

Federal University of Bahia (*Universidade Federal da Bahia*) Institute of Collective Health (*Instituto de Saúde Coletiva*) Postgraduate Programme in Collective Health

## DOCTOR OF PUBLIC HEALTH

# **STUDENT MANUAL**

### **Collegiate Board:**

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### **INTRODUCTION**

This manual aims to provide guidance to students on course organization and explain the responsibilities of all involved; it also presents useful information about the Institute of Collective Health. However, we note that it does not replace UFBA's Regulations for Graduate and Postgraduate Teaching (*stricto sensu*), nor the Regulations for the Postgraduate Programme in Collective Health, nor other Brazilian Postgraduate regulatory norms, particularly those pertaining to UFBA.

It is the responsibility of every student to be aware of and fulfil all the obligations for obtaining their course equivalent degree. For further information, please see your supervisor, the Department Coordinator or the Collegiate Board of the Postgraduate Programme in Collective Health.

### UFBA'S INSTITUTE OF COLLECTIVE HEALTH

The Institute of Collective Health at the Federal University of Bahia (*Instituto de Saúde Coletiva da Universidade Federal da Bahia*: ISC-UFBA) was founded on 5 August 1994 and is recognized by the Ministry of Education through Decree no. 613/1995. The institute works from an innovative perspective of integrated teaching, research and technical cooperation, emphasizing the transdisciplinary and globalizing nature of Collective Health.

In concrete terms, this innovative perspective is expressed in the organization of Integrated Programmes of Teaching, Research and Technical Cooperation, bringing together students, researchers and professionals from distinct areas in the field of Collective Health. As a rule, from the outset of activities, each doctoral student is included in the Integrated Programme related to their subject of interest and to which their supervisor is affiliated.

ISC is located on the Canela campus, where most of UFBA's other health units are also situated. Its facilities include classrooms, teacher and researcher offices, as well as study rooms for research and extension programmes, which students may use and which are equipped with computers and internet access to bibliographic retrieval systems (Medline, Lilacs, ISI, Health Star, Health Plan).

ISC also provides the following: an IT Laboratory, Geoprocessing Laboratory, Technical Support Services and Health Information Sector, where it is possible to access technical support for IT studies.

It is worth remembering that this constitutes public property, which must be used carefully, in order to maintain it, and in the spirit of solidarity and the benefit of all.

# POSTGRADUATE PROGRAMME IN COLLECTIVE HEALTH

The Postgraduate Programme in Collective Health at the Federal University of Bahia (*Programa de Pós-Graduação em Saúde Coletiva da Universidade Federal da Bahia*:PPGSC/UFBA) was founded in 1974 through the then Master's in Community Health, at that time located in the Department of Preventive Medicine (*Departamento de Medicina Preventiva*: DMP) at the Faculty of Medicine. In 1989, the Doctor in Public Health was established, initially only in the area of Epidemiology. In 1994, upon the creation of the Institute of Collective Health at UFBA, the postgraduate course at DMP/UFBA was transferred to the new unit.

With the accumulated experience of four decades of teaching, between 1974 and 2016, ISC-UFBA's Postgraduate Programme in Collective Health produced 584 dissertations and 374 theses

and is considered to be a centre of excellence by the CAPES-CNPq system. In 2016, 101 doctoral students and 37 master's students were registered at the institute, with a significant number from other states in Brazil and 7.2% from Latin America and the Caribbean, Africa, North America and Europe.

The PPGSC currently offers three areas of concentration: Epidemiology, Planning and Management in Health, and Social Sciences in Health. Since 2001, it has provided classes for a Masters in Professionalization including a number of areas of concentration: Epidemiology, Management in Health, Technology Evaluation, Health Surveillance, etc.

The Postgraduate Programme in Collective Health relies on a team of permanent teachers, as well as participating faculty from other UFBA units (Mathematics, Social Sciences, Nutrition, Economics, Psychology, Nursing, Engineering and Medicine).

ISC-UFBA researchers are noted for their productivity and the quality of their scientific productions and have published a wide range of research in prestigious national and international scientific journals. PPGSC's current lines of research are:

- Health Situation Analysis
- Primary Care in Health
- Evaluation of systems, programmes and health services
- Communities, families, ways of life and health
- Early childhood development and mental health during the life course
- Environmental and social determinants of health
- Economics, technology and innovation in health

Education and communication in health

• Epidemiology of chronic-degenerative, infectious and parasitical diseases

• Epidemiology and evaluation of the impact of health on populations

- Epidemiology and mental health services
- Indigenous population studies
- Ethnicity, race and health
- Gender and health
- Information in health management processes

• Therapeutic itineraries, chronic illness and integrated healthcare

• Macro and micro determinants of infectious diseases and nutritional deficiencies

- Healthcare models and health surveillance
- Planning, management and evaluation in health
- Health policies, institutions and practices
- Public policy, social participation and health
- Sociocultural processes and care in health and illness
- Environmental health
- Mental health

Worker health

• Sociology of chronic diseases and other long-duration conditions

- Work, management and education in health
- Health surveillance
- Urban violence and health
- Vulnerabilities and HIV/AIDS

The PPGSC/ISC works in close collaboration with several international, national, state and local institutions, for example: the Pan American Health Organization, the World Health Organization, UNICEF, the British Council, the Wellcome Trust, the Rockefeller Foundation, the Kellogg Foundation, the Ministry of Health, and Departments of Health in a number of states and municipalities.

ISC-UFBA also offers exchange programmes with prestigious universities for teachers, researchers and students, including: the London School of Hygiene and Tropical Medicine, the University of North Carolina at Chapel Hill, Université de Montréal, Universidade do Porto, Brown University (New York), the European Centre for Sociology (Paris), University College London, Université Pierre Mendes (Grenoble), Harvard University and the Universidad Nacional de Lanus (Argentina).

### DOCTOR OF PUBLIC HEALTH

The objective of the Doctor of Public Health (Doutorado em

Saúde Pública: DSP) is to provide advanced training for researchers, teachers and other professionals interested in studying scientific investigation and university teaching in the field of Public Health. Currently, the doctor course is offered in the following areas of concentration: Epidemiology, Planning and Management in Health, and Social Sciences in Health. On 7 December 1989, the work of the DSP/ISC was authorized by UFBA's Postgraduate Chamber and since 1990 it has been accredited by the National Council of Education.

The DSP's educational and policy design is based on a recognition of the relevance of contributions from scientific knowledge, in critical and democratic dialogue with other knowledge in society, for the effective development of Collective Health activities. Furthermore, it recognizes the historicity, complexity and transdisciplinary nature of its goal, namely, health in its collective dimension. From this perspective, the DSP/ISC was founded on an understanding that the aim of Collective Health is complex, moving from the molecular to the social, and covers the entire health, illness and care process – including the population's health status and the social organization of health services – its determinants and the historicity of the social knowledge and practices on which it is founded.

Applying an annual selection process and currently offering 23 national and four international places, the Doctor Programme is aimed at teachers, researchers and professionals from health (Medicine, Nursing, Nutrition, Dentistry, Pharmacy, Veterinary Sciences, etc.) and other areas (Sociology, Anthropology, Economics, Psychology, Social Services, Geography, Engineering, Statistics, Business Administration, etc.), provided that their research interests are consonant with ISC's lines of investigation.

It is worth noting that a master's qualification is not a requirement for a candidate to enrol in the doctoral selection process, and the programme accepts professionals who present significant scientific production or practical experience in the area of Collective Health.

Throughout the course, sandwich placements at other national or foreign universities are encouraged and considered to provide an enriching experience, for both the doctoral student and the Postgraduate Programme.

The course requires exclusive dedication for a minimum of four semesters. The maximum course duration is four years (48 months). The course provides a range of institutional quotas as well as CAPES, CNPq and FAPESB grants, which are distributed according to the candidate's eligibility criteria, as defined by these institutions and the grade obtained in ISC's internal selection process, specific to each grant.

### CURRICULUM STRUCTURE

The study programme at doctoral level is tutorial and individual, and based on the expectation that the student will plan their studies with their supervisor. The programme is structured according to a minimum of 20 credits in compulsory and optional subjects, and participation in advanced critical seminars, teaching practice and thesis development. Student evaluation for the various subjects and activities is processual, and provides the feedback required for the completion of studies.

The student must join one of ISC's research groups or Integrated Teaching, Research and Technical Cooperation Programmes, in order to provide a complete training programme and expedite the fulfilment of the study programme. ISC currently provides the following Integrated Programmes: Planning, Management and Evaluation in Health; Epidemiology and Evaluation of Impacts on the Population's Health; Environmental and Worker Health; Gender and Health; Community, Family and Health; Health Surveillance; Primary Care; Economics, Technology and Innovation in Health; as well as research groups in Mental Health; Epidemiology of Chronic and Degenerative Diseases; and Vulnerabilities and HIV/AIDS.

Subjects are organized by semester and classified as compulsory or optional. Compulsory subjects contain a common nucleus according to three areas of concentration, composed of Epistemology, Methodology and Health Policy, and four other theoretical and methodological subjects specific to each area of concentration. Two of these specific topics – Advanced Seminars in Theory and Methodology – are based on the students' thesis projects, and promote discussions about the state of the art, in terms of important theories and methods for each area. Optional subjects, for their part, must be chosen in agreement with the student's supervisor from those offered by the PPGSC/ISC or another postgraduate programme that better meets the needs of the thesis project.

Activities which do not obtain credits include the critical seminar, supervised research, supervised teaching practice, the qualification examination and the thesis project.

The critical seminar is an arena for in-depth discussion about thesis projects, principally in relation to theoretical frameworks and methodological strategies, although it may also address introductory features, such as the formulation of the research question and the relevance of the problem.

Supervised research aims to promote student involvement in the PPGSC/ISC's academic life in general and in the research group or the Integrated Programme to which they are specifically connected. It also involves participation in ISC's research sessions, which are held every Friday morning. This is an essential activity for training researchers, since it provides daily experiences from research practice, undertaken without interruption. Every semester, the supervisor completes the doctoral student's evaluation form (attached) and passes it to the Collegiate Board.

Teaching practice seeks to support the development of teaching-related skills. For two semesters, the doctoral student must accompany a faculty member who is teaching a Collective Health subject and carry out all activities related to the preparation, performance and evaluation of teaching a curriculum component.

Finally, the qualification examination activities (4<sup>th</sup> semester) and the thesis project (8<sup>th</sup> semester) correspond to the preparation of a project for submission to an examination commission and the preparation of the thesis for defence.

The DSP subjects are organized into three curriculum structures within their respective areas of concentration, as can be seen in the tables below:

### **Epidemiology**

Compulsory Subjects	Credits - theory/ practice
ISC540 – Epistemology and Methodology in Health ISC520 – Health Policy	2 (1.1) 2 (1.1)
ISC503 – Epidemiological Methods of Analysis I ISC504 - Epidemiological Methods of Analysis II ISC600 – Advanced Seminar in Epidemiological Theory ISC601 - Advanced Seminar in Epidemiological Methodology	2 (2.0) 2 (2.0) 2 (2.0) 2 (2.0)
Subtotal	12 (8.2)
Optional subjects	Credits - theory/ practice
To be selected, in agreement with one's supervisor, from the PPGSC/ISC subjects or from programmes with which ISC has an academic exchange agreement.	(10.0)
Total	22(20.2)
<b>Compulsory activities:</b> ISC602 – Critical Research Seminar in Epidemic	logv

ISC793 – Thesis Project

### Health Planning and Management

Compulsory Subjects	Credits - theory/
ISC540 - Epistemology and Methodology in Health ISC520 – Health Policy ISC522 – Health Planning ISC545 – Methods for Unstructured Data Analysis I ISC610 - Advanced Seminar in Health Planning Theory ISC616 - Advanced Seminar in Health Planning Methodology	2 (2.0) 2 (2.0) 2 (1.1) 2 (1.1) 2 (2.0) 2 (2.0)
Subtota	I 12 (11.1)
Optional subjects	Credit s - theory
To be selected in agreement with one's superviso from the PPGSC/ISC subjects or from programme with which ISC has an academic exchange agreement.	r s (10.0) e
Tota	l 22(20.2)
<b>Compulsory activities:</b> ISC611- Critical Research Seminar in Health Servic Systems ISC790-Supervised Research ISC791 - Supervised Teaching Practice ISC794 - Qualification Examination ISC793 - Thesis Project	es and

### **Social Sciences in Health**

Compulsory Subjects	Credits - theory/ practice
ISC540 - Epistemology and Methodology in Health ISC520 – Health Policy ISC550 – Social Theories in Health ISC549 - Methods for Unstructured Data Analysis II ISC558 – Theoretical Seminar on Social Sciences in Health ISC557 – Methodological Seminar on Social Sciences in Health	2 (2.0) 2 (2.0) 2 (2.0) 2 (1.1) 2 (2.0) 2 (2.0)
Subtotal	12 (11.1)
Optional subjects	Credits - theory/ practice
To be selected in agreement with one's supervisor from the PPGSC/ISC subjects or from programmes with which ISC has an academic exchange agreement.	(10.0)
Total	22(20.2)
<b>Compulsory activities:</b> ISC515 – Critical Seminar in Social Sciences Research ISC790 - Supervised Research ISC791 - Supervised Teaching Practice ISC793 - Thesis Project ISC794 – Qualification Examination	

### **INITIAL REGISTRATION**

Unlike subsequent registrations, which are completed via the internet, initial registration for the doctoral course must be undertaken in person by the doctoral student, or their proxy, at the PPGSC/ISC secretariat.

At the same time, the student must present their Course Plan (see attached model), as developed with their supervisor, chronologically specifying (year/semester or month/day, as appropriate) the subjects they intend to study, the critical seminar activities, supervised research, teaching practice, qualification examination and thesis project. It is worth noting that the qualification examination is planned for the end of the 4<sup>th</sup> semester and the public defence of the thesis for the end of the 8<sup>th</sup> semester.

Note: one supervised research activity must be completed every semester.

### **EVALUATION**

The evaluation system is based on the notion that the doctoral training is progressive and processual, and must assess: a) the student's degree of mastery or their fulfilment of course objectives; b) the identification of gaps or weaknesses which must be remedied during the remainder of the training; c) quality control of the institution's teaching. Process evaluation instruments are as follows:

a) Student's academic performance

The method of student evaluation for each subject is defined by the responsible faculty member. For the Supervised Research activity, evaluation includes attendance at scientific sessions, held at ISC every Friday morning, and the supervisor's termly opinion of the student's progress in relation to their studies and, in particular, their research project. Attributed grades run from 0 to 10, in accordance with UFBA's rules; a minimum grade of 5.0 is classified as approved.

b) Quality of the academic course

As well as the student's performance evaluation, subjects and faculty members are assessed at the end of each semester, via a form completed by each student. These forms must be completed individually; the responding student will remain anonymous.

### c) ISC and PPGSC Performance

At the end of each academic year, ISC holds an evaluation and planning seminar, which addresses the PPGSC's performance and is attended by faculty members, technical and administration team members and student representatives.

Every three or four years, an *ad hoc* commission, composed of invited teachers from other postgraduate programmes, evaluates the PPGSC's performance and provides recommendations about teaching accreditation.

### **REQUIREMENTS FOR OBTAINING THE DOCTORATE DEGREE**

In order to obtain a Doctorate Degree in Public Health from the Postgraduate Programme in Collective Health at ISC/UFBA, the student must fulfil the following requirements:

a) Earning credits - obtaining a global average of 5.0 or above in course subjects; this is computed at the end of the 4<sup>th</sup> semester (it is possible to use credits from subjects completed at UFBA or other institutions, as well as for published articles or books);

b) Approval of the thesis project for the Qualification Examination, undertaken at the end of the 4<sup>th</sup> semester (the project must be handed in to the PPGSC secretariat at least 20 days prior to the date of the examination);

c) Approval of the thesis by the Examination Commission in a public defence session, to be held at the end of the 8<sup>th</sup> semester (the final version must be handed in to the PPGSC secretariat at least 30 days prior to the date of the defence).

### QUALIFICATION EXAMINATION

The aim of the Qualification Examination is to ascertain, in general terms, whether the doctoral candidate is capable of conducting their proposed research project. Furthermore, it seeks to provide contributions from other faculty members and researchers, external to ISC. In this sense, the Examination Commission may also recommend that a doctoral student studies new subjects, at the PPGSC/ISC or other programmes.

More specifically, the Qualification Examination aims to assess whether the research project fulfils criteria of scientific rigor, including: a well-defined research question, an updated presentation of the state of the art, a clear definition of objectives, a consistent delineation of the theoretical elements and a methodological strategy consistent with the objectives.

At least 20 days prior to the conclusion of the fourth academic semester, the student must ask the PPGSC Collegiate Board to hold the Qualification Examination. At this point, the supervising teacher must attest that the project is ready to be submitted to an Examination Commission.

The Examination Commission is composed of three members (including the supervisor), one of whom must be from outside the PPGSC/ISC. Their opinions must be individual and written down, and include criticisms and recommendations for project improvements.

The Qualification Examination is held in closed session, and presence is limited to the student and panel members. The candidate has approximately 30 minutes to present their project, at which point the panel members will proceed to arguments, which must include the research area's concepts and methods, particularly those which refer to the chosen topic. The student must respond to any questions.

At the end of the evaluation, each examiner must classify the project, in line with the following stipulations: approved with or without suggested modifications, which do not fundamentally change the project; approved with requirements to re-present to the Examination Commission, should the suggested modifications alter the fundamentals of the project; or rejected: a) A project that receives two rejections from the Examination Commission will be considered rejected; the student will have 90 (ninety) days to present another project.

b) A second project rejection will lead to the cancellation of the student's registration, according to item III of Article 76 of UFBA's Regulations for Graduate and Postgraduate Education (*stricto sensu*).

c) When the project is approved on condition of re-presentation following the incorporation of suggested modifications, the student will have up to 30 (thirty) days to present a new version, which will be reexamined by members of the Examination Commissions, which, in turn, will either approve it, thereby concluding the evaluation, or reject it, allowing the student to present another project in up to 90 (ninety) days.

*Note: The PPGSC/ISC secretariat will provide students with copies of the written opinions of each member of the Examination Commission.* 

### **COURSE CONCLUSION WORK**

The doctoral conclusion work must, of necessity, be a thesis, in other words, an original work of scientific investigation, which may be presented in the form of a monograph or an article, of which the minimum number is three.

In the latter case, articles must be positioned within in the same thematic area, forming a body with the same theory, or theoretically or empirically complementing it. Articles must be preceded by an introduction that clarifies and explains the theoretical or empirical relationship between these areas, followed by a conclusion linking their results and conclusions.

Articles may be written in Portuguese, English, Spanish or French, although complementary texts – the introduction and conclusion – must, of necessity, be written in Portuguese.

Articles published in scientific journals may be accepted, as long as

they contain the result of research conducted during the doctoral course.

# The final course work examination will be conducted over two stages: pre-panel and panel:

The pre-panel consists of a reading and appreciation of the course conclusion work by the individual members of the Examination Commission. At the end of the appreciation, each panel member will issue an opinion, whose conclusion will indicate whether or not the work meets the minimum requirements of a doctoral course.

- a) Should all panel members consider the work to meet the minimum requirements, it immediately moves to the second stage of the final examination.
- b) Should at least one of the panel members consider that the work does not meet the minimum requirements, the student will have 30 days to make any suggested modifications and, following this period, must submit the modified work to the members of the Examination Commission in order to move on to the second stage of the final examination.

The panel consists of an oral defence, with a presentation of the work, following which the Examination Commission members will proceed to arguments, at which point the student will have the opportunity to defend their work.

At the end of the oral defence, the Examination Commission members will issue a final opinion, indicating:

- a) Approval with or without suggestions for modifications which will not fundamentally alter the work;
- b) Approval with the requirement to re-present the work, should the proposed modifications alter the fundamentals of the work; or
- c) Rejection.

Note 1: in line with Collegiate Board criteria, a student whose conclusion work is rejected may submit it for another assessment, within a maximum of twelve months.

Note 2: a student whose conclusion work is approved with a representation requirement, will have 90 days to re-present it to the Examination Commission members, who will either approve it, concluding the assessment, or reject it, in which case the student may present a new version of the work within twelve months.

### ETHICAL REVIEW AND RESEARCH INTEGRITY

In Brazil, the ethical review of research involving humans is regulated by the National Health Council (*Conselho Nacional de Saúde*: CNS) through CNS Resolution no. 466/2012. Every research study involving human participants, beyond the researcher, must be previously submitted to a Research Ethics Committee (*Comitê de Ética em Pesquisa*: CEP), accredited by the National Research Ethics Commission (*Comissão Nacional de Ética em Pesquisa*: CONEP) of the National Health Council.

ISC has a Research Ethics Committee, which is recognized by CONEP. We recommend that students submit their project to the CEP-ISC immediately following approval by the qualification examination.

It is worth noting that the ISC/UFBA community's concerns about ethical conduct are not limited to observation of the regulations for research projects with humans, but include respect for research integrity, which refers to a commitment to the construction of science as a collective resource, in which each person's contribution is recognized and valued. In this sense, the fabrication or falsification of research data and results, plagiarism or the false attribution of authorship are considered to constitute serious misconduct.

Furthermore, ethics form the basis of ISC/UFBA's political and institutional commitment to democracy and social justice in its

relationships with society in general, and, in its internal relationships, in developing practices based on solidarity and respect for differences.

### AWARDING THE DEGREE

The following measures are required for the awarding of degrees:

- a) Educational records must be requested and verified as up-to-date and complete
- b) In this case, corrections must be made to the final version of the thesis, in line with panel suggestions, and four copies of the new version, replacing any existing examples, must be submitted to the Secretariat of the Postgraduate Programme in Collective Health.
- c) The final version of the thesis, in electronic and print version, must be submitted with a letter requesting completion of measures for awarding the degree and issuing the diploma.

### **IMPORTANT DEADLINES**

### 1) When first registering on the course, the student must:

a) Present their course plan, as developed with their supervisor

### 2) By the end of the 4<sup>th</sup> academic semester:

- a) Have fulfilled all subject credits and prepared the thesis project
- b) Have taken the qualification examination and submitted the required documentation, including four copies of their project and the written approval of their supervisor, to the PPGSC secretariat, at least 20 days prior to the examination date.

### 3) When registering for the course's 8th (and final ) semester:

a) Verify that educational records meet the accreditation

requirements for the awarding of the degree, and remember to register for activity ISC 793, the Thesis Project.

### 4) By the end of the 8th academic semester:

a) Take the final examination (pre-panel and panel), submitting the required documentation to the PPGSC secretariat, with six copies of the thesis, including the supervisor's written approval, at least 30 days prior to the date of the pre-panel.

It is the student's responsibility to meet these deadlines and the supervisor's responsibility to inform the Course Collegiate Board regarding the candidate's progress towards their doctorate degree.

#### **APPENDIX 1: STUDY PLAN**

Student's name	Registration no.
Course	Área of concentration:
Integrated programme:	Line of research
Supervisor:	Date:

Compulsory subjects:	Semester / date
1	
2	
3	
4	
5	
6	
7	

Optional subjects:	Semester / date
1	
2	
3	
4	
5	
6	
7	

Activities:	Period or date	Observations
Supervised Research		
Internship / Sandwich grant		
Qualification examination		
Submission of thesis for final examination		
Thesis defence		

#### APPENDIX 2: EVALUATION SHEET FOR THE SUPERVISED RESEARCH ACTIVITY

Seme	ter:
Stude	t's name: Registration no.:
Superv	vising teacher:
Atten	dance at research seminars in the final semester:
1. D	egree of student involvement and participation in institutional
acade	mic life.
Excell	ent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)
Comm	ents:
2. activit	Student participation in ISC's Research Group/Integrated Programme ies.
Excell	ent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)
Comm	ents:
3.	Current status of project development
Dis	sertation/Thesis: Stopped? 🗆 Delayed? 🗆 Within planned schedule? 🗆
Stage:	
Proble Projec Prelim	em/Question/Objectives - Review of literature - Project in development - t completed - Collecting data - Constructing database - Analysing data - inary version presented - Final edition -
Exami	nation qualification taken within planned schedule? Yes No Does not apply.
lf not,	why?
Mater	nity leave/sick leave?
Yes	Νο
lf yes,	how long for?
ls the	student engaged and punctual in fulfilling agreed tasks?
Yes	No

Taking the items in question 3 into consideration, rate the current status of project development:

Excellent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)

4. Progress made in the final semester?

Excellent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)

5. Is the content of the dissertation/thesis project compatible with the degree of excellence demanded by the Programme?

Excellent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)

6. What is your opinion of the student's general performance:

7. Provide a general score for the student's performance in the final

semester:

Excellent (10) Very Good (9) Good (8) Average (7) Unsatisfactory (6)

8. For the purposes of registration on their educational records, in reference to semester \_\_\_\_\_\_, having attained minimum attendance at seminars, the student is:

Approved Rejected

#### APPENDIX 3:

#### DISSERTATION/THESIS EVALUATION ITINERARY

#### (epidemiological or structured research)

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- 4.1 More immediate purpose and objectives
- 4.2 Coherence with previous sections
- 4.4 Originality and social and scientific relevance

#### 5. METHODS

- 5.1 Study design
- 5.2 Research context / definition of area / reference population
- 5.3 Sampling and case selection
- 5.4 Data production
- 5.5 Instruments

5.6 Analysis plan – definition of variables, architecture of analysis, relevance of descriptive and analytical procedures

#### 6. RESULTS

- 6.1 Study population eligibility, refusals, treatment of missing values
- 6.2 Descriptive data
- 6.3 Tabular data
  - 6.4. Modelling data
  - 6.5 Study power

#### 7. DISCUSSION

- 7.1 Summary of results
- 7.2 Interpretation /understanding, explanation, without using epidemiological jargon
- 7.3 Generalization (consistency, coherence, plausibility)
- 7.4 Limitations (bias/ direction) and perspectives

#### 8. GENERAL ASPECTS

- 8.1 Bibliography
- 8.2 Writing, spelling, grammar and style
  - 8.7 Presentation of tables, graphs or figures

#### FINAL CONCEPT

#### APPENDIX 4: SUGGESTED ITINERARY FOR WRITING AN ARTICLE

(epidemiological or structured research)

- 1. Introduction
- a) Identification of the problem;
- b) Brief review of the literature limited to data relevant to the research question;
- c) Characterization of the area and population studied;
- d) Study importance/justification;
- e) Study objective or hypothesis.
- 2. Methodology
  - a) Study design;
  - b) Study population sampling (type, sampling fraction), who was excluded, who was considered eligible and why;
- c) Data sources and when study was conducted
- d) How data was collected and by whom;
- e) Measures taken to avoid errors (validity) and bias
- f) Instruments used;
- g) Definition of variables;
- h) Data registration;
- i) Software employed in analysis;
- j) How data analysis was conducted descriptive and analytical material: selection of variable measures, measures of association or central tendency and statistical test;
- k) Ethical considerations.

#### 3. Results

a) general data regarding study sampling and population: size, missing data or refusals;

b) descriptive data – characterization of study sampling or population according to available information; when there is a test of the hypothesis, presents this material according to the exposure (cohort or cross-sectional) or health status (case-control or reference);

c) analytical data – tables of stratified analysis; presents estimates of the measures of association and estimation and/or statistical inference (confidence interval and/or p-value); confounding and interaction.

#### 4. Discussion

a) repeat the main responses to your research questions;

b) interpret, explaining your findings in the light of existing theory(ies), and/or according to your understanding;

c) compare with results from other studies;

d) study limitations and/or failings – how errors and/or bias may have interfered with how you obtained your results (direction and magnitude, where possible);

e) perspectives from other research on this theme, which enable the advancement of knowledge related to the research question.

This is only a proposal, which may be altered in agreement with your supervisor or in accordance with the norms of the periodical to which you would like to submit material for publication.

# APPENDIX 5: DISSERTATION/THESIS EVALUATION ITINERARY (semi-structured research)

#### TOPICS CONCEPT 1. INTRODUCTION: 1.1 Presentation of the problem (definition, context, nature and scope) 1.2 Relevance of the problem and justification for the research STATE OF THE ART 2. 2.1 Summary of existing knowledge related to the research question 2.2 Scope and topicality 3. STUDY OBJECTIVES 3.1. General and specific objectives 3.2 Coherence with previous sections THEORETICAL FRAMEWORK 4. Review of the main theories related to the theme 4.1 4.2 Personal critical evaluation 4.3 Systematization of assumptions 4.4 Linking concepts and their relationship with a tentative model of understanding 5. METHODOLOGICAL STRATEGIES 5.1 Type of study (case study, ethnography, action research, etc.)

- 5.2 Research context/description of field/population or group
- 5.3 Data production techniques (documentary analysis, observation, interviews, etc.)
- 5.4 Data analysis strategies, (content analysis, discourse analysis, descriptive statistics, hermeneutic analysis)

#### 6. RESULTS AND DISCUSSION

- 6.1 Presentation of the data produced and analysed
- 6.2 Field work aspects
- 6.3 Comparison with results from other studies
- 6.4 Interpretation, understanding / explanation in the light of the theoretical frame of reference

#### 7. CONCLUSION

- 7.1 Summary of results
- 7.2 Main study contributions
- 7.3 Limits and perspectives

#### 8. GENERAL ASPECTS

- 8.1 Bibliography
- 8.2 Writing, spelling, grammar and style

#### 8.3 Presentation of tables, graphs or figures

#### FINAL CONCEPT

# APPENDIX 6: SUGGESTED ITINERARY FOR WRITING AN ARTICLE (semi-structured research)

- 1. Introduction
- a) Identification of the problem;
- Brief review of the literature limited to data relevant to the research question;
- c) Study importance/justification;
- d) Study objectives.
- 2. Theoretical frame of reference
- a) Theoretical assumptions
- b) Definition of key research concepts
- c) Design of explanatory model (tentative) of the studied phenomenon
- 3. Methodological strategies
  - a) Type of study (in terms of general procedures; documentary research, case study, ethnography etc.)
  - b) Research context/description of field/population or group
  - c) Data production techniques (documentary analysis, observation, interviews, etc.) data triangulation, position of researcher
  - d) Data analysis strategies, (descriptive statistics, content analysis, discourse analysis, hermeneutic analysis)
- 4. Ethical considerations.
- 5. Results and discussion
- a) Presentation of data produced and analysed
- b) Comparison with results from other studies
- c) Interpretation, understanding/explanation of the studied phenomenon in the light of the theoretical frame of reference
- d) Conclusion
- e) Summary of the results
- f) Study limitations and/or failings
- g) Perspectives from other research on this theme which enable the advancement of knowledge related to the research question.

This is only a proposal, which may be altered in agreement with your supervisor or in accordance with the norms of the periodical to which you would like to submit material for publication.