

# Category V

## Common List of Generic Electives (GE)

### Generic Elective (GE) 10 Sociology of Public Health

#### GENERIC ELECTIVE COURSE 10 (GE- 10): Sociology of Public Health

#### CREDIT DISTRIBUTION, ELIGIBILITY AND PRE-REQUISITES OF THE COURSE

Course title & Code	Credits	Credit distribution of the course			Eligibility criteria	Pre-requisite of the course (if any)
		Lecture	Tutorial	Practical/ Practice		
<b>GE 10 Sociology of Public Health</b>	<b>4</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>12<sup>th</sup> Class Pass</b>	<b>Nil</b>

#### Learning Objectives:

1. The course introduces students to public health and its interlinkages with various social determinants.
2. It familiarises students with contemporary concerns and challenges with respect to public health in India.

#### Learning outcomes:

Students will be able to:

1. Examine and comprehend public health and the varied social determinants of health.
2. Develop a theoretical understanding of health in society and assess the social determinants of health.
3. Evaluate the health systems in terms of new public health initiatives and innovative technologies.

#### SYLLABUS OF GE 10 : Sociology of Public Health

##### Unit I. Introduction to Public Health (9 Hours)

*This unit introduces the students to the concept of public health from a sociological perspective.*

##### Unit II. Theoretical Approaches to Public Health (6 Hours)

*This unit discusses the ways in which public health has been conceptualised.*

##### Unit III. Social Determinants of Public Health (6 Hours)

*This unit discusses how non-medical factors influence health outcomes.*

##### Unit IV. Contemporary Issues (24 Hours)

*This unit discusses the contemporary concerns and challenges to public health in India.*

**Practical Component: NIL**

**Essential/Recommended Readings:**

**Unit I. Understanding Public Health**

Abel J, Kellehear A. (2023). Public Health Reimagined. *Lifestyle Med.* e76. Pp. 1-8.

Craig R. Janes and Kitty K. Corbett. (2009). ‘Anthropology and Global Health’ in *Anthropology and Global Health*. Simon Fraser University, Burnaby, British Columbia. Pp. 167-183.

Naraindas, Harish. (2020). Past and Present. *The India Forum*. 30 April 2020. Available at <https://www.theindiaforum.in/amp/article/past-and-present->

**Unit II. Theoretical Approaches to Public Health**

Lupton, Deborah (2003). ‘Medicine as Culture: Illness, Disease and the Body in Western Societies’ in *Medicine as Culture: Illness, Disease and the Body in Western Societies*. New Delhi: Sage Publications. Chapter 1. Pp. 5-22.

Priya, R. (2021). ‘Critical Holism As Public Health Theory: Towards A Unifying Framework For Research, Policy And Planning’ in *Dialogue: Science, Scientists and Society*, 4, 1-29.

**Unit III. Social Determinants of Public Health**

Navarro, Vicente. (2009). Social Determinants Of Health: What We Mean By Social Determinants Of Health. *International Journal Of Health Services*. Volume 39. Number 3. Pp. 423–441.

Qadeer, I. (2021). Rebuilding India’s Public Health. *Special Issue on The Deepening of Disciplinary Content: Public Health in Post-COVID India*.

**Unit IV: Contemporary Issues**

**a. Emerging Concerns:**

Chakravarty S. (2022). Anthropological Research in Public Health Emergencies in India: Current challenges and Future Opportunities. *Anthropol Open J.* 2022. 5(2). Pp 43-51.

Grover, A. and R. B. Singh. (2020). Health Policy, Programmes and Initiatives. In Grover, A. and R. B. Singh. *Urban Health and Wellbeing, Advances in Geographical and Environmental Sciences*. Pp. 251-265

World Health Organisation. 2021. *World Health Statistics. Monitoring Health for The SDGs Sustainable Development Goals*. WHO. Pp. 1-34; 58-79.

(The concerned faculty teaching the paper may look at the latest WHO report that is available.)

### **b. Public Private Partnerships**

Baru, Rama V. and Madhurima Nundy. (2008). Blurring of Boundaries: Public-Private Partnerships in Health Services in India. *Economic and Political Weekly* , Vol. 43, No. 4 (Jan. 26 - Feb. 1, 2008). Pp. 62-71.

Datta, Amrita. 2009. Public Private Partnerships in India: A Case of Reform? *Economic and Political Weekly*, Vol. XLIV. No. 33. Pp. 75-78.

### **c. Digital Health**

Tan, S., & Lim, J. (2023) 'Digital Solutions to Public Health Issues' in *Oxford Research Encyclopedia of Global Public Health*.

Dahdah, Marine Al and Rajiv K. Mishra.(2022). 'Digital Health For All: The Turn to Digitized Healthcare in India' in. *Social Science & Medicine*, Volume 319. <https://doi.org/10.1016/j.socscimed.2022.114968>.

### **Suggested Readings:**

Turner, B. S. (1995). *Medical Power and Social Knowledge*. Sage Publications.

Freund, P. E. S., McGuire, M. B., & Podhurst, L. S. (2003). *Health Illness and the Social Body: A Critical Sociology* (4th ed.). Prentice Hall.

Deborah, L. (2013). *Digitized Health Promotion: Personal Responsibility for Health in the Web 2.0 Era* (Working Paper No. 5). Sydney Health & Society Group.

Mishra, Arima (ed.). (2010). *Health, Illness and Medicine: Ethnographic Redings*. Delhi: Orient Black Swan.

Kuhlmannhe, Ellen and E. Annadale (ed.). (2010). *Palgrave Handbook of Gender and Healthcare*. London: Palgrave Macmillan

Tripathy, G. T., Jalan A., Shankardass M. K. (ed). (2021). *Sociological Reflections on the Covid-19 Pandemic in India: Redefining the Normal*. Singapore: Springer.

**Note:** Examination scheme and mode shall be as prescribed by the Examination Branch, University of Delhi, from time to time.