

# Postgraduate distance learning courses in Public Health and Primary Care

## **Student Dissertation Handbook**

Academic Year  
2011-2012

MPH / MRes

**(N.B. This handbook does not apply to students studying the  
Master of Dental Public Health)**

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## Student Dissertation Handbook MPH / MRes

(please note that this handbook does not apply to students studying the Master in Dental Public Health)

### Introduction

The handbook provides information on the dissertation. Your dissertation is an extremely important piece of work. In contrast to the rest of the course, you are also expected to work more independently on your dissertation. Thus providing an opportunity to draw on your research skills and expertise developed through earlier course units.

The handbook is not an authoritative guide on writing a dissertation but sets out your options and requirements. Where possible, we aim to be flexible to help meet the needs of the student alongside the University regulations. For some of you, this is likely to be your first experience of research related activity, and we hope it becomes a positive experience. But don't worry..... we won't leave you on your own! All students will be paired up with a dissertation supervisor. Information on completing a dissertation is also presented in the online course unit Dissertation Skills, found in Blackboard. This unit is not assessed, but it is vital that you work through the materials.

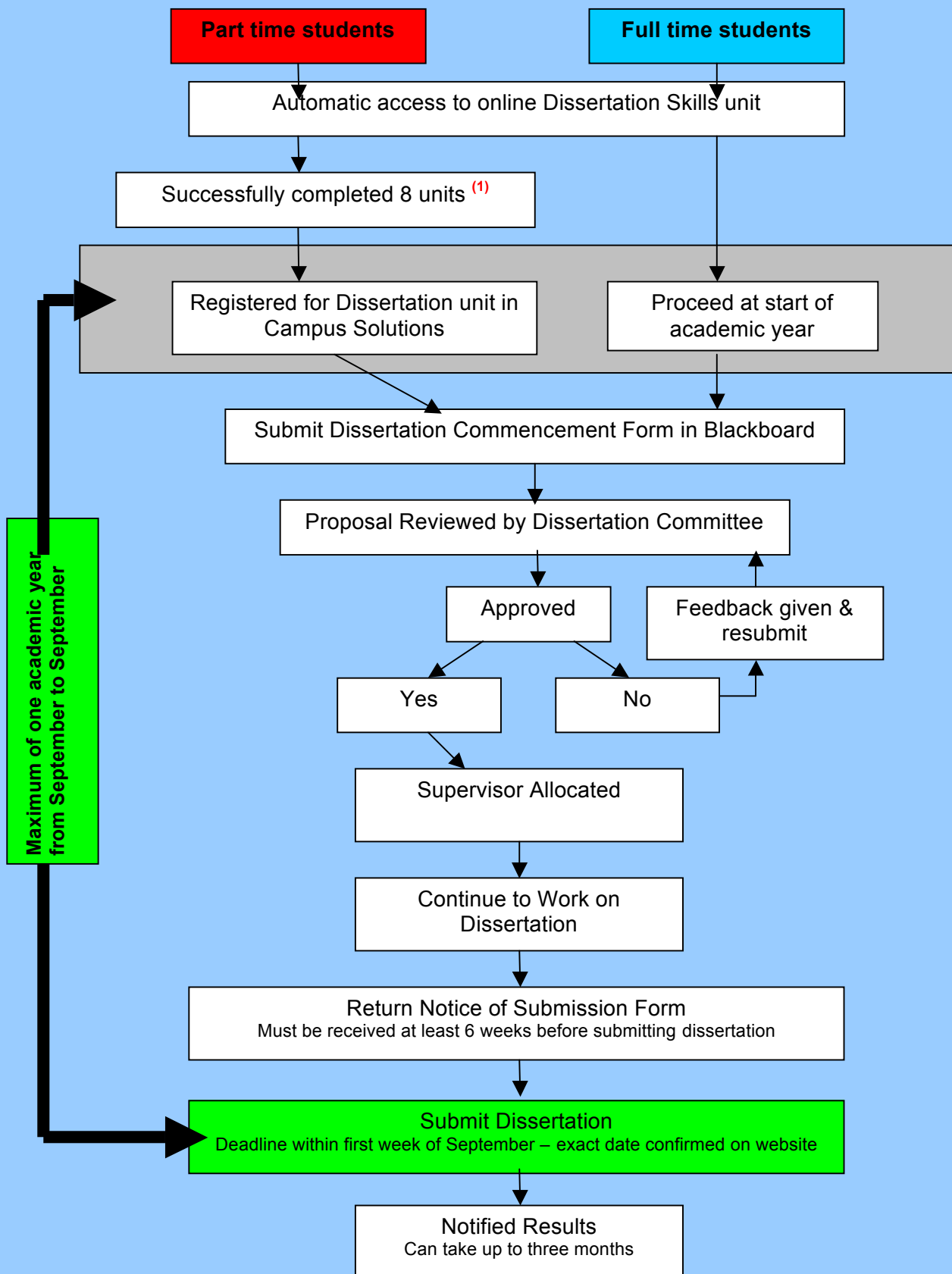
The University provides guidance on language skills directly relevant to writing a dissertation (see link below). This includes information and guidance on:

- writing a dissertation,
- referencing, and
- avoiding plagiarism.

<http://www.langcent.manchester.ac.uk/elplinks/academic/writing/dissertations/>

Please note that we routinely screen all dissertations for plagiarism and your supervisor may request screening of your drafts.

## Dissertation Process



**(1) N.B Part time MRes students start after completing SIX units.**

## What is a dissertation?

A dissertation is a detailed piece of writing to further develop a student's knowledge and expertise in their area of study. A dissertation often involves examining a particular topic/question in depth, with evidence of an ability to undertake sustained critical analysis. It provides an opportunity for students to demonstrate their research/project skills and produce an important piece of written work.

At a Masters level, the dissertation needs to demonstrate that the student can understand how existing evidence/information relates to a particular question, and how their own work adds to this. Independent thinking is required with an ability to critique ones own work and that of others. Students need to be aware of the implications of their work and defend the findings presented in the dissertation.

### **Students registered for the MPH**

The dissertation represents a third of your postgraduate degree (that is equivalent to four units, a total of 60 credits) MPH students are not expected to carry out primary research and collect new data. Studies requiring ethical approval are usually outside the scope of an MPH and support for ethical approval is not given. The following dissertation options are available (see Appendix A for further details):

1. Research Grant Proposal
2. Quantitative Research Report using existing data
3. A complete or adapted Systematic Review
4. A Public Health Report / Health needs assessment
5. A Project Report based on the model of an Outbreak Investigation
6. A Qualitative or Theoretical Study (some specific requirements apply relating to previous course units)

### **Students registered for the MRes**

The dissertation represents half of your postgraduate degree (that is equivalent to 90 credits). MRes students are are usually expected to complete a research project which often requires ethical approval through the University and other regulatory bodies (e.g. NHS research ethics).

Thus an MRes dissertation needs to represent a greater depth and application of research skills relevant to a particular focused research question. Students will need to show evidence of extensive reading across their field, critical thinking and to bring new knowledge to the field. For many students this will involve carrying out an actual research study.

There are three options available for MRes students. These are:

1. Quantitative Research Project.
2. Full Systematic Review.
3. Qualitative Research Project – students must complete the module Qualitative Research methods to take this option.

## What is the online dissertation skills unit?

Blackboard contains a Dissertation Skills module. This self-taught unit is not assessed. All students have access to the Dissertation Skills Unit when they first enrol on the MPH/MRes. We encourage students to work through these materials in advance of starting their dissertation.

## When can I start?

Students must have their dissertation proposal approved by the dissertation committee before starting any substantive work on their dissertation as described later.

- All students have one academic year (September to September) to complete their dissertation once they have registered for the dissertation module. This is a university regulation.
- All full time students are encouraged to start working on their dissertation soon after registration.
- Part time MPH students submit their dissertation proposal once they have successfully completed eight units. MRes students submit their proposal after completing six units.
- Usually part time students start the dissertation process in the next academic year following the completion of 8 units.
- In exceptional cases, students who know they have passed 8 units following the end of a first semester, can go on to register for the dissertation module in Semester 2. However this reduces the amount of supervisory support and working time as the dissertation must be submitted by the September of that year.
- Students will not receive any supervisory support for the dissertation until the Dissertation Commencement form has been submitted and approved. However, the dissertation tutor can be contacted through Blackboard Dissertation Skills for outstanding queries.

## When must I finish?

The University regulation states that students must submit their dissertation within the academic year of registering for the dissertation unit:

- If you register for the dissertation unit in semester one, you have to submit your dissertation by the following September
- If you register for the dissertation unit in semester two, you still must submit your dissertation by the following September. Consequently, we encourage all part time students to start the dissertation in the academic year after they have passed 8 units.

Full time students must submit their dissertation within the academic year of starting the course – that is by the following September. We encourage full time students to start work on the dissertation early in the course.

Part time students: Please do not register for the dissertation unit until you are actually ready to start working on your dissertation commencement form.

The final submission date is usually the first week in September. The exact date will be posted on the dissertation skills unit in Blackboard.

**You can hand in your completed dissertation at any time during the academic year and it will then be marked. However, this does not necessarily mean you will receive formal notification or your qualification any earlier.**

In very exceptional circumstances, students may be granted an interruption lasting several months. However, this is rarely approved by the university. Please contact Katie Reed as soon as possible if you have any serious concerns about meeting deadlines because of exceptional circumstances.

## Dissertation milestones

Successful completion of a dissertation requires attention to planning and time management. It is important that you plan ahead and work towards agreed milestones with your supervisor. Successful completion represents your academic abilities AND practical skills including time management and planning. Use the following very rough guide to assist your work:

<i>Milestone</i>	<i>Full time student</i>	<i>Part time student</i>
Background reading/generate ideas	Sept – Dec	June – Aug
Submit Dissertation Commencement Form by:	Nov – Jan	Sept
Study approved & supervisor allocated	Feb	Oct – Dec
Detailed study protocol	March	Jan
Detailed time plan & outline of headings/subheadings for dissertation	April	Feb
Literature review & critical appraisal	May – July	Feb – April
Start data collection (if required)		
Write up methods		May
Data analysis		June
Discussion & conclusion		
Submit Notice of Submission Form	End of July	End of July
Final changes, printing & binding	August	July
Submit Dissertation for marking	September	September

All good plans need a contingency plan! Please remember that: not all dissertation proposals are accepted straight away, with some requiring additional background work from the student; that we cannot guarantee they will be reviewed at the beginning of every month; and that it can take time to find a supervisor suitable for your work. MRes students also need to appreciate the time it can take to get ethical and other regulatory approval.

## International Students

It is essential that you provide adequate time for your bound dissertation to be mailed to the University of Manchester.

## How do I choose a project?

Students are expected to develop their own project ideas. It can be helpful to discuss these with work colleagues and other students. When choosing your project it might be helpful to think about the following:

- Your dissertation is not an attempt at solving all the problems of the world.
- A good dissertation is often one that examines a tightly structured problem/research question, is clearly focused, and takes a critical approach with a relevant methodology/structure.
- You might have lots of reasons for been passionate about a particular topic/problem, but will need to convey the importance of this to the reader.
- You will need to make appropriate use of previous work relating to the problem been studied but taking a critical aspect.
- Public health is a pragmatic discipline – so dissertations can include discussion on the relevance of your findings, the ‘so what’ factor, and what

changes/recommendations you think would increase further knowledge and improve a populations health in relation to your topic.

- You will be expected to show how your work is relevant to public health and /or primary care.

## Previous dissertations

The appendix includes a cross section of previous dissertation titles submitted for the MPH/MRes (and previous MPHe). A sample of complete dissertations is available in Dissertation Skills in Blackboard.

## Regulatory issues

Students are responsible for ensuring that all University and external, organisational and legal requirements are followed relevant to their dissertation. Further information on key ethical and external regulatory issues is available on Blackboard

Students registered for the MPH are not required/not able to carry out primary data collection for their dissertation and projects requiring ethical approval will not be eligible for an MPH.

Students registered for the MRes, in many cases, will be expected to collect primary (new) data. Therefore ethical approval, for example from the NHS and the University of Manchester, will be required. This is a time-consuming process and students must plan adequately for the impact of this on their dissertation.

## Dissertation commencement

Once you have formulated your ideas, students need to submit their project ideas using the form “Dissertation Commencement” (this is different to the Notice of Submission Form). This form is found in the Dissertation module in Blackboard and you need to complete and resubmit the form in Blackboard. Your proposal will then be assessed by the Dissertation Committee. If it is satisfactory you will be allocated a project supervisor. If it is unsatisfactory at this stage you will be provided with detailed feedback/required changes before resubmitting.

The Dissertation Committee usually meets during the first week of each month from September to June. Commencement forms need to be received in advance of the meeting to give adequate time for review.

A number of factors will be considered when reviewing your proposal. These include:

1. The relevance of your proposal to health/public health
2. Demonstration of an academic approach
3. Your general understanding of the topic at this stage
4. The suitability of the chosen research methods & study design
5. The ability of your proposal to demonstrate your understanding of critical research methods
6. The scope and time scales of the study.

Generally, the main reason why proposals are rejected is because of inadequate attention to points 4-6 above. Reviewers appreciate that your understanding of the topic and methods will develop as you work on your dissertation and receive guidance from a supervisor. However, from experience, we know that students are more likely to produce a successful dissertation once they have done some initial groundwork and considered the factors listed above.

## Supervision

All students will be offered guidance from a dissertation supervisor. Supervisors are experienced academics, usually from the University of Manchester. The supervisor is allocated after we have approved your dissertation proposal. In some cases, you can suggest someone who is willing to take on this role, subject to University approval. We aim to pair students with a supervisor who has particular experience in the chosen area to guide students through the dissertation process. However, students need to be mindful that the role of the supervisor is limited, and the dissertation is to be the students own work. Some students might also have a local project supervisor who is often their line manager, to assist with day to day queries about their work and project management. Supervisors are not responsible in any way for the final work that you submit.

It is important that you start **regular** contact with your supervisor. Please discuss any concerns with your supervisor about your dissertation, the progress of your work and the support you require. Appendix B contains further guidance. Please contact Roger Harrison or Katie Reed if you experience any problems with your supervision.

Students and supervisors need to develop a working relationship for the dissertation process over the academic year. This is another reason for you to start work on your dissertation earlier rather than later. Students starting the dissertation process later in the academic year, will be default, receive less supervisory input.

## Monitoring

Students and supervisors are required to complete a joint monitoring form every three months. The timing starts roughly three months after been allocated your supervisor and thereafter. This is an important part of the student-supervisor relationship and a requirement of the University. The monitoring form aims to highlight any problems/concerns with the student's progress that may have been overlooked. It helps you keep your supervisor and the Dissertation Tutor updated about your progress. The monitoring form will be used to inform any grievances relating to the student-supervisor relationship. The monitoring form is accessed in Blackboard under the 'Assignments' tab. Students are responsible for completing this form with their supervisor. Completed forms are sent to [mph.dissertations@manchester.ac.uk](mailto:mph.dissertations@manchester.ac.uk)

## Recording progress

It is good practice to keep a dissertation diary, or at least a record of your progress and a record of feedback from your supervisor. This can also help us if we need to find you another supervisor mid way through your work, in case of sickness for example. Students will be expected to keep track of their own progress and to initiate contact/support from their supervisor.

## Presenting your dissertation

Information on dissertation regulations including methods of presentation is available at:

<http://www.mhs.manchester.ac.uk/intranet/admingroups/postgraduate/taught/Dissertation/presentation/>

If the link doesn't work, try copying the address into your web browser first. You will need to use your University username and password to access this page. It includes:

- Details of the examination process
- 'Notice of Submission' form
- Guidance on the submission of dissertations
- Library binding service (which now accepts dissertation for binding by post)
- Graduation details

## Word count

The word count for the MPH dissertation is 8,000 to 10,000 (10,000 to 12,000 for the MRes), with a margin of around +/- 10%. The word count includes the main body of the text including headings and titles. It excludes the first few formal pages of the dissertation (such as contents, declarations etc) and appendices and references.

## Dissertation titles

It is helpful for the dissertation title to reflect the topic AND methodology.

## Referencing

Correct referencing throughout your dissertation is an important part of your academic work and is considered by the examiners. A number of computer programmes are available to help with this though this is not essential. Referencing can be produced in Word for example, or manual systems can be used to help along the way. Do not leave your referencing until after you have written your dissertation as it can take a lot longer to complete retrospectively than one might think!

On this course we prefer students to use the Harvard referencing system, reflecting much of the social sciences. See the language centre for more information:

<http://www.langcent.manchester.ac.uk/elplinks/academic/writing/dissertations/>

## Binding

On this course we accept soft and hard bound dissertations. See below for information and services provided by the University bindery.

<http://www.mhs.manchester.ac.uk/intranet/admingroups/postgraduate/taught/Dissertation/presentation/>

Try copying the address into your web browser if the short cut to the link doesn't work.

## Intent to Submit

All students must inform the University of an intention to submit a dissertation. This needs to be done at least six weeks before the hand in date by completing a Notice of Submission Form. Counting back six weeks from the beginning of September, this

means that notice of submission forms need to be received by early July. The University will not accept your dissertation unless this form has been submitted.

**Addendum: Information on accessing the Intent to Submit forms and the process for submitting your completed dissertation will be sent to students during the academic year.**

The University has two graduation ceremonies each year. Dates for submitting your dissertation and graduation ceremonies are found at:

<http://www.mhs.manchester.ac.uk/intranet/admingroups/postgraduate/taught/Dissertation/>

### How do I hand in my dissertation?

For your dissertation, the MPH/MRes is part of the School of Medicine (not School of Community Based Medicine). You are required to submit two paper copies of your dissertation and one electronic copy.

**Addendum: Information on accessing the Intent to Submit forms and the process for submitting your completed dissertation will be sent to students during the academic year.**

All dissertations for the MPH/MRes are routinely screened for plagiarism. Plagiarism is a serious offence and can result in students failing the overall degree. This does happen occasionally so please make sure you understand this topic. Further information is available at:

<http://www.langcent.manchester.ac.uk/elplinks/academic/writing/dissertations/>

Please ensure that your dissertation complies with the University regulations and includes all necessary information as described at:

<http://www.mhs.manchester.ac.uk/intranet/admingroups/postgraduate/taught/Dissertation/>

### Electronic copies

An electronic copy of your completed dissertation needs to be sent to

[mph.dissertations@manchester.ac.uk](mailto:mph.dissertations@manchester.ac.uk),

Please send this as a single complete file either in Word or as a PDF. **The email needs to contain the following statement:**

“I confirm that this electronic file is an exact copy of the printed dissertation submitted for examination”.

## Marking process

You need to allow up to three months to receive your dissertation mark. In certain cases it can be longer. The University allocates two examiners, often your dissertation supervisor and a second examiner. Both assess your dissertation independently then discuss the mark to be awarded. If the examiners fail to reach agreement on your mark, then it will be sent to the external examiner for a final mark. All dissertations are assessed using a formal marking system:

Grade	Achievement
90% - 100%	<b>EXCELLENT</b> - allows award of Distinction. Exceptional work, nearly or wholly faultless for that expected at Masters level. Perfect presentation.
80% - 89%	<b>EXCELLENT</b> – allows award of Distinction. Work of excellent quality throughout. Excellent presentation.
70% - 79%	<b>EXCELLENT</b> – allows award of Distinction. Work of very high to excellent quality showing originality, high accuracy, thorough understanding, and critical appraisal. Shows a wide and thorough understanding of the material studied, and the relevant literature, and the ability to apply the theory and methods learned to solve unfamiliar problems. Very good presentation.
60% - 69%	<b>GOOD PASS</b> . Work of good to high quality showing evidence of understanding of the research topic, good accuracy, good structure and relevant conclusions. Shows a good knowledge of the material studied and the relevant literature and some ability to tackle unfamiliar problems. Good presentation.
50% - 59%	<b>PASS</b> . Work shows a clear grasp of relevant facts and issues and reveals an attempt to create a coherent whole. It comprises reasonably clear and attainable objectives, adequate literature review and some originality. Presentation is acceptable, minor corrections allowed.
40% - 49%	<b>Referral</b> for Masters or allow Diploma Pass for 90 credit dissertations. Work shows a satisfactory understanding of the research topic and basic knowledge of the relevant literature but with little or no originality and limited accuracy. Shows clear but limited objectives and does not always reach a conclusion. Presentation adequate but requires correction.
30% - 39%	<b>Masters fail</b> or allow referral for Diploma (90 credits only). Work shows some understanding of the main elements of the research topic and some knowledge of the relevant literature. Shows a limited level of accuracy with little analysis of data or attempt to discuss its significance. Presentation poor, substantial corrections required.
0% - 29%	<b>FAIL</b> . Little relevant material presented. Little or no evidence of understanding of research topic. Unclear or unsubstantial arguments with very poor accuracy and understanding. Presentation completely unacceptable.

## Marks below 50%

The marking process produces three main outcomes:

50%+	well done, you've passed your dissertation
40-49%	unfortunately, your work is not <b>yet</b> at the required standard to pass your dissertation. We will contact you and offer a period of four months, within which you can resubmit a revised dissertation. It is critical that you continue work with your supervisor during this period
<40%	unfortunately your work is not at the required standard to pass, and because of the significant weaknesses shown in your dissertation, you <b>will not</b> be offered a chance to resubmit

## What next?

We encourage all dissertation students to think about having their work published in an academic journal. This can be important for your CV/career progression and can help share knowledge about your findings too. A publication could take on any number of formats including:

- A commentary/editorial
- A study report
- A case report
- A letter to the editor

Some of our students have published work based on their dissertation, with some in prestigious journals such as the Lancet.

Please discuss publication with your supervisor who might be interested in supporting you (though this is not formally part of their role). Your supervisor might also have ideas about the suitability of your work, the relevant journals, and what aspects to focus on.

It is professional and courteous to always invite your supervisor and others who were involved in your work to an opportunity for authorship. We also ask that you acknowledge that the work was part of a Masters in Public Health at University of Manchester. If you are successful, please send us the reference!

## Appendix A: MPH – Dissertation Options

The following pages contain a breakdown of the individual dissertation options for students registered for the MPH

## 1. Research grant proposal

This option might appeal to students who are keen to get a research project funded after completing their MPH, or who wish to study for a PhD. It will also appeal to students working in a service setting who have identified the need for a particular area of research.

The individual chapters in the dissertation will cover three main areas:

- 1)** A detailed description of the problem you are trying to resolve and a detailed critical appraisal of the existing literature.
- 2)** A working plan of your proposed study design. This needs to be based on the structure of grant application forms such as those used by the MRC and adapted for your dissertation. Alongside the study design, methods and analysis, it needs to include practical information such as a Gantt chart, recruitment rates, possibly a budget and outline important assumptions you have made.
- 3)** A critical discussion of your research design including the strengths and weaknesses, regulatory/ethical issues and practical aspects critical to its success. You also need to set the potential implications of your findings in the context of the existing evidence base and the problem you are trying to resolve.

N.B. Students are expected to demonstrate their research skills and wider understanding of some of the key concepts covered on this MPH. Simply submitting a research protocol will not be sufficient to pass your dissertation.

## 2. Quantitative research report

MPH

This option takes the format of a standard quantitative research project. It needs to include the following main sections:

- Introduction & background
- Critical review of existing literature
- Study design
- Analysis
- Results
- Discussion
- Conclusion

Possible sources of data include:

- a) Use of an existing data set which the student has permission to use. This could include analyses from one of the large national research databases or surveys (e.g. national diet and nutrition survey, or WHO...) or a more local data set, such as a PCT health and lifestyle survey. Further guidance is available on Blackboard
- b) Analysis of a previous or current research project which the student has been involved with. Supervisors cannot support primary data collection.

### 3. Systematic review

Systematic reviews provide an opportunity for students to develop their skills in systematically collating, assessing and summarising existing sources of evidence. The amount of work involved can be influenced by the number of studies that could be included in the review. For the purposes of this dissertation, students can limit the number of studies in their review (see below). Generally, a minimum of between five and ten studies needs to be included in the main part of the review to demonstrate your skills and understanding to the examiner. However, a good review can still be completed even if no eligible studies can be found (see below).

A systematic review need not be limited to randomised controlled trials (RCTs) and you are not expected to complete a meta-analysis for the dissertation. Students will need to include in the dissertation the rationale for the types of study designs included in the review. You are encouraged to use a recognised framework for conducting systematic reviews that is appropriate to your research question.

The content of the actual review will vary depending on the research question and the approach taken. You are expected to highlight how your work is relevant to public health and /or primary care. Generally, it is likely to include:

- Introduction/background
- Study design/methods including:
  - Definition of intervention
  - Criteria for inclusion/exclusion criteria
  - Study populations
  - Primary and secondary outcomes of the review
  - Methods of analysis/summarising data
  - Methods for assessing study quality
  - Search strategy & sources including grey/unpublished literature
- Results including:
  - Flow chart of search process/included & excluded studies
  - Summary of data extraction sheets
  - Summary of included studies
  - Assessment of methodological quality
  - Summary of treatment effects
- Discussion including a critique of the review itself
- Conclusion
- References
- Appendices

#### **Dealing with too many or too few studies**

Good quality search strategies for some research questions can identify hundreds, sometimes thousands of potentially eligible studies to be reviewed. Students are unlikely to have sufficient time (and indeed support from a second reviewer) to suitably deal with this. Therefore, it is possible to limit the number of studies for the dissertation. This could be done for example, by limiting the years of publication in the search strategy, or only including UK studies (or for that matter non UK studies), or limiting studies by population such as just women, or by a specific age group. If you use one of these approaches then it needs to be clearly stated in the methods, results and discussion section.

In some cases, you might find less than a handful of potentially eligible studies for your review or none at all. This does not rule out conducting a systematic review for

your dissertation. You will still be able to complete all of the sections outlined above until the results section. You could then explore possible strengths and weaknesses of your search strategy, or inclusion/exclusion criteria for example, before providing a more narrative review of some of the 'weaker' forms of evidence that did not pass your criteria. It is unlikely that nothing has been published on your research question at all. You could then conclude with recommendations about what research was needed, what form this might take, and why it was important. These are just ideas and students taking this option will be able to enter wider thinking with their supervisor.

## **4. Academic Public Health Report**

**Introduction:** This guidance introduces students to the MPH dissertation option of an academic public health report. It is important that you note the **possible differences** between an **academic** public health report, submitted for your dissertation, and public health reports commonly written as part of main stream public health work.

The format for an academic public health report will vary according to the focus of the report. But throughout, students need to demonstrate academic rigour and move beyond a descriptive or discussion focused report. Looking at routine/mainstream 'public health reports' available in organisations or through the internet may be unhelpful and some of these will not reflect the level of academic rigour, depth and critical thought to be demonstrated for a masters dissertation.

**Aims:** students need to demonstrate their appropriate understanding, application and critical reflection of theories/models and existing knowledge to inform a specific public health question, often focused on a particular locality/setting and to consider future interventions and policy direction.

### **Types of Reports**

In most (but not all) situations, an academic public health report will be used to address certain aspects associated with an existing or pending problem in a specific area or context. The types of public health reports likely to be presented for a dissertation include:

1. Health needs assessment / health impact assessment
2. An audit / evaluation of service delivery
3. An outbreak report
4. Option appraisal
5. Policy evaluation

### **Structure & Objectives**

The specific structure and objectives of the academic report will be influenced by its focus / initial public health question. But in all academic public health reports, students need to demonstrate their ability to appropriately use and understand the main skills and principles that have been covered across the MPH course. Students are encouraged to critically present and reflect on any existing or proposed policy relevant to the focus of the report. Thus, students need to be able to challenge the status quo or proposed policy direction set by organisations, local, national or international bodies & government.

The content of an academic public health report is likely to cover material from the following sections:

#### (1) **Burden**

- a) To clearly identify, describe and present a public health issue, often focused on a particular locality / setting or population;
- b) To present an analysis of the issue;
- c) To use available data sources to where possible describe the actual possible burden or impact of the issue, including historical, current and future impact and to set this in relation to other key population characteristics and health issues. Data and information need to be presented in a meaningful way and appropriate to the focus of the report.
- d) Recognising that there might be limited information on the specific issue in this setting, students need to find other sources of data to inform and estimate the

possible circumstances. Rarely does a locally based public health problem arise without any suggestive or interpretative information from elsewhere which can then be used to inform the local picture.

## (2) **Context**

- a) To set the issue in a relevant policy context, be it a specific local, national or international setting.
- b) To critically review literature relevant to the focus of your public health report. This can include critical reflection of evidence relating to epidemiology, interventions and policy. You will need to describe how you sourced or searched for evidence and information, why, and what methods you used to critically appraise the information.
- c) To identify and examine possible policy drivers and what or how these could influence the current/future situation; in some reports this may require the use of a formal policy review framework.

## (3) **Interventions & recommendations**

- a) The report must include a section examining possible interventions, changes to practice, or policy directions, which need to reflect on the principles of evidence based practice. The possible impact/expected change from these recommendations needs to be explored in relation to the specific issue.
- b) All interventions and recommendations need to be clearly linked to earlier sections in the report and you need to show what gaps/problems/ or issues, identified earlier, that they aim to resolve.
- c) To consider and propose relevant surveillance/monitoring or research to meet gaps you have identified and show how this could then be used to address / inform the issue.

Please note that **you are not** expected to address all of these points in your report and the amount of attention given to each will be reflected by the focus/style of your report.

## **Writing style**

A number of different styles or frameworks can be used to present your academic public health report. Typically your work needs to follow a structured approach, making use of clearly labelled sections, headings and sub-headings. These will help you sign post the reader to various parts of the report as the work progresses, showing how different aspects are linked.

- a) Academic public health reports need to finish with a clear summary of the main features/points in your report and any recommendations. All of which **must** clearly reflect the content of the main body of your report.
- b) As in any academic writing, you need to appropriately reference sources of information, data and literature. As relevant points in the report you need to demonstrate your understanding of the strengths and weaknesses of the information as applied to the specific setting or issue.
- c) You are **not** expected to carry out a systematic review of the existing literature. But you do need to present your approach to information seeking and how this was used to inform the work. Remember that few public health interventions are addressed with randomised controlled trials and few relevant publications are likely to be found using Medline.
- d) You need to explain and critically reflect on any methods used throughout your report. This includes those relevant to data/information seeking, appraisal, impact

and review. Thus highlighting the relevance and strength of the information, to inform the specific issue.

- e) Think carefully about the structure and order of your report. There needs to be a common thread throughout the report and all sections need to be clearly linked to the initial issue presented.
- f) Avoid over use of bullet points and use complete sentences to present most of your work. Use meaningful charts, tables and figures – but there needs to be a clear reason for including these and a link to relevant text. Try not to squash things onto the page, and if a table or a chart lends itself to a full page, then use a full page. All aspects of the report need to be fully referenced, including charts and sources of data.

## 5. Outbreak Report

To be read in addition to the guidance on writing an Academic Public Health Report, in the previous pages.

Students taking this option are likely to be working in a public health setting. In addition to a standard outbreak report, the student will need to demonstrate their skills in setting their findings in the context of other work and providing a critique of their own analysis. These can be included in the main body of the report or as appendices. A standard outbreak report on its own will not meet the requirements for a MPH dissertation.

### Summary

- Purpose of this report
- What was done / what was found
- Key recommendations

### Introduction & background

Setting including detailed population profiles, surveillance data and a description of the site, area or facility

Literature review including a detailed description and critique of previous outbreaks

### Outbreak description to include:

- How was the outbreak reported?
- Steps taken to confirm it?
- What was known then?
- Why the investigation was undertaken?
- What were the objectives?
- Management of the outbreak
- Who was on the OCT? Why chosen?
- Who assisted in the investigation?
- What control measures were taken?

### Methods including a description and

The student should describe and critically assess the methodologies used in the outbreak investigation (epidemiological, laboratory and environmental)

### Results

### Discussion

The section should contain; a critical review of the main findings of the report and Inferences from analytic study results. There should also be a comparison with similar outbreaks and studies using similar methodologies. It should conclude with a clear interpretation of the results and explanation of the action required to protect public health

### Conclusions

### References

### Appendices

## 6. Qualitative/ theoretical study

MPH

**Option A)** For option A, students must have successfully completed the unit Qualitative Research Methods.

Students may complete a:

### **Metasynthesis**

Students should choose a topic that has been previously researched via a number of published qualitative research studies and produce a metasynthesis (see topic 9 of the QRM course).

### **Qualitative study using available data**

One readily available source of qualitative data is the Dipex website (see topic 10 of the QRM course). <http://www.dipex.org/DesktopDefault.aspx> Students might choose a topic of interest and draw upon available patient narratives as well as other relevant published research in critically addressing a health issue of interest.

### **A theoretical review**

Students would choose a topic of interest and address some theoretical questions by reviewing previous theoretical and empirical (where relevant) work. Examples of topics that could be addressed in this way include:

The social/ cultural construction of risk in relation to a number of health issues.  
The conceptualisation/ measurement of disability in relation to meeting health and social needs.

### **Policy or discourse analysis/content analysis**

Students should choose a topic of interest where they can critically examine relevant texts. If the topic is a specific focus of policy strategies, then the study should include analysis of policy documents. Other texts that can be a focus of discourse analysis can include media sources such as visual imagery and newspaper commentary. A number of public health issues have been the focus of discourse analysis, such as 'food scares', the spread of infectious diseases such as HIV, and students could consult published studies of this type for ideas. Students would also need to consult specific texts on discourse analysis for this approach.

Other examples include exploring the social shaping or social construction of a particular issue or medical condition over time: examples include:-

Clarke JN, Everest MM. SOCIAL SCIENCE & MEDICINE 62 (10): 2591-2600 (2006)  
Cancer in the mass print media: Fear, uncertainty and the medical model.

Pilgrim D, Rogers AE. SOCIAL SCIENCE & MEDICINE 61 (12): 2546-2556 (2005)  
Psychiatrists as social engineers: A study of an anti-stigma campaign.

Davin S. SOCIOLOGY OF HEALTH & ILLNESS 25 (6): 662-679 (2003). Healthy viewing: the reception of medical narratives.

Collins PA, Abelson J, Pyman H, Lavis JN. SOCIAL SCIENCE & MEDICINE 63 (1): 89-102 (2006). Are we expecting too much from print media? An analysis of newspaper coverage of the 2002 Canadian healthcare reform debate

**Option B)** - A critical review of a public health or primary care policy using Framework Analysis.

This qualitative research tool, used extensively in applied policy research in the developing world is gaining credibility in the UK. A good description of the methodology involved in this study can be found in the following book chapter Ritchie, J., Spencer, L. Qualitative data analysis for applied policy research. In Bryman, A., Burgess, R.G. (Eds). 1994 Analysing Qualitative data. Routledge: London.

This chapter is available electronically at:

[http://www.library.manchester.ac.uk/texts/medn62130/medn62130\\_ritchie.pdf](http://www.library.manchester.ac.uk/texts/medn62130/medn62130_ritchie.pdf)

The process of the framework analysis has five main stages

- Familiarization
- Identification of a thematic framework
- Indexing
- Charting
- Mapping and interpretation

Students interested in using this technique should read more about it and look for studies that have used it. It is not necessary for you to have studied Qualitative Research Methods to use this technique.

## Appendix B: Introduction to Dissertation Supervision

Here we outline some of the key roles for student and supervisor. Supervision needs to be flexible to help meet the needs of the student and to account for the other roles of your supervisor. Therefore different supervisors may do things in different ways. This usually works out to the advantage of the student. It is important that supervisors and students clarify ways of working, in particular, methods of communication, at the start.

### What is supervision?

At a postgraduate level, a dissertation supervisor aims to guide you or point you in the right directions. Supervisors are not expected, nor should they be doing work directly on your dissertation. A supervisor helps you plan your dissertation and to guide you through a period of learning associated with the topic area. They aim to help you complete a dissertation to the standard that you are capable of. Supervisors are not always 'experts' in the topic of your dissertation but have experience of research and dissertation writing and support, usually in related areas. Supervisors are not expected to do statistical analysis, proof reading, or reference checking!

At a postgraduate level, a key to learning is to be able to identify one's own learning and support needs. Therefore students are encouraged to discuss these with their supervisor. The supervisor can then work to meet those needs directly or suggest someone else for you to contact, or other ways of meeting your needs. This can include self-directed learning, reference to particular text books, or a suggestion to contact a topic expert. Further support materials can be found on the MPH website and the Dissertation Skills unit in Blackboard

### Keeping track

Students and supervisors complete interim monitoring reports every three months from the supervisor been allocated. The form is downloaded from Blackboard and completed jointly between the student and supervisor, before returning to [mph.dissertations@manchester.ac.uk](mailto:mph.dissertations@manchester.ac.uk).

The University allocates around ten to twelve hours of supervision to each student. At first, this might not seem enough, but is usually sufficient to meet the needs of most students. Communicating electronically certainly makes efficient use of time as does highlighting any problems or concerns in advance.

### Good ideas

1. Send your supervisor an email to introduce yourself, with a copy of your approved dissertation proposal, a time plan, and any immediate concerns / support needs;
2. Confirm how often to contact your supervisor and how;
3. Be clear about how your supervisor prefers to work and to make most efficient use of their time;
4. When sending supervisors work to comment on, identify any specific queries or questions you might have;
5. Do clarify with your supervisor how much time they need to comment on substantive pieces of work;
6. Do let your supervisor know of any personal circumstances that are or are likely to interfere with your progress;
7. Do mention any concerns you have about the supervision process with your supervisor.

**Not such good ideas**

1. Don't send your supervisor constant emails about relatively minor things;
2. Don't expect your supervisor to respond immediately;
3. Don't expect your supervisor to know the answer to everything – their role is to guide and support you;
4. Don't expect your supervisor to edit your dissertation;
5. Don't ignore your supervisor's advice without at least discussing it with them. It's unlikely you will want to do everything your supervisor might suggest, but it is helpful for you both to acknowledge your reasons for this.
6. Don't expect to keep your supervisor if you do not contact them for many months or you go past the completion date without having had this agreed in advance.

**What do you do if you have concerns about your supervision?**

Most students have a positive experience of working with their supervisor. It is uncommon for significant problems to arise. If students and supervisors are clear about their roles and responsibilities from the beginning then this can usually be avoided. Similarly, it is important that you raise any concerns with your supervisor before they develop into a bigger problem.

If you do have any concerns about your supervision which have not been addressed adequately by your supervisor then you need to contact the Dissertation Tutor (Roger Harrison) or the Course Leader (Katie Reed).

## Appendix C: A Selection of previous dissertation titles

A more complete list is available in Dissertation Skills, Blackboard.

MEDICAL STUDENTS AND ELECTIVES: A RETROSPECTIVE CROSS SECTIONAL STUDY OF ASSOCIATED HEALTH RISKS.
CERVICAL SCREENING FOR CHINESE WOMEN IN HONG KONG: KNOWLEDGE, ATTITUDE AND ATTENDANCE RATE
SCREENING FOR PROSTATE CANCER
THE ASSOCIATION BETWEEN ORAL CONTRACEPTIVE USE AND BREAST CANCER IN NIGERIAN WOMAN. A STUDY PROTOCOL.
AN ADAPTED SYSTEMATIC REVIEW OF EPIDERMAL GROWTH FACTOR RECEPTOR - TYROSINE KINASE INHIBITORS (EGFR-TKI) IN THE TREATMENT OF SECONDARY BRAIN METASTASES.
A HEALTH EQUITY AUDIT OF ALCOHOL TREATMENT SERVICES IN A LOCAL TOWN.
SYSTEMATIC REVIEW OF DENTAL HEALTH AND PREGNANCY OUTCOME.
BARRIERS TO SEXUAL HEALTH FOR THE LESBIAN COMMUNITY. A PUBLIC HEALTH REPORT,
DEALING WITH DEMANDS OF THE NEW FORMS OF TERRORISM AND ITS IMPLICATIONS FOR PUBLIC HEALTH
DIRECT ACCESS TO THE MIDWIFE: A CAUSE FOR INTERPROFESSIONAL RIVALRY?
THE IMPACT OF BITEWING RADIOGRAPHY ON PATIENT MANAGEMENT IN PRIMARY CARE DENTISTRY. A RESEARCH GRANT PROPOSAL
PROGNOSTICATION IN MALIGNANT DISEASE: A SYSTEMATIC REVIEW
HEPATITIS C SCREENING IN MANCHESTER
FEMALE CIRCUMCISION AND OBSTETRIC OUTCOMES: AN ADAPTED SYSTEMATIC REVIEW OF BIRTHS IN DEVELOPED COUNTRIES
EFFECTIVENESS AND COST EFFECTIVENESS OF THE HOLOGIC THINPREP IMAGING SYSTEM AND BD FOCALPOINT GS IMAGING SYSTEM - A SYSTEMATIC REVIEW
A QUALITATIVE STUDY OF 'LAY HEALTH WORKERS' IN MANCHESTER; WHAT ARE THEIR EXPERIENCES OF WORKING IN COMMUNITY CARE
EXPLAINING CHANGES IN THE INCIDENCE OF SEXUALLY TRANSMITTED DISEASES
IMPROVING THE THIRD YEAR OSCE - DO EXAMINERS SET DIFFERENT STANDARDS?
A PUBLIC HEALTH REPORT ON ADULT ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD). WHAT ARE THE RECOMMENCATIONS FOR PATIENT CARE IN THE POST ADOLESCENCE TRANSITIONAL STAGE OF EARLY ADULthood?
HEALTH DISPARITIES AMONG MAJOR UK ETHNIC GROUPS
INFANT MORTALITY IN KIRKLEES
LEVELS OF ENAMEL FLUOROSIS IN FLUORIDATED AND NON-FLUORIDATED POPULATIONS MEASURED USING QUANTITATIVE LIGHT-INDUCED FLUORESCENCE (QLF)
SOCIO-ECONOMIC GROUPING IN YOUNG PEOPLE WITH OBESITY LIVING IN THE UK
WHAT ARE THE PATTERNS OF OBESITY LEVELS ACROSS OECD COUNTRIES AND TO WHAT EXTENT ARE THEY ATTRIBUTABLE TO ENVIRONMENTAL FACTORS?
THE SOCIAL AND ECONOMIC OUTCOMES OF WOMEN HAVING AN ABORTION UNDER THE AGE OF 20 YEARS COMPARED WITH THOSE CONTINUING PREGNANCY. AN ANALYSIS OF THE BRITISH COHORT STUDY.

AN ADAPTED SYSTEMATIC REVIEW OF BREAST CANCER INTERVENTIONS
MODELLING THE EFFECT OF SMOKING CESSATION UPON LOCAL MORTALITY AND LIFE EXPECTANCY: THE TIME DIMENSION.
OCCUPATIONAL HEALTH AND SAFETY ADVICE
EXPLORATION OF THE HEALTH SERVICE EXECUTIVE'S RESPONSIBLE SERVING OF ALCOHOL PROGRAMS IN CORK CITY & ENVIRONS
WHAT ARE THE OPINIONS OF PARENTS OF YOUNG CHILDREN LIVING IN BARROW-IN-FURNESS REGARDING DENTAL HEALTH EDUCATION?
MASS MEDIA INTERVENTIONS FOR PROMOTING HEPATITIS C TESTING: A SYSTEMATIC REVIEW
THE NEED FOR ROUTINE CHLAMYDIA SCREENING IN NEW ZEALAND PRISONS
MENTAL HEALTH SCREENING AMONG ANTENATAL WOMEN IN MANCHESTER
THE PREVALANCE OF CONTROLLED BLOOD PRESSURE OF HYPERTENSIVE PATIENTS TREATED IN PRIMARY CARE HEALTH CENTRES IN BAQA'A REGION
WHICH WAY OUT? EXPLORING EXIT STRATEGIES FOR FEMALE SEX WORKERS. A QUALITATIVE STUDY.
REDUCING ALCOHOL RELATED CRIME AND DISORDER IN THE POPULATION OF LANCASTER - WHAT IMPACT ON THE HEALTH ECONOMY
THE IMPACT OF OBESITY ON PREGNANCY OUTCOME
LEVELS OF CHILDHOOD OBESITY IN NORTHAMPTONSHIRE AND POXIMITY OF FAST FOOD OUTLETS TO SCHOOLS
A SYSTEMATIC REVIEW OF THE EFFECTIVENESS OF RIFAMPICIN COMPARED WITH PAUCI-BACILLARY + MULTI-BACILLARY FOR LEPROSY
ASSOCIATION OF ADOLESCENT WEIGHT PERCEPTION, DIETING HABITS AND PSYCHOSOCIAL HEALTH: ANALYSIS OF THE HEALTH SURVEY FOR ENGLAND
A SYSTEMATIC REVIEW OF COMMUNITY BASED INTERVENTIONS FOR REDUCING VECTORIAL TRANSMISSION OF CHAGAS DISEASE IN THE AMERICAS.
THE EVIDENCE FOR USE OF ORAL HORMONAL CONTRACEPTIVE METHODS IN SLE: A REVIEW
DOES PHYSICIAN CONTINUITY AFFECT THE QUALITY OF PRIMARY CARE? A REVIEW OF THE EVIDENCE
A REVIEW OF POLICY FOR TUBERCULOSIS IN AN INNER CITY AREA OF MANCHESTER
OUTPATIENT CARE FOR CHRONIC RENAL DISEASE IN CHINA
A REPORT OF A CANADIAN WOMEN'S PRISON PARTICIPATORY HEALTH RESEARCH PROJECT
USER LED RESEARCH ON THE IMPACT OF DIAGNOSIS FOR PEOPLE WITH PSYCHOSIS