical Methods
Epidemiology	 Principles of Epidemiology Health Statistics Epidemiology of Communicable Diseases Epidemiology of Non-communicable Diseases
Management	- Management l (Concepts) - Management 2 (Process) - Management 3 (Applications)

Research Methods	- Computer Applications in Public Health - Community Research Methods
Social Science and Health Bducation	- Medical Socio-anthropology - Education and Communications in Public Health
Environmental Health	- Environmental Health - Occupational Health
Family Health	- Maternal and Child Health - Population and Ecology - Public Health Nutrition - Primary Health Care

Location of the various courses in any academic year may vary slightly depending on the availability of staff and the tiein with the undergraduate programme for field work assignments. Further details are given under the chapter on Coursework.

3. Field Work

The MPH programme requires that a candidate be given "supervised field experience". This is fulfilled through a number of field studies as follows:

- (a) Field studies in Malaysia. These consist of visits to a number of institutions, plants and establishments which are related to the practice of public health in Kuala Lumpur or the nearby states. These visits form part of various courses which are conducted.
- (b) Field studies in Singapore. Alternatively known as the "comparative public health studies module", a two week visit to Singapore is arranged to allow the candidates to compare public health practice in a highly urbanised area with their own experiences in Malaysia.
- (c) District Health Services Study (DHSS). The DHSS is conducted together with the undergraduate field programme of the same name. The candidates are expected to observe (as a non-participant observer) the management of public health services in a district and relate it to their own past experiences as district health officers. At the same time they experientially learn to be supervisors as they guide the undergraduate group in the same district. Overall supervision is given by the accompanying academic staff member.

The stated objectives of this field study are:

to develop and strengthen the candidate's leadership qualities to be a trainer and supervisor, and

to examine critically the management processes as practised in the district health services.

(d) ASEAN field study module (optional). As an extension to the comparative public health study module (b. above), a visit to a nearby ASEAN country to observe public health practice there can be arranged depending on whether there is sufficient interest in the student group. This module is carried out after the final examinations of the MPH programme.

4. Dissertation

The MPH programme rquires that a candidate submits a dissertation before he is able to satisfactorily complete the programme.

The dissertation is considered primarily as an educational tool wherein the candidate can demonstrate his ability to:

- define a public health or health-related problem,
- read and review literature concerning the defined problem,
 - choose appropriate methods for investigating the problem,
 - present his/her findings and conclusions scientifically and clearly, and
 - where appropriate, make recommendations for the solution of the problem.

A two-week period immediately prior to the first term vacation is allocated for the candidate to collect data for his/her dissertation.

A more detailed consideration of staff duties regarding the dissertation is given under the section on Dissertation (qv).

5. **Evaluation** System

Evaluation of a candidate's performance in the programme for eventual certification takes place in three directions, viz:

 (a) a system of formative evaluation by a series of end-ofcourse tests (qv Coursework).

- (b) a system for the evaluation of the dissertation which comprises both formative as well as summative evaluation processes (qv Dissertation).
- (c) a system of summative evaluation in the form of a final examination which consists of a consideration of a candidate's
 - coursework performance,
 - performance in the dissertation, and
 - performance in the final examination which consists of:
 - 4 written papers, and
 a viva-voce examination.

Further details of the evaluation system are given in the chapters on Coursework, Dissertation and the section on Regulation XIII, Part 8D in the chapter on Acts and Regulations.

– 5. DEPARTMENT ORGANISATION —

- 1. The Department tasked to carry out the MPH programme is the Department of Social and Preventive Medicine (SPM), Faculty of Medicine, University of Malaya.
- 2. In order to carry out the MPH programme, SPM is organised in a manner which ensures that the resources available are used optimally. Thus SPM consists of academic staff who are grouped together into "interest groups" depending both on their academic qualifications and specialty, and on their interests. Graphically:



Thus the academic staff of SPM belong "informally" to four major interest groups which combine to conduct all the courses and field work of the MPH programme.

The non-academic staff who are diploma/degree qualified in certain fields assist in various ways the conduct of the MPH courses. The secretarial staff provide word-processing help and the remainder contribute with transport etc. 3. Within each interest group, the academic staff members will engage in the development of the curriculum for their group of courses to be conducted. They will decide on the current emphasis to be laid on which areas of their subject. They may decide on the load each will undertake for any particular academic session.

It is possible for an academic staff member to be involved with two interest groups at the same time and he/she will thus contribute to both groups in curriculum development and teaching load.

Where courses or field modules require the participation of the whole or a large part of SPM, all academic staff are expected to contribute and/or participate in these modules or courses which will cut across interest or specialty lines.

In cases where resignations, sickness or sabbatical/study leave diminishes the number of academic staff available, any academic staff can be required to participate in courses of another interest group

This manner of organisation, it is felt, will allow academic staff to fully develop his/her specialty/interest fully within the interest group as well as provide the flexibility to cope with contingencies/emergencies which may arise.

- 4. The technical staff (ie the Medical Laboratory Technologist (MLT), the dietitians, programmers, and public health nurses (PHN)) will be tasked to assist the conduct of courses by taking care of certain administrative chores (eg ensuring handouts are readied, correspondence filed, time-tabling without overlaps etc). (For further information see under "Course assistants" in the chapters on Coursework and Field Work)
- 5. The MPH stenographer and the typist will assist in maintaining correspondence and the preparation of handouts. Academic staff, however, are encouraged to utilise the computer facilities to word-process their own handhouts as far as possible as it has to be remembered that the undergraduate SPM programme will also require the services of the single typist.
- 6. SPM maintains a modest computer facility which consists of a cluster of IBM-compatible PC-XT machines which is mainly used for teaching computer literacy and use to the MPH candidates. Staff facilities include two IBM-compatible PC-80386 machines with hard-disk, 5.25" as well as 3.5" floppy disk drives. These units are loaded with a variety of software including Harvard Graphics v2.3 and v3.0 which will facilitate the production of visual materials for teaching.

Staff members are, however, encouraged to purchase their own micro-computers preferably lap-tops or notebooks which can also be used in the field. It is understood that interestfree loans may be available from the Bursar's department for this purpose.

- 7. Teaching-learning spaces under the charge of SPM includes the MPH study room which functions as a "base" for the MPH candidates, the MPH seminar room where in-house coursework is conducted, the undergraduate seminar room, and the undergraduate Multidiscipline Laboratory 3. All these facilities are on the same floor.
- 8. The SPM transport pool consist of five vehicles each able to carry eight persons including the driver. Some of the vehicles are scheduled for replacement. These serve the field work modules of the MPH programme (except the Singapore module) and the undergraduate field programmes.
- 9. The Central (Audio-visual) Facilities of the Faculty (printing, photography, television, graphics, and workshop) are available for assistance in producing audio-visual materials for teaching-learning sessions.

6. COURSEWORK

- 1. Coursework in the context of the MPH programme is defined as the conduct of a series of in-house teaching-learning sessions pertaining to a defined subject area. Thus for a particular block of studies, one or more courses are run.
- 2. A course is a collection of related teaching-learning sessions concerned with a defined subject area. Conceptually, a course consists of three interlocking parts, namely:
 - (a) The General Introduction this is the session which starts the course where the purpose and objectives of a particular course is explained to the candidates and an outline of the structure of the whole course is given together with a tentative schedule. It serves to allow the candidate an overview of the course and to relate each unit (as it is being presented) to the whole. It also suggests the readings which are required. It also outlines the evaluation procedure used. The template for issuing a handout on the general introduction is given in ANNEX B1 and for the tentative schedule in ANNEX B3.
 - (b) The Course itself this comprises all the teachinglearning sessions for the particular course. The number and topics for these sessions would have been decided by the interest group (qv page 14) which developed the course. For each unit of the course, a handout is given which details the objectives of that particular unit as well as the topics within it and the readings required. A template for this handout is given in ANNEX B2.
 - (c) The Evaluation System which is how the student will be evaluated to enable him/her to demonstrated that he has learnt and that he/she has achieved the objectives set for the particular course. An outline of this would have been told to the student via the general instruction (see (a) above).

From another axis, most courses may be considered to be composed of a theoretical part and an applied part. It is the responsibility of SPM as far as possible to utilise its own academic staff to supply the theoretical portions (so as to be in complete control of the width and depth of the knowledge required) whilst the applied parts may be delivered by officers from relevant outside agencies particularly those which have public health programmes for the community.

- 3. The personnel involved in any particular course will be as follows:
 - (a) The Course Co-ordinator he/she is appointed to oversee that the course is planned, scheduled and conducted smoothly. He/she is also responsible for communicating with other agencies to obtain outside lecturers and to obtain permission for visits to be made. He/she is also responsible for the evaluation system of the course.
 - (b) The Teachers these are the internal academic staff who actually teach the course and will include (in almost all cases) the course co-ordinator. Officers from other agencies who teach in the course are appointed as parttime lecturers via a formal procedure and are paid an honorarium.
 - (c) The Course Assistants these are usually the technical personnel of SPM who are assigned to be course assistants to particular courses. These assistants are to help in ensuring handouts are printed on time for distribution, keeping correspondences in proper files, reminding teachers regarding their schedule of teaching sessions and other chores to enable the course to be run smoothly. However, they are not engaged in writing or composing letters nor the contents of handouts.
- 4. The choice of the instructional method for any one or a series of teaching session(s) is left to the course coordinator and his/her team of teachers. The objective is to use the most efficient and effective method for the presentation of any particular topic for the candidates to learn. Post-graduate instructional methods currently used are:

Lecture (presentation)/discussion - for the time allocated, a portion is spent in presenting the topic followed by a discussion of that topic by the candidates and the presenter.

Exercise - mainly used in statistics and epidemiology where a problem is posed and candidates reinforce their learning by working out (usually numerically) certain required indices for deriving a conclusion to the exercise problem.

Case-study - this may take a number of forms. Usually a scenario is given and candidates have to solve various queries posed in the case either by submitting a written analysis of the case or they may be required to physically role-play the solution. Open dicussion of a pre-given case may also be done. The ultimate choice depends on the objective of the case.

Term papers - this is an essay concerning a given topic by the candidates to show his/her understanding of that particular topic and his/her ability to analyse and synthesise the subject matter.

The above list of methods is far from being exhaustive and the course co-ordinator and teachers could devise other methods or combinations of methods for teaching so long as the objective of the choice of that method of instruction is effciency and effectiveness in communication

5. The evaluation system for a particular course is the responsibility of the course co-ordinator and the teachers. They will design the evaluation instrument (according to the instructional objectives of the course), implement the measurement procedure and make decisions of whether a particular candidate has achieved the objective(s) of the course.

In order that the performance of a candidate can be recorded over the length of the programme, a blank list of candidates is available. The performance of each candidate in terms of a percentage is entered therein. This list is sent to the office of the Head and this is recorded on a master list. Thus at any time the performance profile of any candidate can be ascertained and a cumulative profile can be compiled for consideration as "coursework" performance in the final summative evaluation of the candidate (see pages 11 - 12).

The performance in the formative evaluation procedures (ie end-of-course tests) are fed back to the candidates on an individual basis by the office of the Head of department. However, before the individual results are handed to the candidates, the course co-ordinator concerned is expected to check that the results are correct.

6. The above is a general description of instructional methods and certain educational management procedures concerning coursework in the MPH programme. It does not cover all contingencies as each course would have its own peculiar aspects. If these should occur, the matter can be brought up within each interest group or to the departmental level for discussion when necessary. 1. The Dissertation is a requirement of the MPH programme and accounts for 25% of the marks in the final summative evaluation of the candidate's performance in the programme.

The objectives and the field work period have already been described on page 11 (qv). This section details the role of the academic staff member in this part of the programme as he/she guides the candidate through the production of a dissertation which will enable the candidate to fulfil this requirement of the MPH programme.

- 2. To prepare a candidate for his learning and eventual production of his/her dissertation, two courses are conducted,viz:
 - (a) Computer Applications in Public Health (CAPH) this course which is conducted within the first two weeks of the MPH programme allows the candidate to acquire computer skills in word-processing, data-base operations, graphics, statistical operations etc. These skills are required when the candidate begins to prepare for the dissertation.
 - (b) Community Research Methods (COMRM) this course begins before the CAPH course finishes. It serves to expose the candidate to the sequence of work which has to be carried out when engaged in researching, investigating and reporting on a health or health-related problem. It demonstrates to him/her what has to be done in the production of the dissertation. In conjunction with this course, a number of presentation sessions are held to enable candidates to present their problems selected for study and the methodology chosen for its investigation. The staff and the class critique these presentations.

A comprehensive handout entitled "Dissertation Guidelines" is issued to the candidates for guidance and reference during the programme (qv).

3. It is accepted that all academic staff members of SPM have had experience in the production of a dissertation. Should a refresher be required, attendance at the COMRM course would bring one up to date as well as acquaint one with the house style of SPM. It is therefore a required function of an academic staff member to advise one or more candidates in this part of the MPH programme (the dissertation). 4. It is expected that the academic staff member will provide different guidance at each stage of the production of the candidate's dissertation. Thus:

Choice of topic The candidate's adviser is expected to discuss with him/her as to what will be a suitable topic to write on or problem to investigate.

Statement of problemAssist in formulation of a problemand title of disser-statement and a tentative title fortationthe proposed study and dissertation.

Review of literature Reinforce library search methods as taught by the Medical Library (eg the CD-ROM system). Advise on the preparation of bibliographic notes or database.

- Draft of introduction, Critique draft and advise for problem statement and improvements to get ready for proposed methodology possible presentation by candidate.
- Preparation of study Advise on suitability and for pracinstrument ticality of instrument. Critique and advise on conduct of field or data

Data collection

Write-up

Data compilation and analysis

Advise on suitability of tables and system of analysis in relation to objectives of study and depth of analysis required.

Critique of drafts and advise on improvements until required standard is reached.

collection phase of study.

5. An academic staff member will be assigned any candidate during the preliminary stages of the dissertation production process (up to the formulation of a tentative title). Up to this stage, academic staff members act as **temporary advisers** as until then, it will not be possible to ascertain what topics may be selected by the candidates. Once the topics or titles are formulated, it will be possible to assign academic staff members candidates who intend to study topics similar to the specialty or interest of the particular staff member. It may not be possible to assign exactly staff members whose interests/specialty coincide with those of the candidates and staff may have to be advisers to candidates who wish to study topics with which the staff member may not be completely familiar. In such an event, it is the responsibility of the staff member to advise the students to consult with other colleagues within SPM or with other clinical or basic science colleagues in the Faculty and/or in other relevant outside agencies. However, the ultimate responsi-bility of the supervision of the candidate's dissertation still lies with the assigned adviser.

- 6. A matter which often poses a problem seems to be the appropiater choice of a topic to study. Candidates either propose topics which are too wide or too narrow. On the one hand a wide topic may not be feasible due to time and resource constraints and a narrow topic does not offer enough "meat" or substance to produce a dissertation (as different from a research article or paper). In principle, a topic selected for study should answer the following questions:
 - What is to be studied ?
 - How is it to be studied ?
 - What is found after the study ?
 - So what ?

The last question prompts the consideration of the width, depth and usefulness of a proposed study and should be carefully examined.

Suggestions for topics can come from the candidate's own sponsoring agency which may have a particular problem which requires investigation for which the agency itself is not able to conduct perhaps due to lack of time or staff. This source of topics should be carefully explored.

- 7. Since it is the function of an academic staff member to critique and advise on all stages of the dissertation process, it is necessary to review what should be looked for when engaged in critiquing a written draft. The following could be used as an abbreviated check-list for this evaluation process:
 - General criteria
 - Accuracy of report
 - Complete and verifiable
 - Readable and logically presented

Specific criteria

- Title

- Summary
- Introduction
 - Problem statement
 - Justification for study
- Review of literature
- Hypothesis statement (if applicable)
- Methodology
 - Study design
 - Subjects/sampling
 - Instruments
 - Actual procedure
 - Limitations
- Results
 - Clarity
 - Logical presentation
 - Tables construction
- Discussion/conclusion
 - Addressing of the problem stated
 - Conclusions warranted by results ?
 - Overgeneralisation ?
 - Recommendations practicality ?
 - Bibliography/references
 - Completeness
 - Uniformity of citation

The above criteria serves to guide the focus of attention of the staff member when reviewing or evaluating the drafts submitted by their candidates.

ANNEX C gives a scheme for editing and evaluating the final draft submission prior to binding and submission for the final examination.

8. About 5 weeks before the final examination, the dissertation is to be submitted for its final evaluation. The actual dates are given in the Dissertation Guidelines issued to the candidates at the beginning of the MPH programme.

It is the responsibility of the adviser to ensure that his/her candidate(s) hand up the dissertation(s) on time. If for any reason the candidate lags behind in response to the schedule, the adviser must inform the Head as early as possible so that suitable action can be taken.

While the task of advising the candidate and ensuring that his/her dissertation is "up to standard" is the responsibility of the adviser, the final evaluation of the dissertation is made by a panel of two academic staff members who are not the adviser of the particular candidate. A schedule for this process is made by the office of the Head. 9. Both the academic staff members in the panel for any one dissertation will read through it and evaluate it using the criteria as suggested in ANNEX C. They will each give a percentage mark and when both have finished, they will submit their marks to the office of the Head where all the marks will be listed and averaged for each dissertation.

In the event that there is wide disparity between the marks given by the two members of the panel, a discussion will be held to discuss the matter and a decision will be made after the discussion. The Head will chair this discussion. Examples of "wide dispartity" in this context will include:

- a. one member of the panel giving a fail mark whilst the other gives a pass mark
- both members of the panel give pass marks but one member has given a distinction mark whilst the other has only given a pass (see scheme on Page 8)

Should there be revisions or corrections required, the adviser will be consulted and depending on the time available and/or the extent of the revisions required, a decision will be made as to whether to inform the candidate or to wait until the final examination is over.

- 10. The above is a general description of the internal evaluation system for dissertations. When the external examiner arrives, all dissertations will be given to him/her for an external evaluation. After he has decided on his marks for the dissertations, his mark list will be compared to the internal mark list for obtaining a final average mark which will be the score to be entered as the index of a candidate's performance in the dissertation component of the final examination.
- 11. It is expected that the candidate will be asked questions regarding his dissertation during the viva voce part of the final examination.
- 12. Academic staff members are advised to use the Dissertation Guidelines as a reference document when advising their candidates. It would also be useful to refer to ANNEX C of this handbook during the process of critiquing or evaluation.
- 13. It is suggested that academic staff members encourage their candidates to summarise and publish their dissertations as articles in local journals if of sufficient standard. The staff member could assist in this by helping to summarise and polish the paper so produced. It is then the responsibility of the candidate (now graduated) to obtain permission from the agency from which data was gathered to publish the paper. It is also possible for the staff member to be cited as a second author of the paper and gain credit indirectly.

_____ 8. FIELD WORK MODULES ____

1. The objective of the field work component of the MPH programme is to allow opportunities for the candidates to view the application of theory on to practical programmes in the community for the preservation and improvement of health status. It also affords opportunities for the candidates to discuss practical problems of implementation with officers who are practising in the field.

Apart from this overall objective, each field work module has its own particular objectives depending on the actual subject being covered by the particular module. Certain field work modules cover a number of subjects (eg the Singapore Module covers mainly the environmental sciences together with family health, health education, and parts of management).

- 2. The field work modules are outlined on pages 5, and 10 11.
- 3. For the field work modules in Malaysia and Singapore, it will be necessary for a candidate to fill a "field visit report (FVR)" form (ANNEX D). The instructional objective of this form is to allow the candidate to record relevant features of a particular visit and to think about the good and bad aspects of the visit health-wise. If the visit concerns the briefing of a particular programme, it is expected that the candidate will have considered the applicability of the programme in his /her district and the reasons why? The form will also contain details of the plant, institution or programme as well as the briefing officer, so that in future should the work of the candidate requires him/her to contact the plant or institution, he can do so easily.
- 4. The filled FVR form should be submitted to the candidate's dissertation adviser for review as a means of checking on the attendance as well as whether the candidate has indeed thought over the various aspects of the visit.
- 5. The District Health Services Study (DHSS) is conducted in conjunction with the undergraduate programme of the same name. The MPH candidate will have the experience of supervising a group of students as well as critically looking and reviewing the health services management system in the district to which they are assigned.

Evaluation of the candidate in this module will be done by the Academic staff member who is assigned to the particular district as to whether the candidate has adequately used his/her time in the district to fulfil the objectives of the DHSS in so far as MPH candidates are concerned. It is expected that any poorly performing candidates (eg absent from station, not supervising candidates, not conducting the evening information exchange meetings etc) will be reported to the Head of department.

- 6. It is expected that the candidate will maintain a file of his FVR forms after these have been reviewed by his/her adviser. This file will then function as a directory for his future practice when necessary. Academic staff are expected to reinforce this with their candidates.
- 7. In all field work events, it is necessary that the candidates be clear as to the objective(s) of the event and should then learn in the appropriate manner. Academic staff also have to inform the candidates regarding this and reinforce it in the field where possible and necessary.

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9. THE EVALUATION SYSTEM _____

1. The evaluation of a candidate in the MPH programme has been referred to in the following sections:

Page 6 - 8 University of Malaya Examination (Master of Public Health) Regulations (Amended 1991)

Page 11 - 12 Programme Content - Evaluation System

Page)	Coursework
Page	18)	Paras 2(c) and 5
Page	21 -	23	The Dissertation Paras 7 to ll

- Page 24 25 Field Work Modules Paras 3 to 5
- 2. However, in the preparation for the final summative evaluation (or the final examination) a number of actions have to be taken long before the examination itself. The following is a chronological sequence of these actions assuming that the MPH programme begins in January and the final examination is in December.

JANUARY	Programme begins	Master list of candidates prepared; electronic recording tables (Lotus- based) prepared; indivi- dual result information sheets prepared;
		Programme schedule and dates for final examina- tion confirmed.
MARCH		External examiner selection
МАҮ	DHSS Field Work module	Preliminary invitation to external examiner for his availability.
JUNE		Proposal for external examiner to Faculty

Approval by Senate AUGUST Formal invitation by University SEPTEMBER Call for guestions DECEMBER Programme ends Arrival of external Final examination examiner.

- The roles of the academic staff member in the final examin-3. ation are as follows:
 - For the Coursework component (25% of the final examina. ation marks), all formative evaluation systems associated with their own courses have to be completed at least three weeks before the final examination to allow for master compilations to be made.
 - For the Dissertation component (25% of the final examinb. ation marks), each staff member will be required to read about 5 to 6 dissertations and to score them according to the criteria agreed upon. This will have to be done at least one week before the final examination.
 - For the Written Papers component (50% of the final examc. ination marks), the following tasks will have to be carried out:
 - (1)Setting of questions. The four papers in this component of the examination contain different styles of questions, thus:
 - Paper 1 Multiple choice questions. This enables specific gueries on a broad front covering most topics. This sacrifices width for depth. It tests mainly recall and discrimination.
 - Paper 2 Short answer questions. Some 20 to 25 topics can be covered in this paper and will test recall and some ability to explain important terms used in public health.
 - Paper 3 Essay questions. Some 5 to 6 questions will be set and this allows the candidate to demonstrate his ability to compile and synthesize answers. Thus questions will require topics which cuts across subject areas.

JULY

* * *

Paper 4

Problem-solving questions. This paper attempts to test the ability of the student to solve a problem posed by a problem scenario. In this (apart from perhaps the question of biostatistics) there may be no one correct answer but will depend on the way the candidate solves his problem. Questions in this paper will also essentially be across different subjects.

The setting of questions will involve all academic staff involved in teaching the MPH programme. As it is imperative that a wide choice of questions be available for formulating the final papers set, staff are expected to set as many questions as they can. A staff member is not confined to his/her own interest/specialty area when setting questions.

A number of question-vetting-and-choosing sessions will be held until the final papers are set and agreed upon. From then the draft paper is typed onto a diskette and a final version is vetted at a final meeting some two weeks before the examination. A hard copy of the final agreed version is then produced for printing at the Dean's Office. This operation is supervised by a senior academic staff member. The papers are then sealed and locked in the Dean's Office until the morning of the examination for a particular paper.

(The external examiner is invited to submit questions based on samples of past papers sent to him early on in the procedure. His/her questions will also be reviewed during the meetings above and may be included in the final paper.)

- Needless to say, SECRECY is to be maintained absolutely throughout this whole procedure.
 - (2) Invigilation. Academic staff members are required to function as invigilators for the final examination. At least two will be required for each paper. Separate regulations for invigilators are formulated for them by the University. These will be issued to each invigilator together with a time table of their sessions. These rules are to be strictly adhered to and any irregularities must be reported in writing (for which forms are available in the examination hall).

(3) Marking of answer scripts. Academic staff members will be assigned answer script marking responsibilities. These usually follow the interest/specialty lines although it may not always be possible. Blank index number lists are supplied for entry of marks for eventual entry into the master mark sheet. Two examiners will be assigned to mark the answer scripts to a particular question.

A system of double-blind-open marking is followed where each examiner will mark the scripts independently. After both have marked their scripts, the mark lists are compared. Since an open marking system is followed, an answer can be scored a zero up to the full marks (thus an answer to a 20-mark question can score 0 to 20 marks). Any discrepency of more than 3 marks out of 20 (15%) between the examiners is dicussed and a compromise mark is then given. The rest of the marks are averaged and a final mark list for the particular question is prepared from this.

As the scripts are marked and mark lists become available, the scripts are arranged in descending order of marks. These are handed (question by question) to the external examiner who will sample the papers to check for consistency of marking (ie the good answers get good marks and poor answers get poor marks consistently). He/she may adjust the final mark list if it is felt that marking has been overly strict or lenient.

A final master mark list is prepared which will contain scores from all components of the final examination. From this lists are prepared for the viva voce examination and a schedule for attending the viva voce is announced to the candidates.

(4) Viva voce examination. All academic staff members are expected to attend this examination. The examining panel usually consists of the External Examiner, the Head of Department, one associate professor and one lecturer. The External Examiner will start the examination and may usually be followed by the Head. The other examiners in the panel may ask questions if there is enough time (a candidate is usually scheduled for about 20 - 30 minutes). The associate professor and the lecturer will take turns at the various sessions to ensure that as many of the staff are given an opportunity to examine in and to observe the conduct of the viva voce examination (especially for the more junior staff).

(5) Board of Examiners. When all examinations are complete, all marks have been tallied and the results are tentatively reached at the Department level, the External Examiner, the Head of Department, and one or more senior staff members will attend a Board of Examiners meeting chaired by the Dean of Medicine. The results are presented and the meeting will finally decide on the pass/fail result of each candidate.

A special meeting of the Faculty Board is called to receive these results as soon as possible after the meeting of the Board of Examiners. These results are not official until the Faculty/Faculty Board has approved them and are subsequently endorsed by the Senate of the University.

- 4. The final examination is viewed by the University, the Faculty and the Department as the most important event in the conduct of an educational programme, in this case the MPH programme as it is the penultimate certification process. As such, all academic staff members are required to take this event in its proper perspective. They are expected not to be on leave and to be on hand to assist in every way possible. It is on the final examination that the credibility of the Department depends.
- 5. It has been stated that the evaluation system of the MPH programme consists of a formative part and a summative part (page 11 - 12). Academic staff members are expected to play their defined roles in these evaluation procedures so that the final examination becomes a proper evaluation of the candidate's abilities.

_____ 10. GENERAL POLICIES _____

(AND OTHER POST-GRADUATE MEDICAL PROGRAMMES)

- 1. The Master of Public Health (MPH) programme is one of some 13 post-graduate medical programmes at the master's level conducted by the various academic departments of the Faculty of Medicine, University of Malaya. At times some of the clinical master's programmes require assistance from the Department of Social and Preventive Medicine (SPM) in conducting short courses for these programmes, particularly in subjects like biostatistics and epidemiology. A number of general departmental policies have been laid down so that SPM can give such assistance and yet not be over-committed in terms of time, manpower and expertise so that the programmes of SPM itself become affected in structure and quality.
- 2. The above stated policies/guidelines are as follows:
 - (a) When another academic department requires assistance from SPM to conduct a course for its post-graduate (master's) students, it will in the first instance communicate in writing to the Head of SPM requesting such assistance and stating at least the following in the request:
 - title/subject of instruction required
 - terminal instructional objectives
 - brief outline of the contents
 - evaluation system required, and
 - time frame for instruction to be completed.

[The above is necessary as both SPM and the requesting department need to be clear as to what is required and to what depth. It is felt that unless the above is done, both departments may not achieve the aims of either.]

(b) Upon receipt of the above request, the Head of SPM will refer the matter to the senior-most academic staff member of the relevant interest group in the department for consideration. If the interest group feels that it is possible and will not be over-committed, then it will minute this to the Head who will then communicate in writing to the requesting department suggesting further discussions and confirmation with the senior staff member of the particular interest group. The instruction required is then formalised along lines of coursework in the MPH programme and the course is conducted within a mutually agreeable time-frame. Copies of instructional materials/unit structure sheets (ANNEX B) which may be issued to the participants should be sent for filing in the MPH programme section (currently Mr. Ong).

- (c) It has been the experience of SPM that some clinical departments tend to request instructional assistance to fit their own schedules; requiring similar instructional sessions be repeated several times. This is not acceptable to SPM as it is a waste of curriculum time. If several departments request such assistance for similar contents, SPM will determine a time-slot for the conduct of the proposed course to its (SPM) convenience. It is to be noted that SPM does have its own commitments to the Faculty's undergraduate and its own post-graduate instructional programmes.
- (d) It is necessary that assistance of this nature must be documented both for the records of the department as well as to ascertain the extra-departmental work of a staff member in view of the staff performance appraisal now administratively required.

These policies/guidelines apply both to requests from internal (ie Faculty) academic departments as well as to requests from other Faculties of the University and other outside government or private agencies.

(e) It is recommended that should any request for instructional assistance be received from an organisation external to the department, discussions should be held between the staff member concerned and the Head before any reply be given to the requesting organisation. = 11. END-NOTE =

The rules, guidelines and policies contained in this manual for academic staff in the conduct of the Master of Public Health (MPH) programme of the Department of Social and Preventive Medicine (SPM) serve as a reference point to guide the actions to be taken in a particular situation.

It is felt that such a document will allow new academic staff members to understand the philosophy and work-schedule of the MPH programme. It will also serve to remind senior staff of the steps to be taken in a routine procedure which, over time, may have be taken for granted and short cuts, detrimental later to the programme, may have been taken unwittingly.

This compiled manual does not and cannot cover all situations and all eventualities which may arise in the MPH programme. In the event that such a situation arises, consultation and discussion at the interest-group and/or departmental level will have to be carried out to solve the problems associated with the particular situation.