Dear Vice Chancellor,

External Examiner’s Report: MPhil in History, Medicine and Society 2109

This is the second year that I have completed as External Examiner for this degree. Last year I said that the term time essays helped students develop the analytical skills needed for the dissertations, as well as building a detailed understanding of substantive areas that then provide the focus for their dissertations. That’s also true this year with a nice mix of topics that combine the three core themes of the programme - Health, Medicine and Society - very well. It’s this threefold element that marks out the essays and dissertations rather than any transdisciplinary approach *per se*.

This reflects the aims of the degree which is to give students the opportunity to develop a deeper understanding of their chosen ‘home subject’ i.e. either history, philosophy, sociology or the social anthropology of health and medicine. The role of the dissertation workshop is clearly very important here in ensuring the topic and approach a student takes is properly anchored in their ‘home subject’, even though consideration of the value of other disciplines should be undertaken. This broad issue of how far one can expect a student to develop genuinely transdisciplinary skills within a 9 month programme was discussed in
the Exams Board on June 20. Students do get exposure to all four disciplines through the core and option modules they select as well as via methodological training. The dissertation workshop is a very valuable vehicle for ensuring student (and in effect staff) expectations are clear/realistic about drawing on approaches outside of the home subject. This would include guidance on student aspirations to undertake empirical fieldwork, in what would be a tight timeframe, given that ethics approval and access would have to be in place as well. High quality scholarship – as illustrated by the dissertation that received the highest mark (of 82%) – can be based on detailed analysis of secondary source material, which is easier to gather and interrogate in the fairly limited time available. Perhaps next year’s cohort could be given some examples of successful, i.e. doable, fieldwork from the first two years.

The best essays and theses made clear what methods and literatures they would use and why and how these supported the general approach being taken, whereas the less strong failed to say why they chose particular sources and methods given the specific issues they wanted to explore, and often offered simply summary accounts of the literature rather than engaged critically with it. Sometimes too the student gets locked into a conceptual framework to drive their work but in doing so alternative views or the limitations of the framework are not considered. The ethical issues of the topics covered in the dissertations – especially those inspired by a feminist critique - are usually well handled and typically provide the normative underpinning of any recommendations and conclusions.

All 12 of the dissertations showed ambition – in a few cases too much ambition - and a serious amount of background reading, impressive given the relatively tight timeframe in which any fieldwork and writing up is to be done.

The feedback from staff is, as last year, excellent in explaining the strengths and weaknesses of the essay or dissertation, and the final mark. This is especially laudable given the tight turnaround required between submission, assessment and reports and sending me a sample. Both the academic staff and the administrator are to be commended for their hard work in completing this process so efficiently.

One question raised in the Exams Board related to the word limit boundaries for the dissertation, currently set at a 10-15k range. This seemed too broad, and something more constrained was discussed and adopted namely a range from 10k to 12k words, which I fully support.

In my report to the University last year I recommended that the University should try to strengthen the medical anthropology staffing as well as provide more administrative support, as student numbers go up. It was not clear whether anything is happening here as the formal response I received did not address this issue. This is perhaps even more pressing because of a forthcoming retirement. Quite a number of the cohort chose dissertation topics in the medical anthropology area and if the intake next year is close to the 18 target, there will be considerable pressure on the degree programme staff in this area. I hope additional staff resource can be made available.
Overall, the degree produces work of high quality and freshness in approach, reflecting both the calibre of the student intake and the quality of staff supervision. I have agreed to serve for one more year.

Yours sincerely,

[Signature]

Professor Andrew Webster
External Examiner