

SES's L.S. RAHEJA COLLEGE OF ARTS AND COMMERCE (AUTONOMOUS)

Syllabus for Approval	BoS meeting held on: 28.3.25	AC meeting held on:
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Board of Studies: SOCIOLOGY

Sr. No.	Heading	Particulars
1	Nomenclature of the Course	Public Health and Policy
2	Eligibility for Admission	FYBA Pass
3	Passing Marks for eligibility	FYBA Pass
4	Regulations	College Regulations on Admission
5	Programme	B.A
6	Semesters	Semester: IV
7	NEP Vertical	Minor
8	Credit	Four (4)
9	Level U.G/PG	UG
10	Pattern	Semester
11	Status (Revised or New) If revised, % of change)	New
12	To be implemented from Academic Year	From the Academic Year: 2025-2026

Dr. Samya Shinde

Date:

Chairman / Chairperson:

(Name & Signature)

SES's L.S. RAHEJA COLLEGE OF ARTS AND COMMERCE (AUTONOMOUS)



BOARD OF STUDIES: SOCIOLOGY

PROGRAMME: B.A

SEMESTER: IV

NOMENCLATURE OF THE COURSE: Public Health and Policy

NEP Vertical: Minor

Credit: 4

(As Per Choice Based Credit System (under NEP 2020) with effect from the academic year 2024-25)



Programme:	B.A
Nomenclature of the Course	Public Health and Policy
Total Marks	100 marks
Semester:	IV
Academic year	2025-26

LEARNING OBJECTIVES:	• Understand public healthcare, including its delivery, rural-urban disparities, and privatization. • Evaluate healthcare management, focusing on community health, social epidemiology, and hospitals as social systems. • Examine health policies, environmental health linkages, and major public health programs in India. • Explore emerging health issues, including reproductive health, malnutrition, and medical tourism.
COURSE OUTCOMES:	• Analyze public healthcare in India, assessing rural-urban differences and privatization. • Critically evaluate healthcare management, including community health, social epidemiology, and hospitals. • Assess health policies, environmental health, and major public health programs in India • Investigate emerging health issues, including reproductive health, malnutrition, and medical tourism.

Unit	Course Content	Andragogy	No of Lectures
1	Understanding Public Health Care in India a. Delivery of Public Health Care in India b. Rural and Urban Health Care in India c. Privatization of Health Care in India	-Readings -Case studies -discussions - field visits - policy review	15
2	Management in Health Care a. Community Health and Medicine b. Social Epidemiology c. Hospital as a Social System	-Readings -Group discussions and community health field visits.	15
3	Health Policy and Public Health Programmes in India a. National Health Policy b. Linkages between Environment and Health c. Major Public Health Policies and Programmes in India	-Policy review -debates -field visits -comparative reviews and guest lectures.	15
4	Emerging Issues in Health Care a. Reproductive Health Care b. Malnutrition and Health c. Medical and Health Tourism in India	-Policy reviews -Documentary screenings - case studies -class room discussions.	15

RECOMMENDED/ SUGGESTED READINGS and REFERENCES

- Baru RV. Challenges for regulating the private health services in India for achieving universal health care. *Indian J Public Health*. 2013 Oct-Dec;57(4):208-11. doi: 10.4103/0019-557X.123243. PMID: 24351380
- Gangolli Leena, Ravi Duggal, Abhay Shukla 2005 Review of Health Care in India
CEHAT Mumbai.
- Goel, S. (2007). From Bhore Committee to National Rural Health Mission: A critical review. *The Internet Journal of Health*, 7(1).
- Government of India, Ministry of Health and Family Welfare. (2017). *National health policy 2017*. New Delhi, India. <https://www.nhp.gov.in>
- Government of India, Ministry of Health and Family Planning. (1983). *National health policy 1983*. New Delhi, India.
- Government of India, Ministry of Health and Family Welfare. (2002). *National health policy 2002*. New Delhi, India.
- Marwah, V., & Naidu, S. (2011). Reinventing reproduction, re-conceiving challenges: An examination of assisted reproductive technologies in India. *Economic and Political Weekly*, 46(43), Pp. 104–111.
- Nagla, M. (2018). *Sociology of health and medicine*. Rawat Publications.
- Patel, T. (2012). Global standards in childbirth practices. In V. Sujatha & L. Abraham (Eds.), *Medical pluralism in contemporary India* (pp. 232–254). Orient Black Swan.
- Qadeer, I. (2011). *Public health in India*. Danish Publishers.
- Sahoo, N., Kujur, J., Iohana, S. 2024. *Viksit Bharat @2047: Developed India*. New Delhi: New Century Publications.
- Sujatha, V. (2020). *Sociology of health and medicine*. Oxford University Press.
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QUESTION PAPER PATTERN

(A) FOR CONTINUOUS EVALUATION

(A-1) RUBRICS FOR CONTINUOUS EVALUATION

Public Health and Policy - 40 Marks

Sr No.	Examination Method	Marks	Marking Scheme	Criteria
1	Presentation	10	Subject knowledge- 6marks, Presentation skills – 4 marks	Poster Presentation, PPT
2	Project/ Review article/ Documentaries review / Report writing	20	Subject knowledge – 10 marks, Content – 6 marks, Presentation-4 marks	Topic will be given by faculty
3	Class Participation	5	Excellent – 5 marks, Good – 3 to 4 marks, Satisfactory – 1 to 2 marks	Attentiveness, Response & Behavior of student in class
4	Viva-Voce	5	Based on performance	
		40		

B)

QUESTION PAPER PATTERN FOR SEMESTER END EXAMINATION

Maximum Marks: 60

Duration: 2 Hours

The question paper will have a total of five questions

All questions would be compulsory and there would be an internal choice in the first four questions.

The last question would be on concepts. Students will have a choice of attempting any four out of six Concepts.

Question No.	Description	Total Marks
1	Essay Type Questions (Attempt Any One out of two Based on Unit I)	12
2	Essay Type Questions (Attempt Any One out of two on Unit II)	12
3	Essay Type Questions (Attempt Any One out of two on Unit III)	12
4	Essay Type Questions (Attempt Any One out of two on Unit IV)	12
5	Concepts: Attempt any 4 out of 6 given (3 marks each)	12