



# UNIVERSITY OF GOTHENBURG

## SAHLGRENSKA ACADEMY

### **LÄA102, Degree project with global health, 30,0 higher education credits**

Examensarbete med inriktning mot Global hälsa, 30.0 högskolepoäng

*Second Cycle*

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#### **1. Confirmation**

The course syllabus was confirmed by Committee for Study Programmes in Medicine on 2011-09-22 and was last revised by Committee for Study Programmes in Medicine on 2012-03-01 to be valid from 2012-01-16.

*Field of education:* Medicine 100 %

*Department:* Department of Medicine

#### **2. Position in the educational system**

The course is included in the Program of Medicine 330 educational credits/330 ECTS credits, semester 10.

*Main field of studies*

Medicine

*Specialization*

A2E, Second cycle, contains degree project for Master of Arts/Master of Science (120 credits)

#### **3. Entry requirements**

To be eligible for this course a pass must have been obtained for the courses in Biomedicinsk fördjupning: Patogenes (BF1) 3 hp, Biomedicinsk fördjupning: Patofysiologi (BF2) 3hp and Biomedicinsk fördjupning - Kritisk analys av medicinska data (BF3) 3 hp.

#### **4. Course content**

The course gives the student experience within science and research. The main purpose of the course is for the student to acquire improved knowledge and enhanced understanding of a topic of special interest to the student within the broad area of medical research. The Degree Project, which is the core of the course, can be an experimental, epidemiological or a clinical project or an analytical systematic review of the literature. The Degree Project can take place at University of Gothenburg or another institution of higher education with similar status in Sweden or abroad.

The course consists of four different parts; an introductory part on research methods, a module on Global Health, to plan and carry through a scientific project and, finally, an oral and written thesis examination.

The introductory module on Global Health (4 weeks) will present a theoretical background to the health situation in low-and middle income countries. This course is compulsory for students that plan to undertake their Degree Project in in such a country.

This module is built on four main themes: global overview of social determinants of health, health systems and the right to health, communicable diseases, and non-communicable diseases awith sessions on research methodology focused on qualitative methods.

The main aim of this course is to give the student theoretical and practical in-depth knowledge within a field of interest to the student. The deepening of a subject will be exercised through collecting data that will be analysed, compiled and presented. The student should be aware of how hypotheses are tested and how to plan, carry through and present a scientific project.

The subject for the Degree Project, and how it should be carried through , is to be decided in consultation with the tutor. A written agreement and a project plan should be developed. Learning is supported in individual tutorials and in group sessions throughout the course. Each student is to hand in an individual thesis and to present it orally in a seminar where experts in the particular topic will be present. The thesis is then scrutinized and approved of by an appointed examiner.

## 5. Learning outcomes

After the course, the student should, with a high degree of autonomy, be able to:

### *Knowledge and understanding*

- identify and evolve relevant scientific hypothesis/research questions
- plan and with adequate scientific methods, in an ethical manner, implement a scientific project
- describe and discuss the influence of social determinants such as poverty, gender and other psychosocial factors on population health
- describe the differences between qualitative and quantitative method s and their relevance in relation to a scientific project

### *Skills and abilities*

- identify, obtain, summarize and critically examine complex medical and scientific information
- prepare, summarize, explain and defend obtained results
- critically assess scientific information and, in an objective and scientific manner oppose and discuss and assess strengths and weaknesses
- critically analyse how differences in overall life circumstances affect health in the individual and at population level
- suggest relevant strategies on the structural and local levels to improve population health

### *Judgement and approach*

- assess and contrast the possibilities and boundaries of science
- discuss ethical aspects on research and development
- analyze the impact of collaboration and learning from others in conjunction with the planning, implementation and interpretation of the Degree Project

- discuss and argue for the importance of a more equitable allocation of resources to improve health in a global perspective
- discuss ethical aspects, values and priorities in relation to limited resources within prevention and curative health work

## 6. Literature

See appendix.

## 7. Assessment

The Degree Project shall lead to a thesis written in English in the form of a systematically structured report with the scientific article as a model. The degree projects within Global Health are performed in collaboration with a Swedish and an international tutor. It is therefore necessary that the thesis is written in English as the results should be interpretable in the country where the study was performed. This is also a requirement for ethical permission to perform the study.

To obtain the grade pass (G) the student shall also obtained the grade pass (G) on the following parts:

- participated in the introductory part of the course and other project specific activities/seminars.
- approval of the module on Global Health including a written examination and an oral presentation. In addition, attendance and active participation at seminars, team-work and presentations
- performed a Degree Project equivalent to 20 weeks full time studies
- presented the Degree Project orally at a seminar with experts within the area of thesis
- presented the Degree Project as a poster at the examination day
- been the opponent on another students thesis
- submitted the Degree Thesis (in pdf format) electronically to the secretary of the course
- the appointed examiner has approved the written thesis

A student who has failed an examination twice has the right to change examiner, unless weighty arguments can be adduced. A written application shall be sent to the board of the department.

## 8. Grading scale

The grading scale comprises Fail (U), Pass (G).

(The Board of the Academy has on November 2, 2006 decided this grading scale may be utilized for courses given by the Sahlgrenska Academy).

## 9. Course evaluation

A general (Sahlgrenska Akademiens gemensamma kursvärdering) and a course-specific evaluation in writing will be performed after the course. During the course there will be meetings where representatives for students and the course management discuss the content and implementation of the course.

## 10. Additional information

Language of instruction: Swedish.

The course is offered in Swedish but the thesis should be written in English. However, the module on Global Health is offered in English only

Responsible department: Institute of Medicine. The Institute of Biomedicine, the Institute of Clinical Sciences, and the Institute of Neuroscience and Physiology, also participate in the course.

## **LÄA102 Degree project with global health /Examensarbete med inriktning mot global hälsa**

The literature list is established by the Committee for Study Programmes in Medicine 2011-11-22 and revised 2012-05-30.

### **Course book**

Lindenstrand Ann, et al. *Global Health, an introductory textbook*. Narayana press Denmark: Studentlitteratur, 2006. ISBN978-91-44-02198-0 (326 pages)

Alternative book I:

Skolnik, Richard. *Global health 101*, second edition, Publisher: Jones & Bartlett Learning International, London, 2012. (434 pages)

Alternative book II:

Gatti Anna, Boggio Andrea. *Health and Development, Toward a matrix Approach*. Palgrave Macmillan, 2009. ISBN-13:978-1-4039-4737-6 (254 pages).

### Additional recommended literature:

#### **Social determinants**

*Commission on social determinants of health, final report- Health equity through action on the social determinants of health*. World Health Organisation, Geneva. 2009

McMichel A, et al. *Mortality trends and setbacks: global convergence or divergence?* The Lancet 2004; 363 (April 3): 1155-1159.

Scott, V. et al. *Research to action to address inequities: the experience of the Cape Town equity gauge*. International Journal for Equity in Health 2008, 7:6.

#### **Health systems and the right to health**

Backman, G (editor). *The right to health- theory and practice*. Studentlitteratur, Lund, 2012. (book, 368 pages)

Backman, G. et al. *Health systems and the right to health an assessment of 194 countries*, Lancet 2008; 372: 2047–85

Reich, M.I. et al. *Global action on health systems: a proposal for the Tokyo G8 summit*. Lancet 2008; 371: 865-69.

#### **Health economics**

*World in your pocket – a handbook of international health economics statistics*. Institute of Health Economics, IHE, Canada, 2007.

#### **Climate change and sustainable development**

Mc Michael et al. *Promoting global health while constraining the environmental footprint*. Annual Rev. Public Health, 2011, 32; 10.1-10.19

#### **Gender**

Sciarra, J. *Global issues in women's health*. Int J of Gynaecology and obstetrics. 104 ( 2009) 77-79

Henshall Momsen, J. *Gender and Development*. New York: Routledge, 2004, reprinted 2007. 266 pages (book, individual chapters.)

Murthy, P & Smith C.L (editors) *Women's global health and human rights*. Jones & Bartlett Publishers, London. 2010 ( 556 pages)

Farid-ul-Hasnain S, Johansson E, Mogren I, Krantz G. *Young adults' perceptions on life prospects and gender roles as important factors to influence health behaviour: an explorative qualitative study from Karachi, Pakistan*. Accepted for publication in Global Journal of Health Sciences 2011, Dec.

### **Violence**

Vung ND, et al. *Intimate partner violence against women in rural Vietnam: different socio-demographic factors are associated with different forms of violence. Need for new intervention guidelines?* BMC Public Health 2008; Feb 11; 8(1):55.

Krantz G, Vung ND. *The role of controlling behaviour in intimate partner violence and its health effects: a population based study from rural Vietnam*. BMC Public Health. 2009 May 14; 9:143.

Ali TS, Asad N, Mogren I, Krantz G. *Intimate partner violence in urban Pakistan: prevalence, frequency and risk factors*. Int J Womens Health. 2011 Mar 16;3:105-15.

Ali TS, Mogren I, Krantz G. *Intimate Partner Violence And Mental Health Effects: A Population-Based Study among Married Women in Karachi, Pakistan*. Int J Behav Med. 2011 Oct 27. [Epub ahead of print].

Ali TS, Krantz G, Gul R, Asad N, Johansson E, Mogren I. *Gender roles and their influence on life prospects for women in urban Pakistan - a qualitative study*. Glob Health Action. 2011;4:7448. doi: 10.3402/gha.v4i0.7448. Epub 2011 Nov 2.

### **Communicable diseases**

King, C.H. et al *Asymmetries of Poverty: Why global burden of disease valuations underestimate the burden of neglected tropical diseases*. PLoS Negl Trop Dis 2008; 2 (3)

Potts, M. et al. *Reassessing HIV Prevention*. Science 2008; 320: May 9th.

Ingstad, B. et al. *The evil circle of poverty: a qualitative study of malaria and disability*. Malaria J, 2012, Jan, 11; 11-15

Hasnain F, Johansson E, Krantz G. *What do young adults know about the HIV/AIDS epidemic? Findings from a population based study in Karachi, Pakistan*. BMC Infectious Diseases, 2009, Mar 26; 9:38.

Hasnain F, Krantz G. *Assessing reasons for school/college dropout among young adults and implications for awareness of STDs and HIV: Findings from a population-based study in Karachi, Pakistan*. Int J Behav Med. 2010 Jun;18(2):122-30

### **Child and maternal health**

Victora, C.G. et al. *Maternal and Child Undernutrition 2. Maternal and child undernutrition: consequences for adult health and human capital*. Lancet 2008; 371: 340–57.

Morris, S.S. et al. *Maternal and Child undernutrition 5: Effective international action against undernutrition: why has it proven so difficult and what can be done to accelerate progress?* Lancet 2008; 371: 608–21.

Semba, R. D. et al. *Effect of parental formal education on risk of child stunting in Indonesia and Bangladesh: a cross-sectional study*. Lancet 2008; 371: 322–28.

### **Mental health**

Prince M. et al. *No health without global health*. Lancet 2007, 370:859-77

Eaton J. et al. *Scale up of services for mental health in low income and middle income countries*. Lancet, vol 378, Issue 9802, pages 1592-1603, Oct 2011.

### **Books**

Walley. J. *Public Health: An Action guide to improving health in developing countries*. Oxford University Press, USA. ISBN: 019850991.290 pages), 2001

Michael, H. Merson *International Public Health: Diseases, Programs, Systems and Policies*. Jones & Barlett Publishers, 2005. ISBN: 0763729671. (730 sid)

The state of the World's children. A UNICEF report 2008.

Introduktion till *Medicinsk Statistik*, Johan Bring & Adam Taube, Studentlitteratur 2006, ISBN 91-44-03748-1

Bowers, D. *Medical statistics from scratch. An introduction for Health Professionals* second edition, Wiley. ISBN 978-0-470-51301-9

*For the degree project of the course, there is no compulsory reading list. Reading will be decided in consultation between the student and the tutor, dependent on the subject of the Degree Project in question. Reading should be accounted for in an appendix to the project report/thesis.*