

COURSE REPORT

| | | |
|---|-------------------|---|
| Course code: INTH 301 Course title: Research tools and theory | Semester: fall | Department: Centre for International Health IGS |
| Course coordinator: Tehmina Mustafa and Karen Marie Moland Date: Nov 10 – Dec 5 | Approved in: | |
| INTRODUCTION | | |
| <ul style="list-style-type: none">• Follow-up from previous evaluations: Based on previous evaluations even more emphasis was put on practical exercises.• Course description ECTS credits: 6 Contact hours: 100 Group work: 30 Individual assignments: 50 Total SIT: 180 hours <p>Knowledge and understanding</p> <ul style="list-style-type: none">• Demonstrate knowledge of basic principles of research theory and philosophy, and the similarities and differences of the theories underlying qualitative and quantitative research• Recognize the basic ethical principles and understand how these translate into concrete responsibilities of researchers• Define the basic principles of qualitative research and how they differ from epidemiological principles• Describe principles underlying proper design of questionnaires and interview guides• Discuss common challenges in study implementation and potential solutions• Explain principles of scientific writing; Discuss how to avoid plagiarism and publication bias• Outline principles of proper citation <p>Skills</p> <ul style="list-style-type: none">• Describe how to plan and write a complete research protocol• Design and write an informed consent form• Demonstrate how to search and find relevant literature and carry out a semi-systematic literature review• Make use of endnote• Design and write interview guide for in-depth interviews and focus group discussions• Design and write a structured questionnaire• Prepare a presentation for a scientific meeting• Apply correct citation practise <p>Content</p> <p>The course has 5 content areas</p> <ul style="list-style-type: none">• (1) <i>Scientific theory</i> underlying qualitative and quantitative research; Introduction to <i>research ethics</i>• (2) Introduction to <i>qualitative research methods</i>; Design of qualitative and quantitative <i>research tools</i>; questionnaires and interview guides | | |

- (3) Practical study *implementation challenges* regarding study funding, questionnaire administration, training and study preparations, and issues of accrual, retention and adherence
- (4) Finding and handling *literature*, reference systems (Endnote); doing a literature review
- (5) *Scientific writing*, including planning the research protocol from A to Z, planning and writing scientific papers for publication and a session on fraud and plagiarism

Format:

- A mixture of lectures, individual and group exercises and individual study

Reading list:

Book:

Jan Van den Broeck and Jonathan R. Brestoff (eds) *Epidemiology: Principles and Practical Guidelines* 2013, Chapters 4,5,8,10,11,15,16,17,18,25,28

Journal articles:

Swift JA and Tischlert V (2010): Qualitative research in nutrition and dietetics: getting started. *Journal of Human Nutrition and Dietetics*, 23:pp 559-566

Draper A and Swift JA (2010): Qualitative research in nutrition and dietetics: data collection issues. *Journal of Human Nutrition and Dietetics*, 24:pp 3-12

Fade SA and Swift JA: (2010): Qualitative research in nutrition and dietetics: data analysis issues. *Journal of Human Nutrition and Dietetics*, 24:pp 106-114

Pilnick A and Swift JA: (2010): Qualitative research in nutrition and dietetics: assessing quality. *Journal of Human Nutrition and Dietetics*, 24: pp 209-214

Rekdal, O. B. (2014). "Academic citation practice: A sinking sheep?" *portal. Libraries and the Academy* Volume 14, Number 4, October 2014

Assessment:

Written home exam to be delivered in the first week of January

Pre-proposal 1.5 to 2.5 pages

Writing an abstract based on a research paper using quantitative or qualitative research methods.

STATISTICS:

| Number of students: | | Number of students completing the course: | | | | |
|---------------------------------|-------|---|------|-------|----|----|
| Grade distribution -> Or ->: | A: 3 | B: 8 | C: 4 | D: | E: | F: |
| | Pass: | | | Fail: | | |

SUMMARY OF THE STUDENT EVALUATION (main points):

- **Practical implementation:**

- Assignment & Group work: Wanted to have more practical assignments & tasks.
- Literature: Want recommendation for optional supplementary reading.
- Examples of previous students master thesis to demonstrate a structured research process
- Quiz recap of previous day, puts pressure on students to read from previous days lectures and could be incorporated in more courses

- **Students' evaluations and feedback**

Lectures: Good because of participatory nature.

Organization: Satisfied

Communication: satisfied

My space: satisfied

Literature: Generally satisfied.

Practical sessions were good like; Library sessions, forming research question, survey, consent group work with actual examples, poster exercise

Ole Bjørn Rekdal's approach to plagiarism, referencing and citation practice was excellent and engaging.

- **Comments from teachers**

Due to the illness of the Jan Van den Broeck who was doing most of the teaching in previous years, we had to use different lecturers to cover the various topics. This made the course less coherent.

COURSE COORDINATORS EVALUATION:

- Teaching and assessment methods: In the teaching even more practical exercises is recommended. The current assessment methods are satisfactory.
- Curriculum: Satisfactory
- Information and documentation: MySpace is user friendly
- Grade distribution:
- Localities/equipment: Fine
- Field trip (if relevant): not relevant
- Changes done during the course: No major changes done

GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD – IMPROVEMENTS TO BE MADE:

COURSE REPORT

| | | |
|---|--------------|---------------------------------|
| Course code: INTH 316 | Semester: | Department: |
| Course title: Health systems | Fall 2014 | Centre for International Health |
| Course coordinator: David Lackland Sam and Karen Marie Moland | Approved in: | |
| Date: 06.10.2014 – 31.10.2014 | | |

INTRODUCTION

Follow-up from previous evaluations:

The course evaluation in 2013 pointed out lack of integration of the various course themes and that the literature should be specified for each day of the course

Course description

Number of Credits: 6 ECTS
Master and PhD

Objectives

Sickness and ill-health are a natural part of human life, and poor health has important effects on the individual and the society, as well as ramifications for global economy. Thus national governments and international agencies are all concerned with identifying micro and macro-levels factors that may help understand the health of individuals and of the nation. This course will address four main issues: (i) how health services are prioritized and organized nationally and globally and the policies that govern them (ii) the cost of ill health to the individual and the society (iii) the cultural and socio-political factors that sustain health beliefs and practices and (iv) the socio-psychological dimensions of health and disease prevention and health promotion. While the first two components will be more at the macro-level, the last two will look at the interplay between the micro and macro-levels. Together, these broad areas are aimed at sensitizing students to the health systems thinking as spelt out by WHO in 2007 with the goal of improving the health of all through equity and fairness, and in a financially responsive way.

Contents

- i. Health policy, health services and the health workforce

Attention will be directed to three main issues (i) an understanding of health systems as laid out by the WHO including the building blocks (service delivery, health workforce, information, medical products, financing and governance) and the relationship between them (ii) the factors that affect access, coverage and quality of health care, and (iii) the underlying values related to the way services are provided focusing on discrimination, dignity, equity and responsiveness. These issues will be approached and situated in a historical perspective, looking at how global policies have developed over time.

- ii. Economics of health systems

The economics of health systems will look at the economic context of health and health care, the economic determinants of health, financing of health care, paying of health care providers and economic evaluation and priority setting.

- iii. Socio-political dimensions of health

How do individuals and groups of people understand their health and illness and how is access to health care distributed in, and between populations? These questions will be illuminated through a discussion of (i) The cultural context of health and disease; the local knowledge, values and traditions and the steps taken to alleviate ill-health in a pluralistic health care system; (ii) A critical perspective on access and social determinants of health looking at the politics of power, equity and gender.

iv. Health promotion

The attention here will be on health as social and psychological well-being, disease prevention and the promotion of healthy individuals and societies. Individual life styles and health behavior will be illuminated using socio-psychological models for explaining and predicting health behavior.

Learning outcomes

1. To understand and be able to discuss how global health policies have developed and how they affect national health systems; To understand and be able to apply WHO's health systems framework in the analysis of health systems challenges related to coverage, service provision and utilization, human resources and financing.
2. To know how health care spending differs across the world; To be able to explain advantages and disadvantages of different ways of financing health care; To understand basic health economic evaluation, and how to apply such evidence to inform decisions about prioritizing between health interventions.
3. To understand and be able to discuss how the cultural context of health and disease and socio-political factors impact and sustain the health of an individual and a community, and the steps taken to alleviate ill-health.
4. To be able to discuss how human behavior can sustain, prevent and promote positive health.

Teaching methods

The course will stretch over a period of four weeks and will involve formal lectures, interactive group discussions, seminars and data exercises and oral presentations, reading and self-reflection and essay writing. Not all the days will be used for lectures. Self-study will also be included during the period.

Assessment methods: Essay writing (home exams)

Pre-requirements: Minimum a Bachelor or equivalent, according to the requirements for the Master program.

Grading Scale: A-F

STATISTICS:

| | | | | | | |
|--------------------------------------|-------|---|------|-------|----|----|
| Number of students: | | Number of students completing the course: | | | | |
| Grade distribution ->: Or ->: | A: 2 | B: 4 | C: 5 | D: 1 | E: | F: |
| | Pass: | | | Fail: | | |

SUMMARY OF THE STUDENT EVALUATION (*main points*):

• **Practical implementation**

- The themes taught in the course followed a sequence which was not well received.
- Too much literature on the reading list, but good that the readings were specified for each day

• **Students' evaluations and feedback**

- Health economics excellent both in terms of defining learning outcomes, lectures were relevant and practical exercises very useful and fun to work with

- Medical anthropology should get more time and emphasis
 - The WHO health system framework is overarching and should be better integrated into the various themes
 - Other perspectives on the health system should be even more emphasized
 - Health systems thinking lecture was too complex for the first day and should come later
 - Health promotion was not sufficiently covered and linked to the health systems framework
 - The lectures should be more closely linked to the assigned literature
 - The exam assignment was relevant
- Comments from teachers
- An improvement from the year before, but the challenge of integrating a course which is composed of 4 different themes taught by different disciplines remains to a large extent and needs to be worked on for the coming course. Wednesdays were set aside for self-study and this worked out well.

COURSE COORDINATORS EVALUATION:

- Teaching and assessment methods: There was too much lecturing and too little exercises. The exam was a home assignment. The students chose one out of five possible questions to answer in an essay form. The results showed a good comprehension of the course.
- Curriculum: The reading material needs further linking to specific lectures and the scope of obligatory readings should be further reduced.
- Information and documentation: good. Timetable was held, the reading material and the lecture notes were posted on MySpace.
- Grade distribution: even
- Localities/equipment: good
- Field trip (if relevant): not relevant
- Changes done during the course: none

GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD – IMPROVEMENTS TO BE MADE:

Some of the lectures should be replaced by exercises in the classroom for the students to work with the particular themes making up the course, and for integrating these themes into a health systems thinking.

The timetable will be organized taking into consideration the students' feedback such as the sequence of lectures.

COURSE REPORT

| | | | | | | |
|---|-------|---|-----|---|----|----|
| Course code: INTH333A | | Semester: | | Department: | | |
| Course title: Biological factors and climate conditions | | Spring 2014 | | Department for Global Public Health and Primary Care Centre for International Health | | |
| Course coordinator: Bente E. Moen Date: 14 jan 2015 Kurset gikk 19/5-13/6 2014 | | Approved in: Case document: | | | | |
| INTRODUCTION | | | | | | |
| <p>Course description: Four weeks.</p> <p>Learning Outcomes</p> <p><u>Knowledge</u> At the end of the course the students should be able to</p> <ul style="list-style-type: none"> -describe different bio aerosols and their sources -define bio aerosols at workplaces -identify methods for surveillance of bioaerosols -describe health effect from bioaerosols -give principles for preventive measure -know definitions of allergy -know the indoor air concept and health effects related to low quality indoor air -know thermic factors at work and health effects -understand ventilation principles at work <p><u>Skills</u> At the end of the course the students should be able to</p> <ul style="list-style-type: none"> -Plan surveillance of indoor air at work places -Advice on improved indoor air at work -Plan for avoidance of heat stress and effect from cold temperature at work <p><u>General knowledge</u> -.Be able to integrate information from different disciplines -.Be able to have a scientific approach to work place problems and how to solve them</p> | | | | | | |
| STATISTICS: | | | | | | |
| Number of students:8 | | Number of students completing the course: | | | | |
| Grade distribution ->: | A:2 | B:5 | C:1 | D: | E: | F: |
| Or ->: | Pass: | | | Fail: | | |

SUMMARY OF THE STUDENT EVALUATION (*main points*):

They were very pleased with the course, especially the exam session – one day with presentations like a congress.
They found it very useful.
They particularly enjoyed the part on indoor air, which was new to many of the students.
The students did not have any negative comments.

COURSE COORDINATORS EVALUATION:

- The course is too long, takes a lot of resources.

GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD – IMPROVEMENTS TO BE MADE:

The course should be integrated into other courses in occupational health.
A revision is planned in spring 2015.

COURSE REPORT

| | | |
|---|----------------------|---|
| Course code: INTH334A Course title: Noise and Vibrations | Semester: V14 | Department: Department for Global Public Health and Primary Care |
| Course coordinator: Magne Bråtveit Date: | Approved in: | |

INTRODUCTION

- Follow-up from previous evaluations:

In the present form this course was provided for the second time this year, but comprises the content of an earlier course that have been given five times since 2000. The new course has the same basic structure as the previous courses. Previous evaluations have been positive.

- Course description

Learning outcomes:

Knowledge

At the end of the course, the students shall be able to:

describe the physical characteristics of noise and vibrations in the working environment

describe the consequences to health and well-being of excessive exposure to noise

describe the characteristics of whole-body and hand-arm vibrations and its health effects

outline the range of approaches to risk reduction embodied in the hierarchy of control of noise and vibrations

Skills

At the end of the course, the students shall be able to:

conduct field measurements in the industry to investigate and assess risks from noise and vibrations

analyse field measurements (including dosimetry) of noise and vibrations in relation to risk of health effects and to current standards

write a feedback report on noise and vibration measurements to the industry

apply appropriate strategies for implementation advise on the need and means of control measures regarding exposure to noise and vibration by control at the source, at transmission and at the receiver

General competence

integrate knowledge from different disciplines

promote positive interaction and collaborative relationships between the different actors within occupational health

a scientific way of thinking and a critical approach to research results
written and oral communication and dissemination

STATISTICS:

| | | | | | | |
|------------------------|-------|--|-----|-------|-----|----|
| Number of students:7 | | Number of students completing the course:7 | | | | |
| Grade distribution ->: | A:1 | B:3 | C:1 | D:1 | E:1 | F: |
| Or ->: | Pass: | | | Fail: | | |

SUMMARY OF THE STUDENT EVALUATION (*main points*):

The flow of information through the course was appreciated by starting with theory, followed by practical training, field work with noise measurements, report writing from the field work, presentation and discussion of the results. The practical approach of the training facilitated learning. Also the reading and discussion of recent publications from this topic was very positive.

COURSE COORDINATORS EVALUATION:

Different teaching methods comprising traditional teaching, practical training, group work and presentations seems very positive. More time could be spent on the theoretical part by including more problem-based learning and group work. The reading list might be too extensive, and not optimally balanced by the teaching/training lessons. The field exercise was very useful for the students. They were well prepared and made use of the information they had got during the course.

GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD – IMPROVEMENTS TO BE MADE:

More problem-based learning and group work should be considered.

COURSE REPORT

| | | |
|---|---|---------------------------------|
| Course code: INTH356 | Semester: | Department: |
| Course title: Observational Epidemiology: Survey, Cohort and Case-Control Studies | Spring 2014 | Centre for International Health |
| Course coordinator: Cecilie Svanes Date: 23.07.14 | Approved in: PU - Bente Moen, head Date: 6.10.2014 | |

INTRODUCTION

Course description: Three week intensive course in observational epidemiology.

Learning Outcomes

At the end of the course the students should be able to

- distinguish the principles of surveys, case-control and cohort studies - and how the three designs differ from each other and from the design of randomized controlled trials
- calculate sample sizes for surveys, cohort studies, and matched and unmatched case control studies, based on simple random sampling and two-stage cluster sampling with stratification
- compare alternative sampling methods (stratified, systematic, cluster, non-random)analyse data sets from surveys, cohort, and case-control studies
- calculate precision and account for design effect in cluster sample surveys
- distinguish the different types of cohort studies, i.e. prospective, retrospective and double cohorts
- distinguish the different types of case-control studies
- suggest relevant designs (plan) for case control and cohort studies and surveys
- compare principles and consequences of density based sampling of controls in case control studies and the importance of using incident rather than prevalent cases
- evaluate the direction and magnitude of selection- and information biases in case-control studies, cohort studies and surveys and discuss how to minimize the above mentioned biases during design and conduct of studies
- distinguish in stratified analysis potential confounding and interaction and ways to differentiate between the two, i.e. adjust for confounding factors using Mantel-Haenszel adjusted relative risk estimates and how best to present and interpret a stratified presentation of effect measures when interaction is present. This knowledge should be based on an understanding and ability to identify effect measure modification
- critically appraise the design, analysis and interpretation of studies conducted by other investigators
- communicate effectively with those involved in conducting public health research

STATISTICS:

| | | | | | | |
|------------------------|----------|---|----|---------|----|----|
| Number of students: | | Number of students completing the course: | | | | |
| Grade distribution ->: | A: | B: | C: | D: | E: | F: |
| Or ->: | Pass: 19 | | | Fail: 1 | | |

SUMMARY OF THE STUDENT EVALUATION (*main points*):

1. Statistical packages. Students thought it would be beneficial if they could have a short introduction session on Stata/SPSS at the start or end of Day 1 (if not possible before that). However, they were able to work their way through STATA by end of Day 1 and SPSS was fairly intuitive. Suggestion: Distribute pre-reading on introduction to SPSS/STATA, including how to import datasets from different packages (e.g. excel format). Also state in course description that although familiarity with basics of statistical software is an advantage, it is not essential; students may view the pre-reading and the program before the course. During the course a formal session on introduction to the software will not be covered.
2. They were pleased to have two sessions on sampling- this should NOT be changed. The session on causal inference should be retained. Suggestion was to introduce case-control on the last Friday of week 2 (? afternoon) so that we could have some additional time for this component.
3. During the exercises a strong emphasis on interpretation is requested rather than only focus on analysis.
4. The amount of time spent on 'recap' of basic concepts could be reduced by referring students to appropriate pre-readings prior to the course. Perhaps also recommend specific sections of the textbook to preview.

COURSE COORDINATORS EVALUATION:

- Teaching and assessment methods: Even more hands-on would be good
- Curriculum: Good, see comments from students above
- Information and documentation – would be good if students were better prepared before course, as there were very large differences between students' pre-course level
- Grade distribution – 19 pass 1 fail - acceptable
- Localities/equipment – auditorium with computers difficult with long distance from back to see screen up front, sound a bit difficult

GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD – IMPROVEMENTS TO BE MADE:

- Distribute pre-reading on introduction to SPSS/STATA, including how to import datasets from different packages (e.g. excel format). State in course description that familiarity with basics of statistical software is an advantage.
- Give more specific advice as to pre-reading, to reduce somewhat potential large differences in pre-course knowledge
- Change in course description that there will be given grades, not only pass/fail (some students need grades).