PROGRAMME SPECIFICATION

1. Overview

Programme Title	MSc Public Health for Global Practice
Academic Year	2027-28
Cohort Entry Points	Annually in September
Programme Director(s)	Hannah Blencowe and Simon Cohn
Awarding Body	London School of Hygiene & Tropical Medicine
Teaching Institution	London School of Hygiene & Tropical Medicine
Faculty	Public Health and Policy
Length of Programme	Full-time Taught Masters programmes: 12 months Part-time Taught Masters programmes: 24 months
Mode of Delivery	In-person intensive
Maximum period of registration	Full-time 3 years / Part-time 5 years
Language of Study	English
Entry Requirements	Please refer to the specific programme entry requirements here.
Award Titles	Master of Science in Public Health for Global Practice Exit Awards: Postgraduate Diploma in Public Health for Global Practice (120 credits) Postgraduate Certificate in Public Health for Global Practice (60 credits)
Total Credits	**CATS:** 180 **ECTS:** 90
Accreditation by Professional Statutory and Regulatory Body	N/A

Relevant PGT QAA Benchmark Statement and/or other external/internal reference points	N/A
Framework for Higher Education Qualifications Level (FHEQ)	Level 7
Re-sit Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-08a.pdf
Extenuating Circumstances Policy	https://www.lshtm.ac.uk/sites/default/files/academic-manual-chapter-07.pdf
Date of Introduction of Programme	September 1978 (as MSc Community Health in Developing Countries) September 1994 (title changed to MSc Public Health in Developing Countries) September 2016 (title changed to MSc Public Health for Development) September 2025 (title changed to MSc Public Health for Global Practice) Updated for 2027-28

2. Programme Description, Aims & Learning Outcomes

Programme Description
The *MSc Public Health for Global Practice* is specifically designed for individuals with prior professional or other experience in resource-constrained, low- and middle-income, or structurally marginalised settings. The programme builds on this experience, enabling students to develop the strategic, evidence-informed and reflective skills needed to address global public health challenges across a wide range of contexts. It provides a comprehensive foundation in public health relevant to low- and middle-income settings, through five compulsory core modules delivered in Terms 1 and 3. Students then tailor the MSc to their interests and professional

goals through four elective modules across Terms 2 or 3, developing methodological, subject-specific or broader skills for public health practice in a global context. These choices offer opportunities to build expertise in areas such as humanitarian health, nutrition, maternal and child health, and infectious diseases, or to develop more advanced methodological and analytical skills.

The MSc culminates in a 45-credit independent summer project, offering students the opportunity to bring together their learning and pursue an area of global public health that particularly interests them. Through designing and undertaking their own substantial project, students explore a real-world challenge in depth, and further develop their skills in applying evidence to public health practice.

Educational aims of the programme

Consistent with LSHTM's mission to improve health worldwide, the primary aim of the MSc Public Health for Global Practice is to produce critically engaged, reflexive, and technically proficient public health practitioners and researchers capable of navigating complex, resource-constrained, and structurally marginalised environments.

The programme specifically aims to:

1. **Transform previous experience:** Equip students to critically re-evaluate and build upon their prior global health experience using advanced theoretical, analytical, and reflexive frameworks
2. **Engage with Power, Equity, and Decolonisation:** Foster critical awareness of positionality, power dynamics, colonial legacies, epistemic justice, and equitable North–South partnerships in contemporary global health research and practice
3. **Bridge Evidence and Implementation:** In line with its emphasis on global practice, develop core competencies in implementation science, participatory co-design, health systems analysis, and economic evaluation to link research to practical application
4. **Deliver Interdisciplinary Analytical Rigour:** Provide robust training in epidemiological concepts, statistical reasoning, social research methods, and policy analysis required for evidence-informed decision-making in settings with incomplete or uncertain data
5. **Cultivate Strategic Communication and Leadership:** Prepare graduates to communicate evidence effectively to diverse stakeholders, including local communities, policymakers, donors, and academic audiences.

Programme Learning Outcomes

By the end of the MSc programme, students should be able to:

1. Apply core public health disciplines including epidemiology, statistics, social science, health economics, and health policy to analyse and critically appraise evidence for decision making and impact in diverse global contexts.
2. Assess public health needs, health system constraints and implementation barriers in resource-constrained and structurally marginalised settings, using quantitative, qualitative and participatory methods.
3. Evaluate public health strategies using appropriate impact, process, equity and economic evaluation methods to inform decision-making, learning and improvement.
4. Critically reflect on positionality, power, epistemic justice, colonial legacies and North-South partnerships in shaping public health knowledge, practice and ethics.
5. Communicate public health evidence, analyses, strategies and evaluation findings effectively to diverse audiences using appropriate formats and communication approaches.

Teaching and Learning Strategy

Teaching and learning on this programme are designed around the principle that advanced Level 7 understanding is actively built through critical interrogation, reflective practice, and peer exchange. The programme recognises that the student cohort will be inherently diverse in terms of background, previous experience and familiarity with UK HE expectations, but draws on this as a key opportunity rather than a set of additional demands.

The programme is delivered using a variety of teaching, including: lectures, small group seminars, practicals, and group-work with peers. All elements of the programme have specific learning objectives, with content designed to help students achieve these outcomes. Students are expected to learn through both directed and self-directed study.

Distinctive features of the MSc Public Health for Global Practice teaching and learning strategy include cohort-based peer-learning, experiential exchange and dedicated residential retreats at the start and end of the programme.

Assessment Strategy
A varied approach to assessment is used across the programme, reflecting the breadth of subject matter and diversity of students' backgrounds, while enabling students to demonstrate their learning and achievement in different ways. This may include essays, other written coursework, short written exams, group-work, oral presentations or other methods. Assessment approaches are designed to align with module and programme learning outcomes, and to scaffold the development of students' understanding and skills over time. Formative opportunities are provided for students to check their understanding of key content, practise key skills and receive feedback ahead of summative tasks. Feedback on both formative and summative work is aligned with assessment criteria, to enable students to understand performance standards, identify areas for improvement, and apply learning to subsequent tasks. Students are guided on the responsible use of Generative AI in assessments.

3. Programme Structure and features, modules, credit assignment and award requirements:

Full-time Masters	Term 1	Term 2	Term 3	Total Credits
Teaching Slots	**AB1**	**C1, C2, D1, D2**	**E1, E2**	
Compulsory Modules	4		1	75
Elective Modules*		3 or 4	0 or 1	60
Project			1	45

MSc Public Health for Global Practice students must take four elective modules in the five teaching blocks (C1, C2, D1, D2, E1) in Terms 2 and 3, leaving one block from the five (C1, C2, D1, D2, or E1) free for Project preparation. During C and D blocks some (non-assessed) sessions and support will help with the planning and organisation of student Projects.

Note: Part-time students complete the same core curriculum of five compulsory modules and four electives, plus a project, over two years. Prospective part-time students are expected to discuss their individual study plans with a Programme Director before starting the programme.

Module information is correct at the time of publication, but minor amendments may be made subject to approval as detailed in Chapter 3 of the LSHTM

Academic Manual. Elective modules listed are indicative and may change from year to year. https://www.lshtm.ac.uk/study/courses/changes-courses

Compulsory Modules

Term	Term Slot	Module Code	Module Title	Module Type	Credits (CATS)
1	AB1	TBC	Foundations for Global Health Practice	Compulsory	15
1	AB1	TBC	Health Economics, Systems and Policy	Compulsory	15
1	AB1	TBC	Concepts in Epidemiology	Compulsory	15
1	AB1	TBC	Statistics for Epidemiology and Population Health 1 (STEPH1)	Compulsory	15
3	E2	3198	Applying Public Health Principles	Compulsory	15

Indicative list of Elective Recommended Modules*

2	C1	1808	Health Systems	Recommended	15
2	C1	2401	Family Planning Programmes	Recommended	15
2	C1	2440	Maternal & Child Nutrition	Recommended	15
2	C1	1701	Reviewing the Literature	Recommended	15
2	C1	2607	Methods in Climate Change & Planetary Health	Recommended	15
2	C1	2400	Intermediate Epi Methods	Recommended	15
2	C2	2472	Social Epidemiology	Recommended	15
2	C2	3457	Designing Public Health Programmes	Recommended	15
2	C2	1700	Qualitative Methodologies	Recommended	15
2	C2	TBD	Health Policy, Process and Power	Recommended	15
2	C2	TBD	Economic Evaluation Evidence	Recommended	15
2	C2	2436	Population, Poverty and Environment	Recommended	15
2	C2	2451	Nutrition in Emergencies	Recommended	15
2	D1	TBD	Statistics for Epidemiology and Population Health 2 (STEPH2)	Recommended	15
2	D1	3434	Water, Sanitation and Hygiene, and Health	Recommended	15
2	D1	2423	Research Design & Analysis	Recommended	15
2	D1	2611	AI in Health: Principles and Applications	Recommended	15

2	D1	3195	Malaria: From Science to Policy and Practice	Recommended	15
2	D1	1402	Conflict & Health	Recommended	15
2	D1	1802	Medical Anthropology and Public Health	Recommended	15
2	D1	1504	Economic Analysis for Health Policy	Recommended	15
2	D1	3192	Control of Sexually Transmitted Infections	Recommended	15
2	D2	2437	Epidemiology of Infectious Diseases	Recommended	15
2	D2	1301	Environmental Epidemiology	Recommended	15
2	D2	2442	Nutrition Related Chronic Disease	Recommended	15
2	D2	1804	Sexual Health	Recommended	15
2	D2	1503	Globalisation and Health	Recommended	15
2	D2	2342	Design and Evaluation of Mental Health Programmes	Recommended	15
2	D2	3166	Integrated Vector Management	Recommended	15
2	D2	3189	Ethics, Public Health & Human Rights	Recommended	15
3	E1	1606	Health Decision Science	Recommended	15
3	E1	1127	Evaluation of Public Health Interventions	Recommended	15
3	E1	2407	Epidemiology of Non-Communicable Diseases	Recommended	15
3	E1	3135	Spatial Epidemiology for Population Health	Recommended	15
3	E1	TBD	Designing & Delivering Public Health Interventions	Recommended	15
3	E1	3174	HIV	Recommended	15
3	E1	2459	Current Issues in Maternal & Perinatal Health	Recommended	15

Students choose 4 elective modules across the 5 elective module slots (C1, C2, D1, D2 and E1).

Students wishing to study a cross-programme module can find out more here: https://www.lshtm.ac.uk/study/courses/modules/intensive-modules/module-specifications

Contact time

Student contact time refers to the tutor-mediated time allocated to teaching, provision of guidance and feedback to students. This time includes activities that take place in face-to-face contexts such as on-campus lectures, seminars, demonstrations, tutorials, supervised laboratory workshops, practical classes, project supervision and external fieldwork or visits, as well as where tutors are available for one-to-one discussions and interaction by email. Module contact time will be defined in the individual module specifications and provided to students at the start of their programme.

This definition is based on the one provided by the Quality Assurance Agency for Higher Education (QAA) Explaining contact hours (2011). Student contact time, together with time allocated for independent study and assessment, determines the total student study hours for a module or programme. Although there are separate hours allocated for each of these activities, they should always be clearly linked together to support effective learning.

The London School of Hygiene and Tropical Medicine (LSHTM) defines high quality contact time as structured, focused, purposeful and interactive.