

CENTRAL UNIVERSITY OF KERALA
DEPARTMENT OF PUBLIC HEALTH AND COMMUNITY MEDICINE

Minutes of the Board of Studies meeting held on July 8, 2020

1. The 2nd board of studies meeting for the Department of Public Health and Community Medicine was held on July 8th 2020 from 10 am to 1pm. The meeting was attended by the following members.

Sl.	Name of the expert	Capacity	Designation & Affiliation
1	Dr Elezebeth Mathews	Chairperson	HOD (In-charge), DPH&CM, CUK
2	Prof. (Dr.) KR Thankappan	Member	Professor, DPH&CM, CUK
3	Assoc. Prof. Dr. Rajendra Pilankatta	Member	Dean, School of Medicine & Public Health, CUK
4.	Dr Sibasis Hense	Member	Asst. Professor, DPH&CM, CUK
5	Prof. (Dr.) Raman Kutty V	Member	Epidemiologist and Data Science Consultant, Amala Institute of Medical Sciences, Thrissur, Kerala
6	Prof. (Dr.) Unnikrishnan B	Member	Associate Dean and Professor Department of Community Medicine, Kasturba Medical College, Mangalore MAHE.

7	Dr. Shailendra Kumar B Hegde	Member	Senior Vice President - Public Health Innovations at Piramal Swasthya, Hyderabad (India)
8.	Dr. C.K. Jagadeesan	Member	State Nodal Officer of ARDRAM Mission and Deputy Director, Directorate of Health Services, Govt. of Kerala
9.	Dr. K Vijayakumar	Member	Professor, Dept. of Community Medicine, Amrita Institute of Medical Sciences, Kochi.
10.	Mr. Prakash Babu Kodali	Faculty member	Department of Public Health and Community Medicine, Central University of Kerala
11	Ms. Jayalakshmi Rajeev	Faculty Member	Department of Public Health and Community Medicine, Central University of Kerala

2. The Department proposed for a change in the eligibility criteria for admission to the MPH program due to the increasing number of applications from life sciences and biomedical stream. Faculty members envisioned that if there are more applications with relaxed eligibility criteria, the competition to the program will be tougher and best students can be selected to the program.

Current Eligibility criteria: MBBS/BDS/B.Sc. Nursing (4 years)/any Branch of Engineering (4 years)/ B.Pharm/Bachelor of Phototherapy/ B. AYUSH/ B.Vety/B.V.Sc./ Master in Social Work/ Economics/ Policy Science/ Sociology/Nutrition/ Development Economics/ Public Administration/Psychology/ Law. No upper age limits.

Proposed eligibility criteria: Bachelor's degree in the following disciplines are eligible: Medicine / AYUSH / Dentistry / Veterinary Sciences/ Nursing/ Allied Health Sciences / Life Sciences / Statistics / Biostatistics / Demography / Population Studies / Nutrition / Sociology /

Psychology / Anthropology / Social Work/ Engineering/ Bio-medical sciences/ Law/ Management Studies/ Public Policy & Administration/ Economics. No upper age limits.

The members of the Board of Studies deliberated on the eligibility criteria proposed by the department and approved the same.

3. The MPH curriculum was revised as per the curriculum promulgated by the Ministry of Health and Family Welfare, adhering to the CBCS guidelines of University Grants Commission. The revised curriculum has also incorporated value addition courses from Massive Open Online Courses from SWAYAM program of Government of India as electives.

The revised MPH programme consists of 72 Credits, of which 59 and 13 credits are offered through core and elective courses (including MOOC courses) respectively. **Semester- I** consist of 20 credits; **Semester- II** consist of 20 Credits; **Semester-III** consist of 18 Credits; and **Semester -IV** consist of 14 credits.

The revised program structure was approved by the members.

4. Dr. Vijayakumar recommended that disaster management be included in Principles of Practices of Public Health course and the same has been incorporated.
5. Dr. Jagadeesan suggested the need to include health systems based internship to students to get them acquainted with the functioning of the health system. He further suggested that the course on Health Promotion methods and approaches shall also include the approaches in decentralized system. The same has been incorporated.
6. The courses and the syllabi was reviewed and approved by the members.

Semester: I
Core Course

5. Course Code & Title: MPC 51 05 & Introduction to Health Systems and Policy
Credits: 4

Course objectives: The objectives of this course are to provide students with basic understanding of a health system with respect to its evolution, levels, functions, types and building blocks. The objective is also to sensitize students with the nitty gritty of health policy making, its analyses and implications on health services delivery and health outcomes.

Course outcomes: On successful completion of the course, students will be able to:

1. Learn the WHO health system framework and its important building blocks.
2. Analyze important components of the Indian public and private healthcare systems and compare it with other emerging economies.
3. Understand the theories and concepts related to public policy.
4. Understand the political context of making policies and the role of government as policy maker
5. Compare the global and national health policies in the context of changing global health policy environment
6. Understand health policy making, analysis and actors involved in the process.
7. Identify the gaps and opportunities in health policies and systems in India.

On successful completion of the course the students will be able to gain essential employment oriented skills in health systems strengthening and health policy analysis.

Teaching methods: This course will be delivered using a variety of methods and modalities such as classroom and online lectures, self-study, seminars, field visit, group work.

Units and Topics	Teaching Methods								Mandatory Readings
	L	FW	FV	CS	GW	SS	SP	P	
Unit-I: Introduction to Health Systems									

1.1 Definitions, evolution, functions and types of health systems.	X					X			Gilson L (2012). Health policy and systems research: a methodology reader.
1.2 Health systems of developing and developed countries (Including Indian Health System)									WHO (2010). Monitoring the building blocks of health system: a handbook of indicators and their measurement strategies.
1.3 WHO building blocks of health systems and their linkages: (i) service delivery, (ii) health workforce, (iii) health information systems, (iv) access to essential medicines, (v) financing, and (vi) leadership/governance	X					X			World Health Organization. (2007). Everybody's business--strengthening health systems to improve health outcomes: WHO's framework for action.
1.4 Micro (Individual interactions), meso (organizational structure and community) and macro (Policy) framework of a health systems.	X					X			
Unit-II: Global Health Initiatives and Health Programmes in India									
2.1 Alma Ata Declaration, MDGs, and SDGs	X					X			
2.2 Universal Health Coverage (UHC)									
2.3 National Health Programmes, NHM, NUHM and ICDS.									
2.4 Role of NITI Ayog, and five-year plans.									
Unit-III: Introduction to Health Policy									
3.1 Introduction to core concepts and definitions - public and private policies, policy makers and actors, policy instruments, policy transfer, power in policy	X					X			Buse, K., Mays, N., Walt, G. (2005). Making Health Policy: Understanding Public Health. Open University Press.

3.2 Health Policy: Definition and importance, Evidence-based policy making, Role of government as policy maker and the political context of making health policies								Wildavsky, A. (1979). Doing better and feeling worse: the political pathology of health policy. In the <i>Art and Craft of Policy Analysis</i> (pp. 284-308). Palgrave Macmillan, London.
Unit-IV: Health policy making and analysis								
4.1 Policy making process: Theories – multiple-streams theory, punctuated equilibrium theory 4.2 Policy making cycle: Agenda setting, formulation of policy, adoption, implementation and evaluation. 4.3 Decision making - Linear/rational model, incrementalist model and mixed scanning model 4.4. Dichotomy between policy making and implementation: Bottom-up and top-down implementation, Street level bureaucracy 4.5 Health Policy analysis - Policy triangle framework (Walt and Gilson 1994), cost-benefit and cost-effective analysis	X		X	X	X	X		Buse, K., Mays, N., Walt, G. (2005). Making Health Policy: Understanding Public Health. Open University Press. Walt, G., & Gilson, L. (1994). Reforming the health sector in developing countries: the central role of policy analysis. <i>Health policy and planning</i> , 9(4), 353-370. Walt, G., Shiffman, J., Schneider, H., Murray, S. F., Brugha, R., & Gilson, L. (2008). ‘Doing’health policy analysis: methodological and conceptual reflections and challenges. <i>Health policy and planning</i> , 23(5), 308-317.
Unit-V: Global and National Health Policies, Changing Global Health Policy Environment and Emerging Concepts								
5.1 Global Health Policies: Role of World health organization in setting norms and standards, e.g. International Health Regulations, Framework Convention on Tobacco Control (FCTC) 5.2 National health policies: Overview of health policies from developing and	X		X		X	X		Lee, K., Kamradt-Scott, A. (2014). The multiple meanings of global health governance: a call for conceptual clarity. <i>Globalization and Health</i> , 10:28. https://www.who.int/

developed countries. 5.3 Health policies of India – National and state health policies 5.4 Global health governance to global governance for health: Role of agencies such as World Trade Organization, International Monetary Fund, World Bank, Donors and philanthropic organizations 5.5 Global health security and diplomacy 5.6 Health in All Policies 5.7 Health and activism 5.8 Health Policy and Systems Research									Adams, V., Novotny, T. E., & Leslie, H. (2008). Global health diplomacy. <i>Medical anthropology</i> , 27(4), 315-323. WHO. (2014). Health in All Policies (HiAP) framework for country action; 2014. Gilson L. Health policy and systems research: a methodology reader. WHO; 2012. ISBN 978 92 4 150313 6. Loewenson R (2013). Activism for health. <i>The Lancet</i> , 381(9884):2157.
--	--	--	--	--	--	--	--	--	--

L- Lecture; FW- Field work; FV - Field Visit; CS - Case study; GW- Group work; SS- Self-study; SP- Seminar presentation; P-Practical

Evaluation - As per CBCS guidelines, this course will be evaluated for 100 marks with a Continuous Evaluation (CA) component of 40 marks and End-Semester Evaluation (ESA) component of 60 marks.

Additional readings:

1. Ramani, K. V., & Mavalankar, D. (2006). Health system in India: opportunities and challenges for improvements. *Journal of health organization and management*.
2. De, P., Dhar, A., & Bhattacharya, B. N. (2012). Efficiency of health care system in India: an inter-state analysis using DEA approach. *Social Work in Public Health*, 27(5), 482-506.
3. Krupp, K., & Madhivanan, P. (2009). Leveraging human capital to reduce maternal mortality in India: enhanced public health system or public-private partnership? *Human Resources for Health*, 7(1), 1-8.
4. Lakshminarayanan, S. (2011). Role of government in public health: Current scenario in India and future scope. *Journal of Family and Community Medicine*, 18(1), 26.