TROPICAL INSTITUTE OF COMMUNITY HEALTH AND DEVELOPMENT (TICH) in Africa

HIGHER DIPLOMA IN COMMUNITY HEALTH AND DEVELOPMENT

STUDENTS' HANDBOOK

JANUARY 2012

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INTRODUCTION AND BACKGROUND

The Tropical Institute of Community Health and Development (TICH) is non-profit, voluntary institution registered in the republic of Kenya as an International Community Based Development, Research and Training Trust. The Trust brings together academicians, professionals and practitioners in Community Health and Development of diverse backgrounds to pool skills, expertise and experience in developing concerned leaders, managers and professionals in Community Health. It aims at providing a sound research evidence base for policy development as well as decision making in management of Community Health and Development Programs, implementing Community Based Programs, as well as providing technical services to interested customers in the areas of program development, evaluation and operation research. TICH was launched on the 30th of April 1998 when the first meeting of the International Academic Board took place. The academic program started with a group of 7 students from Kenya, Congo and Malawi.

1.1 Core philosophy, principles and values

TICH believes that all people and communities have inherent capacities to undertake, sustainable, collective, co-operative and collaborative actions to solve their own problems. In this regard, the philosophy and principle of partnership lies at the core of TICH academic, professional and practical institutional value system. TICH thus fully subscribes to a partnership model that recognizes, affirms and builds on the strengths of every stakeholder and partner engaged in health and development. To TICH, this forms the basis for combating both common and individual problems in our society. TICH is therefore committed to:

- Promoting justice in health and development
- Upholding the dignity of all peoples and communities, promoting respect across socio-economic divides, team spirit, respecting of everyone's rights
- Maintaining high standards of integrity through mutual trust, transparency, accountability, selfless and sacrificial attitude

- Inclusive community participation where all people have space and voice
- Mutual respect in diversity where strengths are encouraged and weaknesses minimized irrespective of gender, position, race or religion.
- Responsible stewardship and accountability for the intangible and tangible resources and existing capacities
- Building healthy, healing communities
- Targeting the most disadvantaged people through their own efforts, building on locally available capacities, assets and investments.

1.2 TICH Strategic identity

TICH's strategic identity encompasses:

- Serving the ecumenical movement in health, healing, wholeness and strategic development
- Creating a focal point for capacity building and information sharing in community health and development in the Africa region.
- Enhancing its profile as a voice of the civil society and academia on the Health for All policy, focusing on justice, equity and sustainable development.
- Creating an effective link between communities (strengthening the civil society), governments, and international community at all levels in community health and development.
- Serving as a center of academic and professional excellence in action research, training, policy analysis focused on community health and development, bridging academics with practical living in community and institutional contexts.

1.3 The vision, mission and goals

1.3.1 Vision

To be an international center of academic, professional and technical excellence in community health and development in the

African region bridging academic training with practical community and institutional development through the partnership approach to enable households enjoy essential elements of dignified living.

In this way TICH hopes to make a meaningful contribution towards a healthy, just, prosperous, and sustainable society in which individuals, families and communities are equipped with the necessary practical capacities to cope with the demands in daily life.

1.3.2 Mission

Developing effective, concerned managers/leaders with a vision for the transformation of health and development situations through practical, high quality academic and professional training programs; developing, testing and replicating alternative models of community health and development through networking.

TICH exists to build on and strengthen the potentials, actions and capacities of individuals, families, communities and institutions in order to develop sustainable leadership and programs *building a bridge into a sustainable and secure future, beyond the year 2000.*

1.3.3 The Goals

- Train and develop practitioners in Community Based Health and Development (CBHD).
- Train and develop leaders/managers/policy makers in and/or for CBHD
- Strengthen/develop/sustain Community Based Programs
- Develop/document sustainable Community Based models in partnerships.
- Develop/test/document and publish effective models in health and development.

1.4 The Partnership's approach to teaching/learning

TICH courses are oriented towards community-based approaches to Health and Development. Students take responsibility in TICH partner communities or agencies to manage program activities determined and driven by the partners themselves. They are encouraged to use

evidence based methods in facilitating effective action for change at the agency or community level to promote improvement in the state of well-being for all. The Partners engage in policy analysis, advocacy, negotiation and political / socio-economic action to address underlying causes of ill health.

There is an extensive exploration of integrated approaches to equity in health and development. This training initiative introduces a major paradigm shift from the Institutional Community Health and Development Training to a practical Community / Problem Based model. Where as the course has an institutional resource base and support much of the learning takes place within partner communities and agencies, focusing on their priorities and capacities; focusing on the development of the competencies and skills necessary for the management / leadership of Health and Development programs.

Such skills can only be developed in the context of operations, where the learner has technical and professional coaching, guidance and support, within or as close as possible to the targeted communities or agencies in which students are assigned as workers with well defined job descriptions. Therefore the teaching methods are based on adult learning techniques and consist of:
- Discussions
- Demonstrations
- Field visits and exercises
- Laboratory practice
- Lectures
- On-the-job training and coaching at work situation during follow-up / supervisory visits.

1.5 The TICH Students

Educational experience is further enriched by the diversity of the student body. TICH students are a heterogeneous group, coming form different parts of the world. Students range in age and experience from recent college graduates to mid-career changers, or community health workers seeking new contemporary skills and academic experience to enhance their role as bridge builders into a more secure and sustainable future.

1.5.1 The Advantages of the Course

The programs managed by the students are closely evaluated, and experiences documented and disseminated to promote replication and policy impact.

The participating facilitators, mentors and graduates become part of an international network of Community Based Health and Development experts involved in specific programmes all over the world. The training program is dynamic and will constantly be reviewed to ensure relevance to the emerging issues and concerns in health and development. Students have opportunities to transfer credits earned at the Institute to partner universities.

15.2 The Uniqueness of the Course

The on-the-job aspects of training at TICH in which students are engaged as workers not observers or researchers are the unique parts of the course. To support this vital element the training approach emphasizes:

- Community and Problem Based Learning
- Participatory Action Research
- Partnership/Leadership Development.

GENERAL INFORMATION

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2.1 TICH location

TICH is located in Kisumu municipality, Nyanza province, in Kenya. It is about 500Km. To the West of the Capital, on the shores of Lake Victoria, close to the Uganda boarder. The climate is warm all the year with an annual rainfall of 1,260 mm per annum. It has two rainy seasons: between March to May and between September to October. Mean annual maximum temperature ranges from 9 ^{0}C to 18 ^{0}C with an altitude of 1,144m above sea level. There is intense transmission of malaria all the year round. Students coming to the Institute need to take appropriate precautions including chemoprophylaxis prescribed by a medical doctor.

2.1 Certification of the Courses

The Institute within GLUK is accredited by the Commission of Higher Education to confer Certificates, Diplomas and degrees. In addition to this, TICH has an International Advisory Group composed of representatives of MacMaster, John Hopkins, as well as Moi University. Currently the external examiners come from Nairobi, Makerere and Dar es Salaam Universities.

These linkages ensure international standards of our programmes and qualifications through the International Academic Board (IAB).

2.2 Admission requirements

To be admitted to the Higher Diploma program, an applicant must have a recognized ***ordinary diploma*** in a health related field. Applicants with extensive involvement or a strategic position in Community Based Development or Service Management or Delivery are given preference.

A student who completes a Higher Diploma in Community Health and Development and intends to apply for Masters Degree in Community Health and Development will only qualify if he/she has an average of +60%. If this is not the case, then TICH, through the Deputy Director, Academics, will inform the student on which clusters to bridge in order to raise the marks to +60 %.

2.3 Required Documents for Application:

All applicants must provide:
- A completed application form
- A curriculum vitae
- Passport photos
- Letters of recommendation from either educational institution staff and/or persons with whom the candidate has worked. Letters from relatives are not acceptable
- Indication of source of funding
- An application processing fee of US$ 30 or Kshs 1000

A candidate cannot be given a letter of acceptance to any course offered until the Institute has received ALL this documentation.

2.4 Application Procedures

Applications are accepted on a rolling basis. Applicants are encouraged to submit their applications three months prior to the intended start date. The normal intakes are January and September each year. Applicants interested in any cluster(s) of modules offered should submit their applications at least one month prior to the start of the cluster in which they are interested. Application forms are available on request from the office of the Registrar.

2.5   Fees

Tuition fees are to be paid up in full at the time of registration.   Pre-registered students must pay by the deadline indicated on their tuition bills. Bankers Cheques should be made payable to Tropical Institute of Community Health and Development (TICH) in Kenya shillings, US dollars, Euro or sterling pounds.

It is the policy of TICH to withhold all diplomas, degrees, official transcripts, and other official recognition of work done at the Institute from the students with outstanding debts owing to the Institute until all current obligations to the Institute are paid in full. Fees can be paid per cluster, block or year according to the convenience of students or their sponsors.

Annual payments are preferred as this fits well into our annual planning cycle. Application processing fee USD 30(Kshs 1,000) (non-refundable)

Payments in Ksh. to be made directly to our account whose details are given below:-

A/C Name   : TICH-TRUST
A/C No.   : 0102093484600
Bank Name   : Standard Chartered Bank
Branch   : Kisumu
P.O. Box   :   354, Kisumu

Payments US Dollars to be made directly to our account whose details are given below

A/C Name   :TROPICAL INSTITUTE OF COMMUNITY HEALTH AND DEVELOPMENT
A/C No.   : 240593 505
Bank Name   : Commercial Bank of Africa Ltd
Branch   : Westlands Nairobi Kenya
Swift Code   :CBAFKENX
Currency   :US DOLLARS

Students can be introduced to a bank if they want to open accounts of their own while at TICH.

2.6   Other Costs:

Airfare, airport taxes and local travel expenses to and from the Institute including accommodation while on transit must be paid for directly by the student. This includes excess baggage if any at the completion of the course or any other time. Out of pocket allowance, a flat rate of USD 250 per month is recommended.

Any breakage to or loss of property of the Institute are assessed and charged to the student at actual cost. The Librarian assesses and levies library fines.

2.7   Financial Aid and Higher Education Loans Board

The Institute is currently unable to offer scholarships for tuition and / or accommodation to students. Students who receive funding from external donors channeled through the Institute for the period of their study are provided with a basic living allowance of Ksh 15,000 per month if they opt to manage their own accommodation and meals.

Students are highly encouraged to apply for the Higher Education Loans Board (HELB) as GLUK is approved for this assistance.

2.8 Accommodation

Accommodation at the Institute is optional. We have taken the liberty to arrange accommodation and meals in the TICH compound for new international students to facilitate their settling in process. Students can consider making alternative arrangements at their own discretion. The administrator in charge of students' affairs will be available to assist you in this matter.

2.9   Clothing etc

Kisumu has warm climate all the year round and can be very wet at times. There can also be plenty of mosquitoes. Light long sleeved clothing is advisable in the evenings. Rubber or canvas shoes are necessary for fieldwork in addition to open shoes.

2.10   Library Services

All students are encouraged to use the TICH resource center located on campus. Students are also expected to use other major libraries like the British Council Library, and KEMRI Libraries in Kisumu. More information may be obtained from the office of the Deputy Director, Academic Affairs.

2.11   Computer and photocopy Services

Limited services are available on campus for fully paid up students. The software collection includes word processing, spreadsheets, database, graphics, and statistical package, SPSS. However only required class work specified by a lecturer should be reproduced using these limited services.

It is expected that all computer users will make use them in a manner which is efficient, ethical, legal and not to the detriment of rights and property of others. Photocopying arrangements should be made through the Administrative Assistant.

Students are encouraged to bring their own Laptops with them.

2.12   Medical Care

Students are eligible to receive outpatients' and inpatients services at TICH clinic as well as selected clinics and hospitals in Kisumu town, arranged through Institutional Development and Management Department upon payment of the medical fee.

Kisumu has the highest transmission rate of many communicable diseases (malaria, typhoid, and HIV/AIDS), in the country. We advice all students to take extreme care to prevent infection. Make arrangements to discuss health issues with the GLUK .

In general, all students require anti-malarial chemoprophylaxis. Students must ensure that water is boiled before drinking. Drinking only hot water is a good practice. Tap water is unsafe. Avoid raw foods (e.g. salads or vegetables) unless you have prepared them yourself. Also, every student is required to submit a medical assessment form upon registration

2.13   Security

Security at the TICH compound has been excellent so far. It is advisable to carry identification documents in the evenings to avoid embarrassment by the police.

The Directors, Administrators and the rest of our support staff as well as senior students are willing to discuss any issues that might bother you at any time. Please do not hesitate to ask questions. All of us will be delighted to assist you within our means and the laid down procedures.

3   THE ACADEMIC PROGRAMME

The course is organized into seven core clusters based on a credit system. Each cluster may be taken independently according to the convenience of the student in terms of ability to pay and time off from duty. A student is required to take the 7 clusters offered in Blocks I and II. The student's work must make a good contribution to learning and demonstrate a capacity to relate to the work done by the student to the broader framework in community partnerships approach in health and development while meeting internationally recognized standards.

Each new class starts with an orientation week during which the partnership practice program is introduced, reviewed and planned. At the end of the orientation week new students are matched to willing partners while old students

are confirmed by old partners or moved to new ones according to the needs of partners.

Partnership practice continues throughout all the blocks (192 hrs during blocks I and II), including two attachment periods of 3 months each for program management.

3. THE ACADEMIC PROGRAMME

BLOCK I
CLUSTER 1 CHD 100: CONCEPTS AND TRENDS IN HEALTH AND DEVELOPMENT
 (120 hours/3 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD
Core Facilitators: Prof Richard Muga, Dr.George Ngatiri,Dr. Benard Abong'o, Rose Olayo,Charles Wafula, Beverly Ochieng, Eveline Mandela, Millicent Jaoko, Dominic Mogere

Modules:
CHD   101 Theory, Principles and Practice of Partnership for Development
CHD   102 Concepts and Trends in Health and Development
CHD   103 Global Health Policies (Primary Health Care and Community Based Health Care)
CHD   104 Critical Reading and Scientific Writing (linked to seminars
CHD   105 Factors Affecting Health Status, Health Care and Development
CHD   106 Health Policy Analysis and Development
CHD   107 Program Planning and Management

CLUSTER 2 CHD 200 : MANAGEMENT, ENTERPRISE, ECONOMICS, INSTITUTIONAL DEVELOPMENT IN HEALTH AND DEVELOPMENT
(120 hours/3 units)

Convenor: Prof Muga (MBS) MBChB, MMed (Paeds) Dip Health Systems Management;
Core Facilitators: Dr. Samule Tororei, Dr.Pamela Juma, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, Dr. Hazel Mumbo, Oscar Mori, Charles Oyaya, Charles Wafula, Evans Nyagol, Stephen Kungu, Dominic Mogere,

Modules:
CHD 201   Institutional Developments and Management
CHD 202   Health Systems Development and Management
CHD 203   Financial Resource Generations and Management
CHD 204   Human Resource Developments and Management
CHD 205   Introductions to Health Economics and Financing
CHD 206   Health and Development Information Systems

CLUSTER 3 CHD 300: MEASUREMENTS IN HEALTH AND DEVELOPMENT 1 (80 hours/ 2 units)

Cluster Convenor: Prof. J. Otieno Oteku, PhD.
Core Facilitators: Prof Stephen Okeyo, Prof James Oloo, Dr. Mabel Nangami, Dr. Willis Osoo, Dr. James Ouma, Henry Oyugi

Modules:
CHD 301   Demography and Population studies
CHD 302   Principles of Epidemiology

CLUSTER 4 CHD 400: MEASUREMENT IN HEALTH AND DEVELOPMENT 2 (80 hours/ 2 units)

Cluster Convenor: Prof. J. Otieno Oteku, PhD.
Core Facilitators: Prof Stephen Okeyo, Prof James Oloo, Dr. Mabel Nangami, Dr. Willis Osoo, Dr. James Ouma, Henry Oyugi
Modules:
CHD 401   Biostatistics
CHD 402   Essentials of Computing

BLOCK II

CLUSTER 5 CHD 500: BUILDING HEALTHY, HEALING COMMUNITIES
(120 hours/3 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD.
Core Facilitators: Mitch Odero, Rose Olayo, Rev Boniface Obondi, Jane Wesonga, Jack Buong
Modules:
CHD 501 Health Healing and Wholeness, Building Healing Communities
CHD 502 Communities Based Counseling
CHD 503 Advocacies and Communication
CHD 504 Negotiations and Peace Building
CHD 505 Curriculum Development
CHD 506 Community Based Education, Problem Based Learning, Competency Based Training Curriculum Development

CLUSTER 6 CHD 600: INTRODUCTION TO RESEARCH METHODS (1200 hours/ 30 units)

Cluster Convenor: Prof Dan Kaseje, MBChB, MPH, PhD
Core Facilitators: Prof. J. Otieno Oteku, Prof John Alwar, Dr. Constantine Loum, Dr. James Ouma, Mr. Henry Oyugi, Rose Olayo, Dr. Willis Osoo

Modules:
CHD 601   The basics of Research
CHD 602   Quantitative Methods
CHD 603   Qualitative Research Methods
CHD 604   Literature Review and scientific writing

<u>**SELECTIVES CHD 700A OR CHD 700 C**</u>

CLUSTER 7A CHD 700: ENVIRONMENT, FOOD SECURITY, COMMUNITY NUTRITION AND INDUSTRIAL DEVELOPMENT (120 hours/ 3 units)

Cluster Convener: Emmanuel Ariga BSc, MSc, PhD;
Core Facilitators: Dr. Augustine Afullo, Prof Leo Ogallo, Dr. Jame Mumma, Caroline Musita, Isaac Ogwayo, George Oele, Shadrack Oiye
Modules:
CHD 701   Community Water Supplies and Sanitation
CHD 702   Community Nutrition
CHD 703   Agro forestry and Food Securities

CLUSTER 7B CHD 700: HEALTH ECONOMICS AND FINANCING (120 hours/ 3 units)

Convenor: Prof Muga (MBS) MBChB, MMed (Paeds) Dip Health Systems Management;
Core Facilitators: Dr. Samule Tororei, Dr.Pamela Juma, Dr. George Ngatiri, Dr. Margaret Kaseje, Dr Willis Obura, Dr. Hazel Mumbo, Oscar Mori, Charles Oyaya, Charles Wafula, Evans Nyagol, Stephen Kungu, Dominic Mogere,

Modules:
CHD 708   Economic Analysis of user and provider behavior
CHD 709   Methods of Economic Evaluation
CHD 710   Economic Dimensions of terminal illness/death and living
CHD 711   Health Sector Financing

CLUSTER 7C CHD 700C: COMBATING ILL-HEALTH (120 hours/ 3 units)

Cluster Convenor: Prof John Alwar: MBChB, MMed (Paeds), MPH
Core Facilitators: Prof Dan Kaseje, Prof Steven Okeyo, Dr. Andrew Otieno, Dr. Pamela Juma, Prof Richard Muga, Dr. Peter Gisore, Leila Geteri, Norah Nyanga
Modules:
CHD 704   Integrated Maternal and Child Health
CHD 705   Reproductive Health
CHD 706   Disease Control
CHD 707   Essential drug management in District Health Systems

4   ASSESSMENT FOR CLUSTERS 1-7 AND BLOCK III

4.1 Cluster Assessment

The following framework summarizes the assessment, examination processes and marking for the taught clusters. Clusters 1, 2, 4, 5, and 6 are considered Core Clusters

BLOCK I

Cluster 1: Concepts in Health and Development
The students will be required to give:
- A term paper on seminar topics (30 marks)
- A seminar presentation (10 marks)
- A Continuous Assessment test (10 marks)
- An end of Block written examination: The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

Cluster 2: Management

- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

Cluster 3: Measurements 1

- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

Cluster 4 Measurements 2
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Continuous Assessment Test (CATs)/Term papers will be given to the students in each module in the cluster to account for 30% of the total grade, while exams will account for 70%.
- Partnership practical's

BLOCK II
Cluster 5: Building Healthy Healing Communities
- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

Cluster 6: Research Methods

- Written examination consisting of 10 short answer questions (40 marks)
- Submission of a research proposal at the end of the block that may serve as the basis for thesis research (60marks)

Cluster 7a: Community Environmental and Health Concerns
- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

OR

Cluster 7b: Community Environmental and Health Concerns
- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

OR

Cluster 7c: Combating Ill Health
- Continuous Assessment Tests (30 marks)
- The students will be offered 12 short answered questions to answer 10 (40 marks) in section A and 5 long answered questions to answer 3 (60 marks) in section B in 3 hours (100 marks)
- Partnership practical's

| **5** | THE PARTNERSHIP ACADEMIC PROGRAMME |

The students are required to conceptualize and facilitate the formulation of a realistic partnership project based on existing capacities and available resources but with the potential to create meaningful opportunities for the most vulnerable members or transform the situation of people being cared for. Students are required to facilitate / manage a partnership project, documenting the specific steps taken and the partnership level based on the four levels defined by TICH (parasitic, neutral, synergistic, symbiotic). The assessment is based on weekly process reports submitted by **Monday or Saturday** of the week following the field visit, observation of practical assignments, and written assignments / outcomes.

5.1 Management of Partnerships Practical and Academic Assessment Procedures

This is a major component of the TICH curriculum since it directly links with partner communities and agencies. In general, each practical exercise (or step) consists of *a plan, a practical activity, and a report*. All of these elements are supervised and assessed. The students are expected to use their own workbooks while in the field before final report writing. All assessments must be given a passing mark in order for credits to be awarded. The student is expected to demonstrate skills in:
- Partnership development and strengthening,
- Partnership program planning, implementation, monitoring and evaluation
- Information management
- Problem based learning and Leadership development
- Building /strengthening sustainable healing communities
- Communication, advocacy, negotiation and counseling
- Qualitative and quantitative action oriented research
- Documentation, writing and publishing
- Providing requested problem based technical inputs.

The partnership program Objectives: -

The aim of the program is to develop managers of Health and Development programs that are able to:
- Conceptualize, plan, implement and evaluate community health and development programs
- Provide technical services to interested partners in the areas of program management and action research
- Facilitate the initiation or strengthening of sustainable district / community based programs
- Provide sound research evidence base for policy development as well as decision making in management of community health and development programs
- Facilitate the building / strengthening of healing communities.

5.2 The Learning Methods

Central to the partnerships academic program is self-directed problem based learning. Students are expected to engage in the development / management of a partnership program in real life, from the beginning of first block to the end of the course. No doubt the students will face a multitude of problems as they enter into the partnership context. However, this experience is vital in triggering the learning process, each student recognizing own learning needs, knowledge and skills required to confront problems encountered in the partnership context. Colleagues and

supervisors support the students in this entry and learning process.

All partners (Supervisors, Students, Communities, Service providers and all other Stakeholders involved) are learners and teachers at the same time. Implied in this learning attitude for all partners is the need for timely feedback whether negative or positive. Feedback is crucial for learning to be consolidated. Learning sites / activities include the classrooms, the libraries, during briefing for partnership site visits / activities (based on an activity plan drawn by the student and shared with the supervisor); during partnership practical activity which is observed against the student's plan; during debriefing following the site visit / activity with individuals or groups; during debriefing with the whole Block attended by all supervisors together and, finally, the marking and discussion of reports and other written assignments submitted by the students.

BLOCK I

Specific learning objectives:

At the end of Block I students will demonstrate skills in (and will be assessed on):
- Carrying out rapid Community or Institutional assessment as a basis for program planning
- Providing feedback to the partners and facilitating participatory identification of strategic partnership action
- Facilitating participatory program planning
- Facilitating participatory proposal development
- Assessing Community / Institutional Based Information System
- Facilitating a baseline community survey as a basis for program monitoring, evaluation and feedback.
- Facilitating partnership development, backed by the signing or agreeing on a partnership agreement
- Developing Management Information System /Health Information System/Geographical Information Systems

The learning process / activities / steps:

| **Step 0 (week 0): Introduction** | Introduction to partnership concepts, sites, methods, and assessment as well as partner selection. |

| **Step 1 (week 2): Situation Analysis or program review** | Program review (using situation analysis tools and methods taught during weeks 0 to 3), students submit a plan, are observed on the process and submit a report*.* The situation analysis can either be an **initial assessment** of a new |

partnership situation or a **review of progress** in an existing one.
At this point the students are expected to identify their area of interest which are under the following categories
- Health systems
- Household Vulnerabilities

The tasks for the student include carrying out an entry process into the partnership area as well as a rapid assessment of the situation, essentially for self information of the student as a new comer:
- *Outline of steps (process), methodology*
- *Carrying out actual situation analysis exercise*
- *Compile the entry and Situation analysis process for the Situation Analysis, Feedback Participatory Planning report. (NO REPORT DUE)*

Assessment:
Students are assessed on:
- A plan for situation analysis developed (including a tool/checklist/framework for situation analysis and a tool / framework for institutional assessment), (**10 marks).**

| **Step 2 (weeks 4-8): Feedback Workshop and Participatory Planning** | This step involves two parts: a partnership feedback and priority setting workshop and a participatory planning process in which a master plan is produced or revised. In some partnerships, the main |

need would be for the development or review of an operational plan. In the first part, feedback is given to the partners and priority areas of strategic action identified, based on strengths and opportunities highlighted. Following this, interest groups and partners engage in the planning process as appropriate. The interest areas are often based on current involvement, skills or needs peculiar to the group. Some partnerships need or have a coordinating body to put together the plans developed by the various groups. The master plan would normally include essential elements in Institutional and program development. The main focus is to plan an improvement project through partnership.

Specifically the students have the following tasks:

Organizing and managing a partnership workshop to give feedback and decide on strategic partnership actions for improvement with the community members and other stakeholders. In this exercise the student helps the partners to pause and take stock as to where they are, achievements, strengths, opportunities as well as limitations in order to plan a new or review an existing plan for improvement of their situation.
- *Partnership feed back workshop plans*
- *Partnership feedback workshop process*
- *Partnership feedback workshop report highlighting identified strategic partnership action (next steps).for improvement.*

Organizing or reviewing the partnership structure for effective action, as an institution:
- *A theoretical partnership framework for the implementation of the strategic partnership objectives*
- *A legal partnership framework (detailing operational guidelines, procedures, regulations, expectations, roles, inputs, benefits and conditions).*
- *A partnership agreement detailing signed by all partners (detailing operational guidelines, procedures, regulations, expectations, roles, inputs, benefits and conditions).*

Developing a new or revising an existing partnership project description or plan (*a master or operational plan).*

The students follow-up and facilitate the planning process with individual groups, providing information and technical inputs as requested. They assist in putting together the common partnership plan, bringing together the parts developed / reviewed by each interest group. The students are advised to test the sustainability of each activity based on the sustainability grid. They are also expected to carry out a cost analysis exercise to assist the groups in their choices of activities. The participatory planning tools are outlined in the TICH tools kit for use (as deemed appropriate) by the student and supervisor (see draft partnership management manual).

Assessment:

Students are assessed for each of the two elements the workshop / meeting and the plan. *The student has to book with the TICH office: Academics Coordinator a week before the date of feedback workshop and hand in a summary of the Situation analysis objectives, methodology, list of findings and workshop program. The students are instructed to use the partnership program day schedule as follows:*
1. Mondays (None regular partnership program districts)
2. Tuesdays (Partnership meetings at Main campus. MUST attend for lecturers and students)
3. Wednesdays (Bondo, Rarieda, Kisumu East, Nyando/Nyakach, All Rachuonyos)
4. Thursdays (Siaya, Gem, Ugenya, Kisumu West, All Kisii Districts, Butere, Mumias)
5. Fridays (Homabay, Suba, All other districts)

The feedback and planning workshop is assessed on the following criteria:
- A plan for a partnership workshop / meeting **(20 marks)**
- Organization of the workshop **(20marks)**
- The partnership workshop process **(30 marks)**
- Process of building consensus **(20Marks)**
- Setting the next step **(20Marks)**

A Situation Analysis, Feedback workshop and participatory planning report is submitted for marking as indicated in the partnership deadlines schedule for the semester based on the following outline:

- The executive summary, **10 marks**
- Introduction and background (the context, including the institutional / partnership base), **10 marks**
- Summary of the Situation analysis findings, highlighting strengths and opportunities, **5 marks**
- Identification of strategic actions / tasks and prioritization **10 marks**
- Cost analysis/ viability assessment of alternative possibilities for action *(to assist in differentiating: what needs to be done, what can be done and what will be done),* **10 marks**
- Program goal (s), **5 marks**
- Program objectives, **5 marks**
- Program activities, **5 marks**
- Overall summary description laid out based on the logical framework (Narrative statement, OVIs, MOV, and assumptions), **20 marks**.
- The budget (by sources of income and expenditure line items), **10 marks**
- Institutional / partnership development/strengthening activities (partnership legal base, structure, agreement - detailing roles, expectations, benefits and conditions) based on the essential elements a well functioning partnership, **10 marks**.

This is the FIRST REPORT (1) and should be typed, single spaced Times New Roman font size 12, Justified alignment and stapled. Binding is not necessary.

Step 3 (weeks 10-13): Establishing MIS, HIS, GIS

The students are expected to develop familiarity with various sources of information in their District, their quality, relevance and usage. The students are also expected to plan and conduct a survey to describe the existing situation both qualitatively and quantitatively.

The students establish or review a system for program monitoring and evaluation, (MIS/HIS/GIS), including baseline or follow up survey. This step also consists of two elements: assessment of the existing community or institutional based information system undertaken in every partnership area and conducting a Baseline or Follow-up survey which is undertaken only in partnership sites where it is necessary. Both elements are assessed together.

For the first aspect the students submit a report of their findings including a participatory mapping of partnership resources, assets and investments. The report should also present recommendations for establishing or strengthening the Partnership based information system.

For the survey, students work in groups. Thus teamwork is part of the learning process. They are then assessed as groups for the process but each student is expected to submit a plan, analyze data, and prepare a report, individually for marking. A complete survey report is submitted by the group by the baseline survey excersize as indicated in the semester partnership schedule.

Students are assessed on:
- Assessment of Community or Institutional based information system, its collection, reliability, processing, storage / retrieval and usage, report submitted end of week 10, **(20 marks)**
- Baseline survey plan developed (methodology and instruments), submitted at the beginning of week 10, **(10 marks)**
- Baseline survey process, carried out (week 11), **(20 marks)**
- Baseline survey report linking the findings to the situation analysis, where applicable, is written fed back to partners.

This is a major report (REPORT 2) typed , single spaced pages, Times New Romans fonts size 12, justified alignment and should include an outline for MIS, HIS, GIS for the program area, submitted as per partnership

schedule for the semester.

PARTNERSHIP PRACTICE PROGRESS REPORT 1

In this report the student documents the specific steps taken during the block, their results and the partnership level reached based on the four levels defined by TICH.
The report may have the following sections:

- Background / Introduction / partnership context **(5 Marks)**
- Partnership objectives / essential elements of the program plan **(20 Marks)**
- Description of the process and methods of work (**20 Marks**)
- Achievements, strengths, opportunities, gaps and threats **(10 Marks)**
- Emerging or developed model **(10 Marks)**
- Personal growth as a manager / leader **(5 Marks)**
- Factors which have helped learning **(5 Marks)**
- Factors that have hindered learning **(5 Marks)**
- Recommendations for improvement **(10 Marks)**
- List of documents used during the block **(5 Marks)**
- Plan of action for field attachment : for full time students and Plan of action for BLOCK 2 partnership for part time students**(5 Marks)**

SUMMARY OF ASSESSMENT FRAMEWORK AND LINKAGE TO CLUSTERS IN BLOCK I

Steps / Weeks/ Clusters	Learning Activities / Objectives (students able to	Partnership/Activities	Assessment items
Step 0: Orientation	-Follow course structure -Outline partnership concepts and methods -Identify a partner	-Introductory Lectures -Partnership workshop at TICH	**-**
Step 1: *Cluster 1* *Concepts, methods and trends in Health and development, Policy, Planning*	-Outline partnership Entry steps -Outline methods of situation analysis and Institutional assessment -Carry out situation analysis using outlines for S.A. and Institutional assessment - Plan and manage a partnership workshop -Prepare and present results of S.A. -Identify areas of strategic action and initiate a partnership planning / development process -Outline a partnership agreement -Develop a program plan	-Introduction to partners (exploration/discovery visits) -Carry out a situation analysis using a variety of Methods: LLL, KII, FGD -Analyze information - Prepare partnership workshop plan -Conduct partnership workshop -Write partnership workshop report & plan of action - Carry out cost analysis and viability study -Prepare partnership program plan	-Feedback workshop

Step 2: *Clusters 2 Enterprise and Management in Health and development*	-Outline a partnership agreement -Develop a program plan	- Carry out cost analysis and viability study -Prepare partnership program plan	- Situation Analysis, Feedback workshop and participatory planning report
Step 3: *Cluster 3 and 4* *Measurements in Health and Development*	-Assess Information Systems -Facilitate community survey/feedback. -Develop MIS/HIS/GIS	-Examine information system and write report -Carry out survey and write report -Write program proposal	-Baseline survey report -Partnership progress report 1

Note:
1. The three main reports expected at the end of Block I field practice are:
  i)   *Planning report highlighting the situation analysis review, feedback and participatory planning processes and the PLAN*
  ii)   *Baseline survey report*
  iii)   *Progress report I*
  These must be handed in before admission to exams and as guided by the partnership schedule handout.

2. Block I continuous assessment of partnership practice must receive a passing mark before a student proceeds to Field attachment otherwise a candidate repeats Block I field practice, once, at own expense, not part of fees already paid.

BLOCK II

Partnership Practice during block II is a continuation of activities initiated in Block I, concentrating on review, consolidation and management of the relevant partnership and programs activities. During the first five weeks the students are involved in introducing Block I students, who are engaged in partnership entry and situation analysis, to the community while they carry out their own reviews to enable adjustments and action, in the spirit of team work. Specifically, the students undertake a rapid review of their partnership / program in order to determine areas of emphasis. Consolidation of work started during Block I is a priority but students must also undertake practical exercises relevant to the specific learning objectives of Block II outlined below. In addition students are assessed on 10 weekly reports (out of 10 marks) describing the experience of each week and assessing their progress in implementing their action plan, submitted at the beginning of week 1, based on field notes.

Specific learning objectives

At the end of Block II students will demonstrate skills in:
- Program review and re-planning, completing the planning / implementation cycle
- Facilitating Community Based / Problem Based Curriculum development
- Developing a lesson plan and Conduct a problem based learning session
- Assessing a learning session and training program.
- Building / strengthening healing communities
- Negotiation and Peace Building
- Counseling
- Qualitative and quantitative essential, action oriented research
- Documentation, writing and publishing
- Providing requested technical inputs.

Step 4 : Program review or evaluation

A rapid review of partnership development and management focusing on relationships, rights and opportunities for joint action based on characteristics of a well functioning partnership. The students also spend some time guiding the new students (where they exist) towards what areas they could pay more attention to in their situation analysis, working as a team for the benefit of the host partner. In this step the student is expected to identify opportunities to practice the core objectives of Block II (Healing communities, peace building/negotiation, counseling, communication, and alternative healing practices).

Students are assessed on:

♦ Preparing a plan of work to guide Block II partnership activities including that of partnership/project review submitted at the end of week 1 **(10 marks)**

♦ A plan for carrying out a partnership and program review (including a tool/framework testing the relevance, appropriateness and viability). The students are expected to use the project assessment grid and the SWOT analysis, among other tools learnt in program management. **(20 marks).**

♦ Carrying out a rapid review of the partnership process focusing on essential elements of a well functioning institution / partnership. The student should highlight opportunities for partnership practice (Healing communities, peace building / negotiation, counseling, communication, alternative healing practices) (**30 marks).**

♦ A rapid review report, submitted at the end of week 4, highlighting opportunities for partnership practice around week 4 including recommendations for action to improve the partnership / program **(30 marks)**

Step 5 : Community/Problem Based Learning

This step is made up of three practical elements that are linked to the classroom taught concepts and skills: Learning needs assessment,

curriculum development, lesson planning and conducting a learning session. The students are expected to practice all of these steps during the cluster. It is assumed that by the time of Cluster 4 students will have identified groups requiring some training. In this way the practical exercises become useful for both the student and those to be trained at the partnership sites. Thus the students submit plans for the exercises. Students are examined on process and, finally they submit the training program report with sections covering: Training needs assessment, the curriculum outline, lesson and session plans developed, conducted and assessed.

Students are assessed on:
- Learning needs assessment carried out (following the same format of plan, process and the report) and report submitted, **(20 marks)**
- A community/problem based curriculum developed, lessons plan/sessions plan copy submitted during booking for assessment as indicated in partnership schedule for the semester. **(40 marks)**
- *The student has to book with the TICH office: Academics Coordinator a week before the date of feedback workshop and hand in a summary of the A community/problem based curriculum, lessons plan and sessions plan. The students are instructed to use the partnership program day schedule as follows:*
1. Mondays (None regular partnership program districts)
2. Tuesdays (Partnership meetings at Main campus. MUST attend for lecturers and students)
3. Wednesdays (Bondo, Rarieda, Kisumu East, Nyando/Nyakach, All Rachuonyos)
4. Thursdays (Siaya, Gem, Ugenya, Kisumu West, All Kisii Districts, Butere, Mumias)
5. Fridays (Homabay, Suba, All other districts)

- Lesson/session plans developed and field training conducted as per the partnership schedule **(40 marks).**
- All submitted as one report as guided by partnership schedule

This is a major report (REPORT 4) typed , single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

Step 6: Building Healing Communities

Based on the findings of the rapid review the students identify specific groups within the project area that are committed to improvement to work with, building or strengthening them as healing communities**.**

Students are assessed on:
- Recognition of alternative healing, practice of healing, building relationships, a written paper, including application of scripture traditional or other religious models. A written report based on an experience in the community, describing a group or institution that the student works with, focusing on relationships, which can be used for seminar presentation or media article *(based on characteristics of a healing community)*, attached to partnership II **(25 marks)**
- A case study describing a process of negotiation for partnership building: managing conflict, facilitating the release of bitterness and resentment, and building peace. The student prepares a written report describing the issues, the process (methodology) and results, attached to partnership II **(25 marks)**
- A descriptive report on a counseling session in the community or partner institution which is planned, undertaken and reported on, attached to partnership II **(25 marks)**
- An advocacy issue identified and the group or institution facilitated in taking appropriate action. The students submit written plans, are examined on process, and are assessed on a report describing the strategies used, the process, the results and recommendations for future action attached to partnership II **(25 marks).**

Supervisors use a common list of the Characteristics of a healing community, outline for negotiation / peace building as well as guidelines in other technical areas to guide supervision and assessment).

The above mentioned 4 reports under Building Healing Communities are presented as annexes to the Final progress report or as individual reports submitted as per the partnership schedule for the semester.

Students should carry out a final vulnerability capacity assessment in their partnership site to document improvement.

Step 7a : Final Environmental Health and Vulnerability and capacity assessment.

Students are assessed on:Conducting a follow-up assessment that has been realized based on the planned activities.
  - Summary of Environmental health, food security etc, issues identified during Situation analysis/Rapid assessment **(20 mks)**

- Summary of activities instituted towards addressing the gaps identified in households is written and could be in the areas listed below **(10 Marks)**
  - Environmental Health issues (food and nutrition security, Water and sanitation, agro forestry, etc)
  - School / education
  - Livelihood security
  - Social capital
- Follow up assessment using the VCA tool is carried out and a report written **(40marks)**

This is a major report (REPORT 5) typed , single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

Step 7c : Final Facility Assessment performance assessment.

Students are assessed on:Conducting a follow-up assessment on the improvement of the activities that had been realized based on the planned activities.
  - Summary of health systems issues identified during Situation analysis/Rapid assessment **(20 marks)**

- Summary of activities instituted towards addressing the gaps identified towards strengthening health systems, at Level 1, 2 and 3 **(10 Marks)**
- Follow up assessment using the Health Systems Assessment tool will be carried out and a report written **(40marks)**

(Supervisors use session plans for student supervision and common guidelines for student assessment.)

This is a major report (REPORT 5) typed , single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

THE FINAL PARTNERSHIP PROGRESS REPORT (100 marks)

The students prepare the second partnership progress report including handing over notes documenting the specific steps taken, the outcomes and the partnership level reached based on the four levels defined by TICH. A final report is submitted two weeks before the next Block opens. The report may have the following sections:

- Background / Introduction / partnership context **(5 Marks)**
- Partnership improvement objectives **(5 Marks)**
- Description of the process and methods of work, emphasizing new methods learnt, new revelations and concepts to be explored further (**30 Marks**)
- Progress in building / strengthening partnership practice (institutional and program), highlighting achievement of objectives **(40 Marks)**

- Description of an emerging or developed model **(10 Marks)**
- Lessons learnt in terms of personal growth as a manager / leader **(5 Marks)**
- Annex 1 **(25 Marks)**
- Annex 2 **(25 Marks)**
- Annex 3 **(25 Marks)**
- Annex 4 (**25 Marks**)
- List of documents / references used during the Block **(5 Marks)**

(Annexes of Rapid assessment reports and *Building Healing Communities case studies are attached to the Final progress report submitted as per the partnership schedule for the semester.)*

This is a major report (REPORT 6 with 4 annexed reports) typed , single spaced pages, Times New Romans fonts size 12, justified alignment and submitted as per partnership schedule for the semester.

SUMMARY OF ASSESSMENT FRAMEWORK AND LINKAGE TO CLUSTERS IN BLOCK II

Steps/ Weeks/Clusters	Learning Activities Objectives, students:	Partnership/Activities	Assessment items/ marking
Step 0	-Participate in introduction & Orientation of Block 1	-Introduction to Partnership program and sites Carry out rapid review of partnership development and management	-Plan of action
Step 4: *Cluster 5A* *Community/ Problem Based Learning*	-Develop Community Based / Problem Based Curriculum -Develop a lesson -Conduct a problem based learning session -Assess a learning session Assess a training program	-Carry out learning needs assessment and write report -Develop curriculum -Prepare lesson plans -Conduct learning session -Assess learning session/program	- CBE training workshop - CBE training report
Step 5: *Cluster 5B (Building Healing Communities)*	-Identify healing communities -Describe healing community -Document, write and publish -Facilitate community advocacy, negotiation and peace building -Facilitate community based counseling	Describe healing community -Identify issues, document and disseminate (article or seminar) /facilitate advocacy - Build/strengthen partnership / peace through negotiation -Identify a counseling need and conduct a counseling session	- Communication and advocacy case study -Peace building and negotiation case study - Counselling case study - Healing Community case study
Step 6 *Cluster 6 Basic Research*	-identify researchable issue in your partnership site	Write a research proposal	Research proposal

Selective			
Step 7 (Wks 11-13) *Cluster 7a* *Environmental* *health* *OR*	-Carry out a follow up assessment of activities on Household Vulnerability situation -Demonstrate latrine construction, water purification, nutritional assessment	-Carry out assessment of Household resilience capacity to Vulnerability situations and write a report - Demonstrate and write a on Environmental Health report and submit (annex to Progress report II)	-Vulnerability Capacity Assessment report
Step 7 (Wks 11-13) *Cluster 7c* **Combating ill** **health**	-Carry out follow up assessment of health systems -Demonstrate the importance of health facility data analysis and presentation for decision making.	-Carry out health systems assessment by level and write a report -Demonstrate the importance of health facility data analysis and presentation for decision making	- Health Facility Assessment report

Note:

1. The three main reports expected at the end of Block II field practice are:

   i)   Training report with- training needs assessment, curriculum, session plan and practical training session report

   ii)   Vulnerability capacity assessment report OR Health systems assessment report

   iii)   Final progress report with annexes on the rapid review and Building Healing Communities case studies (A healing community report Negotiation and peace building, Advocacy material and Counselling session report)

2. A passing mark of 50% in partnership practice is required in order to pass and graduate with a Higher Diploma In Community Health and Development.   Otherwise a candidate must repeat Block II field practice (96 hours and be assessed) at own expense. Students can only repeat field practice once.

6	ASSESSMENT PROCEDURES

6.1 Procedures for completing designated course of study

- The content of the academic programmes consists of Block 1-2 and the community Partnership Practice.
- One or more of the following three instruments examines all Clusters: written examinations, papers/reports and practical examinations. The Partnership Practice is assessed on a continuous basis as outlined below.
- In Block I the student must receive a passing mark in Clusters 1, 2, 3 and 4.   During Block II, they must receive a passing mark in Cluster 5,6 and 7. Supplemental examinations will be offered once.
- Students are required to pass Block I and Partnership Practice (with a mark of 50% or above) before the student can proceed to the next Block. They are required to pass Block II and the Partnership Practice for completetion of a Higher Diploma in Community Health and Development.
- A student who fails three out of four Clusters in a Block will be discontinued but may receive a certificate of attendance. A student who fails three or more Clusters in a Block but completes the Partnership Practice including the 4 months field attachment may receive a Certificate of Partnership Practice from the Institute.
- All assessments must be given a passing mark in order for credits to be awarded.

6.2   Procedures for understanding Higher Diploma Assessments

 Assessment summary

AWARD ASSESSMENT	HIGHER DIPLOMA
Written examination	70%
Partnership Practice	30%
TOTALS	100%

6.3   Awarding marks

The pass mark will be 50%. Any assessment marked less than 50% will be deemed as failed. Distinction will be awarded to candidates receiving over 75%.

If a student feels that a mark, which has been given, is unfair, he/she can request a review by the external examiner. Request must be directed through the Institute Director or Deputy Director, Academic Affairs.

6.4 Admission to and the Final Examination

To be granted admission to the final examination, candidates must complete each block with a passing mark. All candidates must obtain passing marks for the Partnership Practice at the end of Blocks I and II.

If a candidate's work and assessment receives a fail mark, the assessment may be taken one more time. A re-sit must be arranged with the relevant cluster convener or a member of the TICH academic staff.

The final examination will be discussion between the candidates and the Board of Examiners. Although all material, which had been presented during the period of study, can be examined, the discussion will focus on the application

of the course of students to future work.

7.1 Transfer of Credit

The TICH Academic Board will consider requests for transfer of credit for the TICH degree/diploma on an individual basis. Only courses taken within five years of the date of the request for transfer will be considered. No students may transfer credits from other schools or institutions. Students who wish to take a course within another institution and who plan to use that course towards a TICH degree must get approval prior to enrolling in the course. No more than one-third of total credits may be transferred from courses taken from other institutions outside TICH. A minimum grade of B (60-65%) is required.

7.2 Transcripts

To request an academic transcript of grades and course work, a student should submit a transcript request form to the GLUK Academics Registrar office. Letter requests will be honored if they are signed and give complete information about attendance, including enrollment dates and degree(s) earned. Official transcripts are mailed approximately one week after receipt of mailed request. Result slips are offered at the end of each semester exams by the Deputy Director Academics.

7.3 Withdrawals, leave of Absence and Refunds

Students who find it necessary to withdraw or take a leave of absence must notify the Institute Administration in writing. Mere absence from classes does not constitute an official leave nor does it reduce the student's financial obligation or remove a final grade if the student is pre-registered for that period. Students may request up to one-year leave of absence. All withdrawals and leaves of absence are subject to the Institute refund policy listed below.

Students who withdraw from a course after the fifth week of class will receive a grade of 'W' (Withdrawn) on their permanent record card. Students may withdraw from a course at any time up to two weeks before the start of final examinations. After that point no course may be dropped. Depending on the date the official withdrawal from the Institute is received by the Administration, the students account will be credited as follows:
- Before the start of classes: 100 percent of tuition fees
- During the first two weeks of classes: 80 percent of tuition fees
- During the third week of classes: 60 percent of tuition fees
- During the fourth week of classes: 40 percent of tuition fees
- During the fifth week of classes: 20 percent of tuition fees
- After the fifth week of classes: 0 percent

Note: Tuition payments will not be refunded after the start of classes; rather, a credit will be made to the student's account. Registration fees and deposits are nonrefundable.

7.4 Suspension, Dismissal or Discontinuation

TICH through its appropriate committees, reserves the right to suspend or dismiss any student for failure to maintain a satisfactory academic record, acceptable personal behavior, or satisfactory standards of health.

7.5 Educational Rights and Privacy of materials

Educational Rights and Privacy of materials ensures confidentiality of students educational records and restricts disclosure to or access by third parties, except as authorized by law. The Institute will not release personally identifiable information contained in student's records. However, students have the right to inspect their educational records, with certain exceptions. If they believe the records are inaccurate, they may request an amendment and if denied have the right to a hearing.

7.6 Equal opportunity policy

TICH prohibits discrimination against any individual on the basis of race, colour, religion, sex, age, national origin, physical or mental disability, marital, parental status. This policy extends to all rights, privileges, programs, and activities, including admissions, financial assistance, employment, housing, athletics and educational programs.

7.7 Intellectual Property

The results of the TICH research should be published and made generally available, but continues to be prepared to protect the Institute intellectual property and encourage its commercial development when this should be of economic benefit to the Institute, its partners and Kenya. Intellectual property protection includes patenting inventions, securing trade marks Designing registration, Copyright and 'know-how' secrecy agreements. The Director of the Institute has powers to act for and on behalf of the Institute in any Intellectual property matter.

7.8 Grievance and Arbitration

The Institute recognizes that it is in the interests of both student and the Institute to have procedures to deal in a simple and effective manner with the personal grievances of students which have arisen in their relationship with the Institute. The procedures are intended to prevent personal conflicts becoming entrenched, to the detriment of the student's academic progress, and to resolve disputes without delay and in a conciliatory and efficient manner. Under normal circumstances, it is expected that students will first raise matters about which they are aggrieved with the person concerned. If the student feels unable to approach the person directly or if such an approach does not solve the grievance, the Director should be consulted. The Director should take appropriate action to ensure that, wherever possible, the grievance is resolved. Such action may involve the use of an independent advisory body to assist in the resolution of any grievance.

8.1 Service Institutions

The Government Ministries (Kisumu, Nyando, Siaya, Suba and Bondo Districts).
Anglican Church of Kenya (Ng'iya and Saradidi Health Centres, Dioceses of Maseno South, West and Southern Nyanza)
Roman Catholic Church, Arch Diocese of Kisumu
Christian Health Association of Kenya

8.2 Community Based Organizations (CBOs)

Lambwe East community
Reach Out community
Kadibo Community
Maseno Division communities (8 sublocations)
Gem Rae, Nam and St Alloys Communities
Boro Community
East Alego Community
South East Alego Community
Abom Community
Saradidi, Majango Communities
East Asembo Community
West Asembo Community

8.3 Training Institutions

Department of management and Health Economics, Moi University
Institute of Public Health, Moi University

9.1 The Founders of TICH.

TICH founder members are those who have paid pay KShs. 100,000 to be used to purchase the piece of land for the construction of the physical facilities of the Institute. Founder membership is still open.

9.2 Trustees

1. Dr. Nyambura Githagui
2. Bishop Joseph Otieno Wasonga
3. Bishop Francis Mwai Abiero
4. Bishop Haggai Nyang'
5. Ms. Penina Ochola
6. Rev. Dr. Dan Owino Kaseje
7. Dr. Richard Muga

9.3 The Council

1. Prof. Miriam Were   (Chairperson)
2. Dr Willis Owino-Ong'or   (Vice Chairman)
3. Prof. Gilbert Kokwaro
4. Prof. Dan Kaseje
5. Rt. Rev. Francis Mwai Abiero
6. Prof. Gilbert Kokwaro
7. Prof. Wilson Odero
8. Prof. Richard Odingo
9. Dr William Otiende Ogara
10. Dr Mary Hlalele
11. Dr. Mabel Nangami
12. Dr.Doreen Othero
13. Mrs. Getrude Lwanga
14. Mr. William Otiende Ogara
15. Mr. Samuel Tororei
16. Mr. James Odaga
17. Mrs. Elizabeth Usagi
18. Mrs. Jane Adewa
19. Mr. Charles Oyaya
20. Mr. Mark Oloo
21. Mr. William Otiende Ogara
22. Mr. Samuel Tororei
23. Mrs Elizabeth Usagi
24. Mrs. Jane Adewa
25. Mr. Charles Oyaya
26. Mr. Mak'Oloo

9.4TICH International Advisory Group

1. Prof. Stan Foster (Emory School of public Health)
2. Prof. Carl Taylor, John Hopkins School of Public Health
3. Prof. Henry Mosley, John Hopkins School of Public Health

4. Prof. Paget Stanfield
5. Prof. Vic Neufield (McMaster University, Canada)
6. Dr. Charles Boelen (WHO, Geneva)
7. Henry Mosley (John Hopkins University, USA)
8. Jack Bryant (Consultant, USA)
9. David Morley (School of Child Health, UK)
10. Frits Van der Hoeven (MCS, Holland)
11. Basi Wessel (Orange Free State University, South Africa)

9.5 TICH Examiners

External
1. Dr. Mabel Nangami (Moi University, School of Public Health, Kenya)

Internal
1. Prof. Dan Kaseje
2. Prof. Owino Okong'o
3. Prof. Joseph Otieno Oteku
4. Prof. Richard Muga
5. Prof.Stephen Okeyo
6. Henry Oyugi
7. Dr. Pamela Juma
8. Dr. Linette Nyapada
9. Silvenus Ochieng
10. Jack Buong
11. Maureen Kimani
12. Caroline Musita
13. Rose Olayo
14. Dr. Joyce Owino
15. Joyce Mbugua
16. Dr. Margaret Nduta
17. Dr. Constantine Loum
18. Dr. Peter Gisore
19. Dr. James Ouma
20. Prof. Oloo
21. Prof. John Alwar
22. Dr. Jane Mumma
23. Isaac Ogwayo
24. Nancy Madigu
25. Charles Wafula
26. Dr. Jackton Opiyo
27. Prof. George RAburu
28. Prof. Jack Kamiruka
29. Irene Obago
30. Careena Otieno
31. Dr. Hazel Mumbo
32. Dr. Andrew Otieno
33. Oyatta Bala
34. Prof. Leo Juma Ogallo
35. Dr. Willis Obura
36. Alice Mwayi
37. BeverleyOchieng
38. Willis Osoo