



HARVARD
T.H. CHAN
SCHOOL OF PUBLIC HEALTH

Department of Global Health
and Population

GUIDE TO THE
DEGREE PROGRAMS

FOR STUDENTS ENTERING
SEPTEMBER 2023

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*THE DEPARTMENT RESERVES THE RIGHT TO MAKE CHANGES TO DEGREE REQUIREMENTS, COURSES OFFERED,
AND OTHER INFORMATION CONTAINED IN THIS DOCUMENT.*

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MISSION STATEMENT

The [Department of Global Health and Population](#) seeks to improve global health through education, research, and service from a population-based perspective.

DEPARTMENT BACKGROUND

The Department of Global Health and Population (GHP) was established in 1962 and is one of nine academic departments at the Harvard T.H. Chan School of Public Health. We are proud to be the first department of population sciences in any school of public health with a focus on global health from the very beginning. Over the past half-century, faculty members, students, and researchers in the department have helped shape the field and launched some of the major ideas in global public health and population sciences.

GHP currently offers the following degree programs:

- Master of Science (80-credit)
- Master of Public Health – Global Health (45-credit)
- PhD in Population Health Sciences – Global Health and Population, offered under the aegis of the Harvard Graduate School of Arts and Sciences (GSAS).

Our faculty have extensive experience and special competence in social and economic development, health policy, and demography. Substantive areas of focus include design and financing of health care systems; women's and children's health; global nutritional epidemiology and practice; prevention and control of infectious and chronic diseases; environmental change and health; program evaluation; health and human rights; and humanitarian crisis and disaster response.

Our students come to the department with various backgrounds and with a wide range of career goals. All have an interest in the health of disadvantaged populations worldwide. **More detailed information is available on our [website](#).**

In addition to the customary research and educational activities, the department contributes to several special programs in global health, which are outlined below.

Affiliated Centers and Partnerships

[François-Xavier Bagnoud \(FXB\) Center for Health and Human Rights](#) envisions a world that fulfills the health and human rights of all peoples and protects them from injustices imposed by discrimination, poverty, conflict, and disaster. This interdisciplinary center conducts rigorous investigation of the most serious threats to health and wellbeing globally. The FXB Center works closely with scholars, students, the international policy community, and civil society to engage in ongoing strategic efforts to promote equity and dignity for those oppressed by grave poverty and stigma around the world.

[Harvard Center for Population and Development Studies](#) is a university-wide initiative. Its mission is to improve well-being around the world by better understanding the interaction of demographic changes

with social and economic development. Through its research, dissemination, and public engagement, this center strives to produce population-based evidence that will enable societies to be more responsive to demographic transitions in terms of policies and culture change.

[Harvard China Health Partnership](#) provides a platform for faculty across Harvard University to advance scholarship on China. Rich research partnerships with leading universities and government agencies for health in China provide a robust platform for multi-disciplinary and multi-site research. Executive Education programs with key government agencies for health in China bring together leading academics from Harvard and peer institutions in China to help Chinese policy makers address targeted challenges in the financing and delivery of health care in China. The Partnership's Visiting Scholars program hosts rising scholars as well as established academic researchers from peer institutions in China as part of a commitment to advance cooperation and grow academic talent in China. Lastly, a monthly seminar provides an opportunity for invited faculty, researchers, and policy makers from China or Harvard to present current work on health and China.

[Harvard Global Health Institute](#) is committed to surfacing and addressing broad challenges in public health that affect large populations around the globe. As a multi-disciplinary institute, HGHI strives to create and pursue opportunities that convene and connect stakeholders across disciplines, geographies, sectors, and the globe. It is dedicated to enhancing the University's capacity to conduct and disseminate interdisciplinary research that addresses some of the biggest challenges facing the globe. HGHI also focuses on connecting students, faculty, and thought leaders across the University and its affiliated hospitals. To help deliver its mission, the Global Health Institute seeks to support and expand creative, collaborative educational efforts that focus on global health and the challenges facing the world's populations.

[Harvard Humanitarian Initiative](#) is a university-wide academic and research center in humanitarian crisis and leadership supported by Harvard University's Office of the Provost and based at the Department of Global Health and Population at the Harvard T.H. Chan School of Public Health. The mission of the Harvard Humanitarian Initiative (HHI) is to conduct research and education on the practice of relieving human suffering in war and disaster by advancing the science and practice of humanitarian response worldwide.

[India Research Center](#), an office of Harvard Global Research Support Centre India, opened in December 2015, through a generous gift from Dr. Swati Piramal, a 1992 graduate of the Harvard Chan School, and Mr. Ajay Piramal, a graduate of Harvard Business School. The Center is designed to facilitate the development of new strategic relationships and build upon existing ones with organizations across India. The Center provides logistical support for its strategic goals of research, teaching, and knowledge translation and communication already underway by the school's faculty and students and their collaborators in India. Equally important, it offers opportunities to expand those activities and create new projects in the future.

[QuEST Center at Harvard](#) serves as the secretariat for QuEST Network activities and research. QuEST Harvard is led by Prof. Margaret E. Kruk, the Director of the QuEST Network. The QuEST Network seeks to build the evidence base to support transformation to high quality health systems by improving measurement, testing solutions, and creating generalizable knowledge in partnership with researchers and changemakers.

Research Initiatives

[Global Mental Health @Harvard](#) The Department of Global Health and Population at Harvard T.H. Chan School of Public Health, the Department of Global Health and Social Medicine at Harvard Medical School, the Harvard Global Health Institute, as well as other schools and departments at the University, have developed a network to coordinate activities under the rubric of a new initiative: GlobalMentalHealth@Harvard. The goal of the new initiative is to foster a collaborative and multi-disciplinary community at Harvard dedicated to transforming mental health of the world's population through education, research, innovation, and engagement. Our overarching objective is to vitalize a community of students and faculty within Harvard who are passionate about promoting a broad perspective on mental health as a fundamental public good and a universal human right. Through a combination of teaching, networking of students and faculty, collaborative research, and engagement with other institutions, innovators and communities with shared interests and values in global settings, we seek to build the capacity of future generations of scholars in this field.

[Health Systems Innovation Lab](#) is a global research and training lab that specializes in creating high value health systems through targeted innovations. Led by Prof. Rifat Atun, the Lab uses its research, education, innovation, and translation activities to work with students, governments, private sector, multilateral entities, and civil society to promote policy and practice, and accelerate the diffusion of health system innovations. The Lab conducts its work within two inter-related streams—Global Health Systems and Innovation—and is driven by a Harvard-based team of interdisciplinary clinicians and academic leaders, and an international group of disciplinary experts.

[HPACC: GHP Project on Access to Care for Cardiometabolic Diseases](#) Noncommunicable diseases (NCDs) such as diabetes and cardiovascular disease are now the leading cause of death and disability in most low- and middle-income countries. To address this global health challenge, researchers from the Department of Global Health and Population at the Harvard T.H. Chan School of Public Health have launched the GHP Project on Access to Care for Cardiometabolic Diseases (HPACC). HPACC is a growing collaboration between the Harvard T.H. Chan School of Public Health, the University of Göttingen, the Heidelberg Institute of Public Health, the Caribbean Public Health Agency, the George Institute, and researchers from over 20 other countries.

[PPIUD Study](#) The International Federation of Gynaecology and Obstetrics (FIGO) is implementing an intervention program on the post-partum intrauterine contraceptive device (PPIUD) services through its nationally-affiliated Associations of Gynaecologists and Obstetricians in six countries—Sri Lanka, Kenya, India, Tanzania, Nepal and Bangladesh. The Harvard T. H. Chan School of Public Health is studying the impact and performance of the FIGO PPIUD intervention in three of the six countries, Sri Lanka, Nepal, and Tanzania. The study will encompass both the impact of the intervention on the uptake and subsequent continued use of PPIUD, the extent to which the intervention leads to the institutionalization of postpartum IUD services in the hospitals, and to what extent the service diffuses to other hospitals or providers.

[Prevention Policy Modeling Lab](#) models the health impact, costs and cost-effectiveness of infectious disease treatment and prevention programs in the United States. We work closely with collaborators in the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) at the Centers for Disease Control and Prevention to inform U.S. health policy and guide public health decision-making at national,

state and local levels. The models we build incorporate evidence-based prevention strategies, emphasize cross-cutting initiatives and produce results that can be operationalized within healthcare and other sectors.

[Value of Vaccination Research Network](#) is a community of practice dedicated to generating new, high-quality evidence on the broader social and economic impacts of vaccination (BSEIV). The purpose of this research is to support evidence-based decision-making for immunization program investments in healthcare systems around the world. The VoVRN has two principle aims. The first is to cultivate a network of stakeholders interested in BSEIV research and provide a forum for them to connect and exchange ideas. The second is to sponsor novel research projects that focus on the pathways, models, estimates, and data needed to expand and strengthen the quality of BSEIV evidence. The VoVRN is led by a Secretariat based at the Harvard T.H. Chan School of Public Health and a twelve-member, multi-institutional Steering Committee. Its work is supported by the Bill & Melinda Gates Foundation.

Research and Training Programs

[Bernard Lown Scholars in Cardiovascular Health Program](#) was established in honor of Dr. Bernard Lown, a world-renowned cardiologist and activist, whose career has advanced public health globally. The Program is designed to create an international cadre of talented health professionals who will use public health tools and strategies to prevent cardiovascular diseases and promote cardiovascular health in developing countries, as defined by the United Nations. Since its establishment in 2008, The Lown Scholars Program has supported the work of more than two dozen Lown Scholars from Asia, Latin America, Africa and the Middle East. Our support has facilitated productive and long-term collaborations between the Scholars and Harvard T.H.Chan School of Public Health faculty members.

[Fogarty Global Health Training Program](#) a consortium of Harvard, Boston University, Northwestern, and University of New Mexico, offers opportunities in global health research training for pre- and post-doctoral candidates from the U.S. and lower-middle-income countries (LMICs). This program is sponsored by the Fogarty International Center (FIC) and several collaborating Institutes and Centers at the National Institutes of Health (NIH). The purpose of the program is to generate a new cadre of global health researchers, educators, and professionals who will be prepared to address the new challenges in global health. The program will provide fellows with a one-year mentored research fellowship in innovative global health research to promote health equity for populations around the world.

[Global Health Delivery Project at Harvard University](#) Despite significant new global health resources, delivering effective interventions to patients who need them remains one of the greatest hurdles facing medicine and public health. To bridge the gap between knowledge and practice in global health, the Global Health Delivery (GHD) Project at Harvard aims to systematize the study of health care delivery and stimulate collaboration among educators, researchers, stakeholders, and implementers. We research and write case studies, run courses, and build online communities for global health professionals. Our mission is to create a global network of professionals dedicated to improving the delivery of value-based health care.

[Harvard FXB Child Protection Certificate Program](#) offers Harvard graduate students the opportunity to obtain a certificate in child protection. This interdisciplinary qualification is open to students from any

Harvard graduate school. Child protection work aims to prevent, respond to, and resolve abuse, neglect, exploitation, and violence experienced by children in domestic and international settings. It requires an interdisciplinary and multi-sectoral approach that encompasses work in health, education, social service, and law enforcement to advance the protection of children and involves collaborating with a wide range of partners across government and within civil society, communities, and families. The certificate program incorporates ongoing child protection research and practice grounded in field-based realities and takes into account the expertise of UNICEF, a university-wide faculty steering committee, and external child protection experts.

[International Health Systems Program](#) is a multidisciplinary team of faculty, scholars, and experts working to improve health care systems in developing countries to improve health and living standards for the poor and disadvantaged. IHSP brings together economics, clinical and public health science, politics, ethics and management to increase knowledge of how health systems work; through research; share this knowledge through teaching, training, technical dissemination and publications; and apply this knowledge by providing technical assistance improving the health status of those most in need.

[Nutrition and Global Health Program](#) takes an interdisciplinary approach to teaching and conducting research about nutrition, its effect on human and economic development, nutrition in humanitarian crisis situations, and the dynamic interplay between the epidemiologic, nutritional, and demographic transitions around the globe. The Program trains and prepares a new generation of health professionals dedicated to innovative problem solving and evaluation approaches to global health nutrition challenges, with emphasis on concerns pertaining to low and middle-income countries.

[Program on the Global Demography of Aging at Harvard University](#) is funded by the National Institute on Aging at the National Institutes of Health to carry out research on themes related to global aging and health, with an emphasis on issues in the developing world. A key overarching theme focuses the expertise available at various schools at Harvard toward one of the pressing health questions of global aging, namely understanding the changing patterns of adult morbidity and mortality, including their measurements and causes, demographic and economic implications, and policies and programs for addressing and mitigating such implications.

[Takemi Program in International Health](#) is an interdisciplinary research program that focuses on the problems of mobilizing, allocating, and maintaining limited resources to improve health. To address these issues, the program brings together at Harvard a small group of Takemi Fellows, mid-career professionals from around the world, with particular emphasis on fellows from developing countries. Through its activities, the program aims to advance knowledge about international health and to contribute to institutional development and improvement of national policy. The program was established in 1983 and is named after Dr. Taro Takemi, the distinguished physician-scientist who served for more than 25 years as the President of the Japan Medical Association.

School-wide Interdisciplinary Concentrations

Degree candidates have the option of pursuing interdisciplinary concentrations. These concentrations are certificate programs designed to deepen a students' experience in academic or professional areas aligned with their career goals. [Click here for a full list of school-wide interdisciplinary concentrations.](#)

MASTER OF SCIENCE PROGRAM

THE MISSION OF THIS DEGREE PROGRAM IS TO PREPARE THE NEXT GENERATION OF RESEARCHERS FOR GLOBAL HEALTH AND POPULATION AROUND THE WORLD IN ORDER TO ADVANCE GLOBAL HEALTH RESEARCH AND REDUCE THE BURDEN OF DISEASE, ESPECIALLY IN THE WORLD'S MOST VULNERABLE POPULATIONS.

GOALS AND OBJECTIVES

SM graduates contribute to the improvement of global health and the resolution of population problems. Graduates have the analytical and technical skills to address health and population problems from a range of disciplinary perspectives. They build a set of advanced competencies covering conceptual approaches, theory and applications, problem solving and analysis, as well as a wide range of quantitative and qualitative methods. Graduates pursue careers in policy analysis, monitoring and evaluation of public health programs, as well as academic and programmatic research. They engage with global health research through national and international government agencies, NGOs, the private sector and academic institutions.

The overall objectives of the two-year (80-credit) SM degree program are:

- To provide training in public health sciences to individuals whose prior training and experience prepares them to play a leadership role in generating new knowledge through public health research;
- To award the SM degree to individuals who have acquired a particular depth of knowledge in public health sciences and who have demonstrated the competencies set out below;
- To lead students to achieve these competencies in a setting that demands that they query, learn, interpret, and communicate in active interchange with their peers, with faculty, and with other researchers outside the school.

COMPETENCIES

SM students acquire an understanding of the major issues in population and global health, as well as learning the research tools for generating evidence and informing public health decisions. Students are also exposed to the practical aspects of undertaking research and evaluating population health interventions around the world, including a perspective on the economic, social, political, cultural, and ethical considerations that bear on these issues. Upon completion of the SM degree, graduates will be able to:

- Identify and apply appropriate quantitative and qualitative methods to the analysis of international, national, regional, or local contemporary problems of public health;
- Synthesize and integrate specialized knowledge and research skills in one or more areas of global health and population (e.g. demography, economics, epidemiology, human rights, law, politics, policy, and statistics), based on advanced course work and independent research study;
- Evaluate and apply ethical consideration in global health research.

EDUCATIONAL APPROACH

The distinctiveness of the SM degree in global health and population is the strong focus on research engagement with contemporary public health issues. This is achieved through coursework, research experiences, and close connections with the faculty, all of whom actively engage in global health and population research. The training combines an academic education in key disciplinary areas with problem solving, research experience and a final thesis. Throughout the program, students are encouraged to engage with faculty on their research projects, to organize and participate in seminars that promote discussion with members of the Harvard T.H. Chan School community, and to engage in research opportunities during Winter Session, which may include either independent studies or coursework. Students are also required to conduct a summer research internship, gaining practical experience and conducting research that can later be extended as part of the masters thesis.

The two-year 80-credit degree program comprises a core curriculum of courses required by the School and the Department, together with elective courses chosen by the student. The coursework emphasizes the acquisition of research skills and concepts necessary to address a range of global population health issues. Of the necessary 80 credits, the required core courses make up slightly over half, allowing considerable flexibility for students to tailor their own degree program. **All departmental requirements, including the 5.0 credit year-long thesis course, must be completed for ordinal (letter grade). Any remaining credits may be taken ordinal, pass/fail, or a combination of both.**

Students are provided with a detailed course schedule for each year of the program (see page 9). In the first year of study, students focus on the core courses required by the School and the Department. GHP 272 *Foundations of Global Health and Population* is offered in the first semester and provides a common platform for the more advanced work that follows. There are approximately 25 required credits in the first year of study, including school-wide requirements; courses in demography and measurement; applied courses in politics, economics, and program policy and evaluation; and case study sessions in research ethics. In the summer after the first two semesters of instruction, students undertake a required research internship, applying the skills and knowledge they have gained to contemporary problems in global health. Students are encouraged to use this research project and the opportunities it provides to inform their Master's Thesis. During the Winter Session (January each year), many students join one of the faculty-directed field courses which in recent years have included research work in Brazil, Chile, Eastern Europe, the MENA region, and Mexico.

The second year involves a combination of coursework and independent research study. Faculty-directed independent study sections in the school (or the University) are encouraged in the second year, to further develop research skills. Some students choose to cross-register at other Harvard Schools such as the Harvard Kennedy School, Harvard Graduate School of Education, or the Harvard Business School, to take advantage of the course offerings at these schools.

CRITERIA FOR ADMISSION

On entry, applicants must hold a bachelor's degree or equivalent in a relevant discipline. Many entering students already hold advanced degrees in medicine or a social science discipline. The admissions committee looks for candidates with:

- Strong academic potential, as demonstrated by grades in prior academic coursework, and/or performance on standardized tests such as GRE or MCAT (*submitting GRE/MCAT scores is optional for the 2023-2024 admissions cycle*).
- TOEFL test with a minimum IBT score of **104** with a minimum of **27** in the writing section and no less than **25** in the remaining 3 sections (listening, reading, and speaking).
- College transcript must show **both a Statistics AND a Calculus** course with a **minimum grade of B+**. This does not include courses on statistical software (e.g. SAS, SPSS, or Stata).
- Relevant global health or public health research experience is required. The review committee looks for applicants with international research work experience. Most successful applicants have **a minimum of one year or more full-time equivalent (FTE)**; health work with a migrant population at the domestic level; substantive policy or advocacy work on a global health issue (e.g. HIV) at the domestic or international level.

STUDENT STATUS

- The GHP SM Program is offered for **full-time** student status only. Part-time status is not permitted.
- The GHP SM Program **does not** grant admission deferrals. Any individual who is admitted to the program and is unable to matriculate will need to reapply.
- Students **may not** request a leave of absence for the purpose of pursuing another degree at Harvard or another university.

ADDITIONAL INFORMATION

Procedures, application deadlines, and test requirements for admission to this program, as well as information on financial aid may be obtained from the [Harvard T.H. Chan School Admissions Office](#).

Admissions Office

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Master of Science Program (80 credits) in Global Health and Population
Degree Requirements for Students Entering Fall 2023

| DEPARTMENT REQUIREMENTS | CREDITS | YEAR COURSE SHOULD BE TAKEN |
|---------------------------------------------------------------------------------------|------------|-----------------------------|
| GHP 220 Fall 2: Introduction to Demographic Methods | 2.5 | 1 |
| GHP 272 Fall: Foundations of Global Health and Population | 5.0 | 1 |
| HPM 548 Fall 1 or Spring 1: Responsible Conduct of Research | 1.25* | 1 |
| GHP 506 Spring 1: Measuring Population Health | 2.5 | 1 |
| ID 212 Spring 2: Foundations of Program and Policy Evaluation | 2.5 | 1 |
| Mandatory Sessions on Research Ethics (Spring 2) | NON-CREDIT | 1 |
| GHP 230 Fall 1: Introduction to Economics with Applications to Health and Development | 2.5 | 1 OR 2 |
| GHP 207 Spring 2: Risk Factors and Population Health | 2.5 | 1 OR 2 |
| GHP 269 Spring 2: Political Economy of Global Health | 2.5 | 1 OR 2 |
| Intermediate Methods (see below for choices) | 10.0 | 1 AND/OR 2 |
| GHP 299 Fall & Spring: Master's Thesis | 5.0 | 2 |

INTERMEDIATE-LEVEL METHODS (10 CREDITS)

| | | |
|---------------------------------------------------------------------------------------------------------|-----|--------|
| BST 210 Fall or Spring: Analysis of Rates and Proportions | 5.0 | 1 OR 2 |
| BST 223 Spring: Applied Survival Analysis | 5.0 | 1 OR 2 |
| BST 226 Spring: Applied Longitudinal Analysis | 5.0 | 1 OR 2 |
| BST 260 Fall: Introduction to Data Science | 5.0 | 1 OR 2 |
| GHP 504 Spring 1: Introduction to Qualitative Research for Global Health | 2.5 | 1 OR 2 |
| GHP 525 Fall: Econometrics of Health Policy | 5.0 | 1 OR 2 |
| SBS 263 Spring: Multilevel Statistical Methods | 5.0 | 1 OR 2 |
| SBS 288 Fall 1: Qualitative Research Methods in Public Health | 2.5 | 1 OR 2 |
| SBS 521 Fall 2: Qualitative Data Analysis for Public Health | 2.5 | 1 OR 2 |
| EDU S052 Fall or Spring: Intermediate and Advanced Statistical Methods for Applied Educational Research | 5.0 | 1 OR 2 |
| EDU S030 Spring: Intermediate Statistics for Educational Research: Applied Linear Regression | 5.0 | 1 OR 2 |

| CORE REQUIREMENTS | CREDITS | YEAR COURSE SHOULD BE TAKEN |
|----------------------------------------------------|---------|-----------------------------|
| ID 100 Fall 1: Foundations for Public Health | 1.0 | 1 |
| BST 201 Fall: Introduction to Statistical Methods | 5.0 | 1 |
| EPI 201 Fall 1: Introduction to Epidemiology | 2.5 | 1 |
| EPI 202 Fall 2: Elements of Epidemiologic Research | 2.5 | 1 |

- Total required credits (department and core) for Years 1 & 2 = **46** or **47.25** (depending on HPM 548).
- Total credits required for degree is 80 of which, **60 must be letter grade.**
- Students may not take more than **27.5 credits per semester.**

***All department and core credits must be taken for a letter grade with the exception of HPM 548 which, if taken for credit, is only offered P/F. Audited courses do not count toward total number of credits.**

NO COURSE SUBSTITUTIONS PERMITTED.

SUMMER RESEARCH INTERNSHIP

The summer research internship is an opportunity for students to engage in a public health research program as a team member under the supervision of both their faculty advisor and a field preceptor. The research internship provides a public health setting in which students may integrate and apply the skills and knowledge acquired through their coursework. While the summer internship is not credit-bearing, it is a requirement of the SM2 degree program in GHP and no student will be allowed to graduate without fulfilling it.

GUIDELINES FOR SUMMER RESEARCH INTERNSHIP

During the summer between the first and second years, students are required to undertake a research internship to gain hands-on experience and to integrate the research skills that they have learned from their coursework. Many students use the summer research experience to begin a research project that can be later developed into their thesis. Beginning early in the first year of study, a series of meetings will be scheduled for students to meet with the Masters Committee to review and discuss internship logistics.

OBJECTIVES

The summer research internship is designed to enable students to:

- Integrate and apply the research skills and knowledge acquired through coursework to a public health issue in the field
- Develop the interpersonal skills necessary to be an effective team member within a research group
- Generate data that can be used to develop the master's thesis
- Further develop oral and written communication skills
- Work on a public health issue within a research environment

PLACEMENTS

Once students have identified a potential research internship opportunity, the following information must be provided to the GHP Education Office in April (specific date will be announced in advance):

- Description of research activity and how it may generate new knowledge for global health field
- Location
- Duration (at least 6 weeks @ 30 hours per week is required)
- Approval from the individual who will supervise student work during this period (field preceptor) and the Faculty Advisor
- Budget – this should include all funding sources (confirmed sources and any funding opportunities to which you are applying) and should only include the following costs:
 - Non-Local or International Sites
 - Travel – this includes the round trip to and from the internship site; if the internship site is in a different location from the main airport, then local travel to the internship site can be included with a clear justification; NOTE: for any internship that involves multiple sites, only one round trip ticket may be submitted for funding consideration

- Meals and lodging during the internship period are covered at the US GSA rate for the specific location, unless organization support is already provided
- **Local Sites (students remaining in Boston)**
 - Travel – this includes travel from your residence to the internship site during work days
 - Meals during the internship period are covered at the US GSA rate, unless organization support is already provided

Further guidance will be provided to all students during the fall semester.

FUNDING

Once a student has submitted the required materials for an acceptable internship as outlined above, they will be eligible for consideration of funding provided by the Department and managed through the Education Office. These funds are limited and are meant to help fill in budget gaps for students. These awards will vary in amount. All sources of existing or expected funding must be included in the student's original budget. Students will be provided with a template for budget proposals.

The following would **not** be considered eligible for these funds:

- Students with fully funded internships covering travel, housing, and stipend
- Students remaining in Boston and receiving a stipend or salary

REPORTING

All SM2 students are required to write a **3-5 page report** of their summer research internship. This report must be submitted electronically via email to the Education Office ([Allison Conary](#) and [Barbara Heil](#)). **This report is due September 16, 2024.**

The following components should be included:

- Description of your summer research internship – activities, responsibilities, and outcomes.
- The name, title and contact information of your supervisor as well as a complete address of the organization/group with whom you are working.
- Indicate whether or not you plan to incorporate your research experience into your Master's Thesis. Explain how you plan to incorporate it, or why you are not doing so.
- Indicate whether or not you would recommend this internship to future students.

As they plan their research internship, all students are required to:

- Consult with their faculty advisor and check the [Office of Human Research Administration \(OHRA\)](#) Guidelines to assess if OHRA approval for the field experience activity is required.
- Register their travel with the [Harvard Travel Registry](#) and complete and submit a [Travel Risk and Release Form](#) to the GHP Education Office.

Examples of recent internships/summer work include:

- *Testing and care among women (of 18-49 years) who have never or infrequently test for HIV, and examine if and how informal healthcare providers, specifically birth attendants, can bridge these barriers to improve HIV testing in Mbarara district*

- *Conducting research on population tobacco control interventions and their effects on female health outcomes using literature review and meta-analysis methods*
- *Researching culturally-relevant, evidence-based interventions designed to support fathers' direct and indirect impacts on ECD will be one of the first studies of its kind in LMIC settings of sub-Saharan Africa*
- *Working with a Kenya-based NGO on building a rapidly expanding network of childcare centers in Nairobi's urban slums*
- *Estimating the burden of disease caused by COVID-19 in Brazil*
- *Designing an AI solution for detection of diarrheal pathogens in drinking water within resource-constrained contexts*
- *Focusing on the status of cardiovascular disease, its economic cost, and impact on COVID-19 outcomes at the global level*
- *Understanding the experiences of families supporting children with disabilities in Senegal*
- *Reviewing the value for money of school feeding programs in Malawi and looking at the multisectoral public health returns across human capital, social capital, health, education, and agriculture and gender equity impact*
- *The Human Cost of Cobalt: A qualitative Investigation in the Democratic Republic of the Congo*
- *Implementation of Non-pharmacological Approaches to Manage Patients' Lower Back Pain*
- *Post-Acute Care in China: payment system, policy landscape, challenges, and prospects*
- *Examining the impact of community-led SNAP awareness, providing peer-to-peer SNAP education, and financial incentives, on increasing SNAP enrollment in the Dorchester, Mattapan, & Hyde Park communities*
- *Needs assessment for the prevention of teen pregnancy in Mexico's rural indigenous communities in the state of Chiapas*
- *Delivery and scale-up of HIV response services to communities in El Salvador*
- *Implementing molecular surveillance to routine surveillance systems in Senegal*
- *Scoping review synthesizing all available evidence pertaining to the role of resilience in shaping mental health outcomes of adolescents in India*
- *Health policies in Brazil in response to COVID-19 and analyzing the effects of the pandemic on healthcare delivery*

WINTER SESSION

The Department strongly encourages all students to participate in Winter Session activities, whether for-credit or non-credit, on-site, or off-site, in accordance with their individual needs and interests. Activities may include [field-based courses](#), independent studies, and providing research support to faculty projects.

COURSE WAIVERS

Students seeking to waive a school-wide core course should follow the procedure as outlined in the [Harvard Chan Student Handbook](#). For Departmental requirements, waivers will be considered only if a student can demonstrate that the subject matter has been covered in a previous **graduate-level course**. To waive a required course or one of a choice of courses fulfilling a requirement, please proceed as follows:

- 1) Secure a copy of the syllabus of the course you took that you believe closely matches the course you want to waive.
- 2) Secure an unofficial copy of your transcript indicating the course you took and the grade you received.

- 3) Send the documents to [Allison Conary](#) or [Barbara Heil](#) with an email identifying which course you would like to be evaluated for in order to waive.
- 4) Once your documents have been received, they will be forwarded to the faculty who teach the course so they can evaluate your request. Once they make a decision, you will be informed. **No course substitutions are allowed.**
- 5) Please keep in mind that waiving a course means that you have met that GHP requirement but does not change the total amount of credits needed for the SM2 degree. You still must complete a total of 80 credits with a minimum of 60 credits being taken for a letter grade.

MASTER'S THESIS (GHP 299)

The second year involves a mix of coursework and the Master's Thesis. The thesis allows the student to pursue a single topic in depth and demonstrate analytical and substantive research expertise in an area of global health and population.

A Master's Thesis is required of all students enrolled in our two-year SM program. Ideally, work on the thesis begins during the summer internship, while the final written version is produced during the student's second year in the program. The thesis serves several purposes:

- It provides an opportunity for the student to work on a new problem or issue of particular interest
- It allows the student to apply many of the research skills acquired in the courses taken for the degree
- The thesis itself is proof of the student's mastery of certain skills that are important whether the student begins a research-based career or continues to a doctorate research degree
- It is a useful document that can be shown to employers and supervisors indicating a student's level of achievement in particular areas of research

The research skills and understanding that we expect to see developed through the thesis include:

- The capacity to conceptualize a problem and to identify the key research question(s) that need to be addressed
- The ability to reduce broad questions and issues to a specific research question that can be answered with the resources available to the student
- The capacity to apply the technical skills acquired in the courses taken during the two-year period of training
- The capacity to concisely summarize new conclusions based on existing evidence and on new findings obtained in the thesis
- The ability to frame the thesis in a broader context and to summarize how the findings contribute to the development of new knowledge and understanding for global health and population
- The ability to write a scientific report of publishable quality

Sample List of Recent Thesis Titles

Household food insecurity, growth and development of preschool children: Evidence from rural Pakistan
"No matter how many minutes you have, [you can] change a child's life by teaching him something": An Exploration of Early Childhood Care and Education Quality in Kenyan Daycares

| |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>The Human Cost of Cobalt: A Qualitative Investigation in the Democratic Republic of the Congo</i> |
| <i>Evaluating the Impact of a Family Planning Supply Chain Intervention on Postpartum Contraceptive Use in Senegal: A Quasi-Experimental Study Using Difference In Differences</i> |
| <i>Towards Targeted Interventions: A Demographic and Spatial Analysis of SINAN-Reported Violence in Brazil in 2019</i> |
| <i>The relationship between maternal depression and early child development with the role of parenting in rural Tanzania</i> |
| <i>Prevalence and factors associated with intimate partner violence against infertile women in China</i> |
| <i>Evaluating the impact of immigration and COVID-19 on the mental wellbeing and general self-efficacy of young people from mixed-status families in Queens, NY</i> |
| <i>Changes in DHS Health indicators over time across the wealth gradient in low and middle-income countries</i> |
| <i>Women's empowerment in the cancer care continuum in Morocco: a qualitative study on the impact of a lay health advisor training program</i> |
| <i>Malawi Family Planning Survey, A Secondary Analysis of the First Three MFPS Waves</i> |
| <i>Associations between maternal parenting stress and depressive symptoms and responsive feeding practices in the Mara region of Tanzania</i> |
| <i>Examining water governance and sustainability from a cluster-RCT impact evaluation of a community-based WASH program in the Democratic Republic of Congo</i> |
| <i>Parental Stimulation: it's association with early childhood development and influence by the gender of a child in the context of children under the age of six years old in Vietnam</i> |
| <i>Cancer Onset and Financial Outcomes among Medicare-insured US Older Adults</i> |
| <i>The Effect of Integrated Mental Health Care on Psychotropic Medication Utilization Patterns and Costs for At-Risk Children in the Boston Area</i> |

STUDENTS ARE REQUIRED TO REGISTER FOR THE THESIS COURSE (GHP 299) IN BOTH THE FALL SEMESTER AND SPRING SEMESTER OF THEIR SECOND YEAR. A MEETING TO DISCUSS THE DETAILED GUIDELINES FOR THE THESIS WILL BE SCHEDULED DURING THE SPRING SEMESTER OF YEAR 1 [APPENDIX 2].

ACADEMIC ADVISOR

All students are assigned an Academic Advisor upon enrollment. The Advisor is responsible for providing guidance and supervision throughout the two-year program, including approval of the course selection by the student. Assignment of Advisors may be shifted by mutual consent of the student and the assigned Advisor. While efforts are made to match students with an appropriate advisor, there are occasions when a change is beneficial. Neither the academic advisor nor the advisee should feel uncomfortable about initiating such a change. To change their academic advisor, the student should speak with the potential new academic advisor to see if he/she is willing to accept another advisee. Once that has been established, they should speak with the current advisor and indicate who they propose that their new advisor will be. Finally, the student should prepare an email which indicates the change from one advisor to another. This email should be sent to [Allison Conary](#) or [Barbara Heil](#) in the GHP Education Office, and must be copied to both new and old advisors.

In an effort to strengthen the advising component of the Department's Master of Science degree program, the SM Committee has prepared a document to clarify the roles and responsibilities of both the academic advisor and the advisee [Appendix 1]. Through this document, the committee has endeavored to present

clearly the expectations of each and allow for a better understanding and a more cohesive and productive relationship between both parties.

CAREER GUIDANCE AND INTERNSHIP OPPORTUNITIES

SM graduates find employment in a wide variety of capacities within the broad areas of population and global health research. GHP faculty have strong links with the bilateral and multi-lateral health and development agencies, academic institutions around the world, and with national and international non-governmental and private voluntary organizations. Positions are largely identified through networking, and public health is not an exception to this rule. The search should start as soon as possible after a student arrives at the School, and it needs to begin with clarity about the type of position to be sought. Informational interviews with individuals in the field, including Harvard Chan graduates, will be helpful at this stage. Those interviews can clarify those work characteristics to be sought and avoided, as well as any academic or other requirements.

Advisors should be helpful during this initial process, as students' career goals and academic paths are mapped out. Their relative utility during the more specific searches for research internships and jobs will depend upon a number of factors including their (faculty members) own educational background, experience and interests. Students are encouraged to complement discussions with their advisor by holding additional conversations with other GHP and Harvard Chan School faculty, especially those with matching research interests and connections.

Students should also make use of the [Office of Career and Professional Development](#), which is supported by the School especially for this purpose. Staff in this office can help with overall planning of the job or interview search process, CV development, and interview preparation.

Students should be aware, from the outset of graduate study that responsibility for a successful search result rests with them. This is an active, rather than a passive endeavor. The Harvard Chan School and the Department of Global Health and Population cannot and will not provide or guarantee a suitable position upon graduation. School faculty and staff can be extremely helpful, as indicated above but their roles are limited. Successful students will take ownership for their job and internship searches and act upon the guidance provided.

CAREERS AND POSITIONS OF RECENT GRADUATES

Recent graduates have chosen a variety of career paths. Some students continue into a doctoral program at Harvard or elsewhere on completion of the masters; their eventual aim is usually to work as researchers in varied types of institutions. Others have begun research careers with foundations such as The Population Council or the Bill & Melinda Gates Foundation, whilst others have worked directly for international health and development agencies such as USAID, UN bodies including the World Bank, and companies and non-profit and non-governmental organizations in the US and worldwide such as John Snow, Inc., BRAC, and R4D. Career advice and opportunities are offered in a number of ways through job postings, alumni talks, School-wide career fairs and networking through the faculty.

Next, is a **sample list** of positions taken by some of our *recent* graduates.

| ORGANIZATION | POSITION |
|-------------------------------------------------|-----------------------------------------|
| Camber Collective | Strategy Consultant |
| Harvard University | PhD student, Population Health Sciences |
| | Research Assistant or Analyst |
| John Snow, Inc. | Consultant |
| Johns Hopkins Bloomberg School of Public Health | PhD Student |
| Palladium | Associate, Health Finance |
| RTI, International | Consultant |
| University of North Carolina | PhD Student |
| USAID | Research Associate |
| | Health Officer |
| World Health Organization | Technical Officer |
| Yale University | PhD Student |

STUDENT GUIDANCE

The Master’s Committee holds a series of meetings with first and second year students aimed at clarifying requirements and at providing guidance in varied activities. The meetings are often scheduled during lunch time, to avoid conflict with scheduled classes, and guarantee maximum attendance.

Topics discussed with 1st year students include:

- Summer research internship – suggestions on how to search for opportunities (e.g., consultation of past summer internship reports, available through the GHP Education Office), guidance on available funding, and clarification on how to take advantage of the research internship for thesis development. A series of meetings are scheduled throughout the fall and spring semesters to monitor progress and address any issues or concerns.
- Human subjects protection – depending on demand, a thorough discussion on human subjects with guidelines on how to secure ethical approval prior to embarking on a summer project.

Topics discussed with 2nd year students include:

- Summer research internship – feedback on the research conducted during the summer and discussion regarding the possibility of using this experience as a basis for their thesis; students are required to submit their summer research internship reports to the department’s Education Office (one meeting early Fall).
- Thesis – discussion regarding the selection of topic, data, advisor, and second reader; advice on how to establish clear agreements with advisors regarding the frequency of meetings to discuss thesis progress; and advice on how to establish clear agreements with second reader on how much effort he/she is willing to invest in meetings and draft reviews. These topics and others are covered in the required year-long SM2 thesis course, GHP 299.

PLEASE NOTE: REGULAR EMAIL COMMUNICATIONS ARE ROUTINELY SENT TO BOTH COHORTS OF STUDENTS BY THE DEPARTMENT’S EDUCATION OFFICE. THESE COMMUNICATIONS INCLUDE REMINDERS OF UPCOMING KEY PROGRAM DEADLINES, COURSE ENROLLMENT INFORMATION, INTERNSHIP AND JOB OPPORTUNITIES, AND RESPONSES TO QUESTIONS CONCERNING PROCEDURES WITHIN THE DEPARTMENT.

DEPARTMENTAL MASTER OF SCIENCE COMMITTEE (2023-2024)

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DOCTORAL PROGRAM

This section presents the Global Health and Population field of study for the Doctorate of Philosophy (PhD) in Population Health Sciences (PHS), a joint collaboration between the [Harvard T.H. Chan School of Public Health](#) and the [Harvard Kenneth C. Griffin Graduate School of Arts and Sciences](#).

This program offers advanced doctoral-level research training that builds on multiple disciplinary perspectives to understand origins and determinants of health and disease across populations, to evaluate health system performances and effectiveness of health policy and to design health systems for improving population health, financial risk protection and equity. The degree is intended for those holding a bachelor's or master's degree in physical, natural, or social sciences. A distinguished undergraduate record, as well as excellent performance in any graduate work undertaken, is required for admission to this program.

Students from the two-year SM degree in Global Health and Population are encouraged to apply to the PhD PHS program. Courses taken during the two-year SM degree may count towards the requirements for the doctoral program and reduce the time required to complete the doctoral program once they enter.

Specific requirements for each **Area of Specialization** are outlined in this document. Adaptations and alterations of departmental requirements are not encouraged and are possible only with written support of the academic advisor in consultation with the head of the area of specialization, and approval of the Doctoral Committee Chair, Dr. Winnie Yip.

GENERAL INFORMATION

This program is intended for students likely to pursue careers in academic and research institutions and international think tanks related to global health and population studies, health systems and health policies. In addition to nurturing the development of the next generation of population health and health system researchers and scientists, the program will provide opportunities for students to build scientific communication, and mentoring and teaching skills, thereby becoming educators in their field.

Within Global Health and Population, students must demonstrate, through coursework and examination, satisfactory knowledge and understanding of their area of specialization and additional tracks of their choosing (please refer to requirement listings for each Area of Specialization). Only letter grades of B or better may be counted towards a student's final program.

The student must also prepare and defend a doctoral dissertation representing original research. Some students arrive with considerable research experience and may move rapidly to completion of the degree, while others must design, collect, analyze, and write-up entirely new dissertation work. The pace of progress depends largely on the student's individual plan, which is designed in collaboration with the academic advisor and dissertation committee and follows the PhD timetable.

Throughout each student's program, the Department will monitor performance in courses and in meeting degree requirements for completion. Upon request by the student, leave of absences during the program may be granted on a case-by-case basis in accordance with GSAS guidelines. Under such approved circumstances, the leave period would not be counted against the four-year time limit. In cases of

unacceptable performance, the student may be required to withdraw. **Students may not request a leave of absence for the purpose of pursuing another degree.**

ADDITIONAL RESOURCES

[Fellowships and Writing Center](#)

[GSAS Policies](#)

[Office of Student Services](#)

[PhD in Population Health Sciences](#)

**PHD PHS GLOBAL HEALTH AND POPULATION
STUDENT TIMETABLE**

| <u>DATE</u> | <u>PROGRESS DUE</u> |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| END OF 2ND SEMESTER (MAY) | Submission of Prospective Program Sit Paper I of the Written Qualifying Examination |
| END OF 4TH SEMESTER | Submit Paper II of the Written Qualifying Exam |
| PRIOR TO 5TH SEMESTER | Submission of Final Program – including nominations for Preliminary Qualifying Exam (PQE) Committee |
| 4 WEEKS PRIOR TO SCHEDULED PQE EXAM | Preliminary Qualifying Exam Scheduling Form Due |
| END OF 5TH SEMESTER | Satisfactory Completion of Preliminary Qualifying Examination Submission of Nominations for Dissertation Advisory Committee (two weeks post completion of PQE) |
| DISSERTATION RESEARCH | Progress Report due every three months until thesis is completed |
| THESIS SUBMISSION TO OUTSIDE READER | Eight weeks prior to intended date of defense; six weeks for the Outside Reader and two weeks to incorporate the feedback |
| DEGREE COMPLETION | Thesis presentation and public defense; End of year 4 |

FIELD OF STUDY REQUIREMENTS

To provide more focus and depth in the key areas of Global Health and Population, the department has identified two areas from which students may specialize their doctoral training. Students must select from one of the following Areas of Specialization:

- Health Systems
- Population and Family Health

Course requirements for each Area of Specialization are listed in the corresponding section. These requirements may involve courses offered through other Fields of Study or Academic Departments, and through other Harvard Graduate Schools. They are designed to prepare candidates with doctoral-level knowledge in theory, analysis and research methods in a particular area as well as providing candidates with a broad-based education in global health.

COURSE WAIVERS

For Field of Study requirements, waivers will be considered only if a student can demonstrate that the subject matter has been covered in a previous graduate-level course. To waive a required course or one of a choice of courses fulfilling a requirement, please proceed as follows:

- 1) Secure a copy of the syllabus of the course you took that you believe closely matches the course you want to waive.
- 2) Secure an unofficial copy of your transcript indicating the course you took and the grade you received.
- 3) Send the documents to [Allison Conary](#) or [Barbara Heil](#) with an email identifying which course you would like to waive.
- 4) Once your documents have been received, they will be forwarded to the faculty who teach the course and your Academic Advisor so they can both evaluate your request. Once they make a decision, you will be informed. **No course substitutions are allowed.**

WRITTEN QUALIFYING EXAM, PRELIMINARY QUALIFYING EXAM, AND DISSERTATION ADVISORY COMMITTEE

WRITTEN QUALIFYING EXAMINATION

Upon completion of the requisite course work, the Department requires that all doctoral students sit a Written Qualifying Examination (WQE) consisting of two papers before advancing to the Preliminary Qualifying Examination (PQE). The first paper consists of a written examination while the second involves the submission of a research paper. The intention is that students complete both parts of the WQE by their fourth semester of study. Students will take the first exam at the end of their first year and submit Paper II at the end of their second year. Students with a prior Master of Science degree from the Department may take both parts of the examination in year one of their program. Paper I of the WQE is offered once per year, typically in May. Any re-sits for Paper I will be taken the following May. Paper II will

have a deadline, in most cases, at the end of the fourth semester. The deadline for resubmission in the case of failure is November 1st of the same year.

AIMS OF WRITTEN QUALIFYING EXAMINATION

The principal aim of the WQE is to ensure that the student is adequately prepared for a period of independent research. The examination is intended to test the candidate's general knowledge in Global Health and Population and the capacity to deal with the kinds of questions that are likely to occur in the course of writing the doctoral dissertation. Passing the examination indicates that the department judges that the student is ready to embark on a course of independent research culminating in the submission of a doctoral thesis. Introduction of the WQE should allow the PQE Committee to focus more sharply on the student's research program. The WQE seeks to:

- Test a student's overall capacity to put together separate topics learned in the core course;
- Provide questions designed to solicit responses requiring the combination of different bodies of knowledge;
- Design questions that are of the type one is faced with when beginning research (larger questions);
- To solicit answers to these questions that indicate that the student is at a level of comprehension where they are ready to both manage independent research and demonstrate training and mind-set of independence;
- Provides the student with the opportunity to show ability to process information rather than simply repeating what was learned in a particular lecture and apply it to a larger question in which they may articulate their opinion or view;
- Give the student the opportunity to show they are capable of carrying out a piece of independent research.

STRUCTURE OF THE EXAMINATION

The examination consists of two papers. Each is described below. The WQE is **pass-fail only**. If the student fails a paper there will be an opportunity for a re-sit but each paper can be attempted twice at most.

Paper I shall be a 24-hour open-book examination and shall consist of two sections. **Section A** shall consist of two compulsory questions which will be general in nature, both of which the student must answer. **Section B** shall consist of four questions from which the student must select two. All of the questions on Paper I shall reflect general knowledge acquired through the departmental core course, GHP 210 A/B, required of all GHP doctoral students regardless of their area of specialization, the full reading list (required and additional readings) from that course, and the Econometrics portion of PHS 2000. Content from each of these should be drawn upon and applied to responses for the exam through interpretation and analysis.

ORGANIZATION AND GRADING OF PAPER I

As described above, the subject matter in Paper I will reflect the syllabus and extended reading list of GHP 210 A/B *Concepts and Methods in Global Health and Population Studies* and the Econometrics portion of PHS 2000b. The course instructors shall write the questions in consultation with the doctoral committee.

Each student will be issued an anonymous code. Each exam script will bear this anonymous code. The code key will be kept solely in the GHP Education Office.

Each question in the examination will be graded by two faculty. For Paper I, the doctoral committee will identify graders and at least one of the graders must be a member of the doctoral committee. The Education Office will be responsible for sending a series of reminders to the graders prior to the date of the examination. One of the two faculty graders may be a member of another department.

Once the examination has been taken, answers will be circulated to all the graders through the Education Office. Graders will have **one month** from the day of the examination to grade the exam and return the students' answers, grade sheets, and comments to the Education Office. The Education Office will record the grades.

When a grade difference of three grades or more exists on a question between two graders (A- to B- for example), the graders will be asked to consult with each other and reconsider their marks and comments. Each grader may revise their grade in light of this consultation or decide the original grade stands.

Examination answers, grades and comments are then considered by the doctoral committee. No conflict of interest will arise from normal academic links between committee members and the students under consideration (e.g. advising and instructing). The committee reviews the overall standard of answers to all questions and the marks and comments given by the examiners. The committee ensures that graders comments are sufficiently detailed to provide assistance to students. The committee computes an agreed mark for each question by averaging the graders' marks.

The agreed marks for each question are averaged for each paper. *The pass mark for the examination is B+ (3.3)*. Average marks of 3.25 and above are rounded up to 3.3 (B+). The committee confirms the pass or fail of each of the two papers of the WQE separately by a vote of a majority of the committee. The students receive only the pass or fail decision, and not the actual average grade.

If any pass or fail is not confirmed by the doctoral committee, the committee may either:

- a) Return the examination to the graders for reconsideration. Revised grades and comments are then considered again by the doctoral committee.
- b) Appoint one or more additional graders for each question. These graders will mark the questions and provide comments independently of the original graders. The doctoral committee will then reconsider all of the grades and comments, weighting them equally to recalculate agreed marks for each question.

After the result has been confirmed by the doctoral committee, the anonymous code will be un-blinded. Students will be informed by the doctoral committee of the result of the examination. Students and their advisors will also be given the written comments on each question, but not the grade or the identity of the grader.

The advisor will then meet with the student to discuss the results of the examination. At this point, if a student has failed either or both papers of the examination, the advisor and the student must outline a plan through tutorials and any additional course work to prepare the student to re-sit the paper failed. This

plan must be in writing and a copy provided to both the Doctoral Committee and the Education Office for the student's file. **All re-sits are taken in May of the following year.**

Paper II is a research paper. It is intended to help students better prepare for the development of their PQE/Oral proposal and may, in some instances, be further developed as part of their actual proposal. At the start of the academic year, a detailed timeline, along with collaboration guidelines for Paper II, will be provided to those students scheduled to take the exam. Any faculty who will be directly advising the student on the paper should be named along with the proposed title.

WORK ON PAPER II

It may be that work on the paper takes place as part of a larger project involving other people. In this case the student should attach an explanation of authorship making clear their contribution to the work. The contribution of the student in this case should be consistent with being the first author. The student should write the first draft of the paper. A detailed timeline, including conduct of research information and deadlines will be distributed separately.

CONTENT OF PAPER II

The paper should be in a format that makes it ready for submission for a journal. The paper is limited to a maximum of 6,000 words. Papers may be shorter if a journal with a more strict word limit is being targeted. An appendix (no word limit) may be attached setting out details not included in the actual paper. There are no rules on the structure of the paper but most will have the following sections:

- Introduction – Pose an interesting question
- Literature Review – Survey literature on your topic and describe how research adds to it
- Methods/Data – Formulate your hypothesis and describe your data
- Results – Present your results with the help of tables and graphs
- Discussion – Critique your method and discuss policy implications
- Conclusion – Summarize what you have done and pose questions for further research

NOTE: *With papers that involve statistical analysis, the student must electronically submit a file containing the computer code that was used to perform the analysis.*

GRADING

Based on the proposed title, the doctoral committee will assign two graders, neither of whom will have been involved in advising the student on the paper. The graders will independently grade the paper. Graders will have 2 months to grade the exams. *An average mark of B+ is required to pass.* A passing grade will indicate that in the opinion of the examiners the papers shows that the student has acquired the skills necessary to successfully undertake research in the field. When a grade difference of three grades or more exists on a question between two graders, the graders will be asked to consult with each other and reconsider their marks and comments. Each grader may revise their grade in the light of this consultation or keep it as is.

The doctoral committee confirms the pass or fail of Paper II. If any pass or fail is not confirmed by the doctoral committee, the committee may either:

- a) Return the paper to the graders for reconsideration. Revised grades and comments are then considered again by the doctoral committee.
- b) Appoint one or more additional graders to review the paper. These graders will mark the paper independently of the original graders. The doctoral committee will then consider all of the grades and comments, weighting them equally to recalculate the marks for each question.

After the results have been confirmed by the doctoral committee, students and their advisors will be informed. The graders' comments and their identity will be provided to both the student and their advisor. Students may schedule meetings with all parties to discuss these.

RESUBMISSION OF PAPER II

Students who have deemed to fail Paper II of the WQE may resubmit. The resubmission date is November 1st for each year. The resubmission should be submitted electronically to Barbara Heil by 5:00 PM (Boston time) on November 1st. No paper will be submitted after that time and the student will be deemed to have failed the examination for a second and final time.

OUTCOME

A maximum of **two attempts** are allowed for each part of the examination. Upon successfully passing the Written Qualifying Exam, the student should immediately meet with their academic advisor to establish their final program, nominate their PQE committee and begin preparing their proposal in anticipation of the Preliminary Qualifying Exam.

PLEASE NOTE: NO STUDENT MAY HAVE NON-RESIDENT STATUS TO BEGIN DISSERTATION RESEARCH UNTIL THEY HAVE PASSED BOTH THE WRITTEN QUALIFYING EXAM AND THE PRELIMINARY QUALIFYING (ORAL) EXAM, HAVE AN APPROVED DISSERTATION ADVISORY COMMITTEE (DAC) IN PLACE, HAVE A MEETING WITH THEIR DAC AND SUBMIT A PROGRESS REPORT.

APPROVAL OF PQE/ORAL COMMITTEE AND DAC

The signature of the academic advisor and field of study academic administrator are required for both the PQE/Oral Committee and the DAC forms. These forms will only be signed upon the recommendation of the Doctoral Committee. This procedure has been established as a safeguard to ensure that the proposed committee membership will satisfactorily support the research planned by the student. **Please be sure to consult with the GHP Education Office.**

Along with the forms, students should submit a 2-3 page proposal/abstract of their planned work, a bibliography, and briefly indicate how the expertise of the individuals nominated for membership will contribute and support the proposed research. These materials should be e-mailed to [Barbara Heil](#) in the Education Office for circulation to the doctoral committee. Any changes in membership to these committees should follow the same process. A [sample proposal](#) is available through the GHP Education Office.

PRELIMINARY QUALIFYING EXAM (PQE)

The Preliminary Qualifying Examination (formerly known as the Oral Examination) should be taken NO LATER THAN the end of the 5th semester.

Upon successful completion of the WQE (Paper I and Paper II), a student should submit their final program, which includes the nomination of their PQE/Oral Committee. The student should immediately begin writing a PQE/Oral proposal which should continually be reviewed and revised in consultation with committee members. The final proposal is then given to the PQE/Oral Committee prior to scheduling the exam.

The proposal is basically a work plan, or calendar of activities for the next 1.5 year period. In this proposal, a student should:

- a. present a question;
- b. defend why this question is worthy of scholarly research and of public health relevance;
- c. demonstrate an understanding of existing related research;
- d. establish that the proposed research is methodologically sound and explain the methods and data you will be using (survey, secondary data, etc.); and
- e. present some preliminary analysis to demonstrate these methods.

The above points are presented in a proposal to the PQE/Oral Committee.

The committee's role in the examination is to give their approval for a program of independent research and writing. Their responsibility is to check the feasibility of the proposal by asking the following questions:

- a. is it the right question – is this something worth looking into;
- b. is there a clear and feasible plan of activities that will answer this question;
- c. is the proposal route correct and appropriate;
- d. as a whole, is the work plan manageable in terms of time and other resources.

Finally, this exam demonstrates the capacity to produce something. Specifically, it seeks to answer the question, will this plan produce a thesis.

DISSERTATION ADVISORY COMMITTEE (DAC)

Within two weeks of successful completion of the Preliminary Qualifying Examination, a student must submit the nominations for membership of their Dissertation Advisory Committee (formerly known as the Research Committee).

Students should first obtain departmental approval of the DAC following the same process as the PQE/Oral proposal process.

If there are no changes in membership from the PQE Committee to the DAC, simply email this information to Barbara Heil in the Education Office. While the Research Advisor/DAC Chair must be a member of GHP, the others may be from other departments and/or outside of Harvard Chan School. The role of the DAC is to oversee the student's progress towards completion of their thesis. Students are required to meet with their committee every three months and then submit a progress report to the Education Office. Nominations for the DAC must be submitted and approved by the GHP Doctoral Committee and the student must convene a meeting with the committee before they may begin any overseas research on a non-residency status.

OUTSIDE READERS

Beginning in September 1997, the Department implemented a system of Outside Readers for all doctoral theses within the Department. The principal reasons for this decision were to improve the quality of our doctoral dissertations and to ensure that our theses were on a par with theses presented in other major universities.

All students in the Global Health are *required* to have an Outside Reader for their thesis. **[Appendix 3]** outlines the necessary steps to be followed when a doctoral student is nearing their thesis defense and is ready to identify an Outside Reader. The Department agreed that the Outside Reader would not be an external *examiner* able to referee the thesis as in some universities but an external *advisor* to the DAC and the student.

NON-RESIDENT STATUS

When dissertation research is to be performed away from the Boston area, students must apply for non-resident status. Students must first pass the Preliminary Qualifying Examination prior to requesting non-resident doctoral status. They must also establish their DAC, and this Committee must meet with the student to appraise the dissertation plan. Agreement must be reached and the GHP Doctoral Committee must provide written approval before the departure of the student. **No student may be Non-resident until all these conditions have been met.** Students planning to be non-resident must also comply with GSAS rules for non-residency and should consult the following link for detailed information <https://gsas.harvard.edu/registration/non-resident-students>.

After the completion of the above steps, the DAC will use the following criteria for approving non-resident status:

- 1) Acceptability and feasibility of the proposed research plan
- 2) Timing and scope of periodic written reports required (including at least one Progress Report every three months)
- 3) Adequate arrangements for direct supervision of the student
- 4) The minimum time the student will spend back at the School prior to the defense

Non-resident status is customarily granted one year at a time. Extensions beyond one year require the submission of acceptable and timely Progress Reports.

The Department expects candidates to be in residence during the semester preceding their defense; many advisors and committees will insist on their presence during the semester before submission.

DEPARTMENTAL DOCTORAL COMMITTEE, 2023-2024

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HEALTH SYSTEMS

AREA OF SPECIALIZATION

Head, Prof. Winnie Yip (wyip@hsph.harvard.edu)

Well-designed and functioning health systems are central to improving population health equitably. At the same time, health systems must provide financial protection to avert impoverishment due to medical costs and gain patient and citizen satisfaction. Now more than ever, globally policymakers want to know how to reform health systems to achieve these goals. Many international organizations (including the World Health Organization, World Bank, and the Global Fund to Fight AIDS, Tuberculosis and Malaria) have identified health systems strengthening as a key priority in their strategies to improve population health. The Health Systems doctoral program at the Harvard T.H. Chan School of Public Health aims to train researchers who want to pursue a professional career in research, for example in academia, international organizations, or think tanks.

The study of health systems begins with understanding of an analytical framework. A health system is a means to a set of ends represented by ultimate performance outcomes. The results involve trade-offs between equity, efficiency, effectiveness and choice, which are shaped by a society's ethical values and by political processes and actors. The Health Systems Area of Specialization aims to train scholars who can answer questions raised by top policymakers such as how to address equity considerations in health care, how policy components influence performance outcomes, and how political strategies can be designed to improve the political feasibility of policy reforms. This requires a clear understanding of what constitutes a health system, how the broader context and political economy influences health systems reforms, and how the complex interactions of different components—namely financing, payments, organizational structures and processes, regulations, and persuasion to change behavior—determine system performance and outcomes.

DESCRIPTION

The Health Systems Area of Specialization recognizes that professionals in health systems must be capable of doing advanced research and evaluating the quality and approach of research performed by others. To achieve this, students are exposed to the frontier of knowledge about health systems, potential areas of new research, and methods appropriate for advancing knowledge and conducting significant research. In particular, students in the Health System Area Specialization are required to take advanced courses in theories and methodologies in relevant social science, such as economics, political economy and organizational behavior.

Students are trained to apply knowledge that addresses major health system questions such as:

- How do changes in health system functions influence health system performance and achievement of goals?
- What financing approaches are appropriate for achieving goals shaped by different ethical values and under varied economic and social conditions?
- Which payment mechanisms are effective in controlling healthcare costs and improving quality of healthcare services?
- How can regulation make the private sector more responsive to societal needs?

- How do different organizational and governance structures of health care delivery systems affect quality and efficiency of health care services?
- How do political structures and processes affect opportunities for adoption and implementation of health system reforms?

A multidisciplinary approach is the foundation of the Health Systems major. While economics can provide insights into financing and payment issues, political science can help explain policy choices and consequences as well as assess the feasibility of proposed reforms. In organizational design, organizational behavior and economics interact to understand how institutions can be organized and how such organizations respond to incentives. To become experts in policy analysis and evidence-based policymaking, health systems doctoral students learn an advanced level of quantitative skills and methods in evaluation science, epidemiology and biostatistics, and their application to real-world health system problems.

Building knowledge about interdisciplinary approaches to health systems research is a demanding pursuit, requiring both a deep understanding of disciplinary expertise as well as contextual knowledge of health systems in different national settings. The Health Systems major provides a solid disciplinary base for students, while developing skills in crossing disciplinary boundaries in order to analyze health system problems. Through coursework and applied research, students learn to integrate theories and methods from various disciplines and apply them to analyze critical health system issues.

The Health Systems Area of Specialization is based in the Department of Global Health and Population, and draws on faculty and courses throughout Harvard University. Program faculty, who work globally with many countries and international agencies, are recognized leaders in the field of health systems analysis and have published widely on the subject. Past collaborative work culminated in the book *Getting Health Reform Right*¹ which is used for teaching at Harvard Chan School as well as at a joint World Bank course entitled the “Flagship Course on Health Sector Reform and Sustainable Financing.” Faculty members have contributed to major research projects evaluating health systems, including financing and payment systems, burden of disease and cost benefit analysis, National Health Accounts, decentralization of health systems, human resources, benchmarks of fairness for health system reform, and political analysis. Faculty members are involved in many international projects supporting health system reform in low- and middle-income countries as well as more advanced economies.

Opportunities for doctoral research include topics such as: how changes in health systems influence national health spending and outcomes, the impact of performance-based payment on quality of health care services delivery, competition between public and private providers and the impact on cost, quality and efficiency, the organization and management of human resources to improve health system outcomes, the design and performance of health systems, regulation of health care and pharmaceutical products, equity determinants in health and in health systems, the political economy of health reforms, innovative financing methods to improve equity and efficiency of the health system, adoption of diffusion of complex health innovations in health systems, and consumer responses to characteristics of public and private health care providers.

¹Roberts M, Hsiao W, Berman P, Reich M. *Getting Health Reform Right: A Guide to Improving Performance and Equity*, Oxford (2003).

REQUIREMENTS

The study of health systems includes theories and methods from economics, political economy and organizational behavior to understand and investigate systemic issues. Moreover, it is grounded in evidence that requires mastery of quantitative and qualitative evaluation methods.

At the end of this section, the core coursework, Field of Study, and Area of Specialization requirements are outlined. The first year courses cover several disciplines and prepare students for advanced doctoral level courses during the second year. Required courses not offered by GHP may be modified yearly by the Health Systems Core Faculty depending on changes in offerings by other schools and departments. Students with prior courses that cover topics and material found in Area of Specialization courses may petition for a waiver with the approval of the faculty offering the required course and the student's advisor.

Students in GHP are required to take a two-part Written Qualifying Examination at the end of the first and second years. They must pass both parts independently to proceed in the doctoral program. After passing the Written Qualifying Exam, students will be expected to prepare a dissertation proposal and defend the proposal in a Preliminary Qualifying Exam.

HEALTH SYSTEMS FACULTY

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Iryna Postolovska, irp230@mail.harvard.edu

PAST THESES TITLES

Daniel Arias (2023), *Quantitative Approaches Towards Evaluating the Global Burden of Mental Illness*

Melissa Barber (2023), *Medicines, Markets, and the State*

Sian Tsuei, (2023), *How do health care organizations' characteristics affect the effectiveness of service delivery reforms*

Anna Gage (2022), *Health system quality improvement interventions in sub-Saharan Africa: Implementation and impact*

Todd Lewis (2021), *High-Quality Primary Health Care: User and Facility Determinants of Best-In-Class Performance*

Isabelle Feldhaus (2020), *Identifying Health System Priorities for Equitable Access to Health Services in Low and Middle-Income Countries*

Annie Haakenstad (2020), *Out-of-pocket Payments for Noncommunicable Disease Care: A Threat and Opportunity for Universal Health Coverage*

Ece Ozcelik (2020), *With or without: An assessment of Brazil's More Doctors Program on population health*

David Sando (2020), *Health System Quality and Improvement Strategies in Caring for People with HIV and Cardiovascular Diseases: Studies from Tanzania, Uganda, and China*

Zeina Siam (2020), *Essays on Patient and Provider Behaviors for Maternal and Child Health*

Radhika Jain (2019), *The Effectiveness of Public Health Insurance: Evidence from Rajasthan, India*

Erin Kinsella James (2019), *Sin taxes and public health: political process and distributional consequences in Mexico and Colombia*

Zhihui Li (2019), *Determinants of Child Health in Developing Countries – Social, Environmental, and Policy Perspectives*

Lingrui Liu (2018), *Three Studies on Improving Health System Performance*

Ellen Moscoe (2018), *Health behaviors and behavioral economics: Essays on HIV, malaria, and exercise*

Osondu Ogbuoji (2018), *Factors affecting patient perceptions of quality and health seeking behavior*

Angela Chang (2017), *Falling short of expectations: Improving healthcare delivery gaps for HIV, non-communicable diseases, and childhood vaccination*

Adanna Chukwuma (2017), *The Politics and Impact of Perinatal Health Interventions in Nigeria*

Jan-Walter De Neve (2017), *Essays on Schooling and Health in sub-Saharan Africa*

Karima Ladhani (2017), *Healthy Workforce, Healthy Baby? Quantitative and Political Analyses of Health Workers in Mexico*

Iryna Postolovska (2017), *Health Financing and Delivery in Low- and Middle-Income Countries in the SDG Era*

POSITIONS OF RECENT GRADUATES

Assistant Director for Program Research & Development, Harvard Ministerial Leadership Program

Postdoctoral Fellowship, University of Pennsylvania

Assistant Professor, Duke Global Health Institute

Young Professional, World Bank Group, Washington D.C.

Junior Economist, Health Division, OECD

Senior Economist, World Bank Group

Health Specialist, World Bank Group, Washington D.C.

Assistant Professor, Heidelberg Institute of Public Health, Heidelberg, Germany

Postdoctoral Research Fellow, Institute for Health Metrics and Evaluation (IHME), University of Washington

Assistant Professor, University of California Los Angeles (UCLA)

Assistant Professor of Global Health, Boston University

Senior Program Officer, Results for Development Institute

Research Fellow, Center for Global Health, Washington, D.C.

Health Systems Strengthening Program Officer, PATH

Postdoctoral Research Fellow, Harvard T.H. Chan School of Public Health

PHD-PHS GLOBAL HEALTH AND POPULATION
COURSE REQUIREMENTS FOR
HEALTH SYSTEMS AREA OF SPECIALIZATION

| CORE REQUIREMENTS | CREDITS (17.5) | YEAR COURSE SHOULD BE TAKEN |
|--------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------|
| PHS 2000 A/B (Fall & Spring) Quantitative Research Methods in Population Health Sciences | 10.0 | 1 |
| SBS 506 (Fall 1) Intro to History, Politics, & Public Health: Theories of Disease Distribution & Health Inequities | 2.5 | 1 |
| EPI 201 (Fall 1) Introduction to Epidemiology: Methods I | 2.5 | 1 |
| EPI 202 (Fall 2) Epidemiologic Methods 2: Elements of Epidemiologic Research | 2.5 | 1 |
| HPM 548 (Fall 1 or Spring 1) Responsible Conduct of Research | 1.25* | 1 or 2 |

*Audit grade option available for HPM 548.

| DEPARTMENT REQUIREMENTS | CREDITS | YEAR COURSE SHOULD BE TAKEN |
|--------------------------------------------------------------------------------------|---------|--------------------------------|
| GHP 210 A/B (Fall & Spring) Concepts & Methods in Global Health & Population Studies | 5.0 | 1 |

| HEALTH SYSTEMS REQUIREMENTS | | CREDITS (17.5) | YEAR COURSE SHOULD BE TAKEN |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------|
| DOMAIN I: Health System Performance | GHP 506 (Spring 1) Measuring Population Health | 2.5 | 1 |
| DOMAIN II: Explanation of Health Systems Performance with Social Science Theories (22.5) | GHP 202 (Spring 1) Comparative Health Systems I | 2.5 | 1 |
| | + <u>20.0 credits</u> from any combination of below fields | | |
| | 1. <u>ECONOMICS</u> GHP 237 Behavioral Economics and Global Health (2.5) ECON 2020A Microeconomic Theory (5.0) <i>*this course serves as a prerequisite for most courses in econ across Harvard and MIT</i> ECON 2030 Psychology and Economics (5.0) ECON 2040 Experimental Economics (5.0) ECON 2360 The Microeconomics of Development (5.0) ECON 2810A Labor Market Analysis (5.0) ECON 2810B Labor Economics and Labor Market Institutions (5.0) ECON 2450B Public Economics and Fiscal Policy II (5.0) ECON 2060 Contract Theory (5.0) ECON 2610 Industrial Organization I (5.0) ECON 2611 Industrial Organization II (5.0) | 20.0 | 1 and/or 2 |

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| | <p>MIT 14.131 Psychology and Economics (5.0) MIT 14.137J Psychology and Economics (5.0) MIT 14.160 Behavioral Economics (5.0) MIT 14.271 Industrial Organization I (5.0) MIT 14.273 Advanced Topics in Industrial Organization (5.0) MIT 14.771 Development Econ: Microeconomic Issues (5.0) MIT 14.750 Political Economy and Economic Development DEV 101 Economic Development: Theory and Policy Evidence (5.0) DEV 102M Econ Development: Using Analytical Frameworks for Smart Policy Design (2.5) DEV 309 Development Policy Strategy (5.0)</p> <p>2. <u>POLITICAL ECONOMY</u> ECON 2418 Political Economy of Non-Democracies (5.0) ECON 2329 Political Economy of Electoral Democracies (5.0) DEV 308 Social Institutions and Economic Development (5.0) DEV 215 Public Finance in International Perspective (5.0) GOV 2129 Political Economy of Development (5.0) GOV 2160 Politics and Economics (5.0) GOV 2102 The Politics of Development (5.0) GOV 2105 Comparative Politics: Field Seminar (5.0) GOV 2170 State-Building (5.0) MIT 14.750 Political Economy and Economic Development (5.0) MIT 14.770 Introduction to Collective Choice and Political Econ (5.0) MIT 14.773 Political Economy: Institutions and Development (5.0) MIT 17.590 State Building (5.0) MIT 17.174 Historical Political Economy (5.0) MIT 17.524 State, Society, and Political Behavior in Developing Contexts (5.0) MIT 17.100 Field Seminar: Political Economy (5.0) MIT 17.178 Political Economy of Institutions and Development (5.0) MIT 17.198 Current Topics in Comparative Political Economy (5.0) MIT 17.320 Social Policy (5.0) MIT 17.572 Political Economy of Africa (5.0)</p> <p>3. <u>ORGANIZATIONAL BEHAVIOR</u> HBSDOC 4880 Macro Topics in Organizational Behavior (5.0) HBSDOC 4882 Micro Topics in Organizational Behavior (5.0) HBSDOC 4110 The Foundation of Strategy (5.0) HBSDOC 4913 Advanced Topics in Strategy (5.0) HBSDOC 4840 Doctoral Seminar for Technology and Operations Management (5.0) HBSDOC 4435 Experimental Methods in Behavioral Research (5.0) MIT 14.282 Intro to Organization Economics (5.0) MIT 14.283 Advanced Topics in Org Economics (3.3) MIT 14.284 Advanced Topics in Org Economics (3.3) MIT 15.341 Individuals, Groups, and Organizations (5.0) MIT 15.099 Seminar in Operations Research (<i>Not offered 2023-2024</i>) MIT 15.342 Organizations and Environments (5.0) MIT 15.576 Research Seminar in Information Technology and Organizations: Social Perspectives (<i>Not offered 2023-2024</i>) MIT 15.928 Sociology of Strategy (5.0) MIT 15.929 Identity and Action (<i>Not offered 2023-2024</i>)</p> | | |
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|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|---|
| DOMAIN III: Evaluation of Interventions to Improve Health Systems Performance (10.0) | GHP 228 (Spring) Econometric Methods in Impact Evaluation | 5.0 | 2 |
| | +5.0 credits from any of the following ECON 2110 Econometrics I (5.0) ECON 2115 Econometric Methods II (5.0) ECON 2120 Principles of Econometrics (5.0) ECON 2140 Econometric Methods (5.0) ECON 2340 Spatial Mobility and Development: Evidence and Quantitative Methods (5.0) ECON 2355 Unleashing Novel Data at Scale (5.0) GOV 2001 Advanced Quantitative Research Methods (5.0) GOV 2002 Quantitative Social Science Methods II (5.0) GOV 2003 Causal Inference with Applications (5.0) GOV 2018 Introduction to Machine Learning (5.0) MIT 14.380 Statistical Methods in Economics (5.0) MIT 14.381 Estimation and Inference for Linear Causal and Structural Models MIT 14.385 Nonlinear Econometric Analysis (5.0) MIT 14.387 Applied Econometrics (5.0) MIT 14.388 Inference on Causal and Structural Parameters Using ML and AI MIT 17.800 Quantitative Research Methods I (5.0) MIT 17.802 Quantitative Research Methods II (5.0) MIT 17.804 Quantitative Research Methods III (5.0) MIT 17.806 Quantitative Research Methods IV: Advanced Topics (5.0) MIT 17.830 Empirical Methods in Political Economy (5.0) BST 222 Basics of Statistical Inference (5.0) BST 223 Applied Survival Analysis (5.0) BST 228 Applied Bayesian Analysis (5.0) BST 232 Methods (5.0) BST 263 Statistical Learning (5.0) STAT 293 Design of Experimental and Non-experimental Studies (5.0) STAT 220 Bayesian Data Analysis (5.0) EPI 501 Dynamics of Infectious Diseases (2.5) EPI 260 Mathematical Modeling of Infectious Diseases ECON 2059 Decision Theory (5.0) RDS 284 Decision Theory (5.0) RDS 285 Decision Analysis Methods in Public Health and Medicine (2.5) BST 212: Survey Research Methods in Community Health (5.0) SOCIOI 2205 Sociological Research Design (5.0) MIT 17.878 Qualitative Methods and Fieldwork (5.0) SBS 521 Qualitative Data Analysis for Public Health (2.5) SOCIOI 2209 Qualitative Social Analysis: Seminar (5.0) SBS 263 Multilevel Stat Methods (5.0) GHP 292 Research Methods for Health System Analysis (2.5) GHP 290 Concepts & Methods for Analyzing Health Systems Quality (2.5) | 5.0 | 2 |

TOTAL CREDITS REQUIRED: 57.5

NOTE: All courses taken to fulfill a requirement must be taken for a letter grade (ordinal credit). No Audits or Pass/Fail grades are permitted with the exception of HPM 548. Optional courses may not be available every year. Students are advised to check early in the year and plan accordingly with advisor.

POPULATION AND FAMILY HEALTH AREA OF SPECIALIZATION

Head, Prof. Goodarz Danaei, (gdanaei@hsph.harvard.edu)

Assessments of levels, patterns and trends in population health are essential for identifying priorities, monitoring progress, and planning, executing, and evaluating health policies. One key component in these assessments is an understanding of the growth, structure and change of human populations (demography), including measurement of mortality and causes of death, along with broader assessments of health and functioning, informed by analyses rooted in the disciplines of epidemiology and biostatistics. Global, regional, national, and subnational analyses, attempting to partition the factors determining population health, require competence in several cognate areas including the capacity to translate census, survey and routine health statistics into summary assessments for priority-setting and action. Another key component is the use of population-based demographic and health data to investigate the causal impacts of health interventions (such as strategies to fight HIV, tuberculosis, malaria, or non-communicable diseases) and of primary healthcare and universal coverage reforms on population composition and health. Such analyses require skills in the use of individual-, household-, and community-level data, and an understanding of causal inference and evaluation methods.

This area of specialization is designed to provide the foundation for work on population and family health around the world. The required coursework illustrates the way in which quantitative methods from demography, epidemiology, statistics, and other disciplines can be applied to new challenges in burden of disease assessments. Since much of the work requires analysis of large-scale survey, surveillance systems, census and routinely collected health data, some recommended courses explain the major methods in data collection and analysis. Examination of causes of death and morbidity are based on combinations of demographic and epidemiological principles. Although the training is primarily quantitative, an understanding of the value of qualitative, ethnographic and mixed-methods approaches is encouraged. These methods are valuable in understanding culturally specific norms and values relating to health and health behaviors, including those related to sex and reproduction.

On completion of this area of specialization, students are expected to have the skills and conceptual understanding to develop their own research plans in a number of areas, mainly focusing on population and family health issues in low-income countries. Prior students in this field have written dissertations on HIV/AIDS and infertility in Tanzania; religion and its role in determining the sexual behavior of Ghanaian adolescents, infertility in China and Chad, male and female fertility in The Gambia; longitudinal studies of child growth, development, and mortality in rural Africa; the causes and consequences of induced abortion in Mexico and Ghana; family planning promotion and its effect on rural fertility in The Gambia; domestic violence as a public health issue in Jordan; abortion in Accra, Ghana; evaluation of malaria control interventions in Africa; proposal of new methods for correcting underreporting in vital events; and the contribution of primary health care to child survival in Africa; among other topics.

POPULATION AND FAMILY HEALTH FACULTY

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Elina Pradhan, elp632@mail.harvard.edu
Maria Steenland, mws475@mail.harvard.edu

PAST THESES TITLES

Nicholas Arisco, (2023), *The Role of Human Mobility, Deforestation, and Extreme Weather Events on Malaria in Brazil*

Dina Goodman-Palmer (2022), *Management of Noncommunicable Disease Risk Factors among Venezuelans Affected by the Humanitarian Crisis*

Lily Bliznashka (2021), *Integrated multi-input interventions to promote child growth and development in low-resource settings: building a supportive and enabling caregiver environment*

Emma Clarke-Deelder (2021), *Scaling Up Effective Maternal and Child Health Interventions in Low- and Middle-Income Countries*

Aayush Khadka (2021), *Housing Instability, Air Pollution, and Health: Three Studies from the United States*

Nora Miller (2021), *Sexual and Reproductive Health Services in Low- and Middle-Income Countries: Understanding the Role and Perspectives of Health Care Providers*

Alexander Kintu (2020), *The Impact of HIV and Antiretroviral Therapy on Cardiovascular Diseases in sub-Saharan Africa*

Yunfei Li (2020), *Epidemiological and Economic Evaluation of Disease Burden in the United States: Data, Models, and Applications*

MK Quinn (2020), *Perinatal Nutrition & Infection Interventions in Sub-Saharan Africa: Timing & Mechanisms of Action*

Allison Portnoy (2020), *Costing and Evaluating Human Papillomavirus (HPV) Vaccine Delivery Strategies in Low- and Middle-income Countries (LMICs) Utilizing Modeling and Economic Analyses*

Alexander Radunsky (2020), *HIV Risk, Prevention and Testing in sub-Saharan Africa: Mixed Methods Analysis*

Mathilda Regan (2020), *Gender and Depression: Three Perspectives from Low-and Middle-Income Countries*

Sarah McGough (2019), *Anticipating Outbreaks: Predictive Modeling to Improve Infectious Disease Surveillance*

Danielle Poole (2019), *Minding the gap in forced migrant health: spatial, social, and structural determinants of morbidity and mortality in transit*

Leigh G. Senderowicz (2019), *Conceptions and Measurement of Contraceptive Autonomy*

Jigyasa Sharma (2019), *From counting contacts to making contacts count: Empirical analyses of facility-based maternal and newborn care quality*

Kathryn Andrews (2018), *Risks, interventions, and costs in early life health and development*

Simiao Chen (2018), *Economics of HIV Vaccine and HIV Vaccine Research and Development*

Yvette Efevbera (2018), *Girl Child Marriage, Health, and Well-Being in Sub-Saharan Africa: A Mixed Methods Investigation*

Pascal Geldsetzer (2018), *The socio-demographic characteristics of diabetes, hypertension, and cardiovascular disease risk in India*

Joshua Jeong (2018), *Fathers' Parenting and Early Child Development*

Elysia Larson (2018), *Measurement and evaluation in maternal and child healthcare: diagnosing poor quality and testing solutions*

Katrina Ortblad (2018), *HIV self-testing and female sex workers: An exploration of delivery models, test performance, and behavioral change in sub-Saharan Africa*

Akshar Saxena (2018), *Effect of Retirement on Health and Mortality*

Maria Steenland (2018), *Examining the effect of supply and demand-side interventions to increase health service use*

Noah Haber (2017), *Essays on HIV in Rural KwaZulu-Natal, South Africa: Inference from Measurement to Policy*

Mahesh Karra (2017), *Essays on Maternal and Child Health, Fertility, and Economic Well-Being in Low- and Middle-Income Countries*

Brian Patenaude (2017), *Health, Behavior & Economic Analysis: Preference Elicitation Biases and the Welfare Consequences of Health Interventions in Sub-Saharan Africa*

Elina Pradhan (2017), *Beyond Health Technology Assessments: Evaluating the Impact of Scaling up Technology Interventions in Maternal and Child Health*

Carlos Riumallo-Herl (2017), *Essays on well-being, old age pensions, and health*

Emily Smith (2017), *Maternal and Child Health, HIV, and Nutrition*

POSITIONS OF RECENT GRADUATES

Postdoctoral Fellowship, University of California, San Francisco

Postdoctoral Fellowship, Swiss Tropical and Public Health Institute

Director of Clinical Research, Gilead Sciences

Postdoctoral Fellowship, Stanford University

Postdoctoral Fellowship, Population Studies and Training Center, Brown University

Postdoctoral Fellowship, International Clinical Research Center (ICRC), University of Washington

Postdoctoral Fellowship, Harvard T.H. Chan School of Public Health

Assistant Professor, George Washington University

Assistant Professor of Global Development Policy, Pardee School of Global Studies at Boston University

Young Professional, World Bank Group, Washington D.C.

Associate Professor, Johns Hopkins University School of Public Health

Senior Monitoring and Evaluation Advisor, Pathfinder International

PHD-PHS GLOBAL HEALTH AND POPULATION
COURSE REQUIREMENTS FOR
POPULATION AND FAMILY HEALTH AREA OF SPECIALIZATION

| CORE REQUIREMENTS | CREDITS (17.5) | YEAR COURSE SHOULD BE TAKEN |
|--------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------|
| PHS 2000 A/B (Fall & Spring) Quantitative Research Methods in Population Health Sciences | 10.0 | 1 |
| SBS 506 (Fall 1) Intro to History, Politics, & Public Health: Theories of Disease Distribution & Health Inequities | 2.5 | 1 |
| EPI 201 (Fall 1) Introduction to Epidemiology: Methods I | 2.5 | 1 |
| EPI 202 (Fall 2) Epidemiologic Methods 2: Elements of Epidemiologic Research | 2.5 | 1 |
| HPM 548 (Fall 1 or Spring 1) Responsible Conduct of Research | 1.25* | 1 or 2 |

*Audit grade option available for HPM 548.

| DEPARTMENT REQUIREMENTS | CREDITS | YEAR COURSE SHOULD BE TAKEN |
|--------------------------------------------------------------------------------------|---------|--------------------------------|
| GHP 210 A/B (Fall & Spring) Concepts & Methods in Global Health & Population Studies | 5.0 | 1 |

| POPULATION AND FAMILY HEALTH REQUIREMENTS | CREDITS (15.0) | YEAR COURSE SHOULD BE TAKEN |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------|
| GHP 220 (Fall 2) Introduction to Demographic Methods | 2.5 | 1 |
| GHP 506 (Spring 1) Measuring Population Health | 2.5 | 1 |
| <p>Methods (select 10.0 credits from the options listed below)</p> <p>Rationale: These courses provide in-depth analytical skills that were briefly introduced in PHS 2000. Choices should be based on the research the student plans to undertake for dissertation.</p> <ul style="list-style-type: none"> • BST 222 (Fall) Basics of Statistical Inference (5.0) *BST 210 or 213 or PHS 2000A/B • BST 223 (Spring) Applied Survival Analysis (5.0) *BST 210 or 213 or 232 or 260 or PHS 2000A • BST 226 (Spring) Applied Longitudinal Analysis (5.0) *BST 210 or 213 or 232 or 260 or PHS 2000A • BST 228 (Fall) Applied Bayesian Analysis (5.0) *BST 210 or PHS 2000A/B and BST 222 • GHP 534 (Spring 2) Introduction to Spatial Methods for Public Health (2.5) • EPI 207 (Fall 1) Advanced Epi Methods (2.5) *EPI 204 or (BST210 and EPI289) or BST 233 • EPI 289 (Spring 1) Epidemiology Methods III: Models for Causal Inference (2.5) *EPI 201 & 202 • SBS 263 (Spring) Multilevel Statistical Methods: Concept and Application (5.0) • STAT 160/260 (Fall) Design and Analysis of Sample Surveys (5.0) • GHP 228 (Spring) Econometric Methods in Impact Eval (5.0) *Econometrics and intermediate microeconomics required • EDU S043 (Fall) Multilevel and Longitudinal Models (5.0) *S052, Stat 139, or an equivalent | 10.0 | Varies |

STUDENTS MUST ALSO SELECT TWO TRACKS AND TAKE 10.0 CREDITS FROM EACH

1. NONCOMMUNICABLE DISEASES (NCDs)

Rationale: This collection of multidisciplinary courses will deepen students' understanding of the epidemiology of NCDs and prepare them to conduct research on these emerging global health threats. GHP 207 covers the concepts and methods required to estimate the effect of risk factors or interventions on disease outcomes at the population level. While most of the course readings and examples are drawn from the field of cardiovascular epidemiology, the methods apply broadly to most NCDs. ID 537, GHP 208, EPI 213, and ID 240, will provide students with an in-depth understanding of NCDs including obesity, mental health, cancer, and injuries, respectively.

- GHP 207 (Spring 2) Risk Factors and Population Health (2.5)
- GHP 208 (Spring 2) Global Mental Health Delivery: From Research to Practice (2.5)
- ID 510 (Fall 2) Nutritional Epidemiology of Cancer (2.5)
- ID 537 (Fall) Obesity Epidemiology (2.5)
- EPI 213 (Spring 1) Epidemiology of Cancer (2.5)
- ID 240 (Spring 1) Principles of Injury Control (2.5)

2. MATERNAL & CHILD HEALTH (includes reproductive health)

Rationale: ID 217 and GHP 208 focus on cross-cutting global health issues affecting maternal and child health (MCH), introducing students to the emerging global health challenges these present. EPI 269 enables students to build on this foundation. GHP 504 introduces students to qualitative research methods with emphasis on MCH topics. SBS 246 examines MCH program and policy implementation.

- GHP 204 (Fall 1) Foundations of Global Mental Health (2.5)
- GHP 208 (Spring 2) Global Mental Health Delivery: From Research to Practice (2.5)
- GHP 209 (Spring) Early Childhood Development in Global Contexts (5.0)
- GHP 504 (Spring 1) Qualitative Research Methods for Global Health (2.5)
- GHP 553 (Fall 2) Human Rights Dilemmas in Child Protection (2.5)
- D 217 (Spring) Nutrition and Global Health (2.5)
- EPI 269 (Fall 2) Epidemiologic Research in Obstetrics and Gynecology (2.5)
- SBS 220 (Spring 1) Society and Its Effects on Child Health (2.5)
- SBS 246 (Fall 2) Issues in Maternal & Child Health Programs and Policies (2.5)

3. INFECTIOUS DISEASE

Rationale: GHP 539 and IID 201 give a multidisciplinary perspective on Infectious Diseases (IDs). EPI260 provides modelling tools and GHP 534 provides spatial epidemiology tools, both applicable to several IDs covered in GHP 539 and IID 201. GHP 255 covers the rationale and mechanisms for major biological, behavioral, and structural HIV prevention and treatment interventions. Lastly, GHP 532 uses a case-based teaching approach to address the design of efficient and effective global health interventions.

- GHP 255 (Spring 1) HIV Interventions: Rationale, Design, and Evaluation (2.5)
- GHP 539 (Fall 1) Control of Infectious Diseases in LMICs: Social, Political & Economic Dimensions (2.5)
- IID 201 (Fall 1) Ecology, EPI, and control of important parasitic diseases of developing areas (2.5)
- EPI 260 (Spring 2) Mathematical Modeling of Infectious Disease (2.5)
- GHP 532 (Spring 1) Introduction to Global Health Care Delivery (2.5)
- GHP 534 (Spring 2) Introduction to Spatial Methods for Public Health (2.5)

4. ECONOMICS

Rationale: Econ2010a and 2020b are microeconomic theory courses that are required for more advanced courses in the economics department. When possible, students should take this microeconomic sequence in year one and proceed to higher level courses in year two. The development economics sequence is useful particularly for students planning field work. Psychology and Economic Theory covers issues in behavioral economics that have health applications.

- ECON 2020a (Fall) Microeconomic Theory I (5.0)
- ECON 2020b (Spring) Microeconomic Theory II (5.0)

- ECON 2338 (Spring) Behavioral Development Economics (5.0)
- ECON 2326 (Fall) Economic Development: Theory and Evidence (5.0)
- ECON 3017 (Fall) Research in Health Economics (5.0)
- ECON 2035 (Fall) Psychology and Economic Theory (5.0)

5. RISK AND DECISION SCIENCE*

Rationale: This sequence of courses introduces quantitative methods and simulation modelling for decision analysis, cost effectiveness analysis, and economic evaluation. RDS 280 is an introductory course in decision analysis. RDS 285 and GHP 501 introduce different mechanistic modelling methods for decision analysis. GHP 201 builds on GHP 501 and offers advanced methods for modeling for health system analysis and priority setting in global health. RDS 282 is an intermediate-level course in economic evaluation, and RDS 290 is focused on the application of decision science methods to a research problem chosen by the student. The sequence RDS 280, 285, 282 and 290 have been deliberately developed to provide an introductory/intermediate sequence of decision science methods. RDS 284 focuses on the theoretical underpinnings of decision science and is targeted to doctoral students with interests in this area.

- RDS 202 (Spring) Decision Science for Public Health (2.5)
- RDS 280 (Fall 2) Decision Analysis for Health and Medical Practices (2.5)
- RDS 282 (Spring 2) Economic Evaluation of Health Policy & Program Management (2.5)
- RDS 284 (Fall) Decision Theory (5.0)
- RDS 285 (Spring 1) Decision Analysis Methods in Public Health and Medicine (2.5)
- RDS 290 (Spring) Experiential Learning & Applied Research in Decision Analysis (2.5)
- RDS 500 (Fall 1) Risk Assessment (2.5)
- GHP 501 (Spring1) Modeling for Health System Analysis & Priority Setting (2.5)
- GHP 201 (Spring 2) Advanced Modeling for Health System Analysis & Priority Setting (2.5); *GHP 501

*Foundational courses in microeconomic theory (ECON 2020a & 2020b) are very useful for students intending to concentrate in this area

6. PROPOSING AN ALTERNATIVE TRACK

It is anticipated that most students will identify two tracks suitable to their interests. Should this not be the case, students in the Population and Family Health AoS will be allowed to propose one track specifically designed for their own research. The process for this is outlined below.

An email containing the following materials should be sent to [Goodarz Danaei](#), Head of AoS, copying your faculty advisor and [Barbara Heil](#):

- The name of the proposed track and the list of courses (complete course title, credits, and instructor) that are being proposed to support this track making sure that the sum total is 10.0 credits.
- Provide a brief justification as to how these courses will support your proposed dissertation work.
- Provide an email/statement from your faculty advisor supporting this request.

These materials will be reviewed, and, in most cases, a decision will be communicated within one week.

Total Credits Required: 57.5

NOTE: All courses taken to fulfill a requirement must be taken for a letter grade (ordinal credit). No Audits or Pass/Fail grades are permitted with the exception of HPM 548. Optional courses may not be available every year. Students are advised to check early in the year and plan accordingly with advisor.

APPENDICES

1. SM2 Advisor / Advisee Document
2. SM2 Thesis Guidelines (GHP 299)
3. Outside Reader Procedures
4. Departmental Committees
5. Department Course Offerings (AY 2023-2024)
6. Other Resources

SM2 ADVISOR/ADVISEE DOCUMENT

For Academic Advisors to SM2 Degree Students in GHP

What is expected of you as an academic advisor?

- Comply with times when faculty attendance is required, these are noted in the Harvard Chan Faculty Handbook.
- Provide clear communication with advisees in advance of when you will be away and indicate who to contact in your absence.
- Be clear about how advisees should reach you and how to go about setting up appointments with you (e.g., email, sign-up sheet, office hours, or assistant).
- Use the appropriate resources available to you to provide advice. These include the Harvard Chan Student Handbook, the Department Degree Guide, the Master of Science Program Checklist, and the GHP Webpages.
- Take the time to familiarize yourself with the requirements of the GHP SM2 degree program. In conjunction with your advisees, you are responsible for making sure they take all the requirements in accordance with both the school's and department's time table.
- Be aware of key deadlines (these are often reminded by the Registrar's office and by the GHP Education Office).
- Read and respond to emails from your advisees in a timely fashion.
- You are expected to meet with your advisees *at least* once each quarter.
- Be aware of specific benchmarks in each year of this 2 year program and be prepared to hold additional meetings to discuss these with your advisee as appropriate – internships (year 1), and thesis and jobs/further schooling (year 2).
- Reinforce any expectations of attendance at certain events/seminars/etc. that have been made by the SM2 Committee or the Department Chair.
- If you have any type of concerns about your advisee, please contact Barbara Heil (617) 432-1179, who can help facilitate your concerns.

Specific Recommendations for Academic advisors of First Year Students

Pre-Orientation: Upon receiving the names and email addresses of your advisees from the Education Office in late July, you should be emailing a short note welcoming them to the department, encouraging them to read over the course information sent to them from the GHP Education Office, and let them know that you expect to set up a time to meet with them individually during orientation week to help finalize their schedules and answer other questions they may have.

Orientation: Each academic advisor is provided with a sign-up sheet (if interested). Please block off any times during which you have prior commitments and then attach it to your office door for students to sign up to see you for ½ hour blocks. This meeting provides an opportunity for you to both answer the student's questions and to lay out your expectations.

- Be clear about the process to follow for obtaining your approval for courses they plan to take.
- Be specific about the how many times you expect (at a minimum) to meet with your new advisee each term.

Post-Orientation (during 1st year):

- Begin discussing plans for summer research internships in late September.

- Based on internship selection, encourage them to think about using internship for the basis of their thesis; additionally encourage them to think about possible thesis advisors.
- Depending upon internship, students may need to consult *Human Subjects Committee Guidelines* and obtain the proper approval; should be done well in advance.

Specific Recommendations for Academic advisors of Second Year Students

- At beginning of academic year, discuss what they propose to do for a thesis and who they plan to ask to serve as thesis advisor and second reader.
- Each summer, the Education Office conducts an audit of the course work of our returning SM2 students and an email which lists any missing requirements is sent to each student and their academic advisor. This list should be carefully reviewed with your advisee at the beginning of the year to ensure that they complete all of the program requirements.
- Encourage students to take advantage of resume workshops, 'how to interview' workshops, and career fairs that are sponsored through the School's Career Services Office.
- Early in the year have conversations with them about their post-graduation plans – job or additional schooling? While you are not expected to secure jobs for your advisees, it is important that you get them thinking and planning for post-graduation. For those planning to join the work force, give them some direction such as recommending personal contacts and/or agencies, NGO's, etc., that they should follow-up with; share with them any opportunities that come across your desk or any that may become available in any of your current research.

What is expected of you as an advisee?

- You will receive clear communication from your academic advisor in advance of when they will be away and information indicating who to contact in their absence should you have any questions. Upon receiving this notice, you should plan any necessary meetings accordingly.
- Be sure you are clear about how you should reach your academic advisor and how to go about setting up appointments (e.g., email, sign-up sheet, office hours, or assistant).
- Use the appropriate resources available to you for guidance. These include the Harvard Chan Student Handbook, the Department Guide, and the GHP Webpages.
- Take the time to familiarize yourself with the requirements of the GHP SM2 degree program. In conjunction with your academic advisor, you are responsible for making sure that you take all the requirements in accordance with both the school's and department's time table.
- Be aware of key deadlines; reminders are often sent by the Registrar's office and by the GHP Education Office.
- Read and respond to emails from your advisor and/or the Education Office in a timely fashion.
- You are expected to meet with your academic advisor *at least* once each quarter, but it is highly recommended that you do more than that.
- Be aware of specific benchmarks in each year of this 2-year program and be prepared to hold additional meetings to discuss these with your academic advisor as appropriate – internships (year 1), and thesis and jobs/further schooling (year 2).
- Have a clear understanding of the expectations of attendance at certain events/seminars/etc, which have been recommended by the SM2 Committee or the Department Chair.
- If you find yourself in a situation where you need any type of help and need to reach out to someone other than your advisor, we encourage you to contact Barbara Heil or Allison Conary in the GHP Education Office, who will help facilitate on your behalf.

Specific Recommendations for First Year Students

Pre-Orientation: In mid-summer you should expect to receive a short welcoming note from the department's Education Office. This note will arrive before the beginning of orientation and will include information on course requirements to help guide you when registration starts in August. When you arrive in late August for orientation, you will have the opportunity to meet with your academic advisor, fine tune your course schedule, and answer any other questions you may have.

Orientation: Each academic advisor is provided with a sign-up sheet. Please be sure to schedule a ½ hour time block to meet with your academic advisor. Use this opportunity to clarify any questions you have about the program, as well as understanding expectations. Gain a clear understanding about the process to follow for obtaining your academic advisor's approval for courses you plan to take, particularly with the electronic approval system.

- Be clear on how many times you should expect (at a minimum) to meet with your academic advisor each term.

Post-Orientation (during 1st year):

- Begin discussing plans for summer internships in late September. Be sure to take advantage of information provided by the 2nd year students based on their summer internship experiences. Sessions to

hear directly from the 2nd year students are scheduled early in the fall and have been very useful to 1st year students in planning their internships.

- Based on internship selection, think about using the internship as the basis for your thesis; additionally think about possible thesis advisors.
- Depending upon the type of internship, you may need to consult *Office of Human Research Administration Committee Guidelines* and obtain the proper approval; this should be done well in advance.

Specific Recommendations for Second Year Students

- At beginning of academic year, discuss with your academic advisor what you propose to do for a thesis and who you plan to ask to serve as thesis advisor and second reader.
- Each summer, the Education Office conducts an audit of the course work of our returning SM2 students and an email which lists any missing requirements is sent to each student and their academic advisor. This list should be carefully reviewed with your academic advisor at the beginning of the year to ensure that you complete all of the program requirements.
- Take advantage of resume workshops, 'how to interview' workshops, and career fairs that are sponsored through the School's Career Services Office.
- Early in the year have conversations with your academic advisor about your post-graduation plans – job or additional schooling? It is important to understand that it is not the responsibility of your academic advisor to secure a job for you, but he/she will be able to give you some direction such as recommending personal contacts and/or agencies, NGO's, etc. It is your responsibility to follow-up on any leads or contacts provided to you. If you are thinking about pursuing the doctoral program in this department, you are encouraged to begin having conversations with the faculty working and supervising doctoral students in one of the department's majors as identified in the Department Guide. Conversations with current students may also be useful.

MASTER OF SCIENCE THESIS GUIDELINES 2023-2024

1. Thesis Purpose

The thesis for the two-year Masters students serves several purposes:

- It provides an opportunity for the student to work on a new problem or issue of particular interest
- It allows the student to apply many of the research skills acquired in the different courses taken for the degree
- The thesis itself is proof of the student's mastery of certain skills that are required whether the student begins a research-based career or continues to a doctorate research degree
- It is a useful document that can be shown to employers and supervisors indicating a student's level of achievement in particular areas of research

The research skills and understanding that we expect to see developed through the research thesis include:

- The capacity to conceptualize a problem and to identify the key questions that need to be addressed
- The ability to reduce broad questions and issues to a specific research question that can be answered with the resources available to the student
- The capacity to apply the technical skills acquired in the courses taken during the two-year period of training
- The capacity to concisely summarize new conclusions based on existing evidence and on new findings obtained in the thesis
- The ability to frame the thesis in a broader context and to summarize how the findings contribute to the development of new knowledge and understanding in the domains of Global Health and Population
- The ability to write a scientific report of publishable quality

The system of grading (see below) reflects the importance we attach to each of these elements.

The Master's Thesis is required of all students enrolled in our Department's two-year SM program. Whilst work on the body of the thesis may begin as early as the summer between years 1 and 2, the final written version is produced during the student's second year in the program.

Students are required to register for the thesis (GHP 299, year-long course) in the fall semester and spring semester of their second year.

2. Thesis Structure

The thesis should include a statement of the problem and its relevance to public health, followed by sections such as:

- a critical analysis of the literature with the aim of clarifying current knowledge and formulating the questions that will be the subject of the thesis;
- a description of the methods and materials to be used in the analysis of the chosen problems or issues;
- an analysis of the materials that illustrate the student's mastery of the skills acquired in the course work in the School and elsewhere;
- a concluding section that deals with the public health implications of the work.

To provide context, samples of both quantitative and qualitative theses are made available by the GHP Education Office.

The *title and signature pages* are self-explanatory. Look at previous theses when in doubt. The *preface or foreword*, as is usual in all good books and theses, is the place where you can say a few more personal words about how the study came about, thank your sponsors, mention people who have been especially helpful and generally add relevant non-scientific information that does not fit in the more formal body of the thesis. The *introduction*, by contrast, opens the issues you are about to address and positions the work in the flow of previous scholarship. The style here is thus more scientific and impersonal.

You are asked to prepare an abstract because we are often asked to summarize the work of our SM students and it is more appropriate for you, as the author of the thesis, to write this. Books generally do not contain abstracts but in the case of your thesis, the best place to place this abstract would be after the table of contents as the list in the Guidelines suggests.

3. Credits and assessment

We encourage students and evaluators to think of the thesis as an essential tool in the development of a professional expertise in some part of global health and population. To this end, we have developed a scoring system that is meant to provide readers/assessors and students with a guide to the kind of criteria we will be using to assess the quality of each thesis.

| Criterion | Maximum Score |
|-----------------------------------------------------------------------------|---------------|
| Well-developed research question | 10 |
| Mastery of existing literature and knowledge | 20 |
| Use of appropriate methods | 20 |
| Analysis and interpretation of results | 15 |
| Conclusions and implications | 15 |
| High quality scientific writing following a standard protocol if applicable | 20 |
| TOTAL | 100 |

The Thesis is taken for ordinal grade (5.0 credits). Students register for GHP 299A in the fall semester and GHP 299B in the spring semester of their second year (2.5 credits per semester). Students must achieve a

minimum grade of B minus (B-). A grade of less than B- on a thesis is treated as a **Fail**. A passing grade on the thesis is a required component of the SM2 degree and if a student receives a failing grade they will not be able to graduate in May, as originally scheduled. The student will be required to do an Independent Study registered with the current Chair of the GHP SM2 Committee. *This Independent Study will take place during the summer with a completion date of August 1st of that same year.* The Independent Study will be designed to address the deficiencies identified in the earlier version of the thesis. If properly addressed, the student will receive a grade of **Pass** and will be a November Degree candidate for that same year. If they receive a grade of **Fail**, they will be withdrawn from the degree program.

4. Role of the GHP SM2 Committee

It is the responsibility of the student to establish regular meetings with both their Thesis Supervisor and Second Reader. It is this trio that works together to produce a quality thesis. The Thesis Supervisor and Second Reader both provide advice and feedback on the thesis content, but the main effort must come from the student. The SM2 Committee provides general guidance in addressing the 4 main components of the thesis: *Problem Statement; Plan of Action; Preliminary Results; and Background*. This is done through the mandatory course, GHP 299. It is not the responsibility of the SM2 Committee to review individual theses and provide commentary.

5. Supervisors, second readers and other faculty

The supervisor for the Thesis may be any faculty member within the Department, not necessarily the student's academic advisor. The thesis supervisor's role is to act as your technical guide on the project. He/she may suggest that you consult other faculty members as well. Students must meet on a regular basis with their thesis supervisor. The thesis supervisor also serves as the first reader and one of the assessors of the thesis. *If a student wishes to propose a Thesis Supervisor from outside the Department, the agreement of the Chair of the SM2 Committee is required. This may be accomplished by emailing the Committee Chair directly and providing a coherent rationale for this request.*

The Department also requires a second reader. This person need not be a member of this Department but he or she is expected to hold an appointment in a university, a research institute or a professional organization concerned with global health and population. The second reader is involved in the production of the thesis as well as the overall assessment (see Section 5 below). The degree of involvement of the second reader can vary according to availability and expertise in the area. It is expected, however, that the second reader shall provide feedback at agreed-upon intervals.

You should plan on receiving feedback from both your thesis supervisor and your second reader on at least 4 key sections of your thesis: problem statement; plan of action; background; and preliminary results. These sections are all addressed in greater detail in the thesis course, GHP 299. All of this takes place before the submission deadline of **Monday, April 1, 2024**. These communications may take place in person or electronically. Students are encouraged to make use of other faculty for production of sections of the thesis, if helpful.

6. Tips on Planning

Previous students have found a summer internship to be an excellent way of consolidating skills learned during the first year and of providing both a topic and data for the thesis. We urge you to consider your recent internship experience in terms of your upcoming thesis work.

Students **must** follow the timeline for GHP 299. It is important to note the specific deadlines as well as the dates of required attendance. **Strict penalties are enforced for not meeting the final submission deadline of May 3, 2024. Some of these can impact your graduation date.**

7. Final Grading

The thesis must have **two** readers, your thesis supervisor, and a second reader. Both the thesis supervisor and the second reader will be responsible for grading the thesis. After consultation, they will agree on and submit **one grade** to the Education Office. The Education Office will be responsible for contacting the thesis supervisor and the second reader about the grade submission process.

8. Length and Format

The final thesis should not exceed 30 pages in length, including all diagrams, tables, and references. Appendices may be kept separately and they are not counted within the 30-page limit. All pages must be numbered. All information should be appropriately referenced and references should appear at the end (no footnotes). Students may use ENDNOTE or variations thereof. With Endnote, the bibliography can either be formatted alphabetically or numerically. The point of the exercise is to learn how to produce a full referenced document with a complete bibliography – the kind of standard expected of journals and other professional publications. The Thesis should contain the following sections **within the 30-page limit**:

- Title page (see next page for format)
- Signature page (see next page for format)
- Preface
- Table of Contents
- Thesis Abstract
- Thesis text with graphs and tables
- References
- *Appendices (NOT part of the 30-page limit)*

9. Submitting the Thesis

Detailed information on submitting the thesis is provided within the GHP 299 syllabus. This includes steps to simultaneously submit the final version to the two readers and upload it to the GHP 299 Canvas site by the stated deadline, followed by emailing a copy that has the electronic signatures of ***both*** the Thesis Supervisor and the Second Reader to [Barbara Heil](#) and [Allison Conary](#).

OUTSIDE READER PROCEDURES

The student and their Dissertation Advisory Committee should meet as soon as the first complete draft of the thesis is in view to discuss possible nominees for the outside reader. All members of the DAC must agree that the thesis is ready for the Outside Reader review before the process may begin. When considering these individuals, please refer to the following criteria:

The Outside Reader should:

- a) Be a full professor in a major academic institution with years of experience with the direction and assessment of doctoral dissertations. In general, based on this criterion, those in firms and development agencies are unacceptable.
- b) Be a leading figure with professional standing in the field. This is important since we often find our Outside Readers are very valuable as referees for jobs and promotion after graduation.
- c) Have worked in the student's area of research (usually evidenced by appearing in the student's bibliography).
- d) Should be individuals NOT previously involved directly with the research or the production of the thesis since we are seeking an assessment independent of the work of the student and the previous guidance provided by the DAC.

Contacting a Potential Outside Reader

Once the Research Committee and the student have agreed upon 2-3 individuals as potential Outside Readers based on the criteria outlined above, the following should take place **PRIOR** to materials being submitted to Barbara Heil for review by the GHP Doctoral Committee. The agreed upon first choice should be contacted informally. This is normally done either by a committee member who knows/is familiar with the individual, or, if no one on the committee has a direct connection, the Committee Chair reaches out. The purpose of this step is really to check on the availability of the first choice individual. This is done by explaining that:

"We are in the process of identifying an Outside Reader for one of our doctoral students who will be defending their thesis soon, and I wanted to explain the process to you and check with you regarding your interest and availability."

The committee member then informs the potential Outside Reader of the following:

- the thesis topic
- the approximate date that they should expect to receive the thesis
- that they will have 6 weeks to review the thesis
- that they will receive a modest honorarium for their work (\$500)
- that more detailed information about the review process and specific dates will be provided when the full thesis is sent

The goal is to confirm that your first choice is interested, willing, and available to serve in this capacity based on the dates and information provided to them. This informal step serves to prevent the situation of having a student's first choice approved of by the Doctoral Committee and then subsequently finding out that they are not available to perform this task.

1. With the DAC's approval, the student submits the following materials to [Barbara Heil](#) in the Education Office for distribution to the doctoral committee for review:
 - a) an abstract of the thesis;
 - b) a copy of the bibliography, even if incomplete;
 - c) 2-3 names of possible Outside Readers meeting the criteria above with a description of how the work of each is tied to the student's thesis work and the suitability of the person to serve as an Outside Reviewer.
2. The Doctoral Committee will review the materials and inform the student of their preferred nominee with a reserve in case of refusal.
3. Once the nominee has agreed to serve as the Outside Reader, the student's DAC will meet with the student and agree on the final timetable up to and including the thesis defense.
4. The student will then be responsible for emailing their thesis to [Barbara Heil](#) **eight weeks** prior to the defense date. **All of the student's DAC members must be copied on this email.** The Education Office will then send the thesis directly to the reader for review. At this time, the role of the reader is explained with the attached instruction sheet and details of responsibilities, the time frame and remuneration. Note that the thesis must be complete (all sections written, tables, graphs and references included) even though the Reader and the Committee recognize this as the penultimate version of the thesis prior to the defense.
5. During this review process, the only communication with the Outside Reader will be through the Doctoral Committee Chair and/or the Education Office. Neither the student, nor members of the student's DAC may contact the outside reader directly at any time during this process.
6. The Outside Reader's report is sent directly to Barbara Heil in the Education Office and is circulated immediately without commentary to all members of the Doctoral Committee, to the student's DAC and to the student before the public defense of the thesis.
7. If the Outside Reader fails to provide a report within the agreed timetable, the Doctoral Committee will take action to ensure that the defense is not unduly delayed.

Recommendations from the Outside Reader

Once the report has been received from the Outside Reader, the student meets with the DAC to review the commentary and to agree on a strategy for responding to any criticisms before the thesis defense and the production of the final version of the thesis. In the past, these comments have included a mix of general commentary, strategic and theoretical and some more detailed points, both statistical and grammatical. After meeting with their DAC to discuss the remarks and recommendations of the Outside Reader, the student will send a brief memo to Barbara Heil outlining the agreed upon next steps. This memo will be circulated to the Doctoral Committee.

In the event that the Outside Reader indicates that the student's thesis is not ready to be defended, the Department Chair will make a determination on the scheduling of the defense after consultation with both the DAC and Doctoral Committees.

DEPARTMENT DEGREE COMMITTEES 2023-2024

DOCTORAL COMMITTEE

Winnie Yip (*Chair*), wyip@hsph.harvard.edu
Barbara Heil (*co-Chair*), bheil@hsph.harvard.edu
David Bloom, dbloom@hsph.harvard.edu
David Canning, dcanning@hsph.harvard.edu
Jessica Cohen, cohenj@hsph.harvard.edu
Kevin Croke, kcroke@hsph.harvard.edu
Goodarz Danaei, gdanaei@hsph.harvard.edu
Marcia Castro (*ex officio*), mcastro@hsph.harvard.edu

MASTER OF SCIENCE COMMITTEE

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MASTER OF PUBLIC HEALTH – GLOBAL HEALTH

Marcia Castro, mcastro@hsph.harvard.edu
Field of Study Leader

**DEPARTMENT OF GLOBAL HEALTH AND POPULATION
COURSE OFFERINGS 2023-2024**

FALL 2023

| COURSE | SESSION | INSTRUCTOR | COURSE TITLE | CREDITS |
|----------|---------|-----------------------|------------------------------------------------------------|------------------|
| GHP 210A | Fall | Canning, Yip | Concepts & Methods of Global Health and Population Studies | 2.5 per semester |
| GHP 272 | Fall | Bloom, Lamstein | Foundations of Global Health and Population | 5.0 |
| GHP 299A | Fall | Sudfeld, SM Committee | Master's Thesis | 2.5 per semester |
| GHP 525 | Fall | Cheng | Econometrics for Health Policy | 5.0 |
| GHP 557 | Fall | Cash, Yousafzai | Fundamentals of Global Health | 5.0 |

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|----------|--------|---------------|-----------------------------------------------------------------------------------|---------------|
| GHP 200 | Fall 1 | Reich | Doing Health Reform Better | 2.5 |
| GHP 204 | Fall 1 | Patel, Saxena | Foundations of Global Mental Health *HMS SM 519 | 2.5 |
| GHP 230 | Fall 1 | McConnell | Introduction to Economics with Applications to Health and Development | 2.5 |
| GHP 539 | Fall 1 | Cash | Control of Infectious Disease in LMICs: Social, Political and Economic Dimensions | 2.5 |
| GHP 945A | Fall 1 | Berman | Applied Practice Experience for Global Health | 1.25 per term |
| ID 250 | Fall 1 | Wikler | Ethical Basis of the Practice of Public Health | 2.5 |

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|---------|--------|------------------|----------------------------------------------------------|-----|
| GHP 220 | Fall 2 | Castro | Introduction to Demographic Methods | 2.5 |
| GHP 262 | Fall 2 | Vinck, VanRooyen | Emerging Issues in Humanitarian Response & HR Protection | 2.5 |
| GHP 293 | Fall 2 | Wikler | Individual and Social Responsibility for Health | 2.5 |
| GHP 553 | Fall 2 | Bhabha | Human Rights Dilemmas in Child Protection *HKS IGA 342M | 2.5 |
| GHP 569 | Fall 1 | Bump | Decolonizing Global Health | 2.5 |

NOT OFFERED 2023-2024

ID 552 Innovations in Global Health Systems, 2.5 credits

ID 205 Societal Response to Disasters, 2.5 credits

WINTER 2024

| COURSE NUMBER | SESSION | INSTRUCTOR | COURSE TITLE | CREDITS |
|---------------|---------|---------------|----------------------------------------------------------|---------|
| GHP 542* | Winter | Castro | Field Trip to Brazil | 2.5 |
| GHP 543* | Winter | Brüderlein | Humanitarian Negotiation on the Frontlines *HKS IGA 353M | 2.5 |
| GHP 544* | Winter | Lajous, Reich | The Mexican Health System | 2.5 |

*TRAVEL COURSE

NOT OFFERED 2023-2024

GHP 297 Field trip to Chile

SPRING 2024

| COURSE NUMBER | SESSION | INSTRUCTOR | COURSE TITLE | CREDITS |
|---------------|---------|-----------------------|-------------------------------------------------------------------|------------------|
| GHP 209 | Spring | Yousafzai, McCoy | Early Childhood Development in Global Contexts *HGSE A827 | 5.0 |
| GHP 210B | Spring | Canning, Yip | Concepts & Methods of Global Health and Population Studies | 2.5 per semester |
| GHP 228 | Spring | Cohen | Econometric Methods in Impact Evaluation | 5.0 |
| GHP 299B | Spring | Sudfeld, SM Committee | Master's Thesis | 2.5 per semester |
| GHP 515 | Spring | Kivlehan | International Humanitarian Response I *Tufts DHP 213 and NUTR 324 | 2.5 |
| ID 217 | Spring | Fawzi, Isanaka | Nutrition and Global Health | 2.5 |

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|---------|----------|-----------------|---------------------------------------------------------------|-----|
| GHP 202 | Spring 1 | Yip | Comparative Health Systems I | 2.5 |
| GHP 212 | Spring 1 | Croke | The Political Economy of Health in LMICs | 2.5 |
| GHP 255 | Spring 1 | Sudfeld, Mayer | HIV Interventions, Rationale, Design & Evaluation | 2.5 |
| GHP 264 | Spring 1 | Wispelwey | The Settler Colonial Determinants of Health | 2.5 |
| GHP 280 | Spring 1 | Kamradt-Scott | Health and Security | 2.5 |
| GHP 292 | Spring 1 | Croke | Research Methods for Health System Analysis | 2.5 |
| GHP 501 | Spring 1 | Verguet | Modeling for HS Analysis & Priority Setting | 2.5 |
| GHP 504 | Spring 1 | Yousafzai | Intro to Qualitative Research for Global Health | 2.5 |
| GHP 506 | Spring 1 | Menzies | Measuring Population Health | 2.5 |
| GHP 532 | Spring 1 | Rhatigan | Introduction to Global Health Care Delivery | 2.5 |
| GHP 537 | Spring 1 | Pham, Greenough | Field Methods in Humanitarian Crises | 2.5 |
| GHP 550 | Spring 1 | Lago | Social Participation, Patient Involvement and Quality of Care | 2.5 |

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|----------|----------|-----------------|-----------------------------------------------------------------------|---------------|
| GHP 201 | Spring 2 | Verguet | Advanced Modeling for HS Analysis & Priority Setting | 2.5 |
| GHP 203 | Spring 2 | Yip | Comparative Health Systems II (to be approved) | 2.5 |
| GHP 207 | Spring 2 | Danaei | Risk Factors and Population Health | 2.5 |
| GHP 208 | Spring 2 | Saxena, Raviola | Global Mental Health Delivery: From Research to Practice *HMS SM518.0 | 2.5 |
| GHP 237 | Spring 2 | McConnell | Behavioral Economics and Global Health | 2.5 |
| GHP 243 | Spring 2 | Brüderlein | Conducting Negotiations on the Frontlines | 2.5 |
| GHP 269 | Spring 2 | Bump | The Political Economy of Global Health | 2.5 |
| GHP 290 | Spring 2 | Kruk | Concepts and Methods for Analyzing Health System Quality | 2.5 |
| GHP 518 | Spring 2 | Kivlehan | International Humanitarian Response II *Tufts DHP 213 and NUTR 324 | 1.25 |
| GHP 530 | Spring 2 | TBD | Consequential Leadership in Practice | 2.5 |
| GHP 534 | Spring 2 | Castro | Introduction to Spatial Methods for Public Health | 2.5 |
| GHP 569 | Spring 2 | Bump | Decolonizing Global Health | 2.5 |
| GHP 945B | Spring 2 | Berman | Applied Practice Experience for Global Health | 1.25 per term |

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| ID 212 | Spring 2 | Kruk | Foundations of Program and Policy Evaluation | 2.5 |
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NOT OFFERED 2023-2024

GHP 265 Ethics in Global Health Research, 2.5 credits

SUMMER 2023

| COURSE NUMBER | SESSION | INSTRUCTOR | COURSE TITLE | CREDITS |
|---------------|---------|------------------------|----------------------------------------------------------------------------------|---------|
| GHP 213 | S1 | Danaei | Global Cardiovascular Disease Prevention - what do we know and how do we know it | 2.5 |
| GHP 532 | S1 | Rhatigan, Mukherjee | Introduction to Global Health Care Delivery | 2.5 |
| GHP 555 | S1 | Weintraub | Management Practices in Health Care Delivery | 1.25 |

OTHER RESOURCES

In addition to the information printed within this Degree Guide, students at the Harvard T.H. Chan School of Public Health are expected to review and become familiar with the following resources:

[ACADEMIC CALENDAR](#)

For important academic semester or term dates, enrollment deadlines, holidays, etc.

[CAREER AND PROFESSIONAL DEVELOPMENT](#)

Connecting the School's global network with resources and opportunities for professional growth.

[COURSE CATALOG](#)

Students should check back frequently for new course postings, classroom assignments, schedule changes, and course cancellations.

[COUNSELING AND MENTAL HEALTH SERVICES \(CAMHS\)](#)

A no-cost support service that works collaboratively across the University to support registered students who are experiencing some measure of distress in their lives.

[OFFICE OF DIVERSITY AND INCLUSION](#)

Our school is strengthened by our diverse, cross-cultural community of students, faculty, and staff, who bring a multiplicity of voices and viewpoints to our shared endeavors.

[OFFICE OF HUMAN RESEARCH ADMINISTRATION \(OHRA\)](#)

Protecting the rights and welfare of subjects involved in human research.

[STUDENT HANDBOOK](#)

An important resource for incoming and current students to manage their academic affairs.

[STUDENT KNOWLEDGE CENTER](#)

Step-by-step guidance on enrollment procedures, cross-registration, instructor permission requests, waitlists, withdrawals, credit limits, priority waves, and independent studies and research credits.

[STUDENT SUPPORT SERVICES](#)

The Office for Student Services works to support students who are experiencing difficulties and to ensure the general well-being of the student body.

Other important resources include:

[Melissa Brodrick](#), Ombudsperson

[Kathryn Austin](#), Director of Financial Aid

[Colleen Cronin](#), Associate Director of Student Support

[Maritza Hernandez](#), Associate Dean of Student Services

[Kerri Noonan](#), Director of Admissions

[Leah Kane](#), Director of Student Affairs

[Joann Wilson-Singleton](#), Registrar