



School of Public Health
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UNIVERSITY OF CAPE TOWN
IYUNIVESITHI YASEKAPA - UNIVERSITEIT VAN KAAPSTAD

Master of Public Health

Programme Brochure: 2026

Welcome to the Master of Public Health Programme at the University of Cape Town.

The School of Public Health is a multidisciplinary department in the Faculty of Health Sciences. We are committed to the concept of a healthy population having equitable access to resources and highly competent health care professionals to achieve a better quality of life. Our guiding values include openness, social engagement, mutual respect, social justice and lifelong learning.

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INTRODUCTION

This brochure provides details for students regarding specific aspects of the UCT Master of Public Health programme. It also may be used to assist prospective candidates in deciding whether the UCT MPH programme suits their needs.

A coursework plus dissertation MPH has been offered in the Faculty of Health Sciences since 1999. It is offered as a multidisciplinary Public Health degree and is based on established strengths at UCT, resulting in an emphasis on Epidemiology, Health Economics, Health Systems & Policy, Social & Behavioural Sciences, Environmental Health, and Global Surgery. Degree candidates from a variety of backgrounds will acquire knowledge and skills to assist them to contribute towards an effective and equitable health system based on population- and individual-level approaches.

There are six specialisations/tracks: Epidemiology, Health Systems, Health Economics, Social & Behavioural Sciences, Environmental Health, and Global Surgery (previously Community Eye Health). Each of these has its own course requirements though requirements and electives overlap considerably across tracks.

The programme is taught as a series of **semester length in-person courses** (sometimes called **modules**) - some of which are compulsory for the degree and others elective. In South African universities the first semester runs from February to June, and the second semester from July to November. The flexible course structure enables collaboration with different departments at UCT and other institutions.

- For all tracks other than Health Economics, candidates will need to complete **10 courses (some core/compulsory, some elective) plus a mini-dissertation**, achievable in approximately 2 years of 'full-load' study or 4 years of 'partial-load' study.
- The Health Economics track candidates will need to complete **8 courses (some core/compulsory, some elective) plus a minor-dissertation**, achievable in approximately 2 years of full-load or 4 years of partial-load.

Some specialisations have pass mark minima on certain courses within the track required for progression to higher level courses. Some courses have pre-requisite courses (i.e. you may not register for that course until you have passed another course, sometimes with a pass mark minima).

Background and degree objectives

What is Public Health? Public Health is the collection of disciplines that seek to promote health and prevent morbidity and mortality, using a population or community as the unit of understanding and intervention.

This is in contrast to other disciplines in the health sciences that may focus on the individual patient, or even the organ or organ system, as the primary focus. This is also in contrast to other disciplines in the sciences or humanities that focus on the population or community but may have a less explicit intention of ameliorating health states. As part of this, there is a strong emphasis in public health on understanding the individual psychosocial, socioeconomic, environmental and structural determinants of health, in addition to biomedical understandings.

In Public Health, major areas of activity include:

- the *measurement and analysis of states of health* (including disease, injury and well-being) at an individual and population level;
- the *prevention of disease and/or promotion of health* in individuals/groups of people through a variety of activities;
- and the *fostering of equity, efficiency and effectiveness* in the provision of health care services and in health systems more generally.

Importantly, Public Health does not focus on a single set of diseases but can encompass the range of health conditions and health-related behaviours that influence morbidity and mortality at a population level. In addition, the epidemiological and biostatistical concepts and methods can also be applied to address clinical questions regarding the aetiology, presentation, management and course of disease.

Target candidates

The UCT MPH programme was originally developed to help professionals already on career paths to advance their skills, opportunities and effectiveness in their current or future positions. In addition to academic and work history, the selection process places value on experience in public health related (or clinical) work.

In the past, successful candidates have included:

- Individuals interested in different aspects of health-related research and/or service delivery, including clinical researchers and environmental health practitioners;
- University graduates in Medicine and in the Allied Health Sciences wanting to broaden their skills and fill roles beyond professional boundaries, or to develop specific research skills;
- Non-health science graduates, e.g. from the physical and biological sciences; social sciences; commerce; journalism and media; engineering; and/or environmental sciences, who want an entry point into the health sector and/or to strengthen their activities in their own disciplines;
- Health sector managers and health professionals responsible for running health programmes or services, for whom a public health perspective is important.

Non-degree candidates

Individual courses are open, subject to limitation on numbers and candidate suitability, to students from other postgraduate degrees at UCT as well as to individuals who want single-semester courses, not for degree purposes. Such **non-degree candidates** may register for a maximum of **three courses** per year and must pay full course fees.

Prospective non-degree student will need to apply online before the start of each semester and *also* complete the non-degree application form which can be received from the MPH administrator (mphadmin@uct.ac.za). Each course that is applied for will be individually assessed by that course convenor. Entry will depend not only on suitable entry requirements, but also on factors such as availability of space in the class that semester.

Thinking you will move from some non-degree MPH courses to the MPH degree?

Non-degree candidates routinely apply for entry into the MPH degree programme and, if accepted, transfer course credits towards the full degree.

Only 50% of the coursework component taken as a non-degree candidate can be transferred into the MPH.

You would still need to apply to the MPH programme via the usual portal, by the advertised deadlines, and submitting the usual documentation.

Acceptance into the MPH is still assessed against entry criteria, including good performance in the courses taken as a non-degree candidate (usually 65% average).

Perspectives and skills

Perspectives emphasised in the MPH programme are:

- An appreciation of diverse, population-based approaches to thinking about human health and its determinants, as well as health services and health systems;
- An ability to ask focused questions related to health and disease in individuals and populations, as well as to apply critical thinking and conduct high-quality research to answer such questions;
- An ability to use evidence in different forms to inform different types of interventions to improve population health;
- An appreciation of the social, environmental and economic determinants of health and health services;
- An appreciation of the goal of achieving greater equity in health, health services and systems development; and,
- Scholarship that helps to address real-world problems.

In addition to track-specific skills and abilities, cross-cutting attributes that the programme seeks to promote across courses and tracks include:

- Critical thinking and problem-solving skills
- Creative thinking and innovation
- Ability to work in teams and adapt to diverse health concerns

- Academic and scientific communication & leadership
- Engagement with and responsiveness to societal issues.

Outcomes

Across tracks, graduates should emerge with certain generic skills and perspectives, including: population, interdisciplinary and systems thinking on health and health care; different kinds of research skills; an understanding of the political, economic, environmental and cultural basis of health determinants, health services and health policy; the ability to critically evaluate evidence related to health and health care; the ability to translate evidence and research findings for policy making; and the ability to advocate for specific health-related policies or practices.

Graduates could be employed in any sector with health functions, including but not limited to health services or related organizations (whether in the public or private sector), academia, research, finance, labour, community-based groups and non-governmental organisations. While the focus of the UCT MPH is on strengthening the public health workforce for South Africa and the continent, increasingly careers in public health are international in scope.

In such jobs, graduates would perform functions with a population, systems or organisational focus, including: setting up, managing and/or supporting health-related services or programmes; developing health-related strategies and/or policies; evaluating health services or programmes; carrying out and reporting on health research; and/or conducting training and support related to health promotion and health care. Some graduates entering the programme from clinical backgrounds will continue to provide clinical services with greatly enhanced research and population perspectives. Others may build on skills learned to pursue a career in research or academia.

CURRICULUM REQUIREMENTS AND ORGANISATION

University and programme rules

Students should always refer to the University handbooks for specific program rules – in particular the Health Sciences Faculty Handbook, and the Fees handbook for that year. <https://uct.ac.za/students/study-uct-handbooks/handbooks>

Time, attendance and location commitment

The programme is classified as a 'full time' degree – but may be taken with a 'full load' (e.g. taking all courses in one year), or a 'partial load' (e.g. spreading courses out across four years). The decision on what load to take is highly dependent on what else the student has happening in their life (work, family etc), and what level of academic literacy they have when first registering. Students decide on what load they can handle each year, in consultation with their *track convenor*.

The UCT MPH is a face-to-face programme, and students need to be present in Cape Town for the courses – while the mini dissertation can be done remotely. Courses and other learning activities expect regular attendance at face-to-face meetings in Cape Town. *Candidates may choose to undertake the programme while living outside of Cape Town but take responsibility for being appropriately present during required learning activities - as **this is not a distance learning degree**.*

MPH courses have a 60% minimum attendance rule – which means that if more than 60% of classes are missed, the student is not cleared to write the exam.

The formal commitment for the degree is a minimum of 1800 'notional hours'. Note that these are notional hours, and do not necessarily reflect actual time commitments involved which may be more or less in different circumstances.

Epidemiology, Health Systems, Social & Behavioural, Environmental Health, and Global Surgery Health tracks:

- Classroom/Practicals: 320 hours (~ 32 hours per course);
- Formal assignments, reading, course project work: 880 hours (~88 hours per course outside the classroom);
- Mini-dissertation: 600 hours (at a minimum, or ~4 months full-time for the entire mini-dissertation process, noting that this is often spread out over a longer period).

Health Economics track:

- Classroom/Practicals: 260 hours (~32 hours per course);
- Formal assignments, reading, course project work: 700 hours;
- Minor-dissertation: 900 hours (at a minimum, or ~ 6 months full-time for entire minor dissertation process)

Completion in four years: The distinction between full-load and partial-load is flexible and based on the number of modules taken per semester and thus the overall time required to complete the degree. Whether full/partial-load, the University expects that the degree will be completed within *four years*. A fifth year of registration can be motivated for but is not guaranteed. Anything further requires special dispensation from the Faculty.

Attendance: All students, whether full/partial-load are required to attend the modules for which they are registered and complete all assignments on time and in full.

- *Full-load students:* typically take 4-5 modules per semester, expected to complete the degree in 18-24 months.
- *Partial-load students:* typically take 2-3 modules per semester, expected to complete the degree in 3-4 years.

Attendance at face-to-face learning activities is mandatory. Students should always inform the module convenor if they are going to be absent for any part of a course or learning activity.

Anyone missing 60% of the teaching time will not receive a DP (Duly Performed) confirmation, in order to continue with the exam. Candidates should plan travel, conference attendance and private schedules accordingly. This is a program rule and is not negotiable.

Students should also ensure that the examination weeks are kept free of any competing engagements.

Students missing sessions must make their own arrangements to obtain material they have missed.

Semester timetables should be consulted well in advance. These are posted on Amathuba and the School website.

Punctuality and lecture courtesy

Please be seated with your notes open by the advertised starting time. It is disruptive to have people walking in once the session has started. All cell phones should be switched off or on silent during sessions. Eating in lecture rooms is not permitted. Please always inform your course convenor if you are not able to attend a session.

Availability of course materials

All course convenors provide detailed materials suited to their course.

- All registered students will have access to a detailed course outline at the start of the semester
- For courses which require preparatory reading, it is the student's responsibility to complete this in their own time before class – and they might be required to download preparatory materials from the course site, or from open access platforms.
- Lecture materials from class will be provided for all courses – usually either powerpoint slides of lectures, or in some cases recordings.
- Please note that all curriculum materials (lecture slides or recordings) are the property of UCT, and may not be loaded online or shared more widely by any student. They are intended for revision by registered students only.
- Students are not permitted to record lectures themselves (e.g. via their own phone or recording equipment), without written permission from the course convenor.

Entry requirements for applicants to the programme

There is a high demand for this degree. The final decision on admission of degree candidates is made by a selection committee made up of programme and track convenors.

The *minimum* requirements for entry are as follows (noting that the number of applications received each year greatly exceeds the number of positions available):

- An appropriate *4-year* Bachelors or Honours degree, or any degree recognised by the University Senate as equivalent;
- Evidence of adequate quantitative, language and critical thinking skills as judged by the selection panel;
- A recent formal test of English proficiency is required of applicants from non-English speaking countries.

English language proficiency: English Foreign Language (EFL) or Foreign Permanent (FP) applicants whose primary language is not English are required to submit one of the following:

- See <https://uct.ac.za/students/applications-admission-requirements/language-requirements>
- A recent score of at least 570 (paper-based TOEFL test) or a score 230 (computer-based TOEFL test or a score of 90 (Internet-based TOEFL test). A recent test is a score obtained within 3-5 years before applying for admission to UCT.
- A recent overall band score of 7.0 (with no individual element of the test scoring below 6.5) on the International English Language Testing System (IELTS).

Diversity of backgrounds: Candidates with training other than in the health sciences, e.g. biology, environmental sciences, law, psychology, anthropology or statistics, are strongly encouraged to apply for admission. Course combinations and teaching will to some extent take this diversity of background into account.

Numeric and writing skills may be tested before and/or after admission for diagnostic purposes. Teaching assistants are available in some courses but candidates with deficiencies in numeracy and/or writing skills may be requested to seek additional tuition at their own expense. The University also provides writing skills support, and candidates may be referred to the UCT Writing Centre after assessment of their written English.

Registration: All participants, including non-degree candidates, or candidates for other UCT degrees, must register and pay fees for every course. Individuals may not “audit” courses, i.e. may not sit in for non-examination purposes. The only exception to this is PhD students registered in SPH in the year in which they would like to take a particular module.

Note that all applications to the UCT MPH must go via the University’s central admissions process, completed online: <https://health.uct.ac.za/home/pg-eligibility-and-process>

Degree structure

The building block of the degree is the *course* (also called a *module*): a self-contained one-semester course, which might require pre-requisite courses to be completed. The degree consists of 10 courses (or 8 for the Health Economics track), including *core/compulsory* and *elective* courses, plus a research-based mini/minor-dissertation. Each course consists of approximately 32 classroom hours, plus approximately 88 hours of independent reading, studying and assignments.

Most courses are offered annually. The University reserves the right to cancel any course if there is insufficient demand, or to change the timetabling of any course. Numbers for a course may also be capped in certain instances, for example, to prioritize students for whom a given course is *core* over those for whom that course is an *elective*.

Courses consist of a set of 2-hour lectures, sometimes twice a week. [Please note, that as of 2025, the two-week teaching blocks have been removed]. Each course will publish their specific attendance requirements.

The semester sessions for each course take place weekly on Monday–Friday during the semester. These two-hour semester sessions are usually held either from 10:30-12:30, 13.30-15.30 or 16:00-18:00. Courses may be scheduled to other time slots and this will be communicated by the individual course convenors ahead of registration.

The MPH degree is suitable for students who are working on either a part-time or full-time basis. However, students who are working while in the MPH programme should clear attendance commitments with their employer in advance for the whole programme, including time required for study leave and examinations.

Graduation requirements, degree time limits and degree certificates

A total of 10 courses (8 in the case of Health Economics track candidates) successfully completed are required for the degree, plus a pass on the mini/minor dissertation. Upon graduation, the specialisation track is inscribed on the degree certificate, in parentheses after “Master of Public Health”.

Mini- and minor dissertations (more below)

The *mini/minor dissertation* is substantially shorter than the full-length dissertation that is standard in dissertation-only Master’s degree programmes.

- *Mini dissertation*: carries 33% of the weighting of the degree
- *Minor dissertation*: carries 50% of the weighting of the degree (currently for the Health Economics track only)

Candidates will be required to complete a mini/minor dissertation in a research area related to their track.

It is the responsibility of the candidate to find an approved supervisor, with the assistance of the programme and track convenors, within their area of interest.

To ensure appropriate support to students, primary supervisors must be drawn from the School of Public Health. External co-supervisors (i.e. non-UCT) may also be drawn from any appropriate tertiary or research institution. (See the end of this brochure for further details on the mini/minor dissertation).

The programme does not provide funding for research, although candidates may apply for such funding through any available channel.

Assessment of student performance

Each course convenor will determine the appropriate form of assessment in that module. Such assessment will consist of some combination of take-home assignments, semester projects and/or final examinations. Typically, the examination carries 50% of the assessment weight. The examination for each course will be written at the end of that semester.

There are generally two or three **assignments** per course, with hand-in deadlines; *extensions must be sought well in advance* of the advertised deadline. Penalties are determined by the convenor; some assignments may not be handed in late at all.

For all MPH courses, a pass mark of 50% is required overall, with a 45% sub-minimum on each of the examination and semester mark separately.

An **external examiner** is appointed for every course. The external examiner for each course retains the discretion to alter the final course mark based on assessment of the candidate's performance across the course as a whole.

Candidates may be allowed to repeat a course they have failed, at the course convenor's discretion. **No course may be undertaken more than twice.**

Where a candidate fails (a) any core course twice, or (b) any 3 courses, a recommendation will be made to the Dean to refuse the candidate further registration in the programme. This applies to both core and elective courses.

No supplementary examinations will be offered to candidates who fail a course. Candidates will have to repeat core courses they have failed. This may prolong the period of residence in Cape Town or extend registration.

The coursework and dissertation components must be passed independently. The dissertation will be marked by two examiners, both external to the university. The *highest* standard aimed for will be that of a manuscript potentially capable of publication as a single paper in a peer reviewed journal (although it need not be submitted for publication, nor be at the level of a peer-reviewed scientific publication in order to pass for the degree).

Deferred examination and access to examination scripts

Deferred examinations may be offered on medical and other grounds. For more detailed information, please see the UCT examinations site.

Applications for deferred examinations must be made timeously *before* the examination date.

Access to marked examination scripts will be provided based on the UCT General Rules and Policies Handbook.

No *supplementary* exams are allowed for coursework master's at UCT (e.g. re-writing an exam) only deferred exams on application.

Distinction rules

Rules for distinction are determined by the Faculty. At the time of writing, the MPH degree will be awarded with distinction to candidates who achieve a weighted average of 75% or above on coursework plus dissertation, with a 70% sub-minimum on each component (i.e. at least 70% for *each* course, and at least 70% on the dissertation).

Currently, the Faculty does not offer distinctions where module credit is being drawn from other university courses or from courses taken as a non-degree student.

Quality assurance

The UCT MPH strives to provide a high quality programme. Various approaches are taken to ensure the continued high quality of curricula provided, and of assessment and teaching approaches.

Each course will be evaluated by candidates using a standard anonymized questionnaire via the electronic teaching platform. Course convenors may hold open discussions during the semester to provide feedback. All student feedback is welcome and is considered highly valuable towards strengthening the programme and improving student learning.

The programme convenor will work with track and course convenors in considering evaluations, solving problems, and maintaining the coherence of the programme.

The programme convenor will also hold meetings with the whole MPH class from time to time. The external examiner for each course is asked to submit a report on the quality of the course and the examination.

In addition to the mechanisms described above, confidential feedback can be communicated to the programme convenor at any time.

Communication

Primary communication with students about a module will take place via email, with additional communications via Amathuba or in class, as arranged by the module convenor.

It is essential that the correct email address used by candidates appears on all lists. Please note that official communications are sent to students' UCT email addresses, and if a student is not using their UCT email address regularly they should arrange for an autoforward from their UCT email to their regular email.

It is the responsibility of the student to ensure that the programme administrator has all their correct contact details, including any change in email address or phone numbers.

Email communication, typically using Amathuba, will also be used for routine programme-, track- and course-level matters.

Taking outside electives

Students may take up to two courses outside the UCT MPH programme modules. These may be from other programmes at UCT, or at other academic institutions. Please note that such electives are not administered through the MPH programme. It is therefore the responsibility of interested students to obtain administrative information from the relevant department or University. Students must register and pay fees for these outside electives as required by the institution. There is no provision for fee transfers. Even in other UCT Faculties, the fee-credit ratio might differ – as might the semester start dates. Candidates must arrange for their marks to be communicated directly by the department offering the course to the programme administrator (including loading of a Faculty form).

Approval to undertake outside courses must be obtained *in advance* from the MPH programme convenor, who will check equivalence (e.g. 120 notional hours; suitable assignments and examination) and appropriate content. Additional approval may be required by the track convenor. Courses completed in the North American system must carry a minimum of a "3 semester credit" weighting at a Masters level. Courses taken without prior approval may be refused credit.

Attendance at a short course, even if a week-long in duration, is not sufficient - the course must be a university Masters-level course with appropriate summative evaluations of student performance.

Please note that the precise name of the externally taken course might not appear exactly on the UCT final transcript, and it will likely be a UCT 'equivalent' course listed there.

Please note that the marks of an externally credited course are not utilized as part of a degree distinction calculation (pass only).

Outside electives can be taken from offerings in other UCT Faculties and post-graduate programs; as well as from other universities. For example:

- UCT Graduate School in Humanities: <https://uct.ac.za/students/study-uct-handbooks/handbooks>
- School of Public Health, University of the Western Cape: www.uwcsoph.co.za

Credits and exemptions

(a) *Credits* towards the degree, or (b) *Exemption* (with substitution) from a core module, based on Masters-level courses passed elsewhere, may be considered on production of appropriate documentation to the programme convenor. Additional approval may be required by the track convenor.

For credits, such courses must have been undertaken as part of a degree programme at another institution but cannot have formed part of an obtained qualification. This criterion does not apply to exemptions, which are aimed at avoiding duplication of prior study and do not reduce the number of courses required.

Upgrading from an MPH to a PhD

It generally is not pragmatically possible to upgrade from a coursework masters such as the MPH to a PhD. This is because the application and decision to upgrade is usually initiated in the 2nd or 3rd year of *dissertation* research. Therefore, an upgrade from an MPH to a PhD would usually not work out because: a) the weighting and scope of the mini dissertation research is rarely sufficient to consider an upgrade to a PhD, and b) the timing for that application does not work out, as you would likely already be in breach of MPH duration rules (4 year max).

We encourage all our students who are interested in moving to a PhD – to complete the MPH mini dissertation as rapidly and confidently as possible, enjoy the walk down the graduation aisle, and then consider options to continue on their PhD journey.

Returning student registration

All candidates, new and returning, must register promptly at the beginning of each year. This is not discretionary. Continuous registration is expected of all students in the MPH programme: you must register for the degree every year from entry to graduation. The only exception to this is a withdrawal of registration, or a formal leave of absence (LOA).

- Failure to register in a timely manner every year (until graduation) may result in suspension from the programme and/or additional fees.
- Unregistered students will be asked to leave class – and may not request any supervision support.
- Even if the student is only undertaking second semester courses, they are still required to ‘activate’ their annual profile in February of that year (i.e. register for that second semester course in February).

If you are suspended for non-registration, readmission to the programme is by **re-application / re-admission**, and is not guaranteed. Said different, Students who break their registration for any length of time (had any year where their registration was not active) need to reapply to the MPH programme via the usual online platform, against the usual deadlines, submitting the standard application materials.

Any student who left the programme with academic conditions pending (e.g. requirements to complete certain components by a certain period), will return with the same conditions in place, updated to that year.

Dissertation registration: Candidates should only register for the dissertation in the year in which they will be working on it and receiving supervision.

- Candidates must pay the full dissertation fee at least once.
- No supervision may be provided to an unregistered student
- However, candidates may start framing dissertation topics and initiating conversations with potential supervisors in the year prior to registration
- Students must complete a *Memorandum of Understanding* (MOU) online when registering for the dissertation in February. This includes a description of the dissertation topic and a detailed agreement with the supervisor. It is not possible to activate your dissertation registration without the completed MOU in place. It is therefore important to conduct dissertation planning before dissertation registration (usually in November of the year prior). We recommend that students register for the dissertation only when they and their supervisors are confident that they will hand in the dissertation during the year.
- If registration for the dissertation is continued into a subsequent year, a *rebate* may be earned for early submission depending on the date of submission. A rebate means the student still pays the full dissertation fee at the start of the year, and then on completion of the examination process a portion of the fees are returned to the student. Please refer to the Fees Handbook for that year to confirm the exact dates for rebates in that calendar year. The rebate process requires that the student submit a form requesting the rebate online, it is *not* an automatic process.
- ‘Dissertation only’ students must register and pay fees in *every* year in which the dissertation remains uncompleted (however, if the dissertation has been submitted for examination – say in December, and is under examination, the student does not need to re-register in the next cycle– as they are provided ‘administrative

registration' status until the examination process is concluded. Should the student receive a 'revise and resubmit' result, they would then need to re-register.)

- For non-local students – it is possible to complete the dissertation while not resident in Cape Town (depending on the research topic). For international students, there is a form which gives students permission for this (and not to pay for medical insurance etc, as they are not resident and not requiring visa extensions). Please visit the IAPO website for more information.

For students who have completed coursework, then had a broken registration, wanting to return to complete the dissertation:

Students who are intending to register for the dissertation after a broken registration are required to submit a *complete draft of their research protocol* (see sections described below), that has been seen and approved by their track convenor and their potential supervisor(s) preferably at the time of re-application (October of the year before), but is required *prior* to re-registration.

Any student who left the programme with academic conditions pending (e.g. requirements to complete certain components by a certain period), will return with the same conditions in place.

Changes of curriculum

Changes to your registered curriculum are made by submitting an Application for Change of Curriculum form (ACA09) online. It is your responsibility to ensure that any changes are made before deadlines that might affect fees, or DP requirements (e.g. you may not change into a new course three-weeks after it has begun).

- Please ensure that your track convenor is aware of any curriculum changes before you make them online.
- Despite what the ACA09 form states, we strongly encourage students to ensure that the form is properly signed by course convenors and program advisors (your track convenor) *before* you load it to the system. Forms that are unsigned take significantly longer to be processed at Faculty level.
- Candidates who stop attending a course yet either do not formally withdraw or withdraw after the last date above will have an 'absent' recorded for that course in that year. An 'absent' (AB) mark is equivalent to a failure (F) in the programme and University. This will appear on the official transcript even if the course is later successfully completed in another year.

Switching between tracks/specialisations

It is possible to switch between tracks during the MPH – but acceptance of such requests is not guaranteed.

- You may only switch tracks once in your MPH career
- Switching tracks is *not* permitted on arrival in the first semester of registration for the MPH and will only be considered in the second semester after first semester marks are released (and might depend on your performance in certain courses there).
- Switching might require additional courses be undertaken to meet the new track requirements.
- Switching is at the discretion of the convenor of the track you would like to switch into – and will be reviewed with the same care as our application review process.
- Most tracks have careful limits on student intake, and some might have a passing rate requirement for introductory courses (usually at least 65% for the introductory courses for that track).
- Please negotiate track switching politely with both your current track convenor (who approved your intake into the MPH program), and the convenor of the track you would like to switch into. Only *after* you have their approval should you submit a service request for a curriculum change on Peoplesoft (ACA09).

Withdrawal of registration

Students or their parents/guardians must give notice of intention to discontinue studies in writing by completing the Cancellation of Registration Form (ACA08) and submitting this online.

The deadlines for rebates on fees for first and second semester courses are advertised in the annual Fees handbook <https://uct.ac.za/students/fees-funding-fees/fees-handbook> - and are also advertised via the MPH Amathuba site. These dates will be strictly adhered to. Any fees owing are due immediately on cancellation of studies. No reduction in fees will be granted if the notice of intention to discontinue studies is received by the Faculty office after these deadlines.

Leave of absence

A postgraduate student is required to have unbroken registration across a year of study until graduation and cannot merely themselves without Faculty approval. Should a *Leave of Absence (LOA)* be approved by the Deputy Dean: Postgraduate Education, on recommendation of the programme convenor and HOD, this will be valid for up to one year only.

- To apply for an LOA the student must complete and submit the Postgraduate Leave of Absence form (ACA38) - setting out the circumstances, and attach substantiating documentation.
- If the student is applying on medical grounds they will need a medical certificate. Members of the staff in the Student Wellness Services do not have discretion to grant LOAs. While a member of the Clinical Staff (or the student's own doctor) may discuss an LOA with the student as part of managing his/her condition, they may not request or instruct the Faculty to grant the LOA. They may only provide a medical opinion.
- The LOA application is a confidential process between the student and Faculty Manager. It is important to inform your track and MPH programme convenor of the basic circumstances, so they can provide the appropriate supporting information to the LOA application.
- *Retrospective leave of absence is not granted.* In such cases, full payment of fees for any 'missed years' is required before re-registration.
- When a student is granted a prospective LOA – they are entitled to a fee rebate, depending on the date and period for which the LOA is granted. Please refer to the Fees Handbook for the exact dates in that year (Rule G.16)
- Students granted an LOA do not have access to university resources such as university libraries – and should not request/expect supervision support during this time.
- When the student is ready to return to studies, they should complete and submit the *Application to Return from Leave of Absence* form (ACA43) timeously to have their profile reactivated.

Academic Misconduct: including plagiarism and use of AI

The University has strict rules against academic misconduct, including plagiarism (e.g. presenting the work of others, including fellow students, as one's own without acknowledgement). This includes re-presenting text from written or electronic sources (e.g., the internet or utilizing AI tools inappropriately) without attribution.

The subject of plagiarism, and how to avoid it, will be discussed at the beginning of the programme and at regular intervals thereafter. Candidates will be expected to submit signed declarations with all written work.

Minor offenses may be handled internally, and result in a mark reduction or failure of a module (zero credit). More serious offenses such as unacknowledged use of AI to write assignments, copying from another student, or plagiarism in an exam or dissertation, will result in immediate escalation to the Faculty Academic Misconduct Committee (AMC) – and may result in serious disciplinary outcomes, such as expulsion from the MPH programme and the University.

All incidences of academic misconduct will be marked on the student record – and may result in a course failure, loss of financial support and/or expulsion. Convictions for plagiarism are endorsed on academic transcripts.

The use of AI in MPH classes and assessment

The rapid evolution of AI tools for research and writing support has created a challenging and rapidly evolving environment for learning. We will address the use of AI resources in the MPH orientation – and students will be required to sign a declaration acknowledging this matter. Text editing tools are also considered to be an AI tool.

Your course convenors will communicate with you what the specific rules are for use of AI in each course.

- Some courses allow the use of AI (e.g. for editing or grammar correction purposes), but would always require the student to *acknowledge* what AI was utilized and in what way
- Some courses do not allow any use of AI, and consider this a form of academic cheating/misconduct

It is the student's responsibility to confirm whether AI is allowed for each course, and to be aware of current rules.

GENERAL INFORMATION

Fees

See the latest University Fee Handbook for up-to-date fee information: <https://uct.ac.za/students/fees-funding-fees/fees-handbook> (this is an important handbook which is updated annually with fee structures and deadlines).

The University's course-based fee structures will enable students to accurately calculate the cost of their studies at UCT. Students can use the course codes listed in this document to look up the all-inclusive cost of the degree in the fees handbook. The sum of these costs will give the total cost for the set of chosen courses per semester and per year.

All students from outside South Africa or other Southern African Development Community (SADC) countries should refer to fees for international students in the Fees booklet on the website above.

All students will be billed in South African Rand regardless of the country of origin. For students who are not from SADC countries, an 'international fee' called the *International Term Fee*, will be charged in addition to standard registration fees. Both the International Term Fee plus the individual course based fees must be paid prior to registration. The full annual International Term Fee is charged even if registration commences in the second semester.

Financial Assistance

Information regarding scholarships and bursaries is available on request from the Postgraduate Centre and Funding Office: <https://uct.ac.za/students/fees-funding-postgraduate-degree-funding/postgraduate-degree-funding-overview>

Tel: +27 21 650 3629 Fax: +27 21 650 4352 Email: pgfunding@uct.ac.za

There are a number of University-administered Master's level scholarships for which both entering candidates and those already in the programme may apply. Deadlines are typically six months to one year in advance. Applications for the programme must be submitted by new applicants in parallel with any scholarship applications.

There is a funding noticeboard which advertises bursaries handled through the UCT PG Funding office: <https://uct.ac.za/students/current-students-funding-postgraduate-degree-funding/postgraduate-degree-funding-noticeboard>

International students can apply for scholarships via the International Academic Programmes Office (IAPO). Forms will be available on the IAPO website (<https://uct.ac.za/international>)

Generally, financial assistance for postgraduate studies at UCT is highly competitive.

Accommodation

University accommodation is limited although specific residences close to the Health Sciences campus are available for postgraduate students. All inquiries about housing should be directed to:

Student Housing Accommodation & Advocacy Services (SHAAS)

University of Cape Town

Phone: +27 21 650 2977 Fax: +27-21- 650 4014 Email: res@uct.ac.za

<https://uct.ac.za/students/applications/student-housing>

Study permits for international students

International students must obtain a study permit before entering South Africa. Please consult the nearest South African embassy/consulate well in advance. Further information for international students is available from the International Academic Programmes Office (IAPO): <https://uct.ac.za/international>

Student representation

The university and faculty have a Postgraduate Students' Association to represent the interests of postgraduate students.

Membership is encouraged.

In the past, students in each enrollment years of the programme have elected a 'class representative' to be the focal point for feedback to the programme on students facing issues. As the programme grew larger this approach proved less useful, and now we recommend to course convenors of larger courses (eg, >20-30 students) that they elect 'class representatives' for that specific module, if desired.

Computing facilities

The Barnard Fuller Computer Laboratory (Level 1, alongside the Postgraduate seminar lecture rooms) is available for use by all postgraduate students. Other computer facilities on campus are shared between undergraduate and postgraduate students.

Students must use their UCT swipe card to gain access to computer labs. Should a card be left at home or not function, students can go to Student Administration to gain access.

The opening times are 24 hours a day, 365 days a year.

Wireless access areas (via Eduroam) are available across campus.

Parking

Student parking on campus is available at the standard university fee that is payable annually. Our campus does allow after-hours parking inside the fenced area outside of standard working hours (so might be allowed for 4-6pm classes, please speak to Campus Control).

Continuing Professional Development (CPD) credits

For individuals registered with the Health Professions Council of South Africa, 30 CPD points are awarded on graduation; this does not include ethics points.

University resources

There are multiple different resources available to support postgraduate studies. See:

- **UCT's Postgraduate Hub:** <https://uct.ac.za/postgraduate-hub/current-postgrads>
- **The Writing Centre at UCT:** forms part of the Language Development Group in the Academic Development Programme (Centre for Higher Education Development). This Centre offers students assistance with academic writing. Please visit their website: <https://ched.uct.ac.za/services/postgraduate-support>.
- **The Faculty of Health Sciences Writing Centre:** responding to demand, a FHS writing centre was opened in 2015 to provide FHS students and staff with convenient access to specialist writing support on their own campus. Please visit the FHS Writing Lab website: <https://ched.uct.ac.za/writing-centre/health-sciences/about-fhs-writing-lab>. *MPH candidates may be referred to the Writing Centre by staff on the basis of performance in written work during the programme.*
- **Student Forms:** <https://www.forms.uct.ac.za/studentforms.htm>
- **The Centre for Higher Education Development** has multiple resources and training opportunities: <https://ched.uct.ac.za/services/postgraduate-support>
- **UCT Libraries** provides additional training, such as their 'Digital Scholar' series: <https://lib.uct.ac.za/services-tools/training-workshops>

Emergency Contacts

Employee Wellness	021-650-5685	Blanche.claasen-hoskins@uct.ac.za
Occupational health and Safety	021-650-3873	ohs@uct.ac.za key@uct.ac.za
Campus Safety	021-650-2222/3 24 hours	
Sexual-assault response team	072-393-7824 24 hours	sart@uct.ac.za
Office for Inclusivity and Change (OIC)	021-650-3530	
Whistle-blowing hotline	0800 650 0000 24 hours	uct@whistleblowing.co.za
UCT Ombud	021-650-0000	ombud@uct.ac.za

MPH enquiries

The MPH programme office is located in the School of Public Health in Falmouth Building on the Health Sciences Campus. The physical location is:

School of Public Health

Falmouth Building, Level 1

University of Cape Town Faculty of Health Sciences

Anzio Road, Observatory 7925, Cape Town, South Africa

<https://health.uct.ac.za/school-public-health>

Logistical and administrative enquiries may be directed to the MPH programme administrative team:

General enquiries: mphadmin@uct.ac.za

Tel: 021 650 1098

Academic enquiries may be directed to Track Convenors or the MPH Programme Convenor.

COURSES / MODULES

The following courses are run as part of the MPH programme. Further electives from other faculties or other institutions are allowed – but with program and track convenor permission.

Requests for exemptions or substitutions of compulsory courses must be discussed with the track convenor involved and may be considered based on special circumstances.

Timetabling

The semester timetable is released prior to each semester. We make all efforts to ensure that there are no clashes between classes, especially compulsory courses. In some instances, a clash between two classes (e.g. between electives) might occur – please contact the programme administrator if this should occur.

Most courses run standard with 2x2-hour sessions per week during the bulk of the semester. (If there are two sessions in the timetable, that means the student needs to attend both those sessions – this is not an option between two sessions each week).

Requirements

All courses have the same basic requirements (as per the degree), and any additional requirements are mentioned below.

Courses with Prerequisites

Please ensure that you take note of the courses which have pre-requisite requirements (usually passing a lower-level course). This is for degree and non-degree students.

Course	Prerequisites
Advanced Epidemiology (PPH7029F)	PPH7018F Introduction to Epidemiology (pass of at least 55%) PH7021F Biostatistics I (pass) PPH7092S Biostatistics II (pass) <i>Recommended:</i> passes in one or more of: PPH7022H Evidence-based Healthcare PPH7063S Epidemiology of Infectious Diseases PPH7065S Epidemiology of Non-communicable diseases
Biostatistics II (PPH7092S)	PPH7021F (pass of at least 65%) PPH7018F (pass)
Biostatistics III (PPH7095F)	PPH7021F Biostatistics I (pass) PPH7092S Biostatistics II (pass) Pass in Biostatistics
Health Systems Research & Evaluation (PPH7094S)	PPH7093F Introduction to Health Systems (pass)

- FIRST SEMESTER COURSES

PUBLIC HEALTH AND SOCIETY (PPH7016F)

Convenors: Professor Lucia Knight *BSc, MPopStuds, PhD (LSHTM)* and Associate Professor Carla Tsampiras *BA BA(Hons) (Rhodes), MA (SOAS), PhD (Rhodes)*

Skill Objectives

Students will develop a broad understanding of the field of public health, and by the end of the course be able to:

- Describe and define public health with some understanding of its origins.
- Describe the major disciplinary contributions, key concepts, and core research tools that are central to public health knowledge and practice.
- Describe the state of the “public’s health” in South Africa, with special reference to the distribution, causes and control of race, class, gender and geographic disparities in health.
- Describe opportunities and challenges for public health interventions beyond the biological, in the context of health systems, communities, cultures, political and economic structures, and the environment.
- Use this multi-disciplinary and multi-levelled approach—the public health perspective—to develop a richer understanding of health problems and the ways that public health knowledge and practice can address these problems.

Content

- The course provides an introduction to the concept of public health and the recent changes in the field including a look forward to where the field is going. The course will consider the many tools and theories the field of public health uses to understand the causes and distribution of health and illnesses as well as the ways public health professionals intervene to improve population health.

INTRODUCTION TO EPIDEMIOLOGY (PPH7018F)

Convenors: Dr Alex de Voux, *BSc (Cape Town), BSc (Hons) (Cape Town), MSc (Cape Town), PhD (Emory)*

Skill Objectives

The course aims to introduce the basic principles and methods of epidemiology. At the end of the course candidates should be able to demonstrate knowledge of:

- The nature and uses of epidemiology
- The strengths and limitations of epidemiological study designs
- The epidemiological approach to defining and measuring the occurrence of health-related states in the population
- The epidemiological approach to assessing study validity and disease causation

Content

- Basic measures of disease occurrence and disease association
 - Types of study designs
 - Random error, bias and confounding
 - Introduction to demography and standardization
 - Epidemiology in prevention and screening
 - Causal inference in epidemiology
 - Introduction to critical appraisal of the literature
-

BIOSTATISTICS I (PPH7021F)

Convenor: Mr Luke Hannan D, *PhD (Cape Town)*

Skill Objectives

This course provides an introduction to the basic concepts and methods of biostatistics. At the end of the course candidates should be able to demonstrate knowledge of:

- The importance of statistics
- Descriptive statistics
- Inferential statistical procedures
- Critically interpreting statistical output
- An application to all techniques by statistical software

Content

- Populations and samples, and sampling methods; Descriptive measures and graphical techniques; Distributions; Estimation: Point and Interval estimation; Hypothesis testing; Power, Effect, and Sample size; Measures of effect – risk ratio and odds ratio
-

ADVANCED EPIDEMIOLOGY (PPH7029F)

Convenor: Professor Landon Myer, *BA (Brown), MA, MBChB, (Cape Town), MPhil, PhD (Columbia)*

Structure

- Compulsory for Epidemiology track
- Two-hour sessions once/twice a week all semester
- Face-to-face learning sessions during the semester approximately every week supplemented by notes and discussion board learning on Amathuba

Skill Objectives

To provide candidates with a deeper understanding of quantitative research concepts learned in the Introduction to Epidemiology course such as:

- Causation, measures of occurrence, and measures of association
- A framework for understanding the relationships between observational and experimental study designs, and an understanding of how different observational designs are inter-related
- An appreciation of the role of variable measurement in research, with emphasis on bias and misclassification and their effects
- A deeper understanding of confounding and how confounding is controlled in epidemiological research, and of the uses and limitations of matching in analytical studies
- A deeper understanding of intermediate variables and the role of intermediate variables in investigating the determinants of disease
- A deeper understanding of effect modification/interaction, including the relevance of these concepts to public health and the difficulties in identifying these phenomena in data
- The ability to integrate and apply different epidemiological concepts to provide a thorough critique of study design, conduct and analysis

Content

- Overview of study design and epidemiologic principles, Measures of occurrence & effect, Approaches to the assessment of causality, Cohort studies and randomised control trials, Case control and cross-sectional studies: appropriate effect measures, Bias and validity, Confounding (including standardisation), Effect measure modification, Matching, Critical appraisal

Additional Requirements

- Introduction to Epidemiology (PPH7018H) (with pass of at least 65%)
 - Biostatistics I (PPH7021F) pass
 - Biostatistics II (PPH7092S) pass
 - Recommended: One or more of Evidence Based Health Care (PPH7022S), Epidemiology of Infectious Diseases (PPH7063S), Epidemiology of Non-communicable diseases (PPH7065S)
-

ECONOMIC EVALUATION FOR UNIVERSAL HEALTH COVERAGE (PPH7039F)

[Previously called Theory and Application of Economic Evaluation in Health Care]

Convenor: Professor Edina Sinanovic, *BSc (Zagreb), MCom (Cape Town), PhD (London)*

Structure

- Compulsory for Health Economics track
- Two-hour sessions once/twice a week all semester

Skill Objectives

- This module aims to enable students to understand and apply current methods in the economic evaluation of health care programmes and interventions. The main skill objectives are:
- To gain insights into the theory underlying the application of economic evaluation to health care programmes and interventions
- To develop an understanding of economic evaluation methodologies
- To be able to judge the quality of economic evaluations
- To develop skills in economic evaluation modelling

Content

- Introduction to economic evaluation; Costing in economic evaluation; Outcome measurement and valuation; Cost, cost-effectiveness, cost-utility, and budget-impact analyses; Critical appraisal of economic evaluation; Use of economic evaluation in health system decision making; Uncertainty in economic evaluation; Modelling in economic evaluation

Additional Requirements

- Computer literacy: Microsoft Excel skills required
-

EQUITY AND EFFICIENCY FOR UHC (PPH7050F)

[Previously called: Microeconomics]

Convenor: Mr Senzo Mthembu, *BCom (Hons), MCom (Cape Town), MSc (LSE)*

Structure

- Compulsory for Health Economics track
- Two-hour sessions once/twice a week all semester

Skill Objectives

- To apply the theory and principles of microeconomics to health and healthcare, including the analysis of the structure and characteristics of the health care market, noting the differences between the market for health care and traditional markets in economics with a view to informing health care planning and policy.

Content

- Introduction to microeconomics and behavioural economic theory; Definition, scope and role of microeconomics in

the health sector; The market for health care and the public sector; Individual and household demand for health and health care; Household-level analyses: the medical poverty trap and related issues; Need, agency theory and supplier-induced demand; Health care production and cost functions; Efficiency in health care provision; Health insurance contracts and incentive effects

QUALITATIVE RESEARCH METHODS (PPH7071F)

Convenors

Dr Jennifer Githaiga, *BEd, MA Communication, MA Counselling Psychology, PhD (Cape Town)* and Professor Lucia Knight, *BSc, MPopStuds, PhD (LSHTM)*

Structure

- Compulsory for Social and Behavioural Sciences tracks
- Two-hour sessions once/twice a week all semester

Skill Objectives

To enable candidates to:

- Identify and describe key concepts and theories related to qualitative inquiry, study design, sample selection and; data collection methods including a brief introduction to analysis, and report writing
- Develop basic qualitative research designs of their own and interpret and evaluate qualitative research reports and articles in the public health literature
- Explain how qualitative and quantitative research studies differ and when it is appropriate/necessary to use qualitative methods in public health research
- Understand how to develop a qualitative research question relevant to public health
- Develop basic qualitative research plans to guide rigorous qualitative research
- Understand and evaluate qualitative research process and value of evidence from reports and articles in the public health literature
- Understand the ethical and logistical issues involved in qualitative research

Content

- Conceptual/theoretical foundations of qualitative research; Relationship/differences between qualitative and quantitative research designs and theoretical perspectives; Development of an appropriate public health research question; Qualitative methodology including: study design, sampling, data collection and rigour; An introduction to the principles of qualitative data analysis and interpretation of data; Ethical issues in qualitative research; Evaluating the quality of qualitative research

Additional Requirements

- This course relies on group work for semester assignments, students are expected to attend all semester sessions unless otherwise discussed with the course convener.

INTRODUCTION TO HEALTH SYSTEMS (PPH7093F)

Convenors: Associate Professor Jill Olivier, BA (Hons), MPhil, PhD (Cape Town) and Dr Eleanor Whyte, BA Hons, MPH, PHD (Cape Town)

Structure

- Compulsory for Health Systems track
- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of this course students should be able to:

- Show an understanding of the dynamic and complex nature of health systems by reflecting on and describing their value bases and functioning, their components and the central roles and behaviours of a range of agents
- Discuss health systems as social constructions, influenced by and influencing the agents within them, as well as influenced by broader political and economic forces, generating public value and contributing to societal development
- Apply these understandings to assessment of our own health system and comparison between health systems
- Apply relevant analytical skills and an understanding of complex systems in order to develop ideas about action to strengthen health systems
- Develop the personal communication, teamwork and leadership skills which are important for supporting health system change
- Demonstrate understanding of and openness to different perspectives on the nature of health systems

Content

- Core elements of health systems; Frameworks for conceptualizing health systems; Key issues in strengthening health systems; Understanding health systems as complex systems comprised of components, actors and inter-relationships; Modes of health systems analysis and action

BIOSTATISTICS III (PPH7095F)

Convenors: Dr Frissiano Honwana, *BSc MSc (UKZN), PhD (Cape Town)* and Ms Hayli Geffen, *BSc MSc (Cape Town)*

Structure

- Compulsory for Epidemiology track
- Two-hour sessions once/twice a week all semester - with extra sessions scheduled at the start of the semester

Skill Objectives

- To provide candidates with a thorough understanding of the analysis of longitudinal and clustered data and a capability to perform such analyses themselves
- To introduce students to other more advanced statistical methods relevant to medical research, so that they are aware of their availability for application to specific problems in medical research

Course content

- Advanced survival analysis; Analysis of longitudinal data and clustered data; Advanced topics in statistical modeling

Additional Requirements

- Candidates failing Biostatistics III will be allowed to repeat the course only at the discretion of the course convenor.
- Candidates registered for a track in the MPH programme for which the course is compulsory will have a higher priority for readmission than those seeking to repeat the course as an elective.

CANCER PREVENTION AND CONTROL (PPH7096F) – DISC 2026

Cancer Prevention and Control will not be run in 2026.

ENVIRONMENTAL HEALTH POLICY (PPH7098F)

Convenor: Dr Meryl Jagarnath, *BScHons, MSc, PHD (Kwazulu Natal)*

Structure

- Compulsory for Environmental Health track
- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of this course students should be able to:

- Critically analyse environmental health policy
- Apply ethics and human rights principles to environmental health
- Demonstrate a strengthened understanding and commitment to environmental justice
- Interpret and apply different approaches to risk management in environmental health
- Apply an understanding of how environmental health policy relates to broader public health policy and to sustainable development

Content

- Environmental ethics and environmental Justice: participation and rights-based approaches to protecting vulnerable groups; Sustainable development; The precautionary principle and dealing with scientific uncertainty; Conflict of interest in environmental health policy; Global environmental health conventions; The role of social movements in responding to environmental health challenge
-

COMMUNITY EYE HEALTH 1 - PLANNING & MANAGING EYE CARE SERVICES (CHM6022F)

Convenor: Dr Deon Minnies *NHDMedTech, NDMedTech (CPUT), MPH, PhD (Cape Town)*

Convenor

Dr Deon Minnies *NHDMedTech, NDMedTech (CPUT), MPH, PhD (Cape Town)*

Structure

- Compulsory for Community Eye Health track
- Weekly on-line teaching and a weekly tutorial over six weeks
- Two assignments during the semester and an end of course examination

Skill Objectives

To enable candidates to:

- Understand the magnitude, causes, and control strategies for the major blinding eye diseases in the world and in Africa
- Understand the components of the WHO/IAPB community eye health initiatives
- Understand the principles of programme planning
- Understand the principles of the control of cataract blindness
- Understand the principles of the control of visual impairment due to refractive error

Content

- Epidemiology and visual impairment
- Cataract
- Refractive error
- Principles of planning
- Planning activities and budget, monitoring and evaluation

COMMUNITY EYE HEALTH 2 – EPIDEMIOLOGY FOR EYE HEALTH (CHM6023F)

Convenor: Dr Deon Minnies *NHDMedTech, NDMedTech (CPUT), MPH, PhD (Cape Town)*

Structure

- Compulsory for Community Eye Health track
- Weekly online teaching and a weekly tutorial over 6 weeks
- Two assignments during the semester and an end of course examination

Skill Objectives

- To enable candidates to: understand study designs as applicable to eye health

Content

- Basic epidemiology, research questions, study designs
- Cross sectional studies for cataract
- Case control studies for age related macular degeneration
- Cohort studies for diabetic retinopathy
- Randomised controlled trials for glaucoma
- Key informant methods, Cochrane reviews, qualitative studies for eye health

FUNDAMENTALS OF GLOBAL SURGERY (CHM6045F)

Convenors: Prof Salome Maswime, *MBChB, FCOG(SA), MMED, PhD* and Dr Simon Le Roux, *MBChB, Master in Global Health*

Structure

- Two-hour sessions once/twice a week all semester

Skill objectives

- Learn about the role of public and global health systems in surgery and explores strategies to improve surgical care in the African context.
- Learn about the global need for surgery as a vital component of healthcare.
- Explore surgical needs and the surgical burden of disease with a focus on supporting surgical systems and surgical services, especially in resource limited settings.
- Learn about the building blocks of health systems as key components of surgical systems strengthening.
- Build surgical leadership in Africa by equipping students with the foundational knowledge, critical analysis and reasoning skills, and tools needed to contribute to global surgery through research, advocacy, and implementation of surgical healthcare programs for large-scale impact.

Content

- Introduction to Global Surgery; Burden of surgical related diseases; Surgical ecosystems; Health systems and strengthening; Financing and surgical packages; Surgical services; Global Surgery research; Quality improvement; Health policy and governance; Advocacy and community engagement; Capacity building; Program management; Implementation science

- SECOND SEMESTER COURSES

EVIDENCE-BASED HEALTH CARE (PPH7022S)

Convenor: Associate Professor Mark Engel and Mr Ameer Hohlfeld

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

To enable candidates to:

- Convert health care information needs into answerable questions
- Identify the best evidence with which to answer them
- Critically appraise the evidence for validity and usefulness
- Apply the evidence in health care practice and policy
- Elements involved in developing a protocol for systematic reviews will be highlighted.

Content

- Formulating answerable questions; Systematic and comprehensive searches for evidence; Evaluating articles about treatment or prevention, diagnosis, prognosis, harm, clinical decision analysis and clinical practice guidelines; Data abstraction, synthesis and interpretation

Additional Requirements

- A pass of at least 55% in Introduction to Epidemiology (PPH7018H)
- Recommended: Biostatistics I (PPH7021F)

HEALTH POLICY AND PLANNING (PPH7041S)

Convenor: Dr Eleanor Whyte, BA Hons, MPH, PHD (Cape Town)

Structure

- Compulsory for Health Economics and Health Systems tracks
- Two-hour sessions once/twice a week all semester

Skill Objectives

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

- Demonstrate understanding of the nature of health policy and the policy process
- Recognise the socio-political factors – and especially power - acting on and through health policy
- Conduct comprehensive analyses of policy development and implementation processes, including stakeholder analysis
- Develop strategies to influence health policy change, that take account of power flows
- Apply theoretical frameworks and concepts in the analysis of policy processes
- Demonstrate understanding of the complexities of developing and implementing health policies intended to promote equity.

Content

- What is health policy and policy analysis?; How do policies emerge and unfold?; What do policies aim to achieve?; Why and how do policy actors exercise power in health policy processes?; How does gender influence policy and

policy change processes?; How does power play out in policy processes?; What global actors and forces matter in health policy?; Which government actors matter in health policy processes?; What is agenda setting and how do policy networks influence it?; Where is the politics in policy formulation and planning?; What is bottom up implementation and what role do street level bureaucrats play in implementation?; Governance lessons: advocacy; Governance lessons: leading policy change; Governance lessons: co-production and citizen engagement

PUBLIC HEALTH AND HUMAN RIGHTS (PPH7053S)

Convenor: Dr Hanne Haricharan, *BA MA MA PHD (Cape Town)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

- The module will take students through an introduction to human rights and its relevance to public health.
- Students will be given opportunities to develop critical skills to analyse public health policies from a human rights perspective, and understand how trade-offs should be made between public health and individual entitlements within a human rights framework.
- Important debates in the human rights literature will be aired, particularly through the use of South African and regional case studies, so that students can apply these insights in their current and future work. Students will cover the international and national frameworks for human rights, particularly the human rights dimensions of South Africa's constitution and its post-apartheid legal framework.
- Case studies involving different vulnerable groups will be explored. The module will aim to enhance students' capacity to be self-reflective in dealing with public health problems, and to apply human rights approaches to their resolution.

Content

- Theoretical and historical background to human rights, including ideas of rights in an African context; International and national human rights instruments and institutions; Contemporary debates in defining human rights and their implementability; The relationship of human rights to health; The right to health, and of access to health care in national and international law; health as a socioeconomic right; When it may be legitimate to restrict rights and the public health rationale; Instruments to examine the human rights impact of public health policies, and to incorporate human rights in public health planning and practice; Vulnerable groups, human rights and health; Dual loyalty and health rights; The relationship of trade policies and practices, intellectual property and human rights as it affects public health and access to health care; Health systems and human rights
-

GENDER AND SEXUAL AND REPRODUCTIVE HEALTH (PPH7054S)

Convenor: Professor Lucia Knight, *BSc, MPopStuds, PhD (LSHTM)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

- The course is intended for students interested in understanding the impact of gender, sex and sexuality on health, health care, and health systems. The course content provides students with the tools and perspectives to promote equity goals pertaining to health, gender and sexuality within the broad arena of public health.
- The course aims to explore the influence of gender, sex and sexuality on the construction of public health in diverse societies and on the experience of and expectations of health.

Content

- Understanding the differences in definitions, understandings and application in public health of sex and sexuality; The gendered stratification of societies and its differential impact on the health of women, men and the LGBTQI community; Global patterns in gender and health; Gender, sex, sexuality and health in South Africa; Changing practices: strategic and practical approaches to gender, sex, sexuality and health

Additional Requirements

- This course relies on group work for semester assignments, students are expected to attend all semester sessions unless otherwise discussed with the course convenor.
-

EPIDEMIOLOGY OF INFECTIOUS DISEASES (PPH7063S)

Convenor: Professor Mary-Ann Davies, *MBChB PhD (Cape Town), FCPHM (SA)* and Dr Reshma Kassanje

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of the course candidates should be able to:

- Apply descriptive epidemiology to communicable diseases and their control and to outbreak situations
- Classify infectious diseases epidemiologically and use common terms and definitions appropriately
- Discuss transmission dynamics and mathematical modelling of epidemics
- Discuss routine and sentinel surveillance
- Discuss the epidemiology and development of vaccines
- Apply epidemiology to specific communicable diseases including HIV/AIDS, tuberculosis (TB), sexually transmitted illnesses (STIs), malaria, hospital-acquired infections and childhood communicable diseases

Content

- Commonly used terms and definitions, descriptive epidemiology, outbreak investigation, transmission dynamics, mathematical modelling, surveillance, vaccination efficacy and effectiveness, epidemiology applied to HIV/AIDS, TB, STIs, malaria and childhood communicable diseases.

Additional Requirements

- A pass of at least 55% in Introduction to Epidemiology (PPH7018F)
-

EPIDEMIOLOGY OF NON-COMMUNICABLE DISEASES (PPH70655)

Convenors: Professor Lara Dugas, *BSc PhD (Cape Town) MPH MSc (Loyola)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of the course candidates should be able to:

- Understand definitions of NCDs, debates in their designation and factors underlying their emergence
- Know the epidemiology of the determinants of NCDs applying frameworks to understand social determinants, risk factors, and infectious agents (causation)
- Interpret the population burden of non-communicable disease measures and data
- Use appropriate conceptual frameworks, such as the socio-ecological framework, the life-course approach to study and understand non-communicable disease occurrence and control at an individual and population levels
- Demonstrate familiarity with methodological issues and epidemiological methods in the study of non-communicable disease including the limits of observational evidence, life-course epidemiology and genetic associations
- Evaluate different interventions at individual, community and societal level to prevent and control chronic diseases including screening and surveillance

Content

- Burden of non-communicable disease; Conceptual frameworks for studying chronic disease causation and control; Epidemiology of cardiovascular disease, diabetes, respiratory disease, cancer, mental ill-health, neurodegenerative diseases, injuries and environmental hazards; Epidemiologic transition in relation to risk factors for the major chronic diseases, e.g. nutrition, obesity, physical exercise, alcohol and tobacco use as well as upstream factors impacting on diseases such as food policy and the built environment; Integrated health services interventions; Genetics and public health. Study designs used to assess associations between exposures and NCDs.

QUANTITATIVE RESEARCH METHODS (PPH7070S)

Convenors: Dr Alex de Voux, *BSc BSc (Hons) (Cape Town), MPH MSc (Cape Town), PhD (Emory)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

- To formulate pertinent research questions and hypotheses in public health and write detailed research proposals that utilize quantitative methods
- To promote research reading, review and writing skills (including citation and scientific argument) for purposes of research proposals
- To introduce data handling best practices (mainly in the post data collection to analysis steps) for analysis, sharing and reporting on data
- To introduce the application of quantitative research methods in the monitoring and evaluation of programmes

Content

- Programme Monitoring and Evaluation; Formulation of research questions; Writing Skills; Research protocol, research ethics, literature review; Population, sampling and subject selection; sample size calculation; Measurement: questionnaires; validity and reliability; Conducting quantitative research; Data management and manipulation
-

THE ECONOMICS OF HEALTH SYSTEMS (PPH7077S)

Convenor: Dr Olufunke Alaba *BSc (Ado-Ekiti), MSc, PhD (Ibadan)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

At the end of the module, participants should be able to:

- Demonstrate an understanding of the complex nature of health systems and the interrelationships between the various components of the health systems
- Identify key functions of health care financing
- Recognise the advantages and disadvantages of various health care financing options
- Engage in debate about health financing reforms
- Use a range of analytical tools to examine specific issues in health systems

Content

- Part 1 focuses on health systems financing and discusses issues relating to universal coverage in low- and middle-income country settings; Part 2 introduces some analytical tools for assessing health financing systems, with a focus on progress towards UHC; and Part 3 discusses the interrelationships between health care financing and other components of health systems (e.g. human resources, Gender, Sex and Reproductive Health service provision)
- While the module introduces theories and methodologies used to examine the economics of health systems, it also integrates practical sessions (including group exercises and appraisal of empirical studies) to help students better understand the application of those theories and methodologies in the context of low-and middle-income countries.

Additional Requirements

- Recommended: Computer literacy, in particular Microsoft Excel
-

BIostatISTICS II (PPH7092S)

Convenor: Dr Frissiano Honwana, BSc, MSc (UKZN), PhD (Cape Town)

Structure

- Compulsory for Epidemiology, Community Eye Health tracks
- This class meets twice weekly during the semester

Skill Objectives

- To equip candidates with a good understanding of modelling the relationship between a response and a set of risk factors, so as to be able to perform such analyses themselves using sophisticated statistical software.

Content

- Generalised Linear Modelling concepts, focusing on: Multiple linear regression for modelling and identifying the relationship between a continuous response and a set of risk factors; Logistic regression for modelling and analysing the relationship between a dichotomous indicator of disease status and a set of risk factors; and Cox regression analysis (survival analysis methods)

Additional Requirements

- Biostatistics I (PPH7021F)
- Introduction to Epidemiology (PPH7018F)
- Candidates failing Biostatistics II will be allowed to repeat the course only at the discretion of the course convenor. Candidates registered for a track in the MPH programme for which the course is compulsory will have a higher priority for readmission than those seeking to repeat the course as an elective.

HEALTH SYSTEMS RESEARCH AND EVALUATION (PPH7094S)

Convenor: Associate Professor Jill Olivier, BA (Hons), MPhil, PhD (Cape Town)

Structure

- Compulsory for Health Systems track
- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of this course students should be able to:

- Identify researchable health policy and systems issues, including those focused on action to strengthen health systems and the processes of policy change
- Formulate substantively relevant health policy or health systems research questions, by drawing on relevant empirical work, practice knowledge, and theoretical insights
- Be familiar with the range of research purposes, questions and strategies used within HPSR
- Identify appropriate research strategies and study designs for different HPSR issues, purposes and question types
- Show awareness of critical issues in, and approaches to, ensuring rigour in HPSR
- Be aware of critical ethical issues for HPSR
- Be able to source HPSR materials and critically appraise HPSR empirical papers
- Appreciate the value of multiple perspectives (positional and disciplinary) in conducting HPSR
- Have some understanding of how the complex and socially constructed nature of health policy and health systems is addressed in HPSR methodology
- Plan activities that support the use of research evidence for and in decision-making, through researcher–policy maker/practitioner engagement
- Recognize that personal skills, such as reflexivity, listening and facilitation, are critical to being a health policy and systems researcher

Content

- Different disciplinary perspectives on health systems dimensions and challenges; Introductory content on health systems research and evaluation methods; More in-depth content on some key study designs and analytical approaches common in HPSR

Additional Requirements

- Has passed Introduction to Health Systems (PPH7093F)
-

CLIMATE CHANGE, POLLUTION AND HEALTH (PPH7097S)

Convenors: Professor Aqiel Dalvie *BSc, BSc (MED) Hons, MSc, PhD, (Cape Town)* and Dr James Irlam *BSc, BSc (MED) Hons, MPhil (Epidemiology), MSc (Climate Change & Development) (Cape Town), PhD (Public Health) (Cape Town)*

Structure

- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of this course students should be able to:

- Understand environmental health from a global and local perspective
- Understand the major environmental health issues which impact local and global burden of disease
- Critically analyse environmental health problems

- Study environmental health problems
- Understand key global evidence of anthropogenic climate change
- Understand how climate change directly and indirectly impacts public health
- Understand how climate change increases health risks due to pollution among vulnerable groups in South Africa
- Understand climate and health co-benefits of mitigation and adaptation measures
- Understand the key principles of sustainable health care
- Identify the priorities in policy, governance, implementation and research to address public health impacts from climate change and pollution in South Africa

Content

- Environmental Epidemiology; Environmental Burden of Disease; Air & Water Pollution and Health; Toxic Chemicals and Health (Including pesticides, persistent organic pollutants, metals and endocrine disruptors); Climate Change and Health Impacts; Climate change mitigation and adaptation measures; Sustainable health care in principle and practice

CHILDREN'S ENVIRONMENTAL HEALTH (PPH7099S)

Convenors: Professor Hanna-Andrea Rother, BA MA, PhD (Michigan State)

Structure

- Compulsory for Environmental Health track
- Two-hour sessions once/twice a week all semester

Skill Objectives

By the end of this course students should be able to:

- Recognize children's environmental health issues from a regulatory, preventative and community action perspective particularly in Africa and low- and middle-income countries (LMICs)
- Identify the nature of children's health problems, especially their vulnerability to toxic agents and harmful pollutants at the different growth and development stages
- Describe children's health risk to environmental factors
- Apply children's rights to preventing health risks from exposure risks including environmental injustices and child labour
- Identify and apply children's health risk assessment, risk management, and risk communication approaches
- Critically evaluate health promotion interventions to address children's environmental health issues
- Identify and apply innovative and effective health mitigation strategies

Content

- Children's environmental health policy; Specific environmental health factors impacting on children's health; Health impacts on children from exposures to environmental factors; Methods for evaluating the impacts on children's environmental health; Health promotion methods

INTRODUCTION TO HEALTH PROMOTION (PPH6038S)

Convenor: Dr Jennifer N. Githaiga, PhD, MPH (Cape Town)

Structure

- Compulsory for Social and Behavioural Sciences track
- Two-hour sessions once/twice a week all semester – in the second semester

Skill Objectives

By the end of this course students should be able to:

- Explain the historical, socio-political, and theoretical underpinnings of health promotion and how these influence contemporary health promotion policy and practice.
- Demonstrate understanding of key concepts, methods, and debates in health promotion.
- Critically assess key health promotion strategies.
- Describe key health promotion theories and models including comparative advantages, disadvantages, and applicability in low-and-middle-income versus high-income contexts.
- Articulate the differences between various downstream, midstream, and upstream strategies as they apply to individual, group and population health promotion strategies.
- Design a health promotion program in response to a pertinent health issue in the South African context, using any of the health promotion theories featured in the course.

Content

- Historical development of health promotion; determinants of health; health education; approaches to health promotion; theories and models in health promotion; health promotion in diverse contexts; community health promotion; planning health promotion programmes; implementing health promotion programmes; ethics and accountability in health promotion; technology, media and health promotion; health public policy; evaluating health promotion programmes and interventions.

GLOBAL SURGICAL SYSTEMS (CHM6048S)

Convenors: Professor Salome Maswime, *MBChB FCOG SA MMED PhD* and Dr Mary Kinney, *BA MSc PHD*

Structure

- Compulsory for Global Surgery track
- Two-hour sessions once/twice a week all semester

Skill Objectives

- Learn about the integration of surgical services within a health system for improving access to surgical care in low- and middle-income countries and explore determinants of surgery and the preventative measures required to reduce the need for surgical care and to strengthen surgical health systems.
- Learn about the principles of implementation and innovation in Global Surgery to improve access to surgical care and surgical outcomes in low- and middle-income settings.
- Gain foundational knowledge, critical analysis, reasoning skills, and tools needed to contribute to global surgery through research, policy, community engagement and implementation of surgical healthcare interventions for large-scale impact.
- Learn to implement pragmatic solutions to reduce the need for surgical care

Content

- The course will have a focus on the critical components required for resilient surgical systems including governance/leadership, health financing, service delivery, human resources, medicines and technologies, and health information systems. It will equip students with the foundational knowledge, critical analysis and reasoning skills, and tools needed to contribute to global surgery through population wide interventions and community engagement programs for large-scale impact.

SEMINARS IN EPIDEMIOLOGY & BIostatISTICS (PPH7090S)

Convenor: Professor Landon Myer, *BA (Brown), MA, MBChB, (Cape Town), MPhil, PhD (Columbia)*

Structure

- Only open to students in Epidemiology track; *admission requires permission of course convenor*
- Semester 2: (register in year 2 of degree only)
- Weekly two-hour sessions mixing student reading presentations and sample analyses with critical discussion and didactic seminars, supplemented by Amathuba-based readings and discussion.

Skill Objectives

- To provide a working understanding of advanced epidemiological principles and proficiency in advanced epidemiological analytic methods, including: causal modelling, including the application of marginal structural models; infectious diseases modelling; directed acyclic graphs and estimator biases; instrumental variables, propensity scoring and alternative methods for adjusting for confounding.

Content

- The purpose is to provide select MPH candidates in the Epidemiology track with advanced training in epidemiological methods. The course is structured as a reading and tutorial seminar over one semester that provides students with understanding of recent developments in epidemiological principles as well as proficiency in advanced epidemiological analytic methods.
- Students will meet the convenor or designated lecturer for weekly 2-hour sessions and are expected to undertake an additional 4-6 hours of reading or demonstration analyses each week.
- Admission is only by prior arrangement with the track convenor.

Prerequisites

- Introduction to Epidemiology (PPH7018F)
- Advanced Epidemiology (PPH7029F)
- Biostatistics I (PPH7021F)
- Biostatistics II (PPH7092S)
- Biostatistics III (PPH7095F)
- Permission of the course convenor

PRACTICUM IN PUBLIC HEALTH (PPH7089F/S)

Convenor: Dr Eleanor Whyte, BA Hons, MPH, PhD (Cape Town)

Structure

- The Practicum has restricted registration, and approval needs to be gained from the course convenor *prior* to registration
- Specifics and timing of Practicum projects will be shaped by host institutions
- *Assessment will include:* Continuous reflective journal, oral presentation of the project output, Written project report, including description of the organisation and genesis of the project, Assessment by practicum host of students' performance
- The candidate will be expected to spend 120 notional hours during the registered semester on the practicum including service work, approved self-learning, and writing/ communication
- While there are two codes (F and S) for the Practicum, we recommend that students follow the following advice:
 - Engage with the Practicum convenor before February of intended year of registration
 - On their approval and identification of a project, register in February for the 2nd semester code PPH7089S
 - Depending on the project and the host timing, begin the Practicum preparation and background activity in

the first semester

- Complete Practicum outputs and assessment *before* the November examinations period
- *[The reason for this is that should the student register for the first semester Practicum course, but not complete the activities and outputs – irrespective of whether the reasons for the delay are from the student or the host – the student will receive an INC on their record for that course, and will need to re-register and re-pay for the second semester course in order to complete]*

Skill Objectives

The purpose of the Practicum in Public Health is to provide candidates with an experience of practical application of public health skills in a community, organizational or other service context. Each practicum attachment will have specific learning outcomes that relate to the placement. The outcomes will reflect:

- ability to apply public health skills to a client/organizational problem;
- ability to adapt to a service setting and meet client need; and
- ability to process and communicate the practical experience

The Practicum is not a research project, and so the application of research skills/methods will not be considered suitable.

Additional Requirements

- Permission of the course convenor
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WHOLE YEAR DISSERTATION COURSES

It is the student's responsibility to ensure they have registered for the correct dissertation for their program. Please check this carefully on first year of dissertation registration.

PPH7015W	PUBLIC HEALTH MINI DISSERTATION	Dissertation for the MPH Epidemiology, Health Systems, Social & Behavioural Sciences, Environmental Health, and Global Surgery (and Community Eye Health) tracks
PPH7087W	PUBLIC HEALTH MINOR DISSERTATION	Dissertation for the MPH Health Economics track
PPH9080W	MSC EPI & BIO DISSERTATION	Dissertation for the MSc Epi&Bio (MM191) degree

For both of the MPH dissertations:

- Track convenors and supervisors jointly administer the dissertation process.
- This is a whole-year course – registration required in January-February of year of registration.
- No supervision can be allocated unless the student is registered for the dissertation
- A Memorandum of Understanding (MOU) is completed online with your supervisor *at the time of registration for the dissertation*. Registration for the dissertation will not be activated until the MOU is completed and approved. In order to complete an MOU, you will need a supervisor and have agreed on terms of supervision, a topic title and brief outline, a dissertation timing plan.
- More details below

TRACK DESCRIPTIONS

EPIDEMIOLOGY TRACK [MM012 PPH02]

Track Convenor: Professor Landon Myer

Epidemiology specialisation (MM012 PPH02)

Compulsory courses:

PPH7016F	Public Health & Society
PPH7018F	Introduction to Epidemiology
PPH7021F	Biostatistics I
PPH7070S	Quantitative Research Methods
PPH7092S	Biostatistics II
PPH7095F	Biostatistics III
PPH7029F	Advanced Epidemiology

Any two or three of:

PPH7063S	Epidemiology of Infectious Diseases
PPH7065S	Epidemiology of Non-Communicable Diseases
PPH7022S	Evidence-Based Health Care

And if necessary, one of:

PPH7090F/S	Seminars in Epidemiology (<i>by permission</i>)
PPH7093F	Introduction to Health Systems
PPH7041S	Health Policy & Planning
PPH7039F	Economic Evaluation for Universal Health Coverage

Plus:

PPH7015W	Public Health Mini Dissertation
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Epidemiology is the study of the distribution of disease, injury and other health states in populations. This includes the study of factors that influence health states and the interventions that may be used to ameliorate these. Often considered the 'basic science' of public health, epidemiology is predominantly quantitative in its approaches. Epidemiology is often closely linked with biostatistics, which involves the application of statistical techniques to address problems in the health sciences, including the analysis of data from quantitative investigations in public health.

The Epidemiology track is aimed at candidates who wish to develop a broad understanding of quantitative thinking in the health sciences. This will suit candidates who envisage a career that requires skills in understanding and synthesizing epidemiological data and other quantitative data sources. Many students who complete the Epidemiology track go on to work in research, including further postgraduate studies. In addition, the track may be of interest to clinicians who want to enhance their research skills and acquire a public health perspective at the same time. The Biostatistics courses are a complement to the Epidemiology training but do not offer the equivalent of a Masters in Statistics.

Candidates who wish to be admitted to the Epidemiology track will need to provide evidence of quantitative skills in their previous training.

Admission to higher level Epidemiology courses is subject to sub-minimum requirements (see above).

To complete this track, candidates must use quantitative methods in their dissertation. Candidates should seek advice from the track convenor if they are unsure about the suitability of a proposed dissertation.

EXAMPLE OF FULL-LOAD PROGRESS ON THE EPIDEMIOLOGY TRACK

Year	First semester	Second semester
Year 1	PPH7016F - Public Health & Society PPH7018F - Introduction to Epidemiology PPH7021F - Biostatistics I ** [Possible space for elective, e.g. Intro to HS]	PPH7070S - Quantitative Research Methods PPH7092S - Biostatistics II *PPH7063S - Epi of Infectious Diseases *PPH7065S - Epi of Non-Communicable Diseases *PPH7022S - Evidence-Based Health Care
Year 2	PPH7095F - Biostatistics III PPH7029F - Advanced Epidemiology PPH7015W - Public Health Mini Dissertation (aim for submission by September of year 2)	

In total: 10 courses + mini dissertation

* Any two or three of Epi of NCDs, Epi of Infect Diseases, Evidence Based Healthcare

** If two of the above, then one of Seminars in Epi, Intro to Health Systems, Health Policy and Planning, Economic Evaluation for UHC

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE EPIDEMIOLOGY TRACK

Year	First semester	Second semester
Year 1	PPH7018F - Introduction to Epidemiology PPH7021F - Biostatistics I	PPH7070S - Quantitative Research Methods PPH7092S - Biostatistics II
Year 2	PPH7095F - Biostatistics III PPH7029F - Advanced Epidemiology	*PPH7063S - Epi of Infectious Diseases *PPH7065S - Epi of Non-Communicable Diseases
Year 3	PPH7016F - Public Health & Society ** [Possible space for elective, e.g. Intro to HS]	*PPH7022S - Evidence-Based Health Care
	PPH7015W - Public Health Mini Dissertation	

HEALTH ECONOMICS TRACK [MM012 ECO07]

Track convenor: Dr Senzo Mthembu

Health Economics specialisation (MM012 ECO07)

Compulsory courses

PPH7039F	Economic Evaluation for Universal Health Coverage
PPH7041S	Health Policy & Planning
PPH7050F	Equity and Efficiency for UHC
PPH7021F	Biostatistics I
PPH7070S	Quantitative Research Methods
PPH7077S	The Economics of Health Systems

Plus:

Two approved elective courses from those offered in the MPH or alternative, with track convenor permission

Plus:

PPH7087W	Health Economics Minor Dissertation
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The MPH Health Economics track examines health economics from macro- and micro-economic perspectives. The curriculum focuses on health economics and health systems in the African context and, while theoretical components are included, the track concentrates on the development of practical research skills useful to graduates working in African health systems.

The MPH Health Economics was designed as an 18-month full time programmed, for those who have a social, economic or health sciences background and have worked and/or will work in the health sector in low- and middle-income settings. If you are working and studying, budgeting two/three years is more realistic.

All students are required to complete a minimum of eight modules: six core and two electives. You might require a particular course to assist your dissertation. E.g. if you want to undertake an economic evaluation for your dissertation (which you can start working on in the second semester) you will need to take Economic Evaluation for Universal Health Coverage (PPH7039F) in the first semester.

Candidates are also required to produce a masters dissertation based on their own research in an area related to health economics. The masters dissertation accounts for 50% of the final assessment for the masters degree, i.e. equal weight is given to both the course work and dissertation components of the programme.

EXAMPLE OF FULL-LOAD PROGRESS ON THE ECONOMICS TRACK

Year	First semester	Second semester
Year 1	PPH7050F - Equity and Efficiency for UHC PPH7021F - Biostatistics I PPH7039F - Economic Evaluation for UHC *Elective 1	PPH7077S - The Economics of Health Systems PPH7070S - Quantitative Research Methods PPH7041S - Health Policy & Planning *Elective 2
Year 2	PPH7087W - Health Economics Minor Dissertation (aim for submission by September of year 2)	

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE ECONOMICS TRACK

Year	First semester	Second semester
Year 1	PPH7050F - Equity and Efficiency for UHC PPH7039F - Economic Evaluation for UHC	PPH7077S - The Economics of Health Systems PPH7041S - Health Policy & Planning
Year 2	PPH7021F - Biostatistics I *Elective 1	PPH7070S - Quantitative Research Methods *Elective 2
Year 3	PPH7087W - Health Economics Minor Dissertation (aim for submission by September of year 3)	

Suitable electives for the Health Economics track*Examples of electives from the MPH programme:*

- PPH7071F: Qualitative Research Methods
- PPH7018F: Introduction to Epidemiology
- PPH7016F: Public Health and Society
- PPH7093F: Introduction to Health Systems
- PPH7098F: Environmental Health & Policy
- PPH7096F: Cancer Prevention and Control
- PPH7065S: Epi of Non-Communicable Diseases
- PPH7053S: Public Health & Human Rights
- PPH7092S: Biostatistics II (Prerequisites)

Electives from outside the programme:

- Financial Admin Public Finance and Budgeting (F)
- Monitoring and Evaluation in Primary Health Care (F)
- Public Policy (S)

Eligibility for elective courses outside the MPH programme is subject to availability and approval by the course convenor – and requires track convenor prior approval.

HEALTH SYSTEMS TRACK [MM012 PPH12]

Track Convenor: Associate Professor Jill Olivier

Deputy Track Convenor: Dr Eleanor Whyte

Health Systems specialisation (MM012 PPH12)

Compulsory courses

PPH7093F	Introduction to Health Systems
PPH7016F	Public Health & Society
PPH7018F	Introduction to Epidemiology
PPH7094S	Health Systems Research & Evaluation
PPH7041S	Health Policy & Planning
PPH7077S	The Economics of Health Systems

One of (based on prior experience, with track convenor permission):

PPH7071F	Qualitative Research Methods
PPH7070S	Quantitative Research Methods

Plus:

Three approved elective courses from those offered in the MPH or alternative, with track convenor permission

Plus:

PPH7015W	Public Health Mini Dissertation
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The Health Systems track is intended for those candidates who have an interest in seeking to change, managing within, or researching the health system. The focus is the health system as a whole - rather than particular health services, or condition specific programmes or health problems. Health system concerns address the complex range of factors that underpin service delivery (such as human resource development and management, financing and resource allocation, information systems, supply chain management and overarching models of care).

Understanding how these factors interact and influence health system performance is an essential starting point for thinking about how to change and strengthen the system. Also important is understanding the politics of policy change, the factors influencing whether health system reforms and wider health interventions are developed and implemented in ways that support achievement of their goals.

Students in the Health Systems track come from multidisciplinary backgrounds (such as the social sciences, clinical, economic, management studies and many others), and in the degree are encouraged to build interdisciplinary skills.

The seven compulsory courses give a grounding in the multi-disciplinary perspectives relevant to understanding and working at the level of the overarching health system.

Three electives can be taken from other courses within the MPH, from courses offered in other faculties or from courses offered by the University of the Western Cape. MPH students on the track can choose from a range of electives, as they are encouraged to gain a broad set of skills and experiences.

The dissertation must address health systems issues and must employ methods suitable to the question of focus. Candidates may only switch to the Health Systems track from other tracks with the permission of the convenor. Since places are limited, such permission is not guaranteed.

EXAMPLE OF FULL-LOAD PROGRESS ON THE HEALTH SYSTEMS TRACK

Year	First semester	Second semester
Year 1	PPH7018F - Introduction to Epidemiology PPH7093F - Introduction to Health Systems PPH7016F - Public Health & Society *PPH7071F - Qualitative Research Methods **Elective 1	PPH7041S - Health Policy & Planning PPH7094S - Health Systems Research & Evaluation PPH7077S - The Economics of Health Systems *PPH7070S - Quantitative Research Methods **Elective 2
Year 2	**Elective 3	
	PPH7015W - Public Health Mini Dissertation (aim for submission by September of year 2)	

* Either PPH7071F or PPH7070S compulsory (depending on previous background and track convenor discretion)

** Three electives from MPH program or outside (with convenor approval)

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE HEALTH SYSTEMS TRACK

Year	First semester	Second semester
Year 1	PPH7093F - Introduction to Health Systems PPH7018F - Introduction to Epidemiology PPH7016F - Public Health & Society	PPH7094S - Health Systems Research & Evaluation PPH7041S - Health Policy & Planning PPH7077S - The Economics of Health Systems
Year 2	*PPH7071F - Qualitative Research Methods **Elective 1	*PPH7070S - Quantitative Research Methods **Elective 2
Year 3	**Elective 3	
	PPH7015W - Public Health Mini Dissertation (aim for submission by September of year 3)	

Introduction to Health Systems and then Health Systems Research and Evaluation should be undertaken in the first year of study for HS track students.

Students can select between Quant/Qual Research methods depending on their existing skillset. In the HS Track, we require students to build a balanced interdisciplinary portfolio. For example, students coming from a strong social science are encouraged to select *Quantitative* Research Methods; whereas others would be encouraged to do *Qualitative* Research Methods.

Please discuss this selection with the track convenor before making your selection.

Possible electives for the Health Systems track

<i>Examples of electives from the MPH programme:</i> PPH7039F: Economic Evaluation for UHC PPH7053S: Public Health and Human Rights PPH7054S: Gender and Sexual & Reproductive Health PPH7063S: Epidemiology of Infectious Diseases PPH7065S: Epidemiology of Non-Communicable Diseases PPH7022S: Evidence-Based Health Care PPH7089F/S: Public Health Practicum	<i>Examples of electives from outside the programme:</i> <ul style="list-style-type: none">▪ Courses from other UCT Faculties, e.g.<ul style="list-style-type: none">○ Theory and Method in Histories of Medicine, Health and Healing▪ Courses from UWC's School of Public Health (full courses, not short courses)
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We encourage HS students to select widely from available elective courses – the track convenor can assist you in selecting courses that will balance out your particular interdisciplinary skills/experience.

It is important for candidates to confirm the timetable and their eligibility for the elective course that they have chosen.

Note that some outside electives have different credit weighting, might run against a different timetable, and might have a different fee structure. It is the student's responsibility to check these.

Eligibility for elective courses outside the MPH programme is subject to availability and approval by the course convenor (those who are running the course), and requires MPH track convenor approval prior to registration.

SOCIAL & BEHAVIOURAL SCIENCES TRACK [MM012 PPH14]

Track Convenor: Professor Lucia Knight

Deputy Track Convenor: Dr Jennifer Githaiga

Social & Behavioural Sciences specialisation (MM012 PPH14)

Compulsory courses

PPH7016F	Public Health and Society
PPH7053F	Public Health and Human Rights
PPH7071F	Qualitative Research Methods
PPH7018F	Introduction to Epidemiology
PPH7054S	Gender and Sexual & Reproductive Health
PPH6038S	Health Promotion

Plus, another four elective courses, subject to the discretion of the track convenor

Plus:

PPH7015W	Public Health Mini Dissertation
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The Social and Behavioural Sciences track is intended for those candidates with an interest in the social or behavioural aspects of public health. Some experience or background in the social sciences is desirable but not a pre-requisite. We seek candidates who want to understand how knowledge and methods from the social and behavioural sciences (including but not limited to psychology, social anthropology, sociology and history) can be applied to public health practice and improve our understanding of the social and behavioural factors that influence public health.

Graduates from the SBS track will emerge with skills in conducting social and behavioural science research. Students will also gain knowledge about the field of social and behavioural sciences, its intersections with other public health-relevant disciplines, and its application in a public health context.

Ten courses—of which six are core—are required, as is a mini-dissertation. Four electives can be taken from other courses within the MPH, from courses offered in other Faculties, or from courses offered by the University of the Western Cape. Please note that three of the core courses, Public Health and Society, Qualitative Research Methods, and Gender and Sexual & Reproductive Health include group work components. Students are expected to attend all of the semester sessions, in addition to the block week sessions unless this has been discussed and approved by the course convenor.

The mini-dissertation must address a social or behavioural science research question, and must employ qualitative and/or quantitative methods suitable to the question of focus. The track convenor will set overall guidelines for the theoretical and methodological content of the mini-dissertations. Individual dissertation topics and methods must also be approved by the track convenor.

EXAMPLE OF FULL-LOAD PROGRESS ON THE SOCIAL & BEHAVIOURAL TRACK

Year	First semester	Second semester
Year 1	PPH7016F: Public Health & Society PPH7018F: Introduction to Epidemiology PPH7071F: Qualitative Research Methods **Elective 1	PPH7053S: Public Health & Human Rights PPH7054S: Gender & Sexual & Reproductive Health PPH6038S: Health Promotion **Elective 2
Year 2	**Elective 3 **Elective 4	

	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 2)
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** Four electives from MPH program or outside (with convenor approval)

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE SOCIAL & BEHAVIOURAL TRACK

Year	First semester	Second semester
Year 1	PPH7016F: Public Health & Society PPH7018F: Introduction to Epidemiology	PPH7053S: Public Health & Human Rights PPH7054S: Gender & Sexual & Reproductive Health PPH6038S: Health Promotion
Year 2	PPH7071F: Qualitative Research Methods **Elective 1	**Elective 2 **Elective 3 **Elective 4
Year 3	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 3)	

Some suitable electives for the SBS track

<p><i>Examples of electives from the MPH programme:</i></p> <p>PPH7093F: Intro to Health Systems</p> <p>PPH7041S: Health Policy & Planning</p> <p>PPH7022S: Evidence-Based Health Care</p> <p>PPH7070S: Quantitative Research Methods</p> <p>PPH7089F/S: Public Health Practicum</p>	<p><i>Examples of electives from outside the programme:</i></p> <ul style="list-style-type: none"> ▪ Courses from other UCT Faculties, e.g. <ul style="list-style-type: none"> ○ ANS5419FS: The Meat of the Matter ○ ANS5420FS: Health, Disease and Society ○ AXL5412F: Critical Medical Humanities in Africa ▪ Courses from UWC's School of Public Health (full courses, not short courses)
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ENVIRONMENTAL HEALTH TRACK [MM012 PPH15]

Track Convener: Dr Meryl Jagarnath

Environmental Health specialisation (MM012 PPH15)

Compulsory courses:

PPH7016F	Public Health & Society
PPH7018F	Introduction to Epidemiology
PPH7098F	Environmental Health Policy
PPH7099S	Children's Environmental Health
PPH7097S	Climate Change, Pollution & Health

One of (based on prior experience, with track convenor permission):

PPH7071F	Qualitative Research Methods
PPH7070S	Quantitative Research Methods

Plus:

Four approved elective courses from those offered in the MPH or alternative, with track convenor permission [Note that there are restrictions on how many PPH4000 or PPH6000 courses can be taken, and some credit weighting differences that need to be taken into account]

Plus:

PPH7015W	Public Health Mini Dissertation
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The Environmental Health track is intended for those candidates who are interested in understanding the environmental determinants and influences on human health, the policy implications, and how to identify, reduce and manage environmental health risks. Candidates will develop an understanding of key environmental health burden of diseases (i.e., chemicals, climate change, indoor and outdoor air pollution and the built environment) with a particular focus on environmental justice and children's environmental health issues. Coursework will prepare candidates to identify suitable interventions for decision makers to community residents.

Ten courses (six core and four electives) and a mini-dissertation is required for this track (see table). The six compulsory courses provide grounding in environmental health policy (e.g., environmental justice, rights-based risk management, public policy), risk management and assessment, as well as risk communication and interventions (e.g., implementation science, research translation). Four electives can be taken from other courses within the MPH, from courses offered in other faculties or from the Master's in Chemicals Risk Management (MM037) offered by the Division of Environmental Health. When selecting electives, students should consider their areas of interest (e.g. environmental epidemiology, climate change) and the kind of research methods they would like training in (e.g. quantitative and qualitative).

The mini-dissertation must address an environmental health related research question and must employ the appropriate quantitative or qualitative research methods for this question. Students are expected to choose a supervisor in relation to their research question. Individual dissertation topics and methods must be approved by the track convenor.

EXAMPLE OF FULL-LOAD PROGRESS ON THE ENVIRONMENTAL HEALTH TRACK

Year	First semester	Second semester
Year 1	PPH7018F: Introduction to Epidemiology PPH7016F: Public Health & Society *PPH7071F: Qualitative Research Methods **Elective 1	PPH7099S: Children's Environmental Health PPH7097S: Climate Change, Pollution & Health *PPH7070S: Quantitative Research Methods **Elective 2 **Elective 3
Year 2	PPH7098F: Environmental Health Policy **Elective 4	
	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 2)	

* Either PPH7071F or PPH7070S compulsory (depending on previous background and track convenor discretion)

** Four electives from MPH program or outside (with convenor approval)

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE ENVIRONMENTAL HEALTH TRACK

Year	First semester	Second semester
Year 1	PPH7018F: Introduction to Epidemiology PPH7016F: Public Health & Society	PPH7099S: Children's Environmental Health PPH7097S: Climate Change, Pollution & Health
Year 2	PPH7098F: Environmental Health Policy *PPH7071F: Qualitative Research Methods **Elective 1	*PPH7070S: Quantitative Research Methods **Elective 2 **Elective 3
Year 3	**Elective 4	
	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 3)	

Possible electives for the Environmental Health track

<i>Examples of electives from the MPH programme:</i> <ul style="list-style-type: none"> PPH7041S: Health Policy & Planning PPH7089F/S: Public Health Practicum PPH7077S: The Economics of Health Systems PPH7053S: Public Health and Human Rights PPH7065S: Epi of Non-Communicable Diseases PPH7021F: Biostatistics I PPH7092S: Biostatistics II 	<i>Examples of electives from outside the programme:</i> <ul style="list-style-type: none"> PPH4041S: International Chemicals Management Agreements (online); 20 credits PPH4034S: Pesticide Toxicology (online); 20 credits PPH6032R: Research Literacies (online); 12 credits PPH6033R: Risk Communication and Policy Brief Development (online); 12 credits PPH6035Q: Core Course in Chemicals Risk Management (online); 12 credits PPH6036R: Chemical Risk Assessment for Managers (online); 12 credits Courses from other UCT Faculties, e.g. <ul style="list-style-type: none"> Dept Environ & Geog: Introduction to Climate Change and Sustainable Development (EGS5031F); 23 credits Dept Environ & Geog: Climate Change Adaptation and Mitigation (EGS5032S); 23 credits <ul style="list-style-type: none"> Courses from UWC's School of Public Health (full courses)
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GENERAL PUBLIC HEALTH TRACK [MM012 PPH07]

Track Convenor: Associate Professor Jill Olivier

As of 2019, we do not offer general admission into the General track. However, candidates may switch from the Epidemiology, Health Systems, Social & Behavioural Sciences or Environmental Health tracks to the General Public Health track with the permission of the programme convenor.

Generally, changing into the General Public Health track takes place due to special circumstances that students may encounter during their studies. *No student may enroll directly into the General track, and any move involving the General track must be discussed in detail with the Track and Programme Convenor.*

General Public Health specialisation (MM012 PPH07)

Compulsory courses

PPH7016F	Public Health & Society
PPH7018F	Introduction to Epidemiology
PPH7021F	Biostatistics I
PPH7070S	Quantitative Research Methods

One or two of the following:

PPH7041S	Health Policy & Planning
PPH7093F	Introduction to Health Systems
PPH7094S	Health Systems Research & Evaluation

Plus: Four or five approved elective courses from those offered in the MPH or alternative, with track convenor permission

Plus: PPH7015W Public Health Mini Dissertation

GLOBAL SURGERY TRACK [MM012 CHM32] - AVAILABLE FROM 2025

Convenor: Professor Salome Maswime

The aim of the programme is to enable students to understand the magnitude, causes, and control strategies for surgical diseases in Africa at a population scale, and enable them to apply this in the design and implementation of surgical services and systems. The specialization will examine public and global health systems in surgery and explores strategies to improve surgical care in the African context.

Learning objectives include: the measurement and analysis of the state of surgical health care at individual and population level; developing strategies for the prevention of disease and disability due to surgical diseases and injuries, the promotion of health and advocacy for implementation of improved intervention strategies at population level; and the fostering of equity in the delivery of surgical services in health systems.

Global Surgery MPH specialization

Compulsory courses:

CHM6045F	Fundamentals of Global Surgery
CHM6022F	Community Eye Health 1 (<i>if this course is not run in 2026, an alternative will be offered</i>)
PPH7016F	Public Health & Society
PPH7018F	Introduction to Epidemiology
PPH7071F	Qualitative Research Methods
PPH7093F	Introduction to Health Systems
CHM6048S	Global Surgical Systems
PPH7070S	Quantitative Research Methods

Plus: Two approved elective courses from those offered in the MPH or alternative, with track convenor permission

Plus: PPH7015W Public Health Mini Dissertation

Possible electives for the Global Surgery track

<i>Examples of electives from the MPH programme:</i>	<i>Examples of electives from outside the programme:</i>
CHM6023F: Community Eye Health 2	<ul style="list-style-type: none">▪ Courses from other UCT Faculties▪ Courses from UWC's School of Public Health (full courses, not short courses)
PPH7041S: Health Policy & Planning	
PPH7065S: Epidemiology of Non-Communicable Diseases	
PPH7022S: Evidence-Based Health Care	
PPH7053F: Public Health and Human Rights	
PPH7077S: The Economics of Health Systems	
PPH7016F: Public Health and Society	
PPH7098F: Environmental Health Policy	
PPH7096F: Cancer prevention and control	

EXAMPLE OF FULL-LOAD PROGRESS ON THE GLOBAL SURGERY TRACK

Year	First semester	Second semester
Year 1	CHM6045F: Fundamentals of Global Surgery PPH7016F: Public Health & Society PPH7018F: Introduction to Epidemiology PPH7093F: Introduction to Health Systems	CHM6048S: Global Surgical Systems PPH7070S: Quantitative Research Methods **Elective 1 **Elective 2
Year 2	CHM6022F: Community Eye Health 1 PPH7071F: Qualitative Research Methods	
	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 2)	

** Two electives from MPH program or outside (with convenor approval)

EXAMPLE OF PARTIAL-LOAD PROGRESS ON THE GLOBAL SURGERY TRACK

Year	First semester	Second semester
Year 1	CHM6045F: Fundamentals of Global Surgery PPH7016F: Public Health & Society PPH7018F: Introduction to Epidemiology	CHM6048S: Global Surgical Systems PPH7070S: Quantitative Research Methods
Year 2	PPH7093F: Introduction to Health Systems CHM6022F: Community Eye Health 1 PPH7071F: Qualitative Research Methods	**Elective 1 **Elective 2
Year 3	PPH7015W: Public Health Mini Dissertation (aim for submission by September of year 3)	

COMMUNITY EYE HEALTH TRACK [MM012 CMH03] – DISCONTINUED

There is no further intake for the Community Eye Health track. Students already registered on this code before 2025 will complete against the previous requirements.

Students interested in Community Eye Health as a specialization are encouraged to apply for the Global Surgery track, in which an interest in CEH will be supported.

MPH MINI- AND MINOR DISSERTATIONS

Scope and standard

The MPH is primarily a coursework degree. The mini/minor-dissertation thus needs to be distinguished from that required for a Masters by thesis alone. The purpose of the dissertation is to show that the candidate is able to carry out supervised but independently-conducted research, has a grasp of the research tools in the chosen field and is familiar with the more important publications on the subject. It should also demonstrate that the candidate is able to communicate results and to evaluate his or her own work and that of others critically.

A mini/minor-dissertation should have a limited focus and scope, e.g. on one research question rather than many. Candidates will need to work closely with their supervisor to focus the question and manage the scope. The research is often a secondary analysis, or one smaller aspect of a larger research project.

The standard of presentation for the journal article component is a manuscript formatted for submission to a peer-reviewed academic journal. The publication worthiness of the work is not directly related to mark, and the publication worthiness of the manuscript is not a pass/fail criterion. However strong dissertations will be more likely to be awarded higher marks as well as be suitable for publication.

Weighting

The MPH currently weights the mini-dissertation at 33% of the total programme mark for all tracks except the Health Economics track (i.e. for General Public Health, Epidemiology, Health Systems, Social & Behavioural Sciences, Environmental Health and Community Eye Health). The remaining two thirds is made up of ten courses.

The MPH Health Economics track weights the minor-dissertation at 50% of the programme mark with the remaining 50% made up of eight courses. In turn, the dissertation rules for the Health Economics track are different to those for the other tracks.

The mini-dissertation and coursework have to be passed independently, i.e. the coursework mark cannot compensate for a fail on the mini-dissertation, and vice versa. To be awarded the degree with distinction, at least 70% is required on the dissertation. See section 2.9 of brochure for the rule regarding programme distinction.

Research approaches required for ‘independent research projects’ at master’s level

Master’s level research projects needs to demonstrate a particular scientific method, and must include data collection and analysis. This can take the form of primary research (involving new primary data collection), or secondary research (new analysis of existing data). Literature reviews are acceptable as the main research approach – however, it needs to be a style of review that is scientifically replicable (usually a ‘systematic review’ of some type).

Structure

Track-specific guidance will be provided relating to dissertation forms and structures – as the disciplinary nature of each specialisations will impact on the dissertation style and structure.

- **Mini-dissertation (33%):** Includes front matter, publication ready journal article, and Appendices. The Department and Ethics-approved research protocol is included as the first Appendix – and it includes a brief narrative-scoping literature review.
- **Minor-dissertation (50%):** Includes front matter, structured literature review, publication-ready journal article, An editorial/opinion piece/policy brief, and Appendices. The Department and Ethics-approved research protocol is included as the first Appendix – and it includes a brief narrative-scoping literature review.

Note that this structure applies from 15 February 2024. Earlier versions will differ in structure – with the protocol and literature review positioned in a different part of the package

Structure for the 33.3% 'mini' dissertation	Structure for the 50% 'minor' dissertation
For the Health Systems, Environmental Health, Socio-Behavioural Sciences, Epidemiology, Community Eye Health tracks	For the Health Economics track
Front Matter (both mini/minor dissertations)	
Name and degree information, Plagiarism statement, Contents, Acknowledgments (for dissertation, not publication), etc	
	Part A: Structured/organised literature review A structured literature review appropriate to the subject matter and methods of the dissertation. The review should not exceed 10,000 words. This will not ordinarily be of the detail or standard required for a 'Cochrane-style' systematic review but will have been researched in a structured/organised manner. It needs to include important literature in the field but does not have to be exhaustive/comprehensive.
Part A: Journal manuscript A 'submission-ready' manuscript of an article for a named peer reviewed journal. The manuscript must meet all the requirements set out in the Instructions for Authors of that journal, including wordcount and referencing style. The journal must allow at least 3 000 words. Supervisors will assist candidates to identify an appropriate journal. The article does not have to be submitted to the journal in order to meet academic requirements. Title, authors, abstract, keywords Journal specified headings: usually – Introduction, Methodology, Results, Discussion, Conclusion, References Acronym list Acknowledgements: including a description of the role played by each person who would be expected to be an author on a published article. In a dissertation derived from work started by others, e.g. analysis of data from another project, the candidate's contribution must have been made after his/her registration and therefore under supervision. In a multi-author project, the candidate would be expected to be first author	Part B: Journal manuscript A 'submission-ready' manuscript of an article for a named peer reviewed journal. The manuscript must meet all the requirements set out in the Instructions for Authors of that journal, including word count and referencing style. The journal must allow at least 3,000 words. The Instructions to Authors must be appended. Supervisors will assist candidates to identify an appropriate journal. The article does not have to be submitted to the journal in order to meet academic requirements. Title, authors, abstract, keywords Journal specified headings: usually – Introduction, Methodology, Results, Discussion, Conclusion, References Acronym list Acknowledgements: including a description of the role played by each person who would be expected to be an author on a published article. In a dissertation derived from work started by others, e.g. analysis of data from another project, the candidate's contribution must have been made after his/her registration and therefore under supervision. In a multi-author project, the candidate would be expected to be first author
	Part C: Brief An editorial/opinion piece/policy brief – max 3,000 words.
Appendices (both mini/minor dissertation)	
Research protocol (required): The protocol (as approved by the Departmental Research Committee and the Faculty Research Ethics Committee) is usually 15-25 pages without references or Appendices. Required protocol sections include: <ul style="list-style-type: none"> - Introduction: usually quite brief, providing an overview, and the main issue/topic being investigated - Literature review: a brief narrative/scoping literature review with relevant references (not comprehensive/systematic) that shows critical awareness of important literature and argues the substantive relevance of the topic/question, as well as any conceptual frameworks. - Research question - Aim and objectives of the study - Methods: detailed explanation of methods that will be used to collect and analyse data, including phasing of the research, specific analytical approach(es), and manner in which rigor will be ensured - Ethics: description of ethical implications and considerations, as well as approaches to ensure research integrity - Research to practice: brief description of potential impact of research on policy/practice, and any communication strategies - Timeline and Budget - References 	

Research appendices (there will be some variations depending on study type)

Questionnaire/data capture instrument(s)

Ethics consent form(s)

Selected tables or figures, with brief explanatory text, that would be useful for the examiner to see as part of the analyses, but which could not be included in the article for reasons of space. These should not simply be a collection of analysis printouts but should be readable as an addendum with reference to the article.

Any technical appendices needed – for example, laboratory techniques, statistical formulae.

The Ethics Approval letter(s) – or letter confirming ethic not required

The instructions for authors for the target journal (required)

Style

There is no specific style guide or overall length requirement. Style concerns (such as referencing style, formatting of headings, etc.) will be determined by the selected journal style guideline.

Using reasonable spacing styles (below) and including references appendices, mini/minor dissertation packages can range from 50-100 pages in total. It is important to work with your supervisor to ensure the dissertation project has an adequate 'scope' for completion (more important than obsessively watching page counts).

Recommended page set-up:

- Use A4 page set-up
- Left and right margins 2cm
- Recommended fonts: Arial, Calibri, Times New Roman, Book Antiqua, or Bookman Old Style. Avoid the 'comic' fonts.
- Font size 11
- Page numbers in the same font as the font you are using for the text
- Set language (dictionary) to English [South Africa] – ensure consistent language style across the whole dissertation
- Line spacing: recommended 1.5 or 'exactly 16'
- Paragraph spacing: 6pts after each paragraph – without additional paragraph breaks
- Text inside tables and figures: Font size 10, single line space
- References: use the selected journal referencing style across the whole dissertation. Reference lists should be precisely matching that journal's style (we recommend that you use a Reference manager). Reference lists should be in a smaller font (size 10) with tighter line spacing to reduce space.
- Appendices can be styled with smaller font (size 10) and with tighter line spacing (single spacing)

Clear, grammatically correct English is essential. Candidates who have difficulties are encouraged to seek help from the writing support facilities on main campus.

Supervisors are *not* required to do detailed editing or correction of spelling, grammar or style. They may refer candidates elsewhere for this, at the candidate's own expense.

Previous MPH dissertations are available in hard copy in the Health Sciences Library as well as (more recently) on <https://open.uct.ac.za/home>. Note that the MPH format has changed slightly over the years (including the positioning of the literature review and protocol).

Choice of subject matter

The dissertation can be done in any area in which coursework has been done and in which a suitable supervisor can be found. This includes health economics, epidemiology, biostatistics, health systems, health services management, clinical epidemiology and social and behavioural sciences applied to health and health care. It must be appropriate to the track chosen. If in doubt the advice of the track or programme convenor should be sought. There may be limitations on choice of a subject, research methodology or subject area owing to lack of a suitable supervisor.

Choice of methodology

The research should involve collection of data using quantitative or qualitative methods or a combination of the two (or formal review methods if a systematic review). Data may derive from interviewing, observing or examining research participants, or from publications, records, registration or notification systems or other databases.

Use of prior or collaborative work

Candidates are encouraged to arrive with a topic/area of interest. However, the principle is that a substantial part of the research should be completed during the degree period under supervision. *Analysis of already collected data or secondary data analysis is allowed.* In such cases, analysis and write up of these data would form the basis of the dissertation.

In the case of collaborative work, the role of each contributor should be clearly stated in the Acknowledgements section. (In collaborative work, the candidate would be expected to be the first author of any publication arising from the dissertation work).

Time planning

The earlier the protocol development is commenced, the better. Candidates need to pace their dissertation progress according to graduation horizon. For example, candidates seeking to graduate within two years should have their protocol ready towards the end of the first year and data collected and/or analysis completed by May of the second year. Your track convenor will work with you to develop a dissertation timeline, usually working backwards from desired date of graduation (with submission six months prior to that).

Finding supervisors

Candidates are encouraged to seek out their own supervisor within the School, faculty or university, who should ideally be knowledgeable in the content and methods of the subject area. Candidates should feel free to approach the programme convenor or staff for guidance. Additional statistics guidance may be needed – candidates should approach the staff who teach biostatistics in the first instance.

Please take note of the following when selecting a supervisor:

- Generally the student must be registered for a degree in the department of the main supervisor. The co-supervisors may be from other departments/faculties or even may be external. This applies to both full research Masters and PhD students. Deviations from this are possible, allowing the main supervisor to be from outside the department in which the student is registered, but this should be discussed in advance with the programme convenor.
- A co-supervisor may be based inside or outside the university – in all cases, at least one internal (UCT) supervisor is required to serve as a guide and link to university procedures.
- Both the supervisors and co-supervisors retain responsibilities to the candidate and the University, and their willingness and ability to meet these responsibilities until the dissertation process is complete, i.e. graduation, needs to be established by the candidate in advance.
- First time supervisors must have a UCT co-supervisor. There is no provision for payment of external co-supervisors.
- Supervisors and candidates are required to sign a Memorandum of Understanding and Progress Report annually.

Managing supervisor-student expectations

Supervision occurs over a sometimes stressful period of time. To ensure a good supervision experience, we advise that students clarify their expectations of the extent of supervisor input they are entitled to receive. Mini/minor dissertations do not receive the same level of supervision as a full masters or PHD degree. Supervision of a mini/minor dissertation amounts to *50 hours* (if you have more than one supervisor, these 50 hours are shared between them – therefore you should not expect both supervisors to do all of the steps below):

For a single supervisor, 50 hours usually amounts to:

1. An initial one-hour meeting to discuss the research focus and question (this should only be arranged *after* the student has conducted some initial scoping review about this topic)
2. Completion of MOU with the student
3. Review of a fully drafted research protocol (completed to 'polished' level by the student, with all sections complete)
4. *If necessary*, a secondary review of the edited research protocol
5. Review of research package including cover letter, FHS13, FHS14, FHS15
6. A *one-hour* 'analysis' meeting – to discuss data collection and data analysis before write-up
7. Review of fully drafted research article (completed to 'polished' level by the student)
8. *If necessary*, a *one-hour* meeting to discuss maturation of research findings and conclusions
9. *If necessary*, a secondary review of the edited research protocol
10. Check of full dissertation package (everything included) before Intent to Submit – including checking of full Turnitin report
11. Submission and examination paperwork (not seen by student)
12. Working with student on any corrections required
13. Supporting any project closure required

Any additional calls/emails or review would be additional – and should only be requested if absolutely necessary.

Please note, it is not the supervisor's responsibility to line-edit your dissertation for style, grammar, or spelling. If a supervisor notes on your work that you need to edit it for any of these, you should undertake that across the whole document. In some instances, your supervisor might require you to seek additional editorial support.

Dissertation research approval processes

At the start of the dissertation journey, all student research needs to be cleared by the Department Research Committee (DRC) and the Faculty of Health Sciences Research Ethics Committee (HREC).

- Departmental ("School") approval for a research proposal must be sought by submitting
- A cover letter (signed by student and the supervisor), a research application form (*available on the postgraduate website – called the FHS13*) and the proposal as soon as it is ready, to the Departmental Research Committee. The form should be signed by the supervisor(s) undertaking to act as supervisor(s) and approving the proposal.

Diagram showing MPH research project process – in particular research approvals

By early December the year preceding dissertation registration:

- Have independently conducted initial literature review around topic(s), settle on topic (in consultation with track convenor), meet with potential supervisors, form agreement with potential supervisor



At the beginning of first year of dissertation registration:

- Register for the mini/minor whole year dissertation
- At the same time, based on discussion with supervisor, complete a *Memoranda of Understanding* (MOU) online, which includes topic description, ethics requirements, and a specific timing plan (in subsequent years, a *Progress and Planning Assessment* PPA)



Early in the year of dissertation registration:

- Complete the *research protocol*, with supervisor's approval
- Develop a package which includes: a) a cover letter on a UCT letterhead signed by supervisor and student, b) a research protocol application form (FHS13, using latest version, downloaded from <https://forms.uct.ac.za/>) properly signed by student and supervisor (who is the PI of the research), c) a research synopsis (FHS14), d) your research protocol (FHS15), and e) necessary Appendices. Note that this package needs to be developed by all students, irrespective of whether the research is primary/secondary or low/high risk.
- Name this package in the following format (e.g. Smith_MPHstudent protocol_2025) and collate it as one pdf document that is not locked against further editing
- Send this package to the **Departmental Research Committee** for review and approval (sph-drcethics@uct.ac.za) - this can take around a week to process, if there are no corrections or changes required
- Once approved and returned to you, if necessary, submit to the **Faculty Human Research Ethics Committee** for approval/clearance (hrec-submissions@uct.ac.za). Minor dissertations are usually expedited. This might take anything from 1-4 months depending on the level of risk, and whether there are corrections required by the reviewers.
- Once approved, you will receive a letter from HREC - which should be stored for later, and included as an Appendix in your dissertation package
- If your research requires further clearance from other Ethics Committees (e.g. if the research is being conducted in another country), or by the South African Department of Health - (i.e. if research is being conducted in/on a public facility) then this should be done now.
- After you have received clearance from all appropriate bodies, you may begin data collection and analysis



During the dissertation:

- If the protocol is later changed in a way which has ethical implications, adaptations need to be approved by HREC



Submission of your dissertation:

- Six weeks prior to submission, an Intent to Submit form and accompanying materials need to be loaded online. An ITS should only be uploaded if you already have a full draft protocol that has been approved by your supervisor. This draft should have already been checked for Plagiarism through Turnitin. The last 6 weeks should only be used for line-editing.



Completion of your dissertation research:

- Once your dissertation has gone through examination, and corrections have been completed (see below), it is important to remember that your research project still needs to be wrapped up. This includes communication of findings to appropriate partners and stakeholders as well as closing the project with HREC.

Submission of dissertation

Details on the process of submitting the mini-dissertation are available from the programme administrator and the Faculty of Health Sciences Postgraduate Office. All submissions are digitally uploaded, hard copies are not required.

- **To graduate in March** of the following year – dissertations must be submitted six months prior, before early September (with the full draft dissertation complete for the Intent to Submit six weeks prior to that)
- **To graduate in September** of the following year – dissertations must be submitted six months prior, before early March (with the full draft dissertation complete for the Intent to Submit six weeks prior to that)

The Faculty of Health Sciences Postgraduate Office must be informed at least 6 weeks in advance by way of a digitally uploaded Intention to Submit form. The contact for the Post Graduate office is for dissertation matters is fhs-cdmc-exams@uct.ac.za

The supervisor will be asked by the Faculty Officer to submit a form supporting submission. Co-supervisors should do this in cooperation with the supervisor. Candidates are strongly advised to have their supervisors' approval before submitting.

All candidates have to pay the full dissertation fee at least once.

The whole-year dissertation registration technically runs from registration in January/February to the end of the second semester (November/early-December). If the student has not submitted by that time, there is a window in which the student may submit any time before the start of the first semester of the next year without incurring re-registration fees (usually mid-February). However, it is important to note that this is a technical window. The formal academic leave period is from mid-December to mid-January. Therefore, the student should not expect administrative or supervision support during that period. This often makes completion challenging. We *strongly* recommend that MPH students do not *plan* to submit in February, and only utilize this as an additional window for independent editing or final polishing.

A rebate on the annual dissertation fee may be obtained in the second or subsequent years of registration of the dissertation if the dissertation is submitted earlier in the year. The precise submission deadlines relating to these fee rebates can be found in the Fees handbook of that year <https://uct.ac.za/students/study-uct-handbooks/handbooks> - and are usually in April (75% rebate), July (50% rebate), September (25% rebate).

Examiners

Three examiners are nominated by the supervisor, two of whom are invited to examine, and one held as an alternate. One examiner must be internationally based. All examiners must be external to UCT. These nominations are circulated to the Faculty Dissertations Committee for approval, as well as the Faculty Deanery.

It is the supervisor's responsibility (with co-supervisors as relevant) to submit names of potential examiners to the Faculty Officer when the candidate is ready to submit. It is against the university rules for the supervisor to be involved in or influence the examination process in any way after that nomination. Examiners will be asked not to communicate with supervisors during the examination process.

It is against university rules for the student to be involved in or influence the examination process in any way. *The candidate may not be informed of the identity of the examiners.* After the outcome of the dissertation has been finalised, the examiners' identities are made known if the examiners have indicated that they do not object to this.

Corrections and finalisation

MPH dissertation results range from a Pass (with a specific percentage), a Revise and Resubmit (where the corrections required are extensive, but the research is salvageable), to a Fail (not worthy of resubmission).

Most (all) passing dissertations return with corrections from the examiners. Guidance for these corrections will be provided by the PG Office, and includes a template for corrections (which works in the same way as a journal review process, where the candidate will address each comment/suggestion made, and respond how they have made changes to address these) – with the supervisor's approval.

Once corrections have been completed and certified by the Faculty Committee – the degree can be awarded and finalized. The student must load a final version of the dissertation online – which will be the version that is provided openly on open.uct.ac.za.

As per the diagram above, it is important that students do not forget to 'close' their research projects. This includes any ethics procedures, and communicating results to stakeholders and participants if appropriate. It is a matter of research integrity to ensure that research is properly communicated as promised – and this needs to be taken seriously, even if the examination process is technically complete.

Publication

Candidates are *not* required to publish their research for purposes of the qualification. However, where research participants have contributed time, effort or resources, failure to meet dissemination or publication commitments made in the Ethics section of the research protocol or on a consent form can be regarded as unethical. Reporting or dissemination commitments should be met as soon as possible after the research is completed. Likelihood of being able to meet such commitments should be taken into account when preparing the protocol and consent form.

Candidates are encouraged to undertake to publish the study if of appropriate standard, with the supervisor(s) as a co-author(s). This will almost always require work beyond the graduation date.

Other co-authors on a publication arising out of the dissertation could include anyone who has made a substantial intellectual or academic contribution to the study. Measures of this contribution include time spent on developing the proposal, assisting with the analysis, reviewing results and assisting with their interpretation.

Some small Faculty funding is available to support publication of student research after completion – please speak to your supervisor to consider if the conditions would apply.

Please always check with your supervisor before submitting to a journal – this is important for research integrity – but it is also important for them to advise you on matters such as journal publication/page costs.

In some cases, if the MPH student has not submitted the dissertation project to a journal within a year of graduation, then supervisor holds the right to submit on their behalf.