

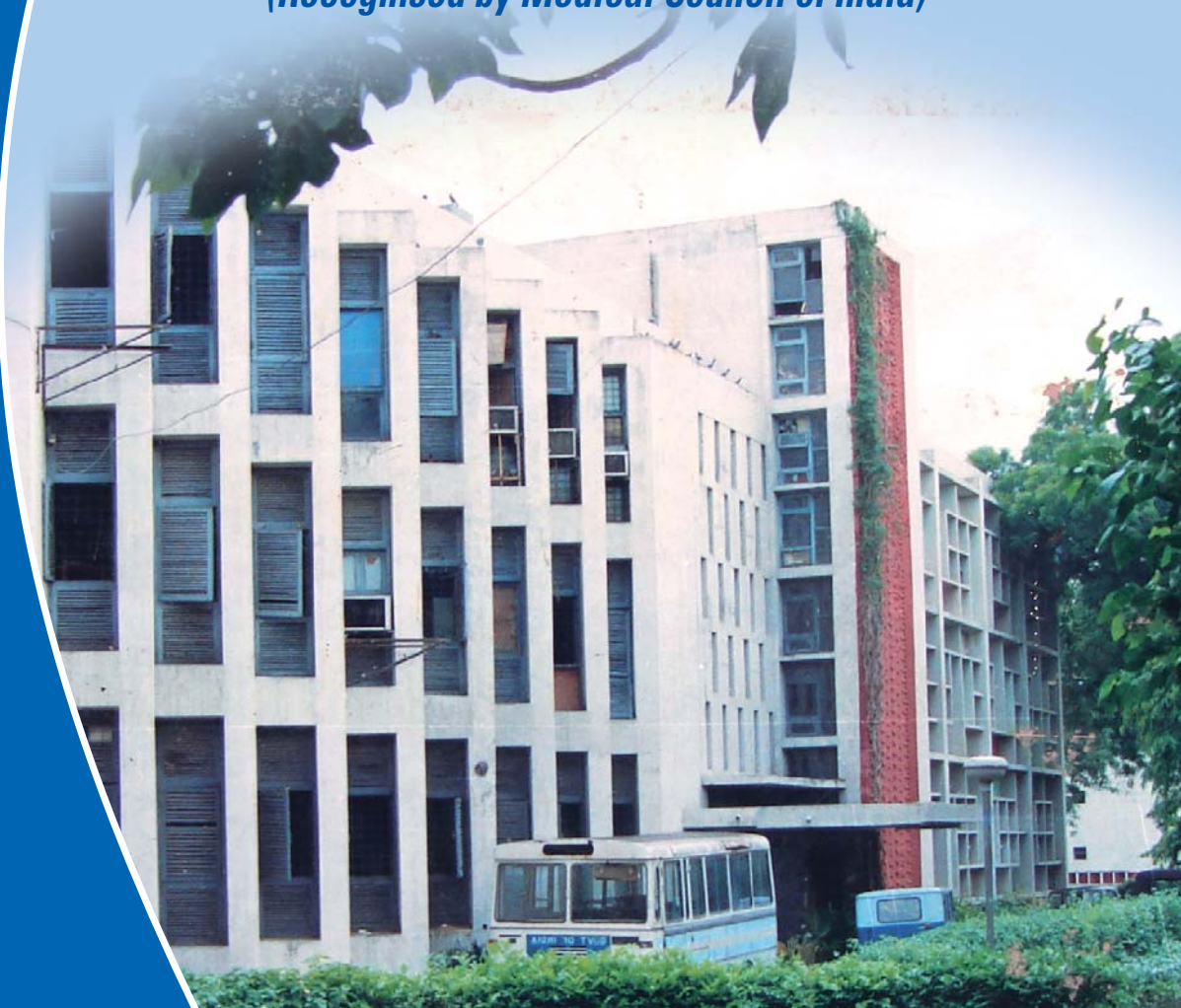


SYLLABUS

Post Graduate Diploma in Health Education

University of Delhi

(Recognised by Medical Council of India)



Central Health Education Bureau

Directorate General of Health Services

Ministry of Health & Family Welfare

Kotla Road, New Delhi - 110002

Website: www.cheb.nic.in • email : dir.cheb@nic.in



SYLLABUS

**Post Graduate Diploma in
Health Education & Promotion (DHEP)
University of Delhi
Recognised by Medical Council of India**



C.H.E.B.

**Central Health Education Bureau
Directorate General of Health Services
Ministry of Health & Family Welfare
Kotla Road, New Delhi - 110002**



Dr. R. K. SRIVASTAVA
M.S. (Ortho) D.N.B. (PMR)
DIRECTOR GENERAL

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FOREWORD

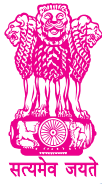
The Central Health Education Bureau (CHEB) is conducting Post Graduate Diploma in Health Education (DHE) Course under affiliation to the University of Delhi and recognized by the Medical Council of India (MCI) since 1971. The DHE Course was designed to prepare Health Education Specialists in the country keeping in view the health needs of the country and technology available at that time. Since then, a lot of changes took place, both, in the knowledge and practice of health promotion and health education in the world as well as in India.

The success of primary health care and the recently launched National Rural Health Mission (NRHM) greatly depend on the practice and implementation of Health Promotion and Health Education in true spirit. To achieve this objective, trained professional manpower equipped with latest knowledge, skills and competencies in this field is very essential, which necessitated an in depth updating the present DHE Course.

Since, Health Promotion and Education serves as backbone for a healthy nation; it is necessary that all such concerned institutions, departments and programmes are headed and guided by the concerned specialists. The Dte. GHS, GOI is fully committed to strengthen the Health Education and promotion in the country and to strengthen the CHEB to as a National Level Institute to meet the National as well as International Challenges of Health Education and Promotion, as a Centre of Excellence in South East Asia Region. The right mixes of eminent experts who have committed in this workshop brought out a curriculum that will help create Health Promotion & Education workforce in our country.

In this direction, the Central Health Education Bureau (CHEB) with the collaboration of World Health Organization (India) conducted a **National Workshop to review and update the present Course of Postgraduate Diploma in Health Education (7-9th December 2005)**. I appreciate the sincere and dedicated efforts made by the Central Health Education Bureau for conducting this workshop by involving eminent experts from diverse fields and bringing out this report and updated DHEP Syllabus, which will go a long way in the development of Health Education and Promotion in our country.

Dr. R .K. Srivastava



Government of India
Ministry of Health & Family Welfare
स्वास्थ्य एवं परिवार कल्याण मंत्रालय

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PREFACE

The Central Health Education Bureau (CHEB), which was set up in the year 1956 on the recommendations of the Bhore Committee and the Planning Commission, is one of the wings of the Directorate General of Health Services (Dte. G.H.S.), Ministry of Health & Family Welfare (MOH&FW), Govt. of India (GOI). It plans and formulates programmes for the promotion of health education in the country through organizing training programmes to prepare health education professionals; conducts behavioural research studies in the field of health education & promotion; provides training in social research methods to the health professionals; provides training to the teachers, para- medical personnels for promoting health education activities. Production of various printed and electronic mass media material & educational aids is another important function of CHEB.

With a view to develop health education specialists, the CHEB has been conducting a Post Graduate Diploma Course in Health Education, popularly known as **DHE Course** since 1971, affiliated to University of Delhi and recognized by Medical Council of India (MCI). It was initially of one-year duration and was later extended to a two-year postgraduate diploma as per the directions of MCI. The DHE course is open to both medical and non-medical candidates.

There have been tremendous developments in the field of health education, promotion as well as communication technology & methodology over the years. Besides, the health scenario has also changed a lot due to emergence of new infections, re-emergence of various infections and rising upward trend of non-communicable diseases globally. In order to meet the challenges of the triple burden on our society, there is a need to prepare the specialists equipped with latest technology and the skills in the field of Health Education and Health Promotion.

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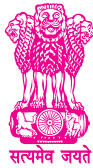
In view of the above, the CHEB organized a National Workshop to review and update the DHE Course from 7-9th December 2005, in collaboration with WHO (India) at New Delhi.

Relevant disciplines and institutions from the country i.e. Biostatistics, Nutrition, Social Sciences, Health Management, Public Health, Multi- media/Computer Animation, Information Technology, National Health Programmes including Mental Health, AYUSH, Oral Health, Operational Research, Environmental Health, Disaster Management, Science Communication, Delhi University and Medical Council of India etc. deliberated on the objectives of this National workshop and made recommendations on the course nomenclature, structure, and contents of the syllabus of the course and all such positions which demand the placement of DHE qualified professionals.

We hope that the recommendations of the workshop and the updated syllabus of the DHE Course, recommended to be renamed as Diploma in Health Education and Promotion (DHEP), will facilitate the requisite strengthening of Health Education and Promotion initiatives in our country in order to achieve the objectives of National Health Policy 2002, National Population Policy 2001 and National Rural Health Mission 2005.



(Dr Ashok Kumar)



Government of India
Ministry of Health & Family Welfare

भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय

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Kotla Road, New Delhi - 110002

ACKNOWLEDGMENT

A National Workshop to review and update MCI recognized & under Delhi University PG DHE course was organized from 7-9th December, 2005 with the support of WHO (India).

CHEB would like to express sincere gratitude to Dr. R.K. Srivastava, Director General of Health Services, Govt. of India, for his vision and valuable guidance in the organization of this Workshop of National relevance. Sincere thanks are also due to Dr. Shiv Lal, Addl. Director General of Health Services, Govt. of India who took keen interest and spared his valuable time for inaugurating the workshop and showing his concern by offering valuable suggestions and words of encouragement.

CHEB would like to place on record its sincere thanks to the World Health Organization for facilitating the conduct of the National workshop. In this context, CHEB also express high gratitude to Dr. Davison Mundawafa, Advisor, Health Promotion and Education, WHO, South East Asia Regional Office, New Delhi; Dr. Cherian Verghese NPO ; and Dr. (Ms) Kavita, WHO- India country office, Nirman Bhawan, New Delhi, for their valuable & active contribution during the workshop .

Our sincere thanks are also due to Dr. Vijaya Shankara Verma, Dean (Planning), representing Pro-vice Chancellor for his constant support and also for words of encouragement for successful organization of the workshop.

We also appreciate Dr. V.K.Gupta, Chairman, Committee on Courses and Studies, University of Delhi; and Dr. Davender Kumar, Deputy Secretary, Medical Council of India for offering their valuable contributions during the workshop and subsequently facilitating the finalization of DHEP syllabus.

This tremendous National task would not have been accomplished without the whole hearted technical support of various experts from (i) WHO ii) Delhi University (iii) JNU (iv) IGNOU (v) Institute of Human Behavior and allied Sciences (vi) Nutrition Advisor, ICMR HQ (vii) NICD, (viii) NIC (ix) MCI (x) RNTPC (xi) NVBDCP (xii) NCD Programme (xiii) NLEP (xiv) AIIMS (Deptt. of Dental Surgery) (xv) Department of Operational Research D.U. (xvi) AYUSH and (xvii) LHMC. Therefore, we are indeed thankful to all of them for their contributions.

We would also like to avail the opportunity to express our sincere thanks to Dr. PH Ananthanarayanan, Director AIIH & PH Kolkata, Dr. S.D. Kharpade Director, FW T & RC, Mumbai, DR (Ms) Lalitha Kabilan Director GIRHFT, Annathrai, Dindigul, Tamil Nadu ; for sharing methodology and course details of their DHE course and offering valuable suggestions for enrichment of DHE Course of CHEB.

We also appreciate the efforts put in by the members of the **Core Group** which was specifically constituted for further looking into the recommendations and subsequently facilitating updated draft of the DHEP syllabus with a view to finalize the DHE P Syllabus. The Core Group Consists of members; 1. Dr V.K.Gupta, Chairman 2. Dr Devendra Kumar, 3. Dr (Mrs) Rama Baru, 4. Dr. S.B.Arora, 5. Prof. Davidson Mundawafa, 6. Dr Cherian Verghese, 7. Dr (Mrs.) Rita Nagpal, 8. Dr (Mrs.) Nalini Agarwal, 9. Dr. S.K.Satija, Member Secretary 10. Mrs G. Saraswathy, 11 Mr S. P. Rao, 12. Dr. V.K.Pandey.

We are also thankful to the Dr. P.L. Sanjeev Reddy, Director IIPA for providing us the infrastructure facilities for successful conduct of the National Workshop.

We also express our gratitude to the Director, CHEB for his dynamic leadership and valuable guidance for the success of the workshop as well as showing his concern for the finalization of the report and updated syllabus of the DHEP course.

At the last but not the least, we would like to avail this opportunity of conveying our heartiest and sincere thanks to all the officers & staff of CHEB who had contributed their best to make this workshop a grand success.



(Dr. Surinder Kumar Satija)

1. Background

The Central Health Education Bureau (CHEB), which was set up in the year 1956 on the recommendations of the Bhore Committee and the Planning Commission, is one of the wings of the Directorate General of Health Services (Dte. G.H.S.), Ministry of Health & Family Welfare (MOH&FW), Govt. of India (GOI). It plans and formulates programmes for the promotion of health education in the country, organises training programmes to prepare health education professionals; conducts behavioural research studies in the field of health education & promotion; provides training in social research methods to the health professionals; provides training to the teachers, para-medical personnels for promoting health education activities. Production of various printed and electronic mass media material & educational aids is another important function of CHEB.

With a view to develop health education specialists, the CHEB has been conducting a Post Graduate Diploma Course in Health Education, popularly known as **DHE Course** since 1971, affiliated to University of Delhi and recognized by Medical Council of India (MCI). It was initially of one-year duration and was later extended to a two-year post graduate diploma as per the directions of MCI. The DHE course is open to both medical and non-medical candidates.

The syllabus for DHE Course was prepared in the year 1971, keeping in view the health scenario prevalent at that time. After more than three decades, the health needs of the country have changed immensely due to various factors like epidemiological transition, changing life styles, advanced methodologies as well as technologies in the field of media, information, education and in health & related sectors etc., which necessitated the immediate review and updating of DHE syllabus in order to equip the health education specialists with the latest knowledge, skills and technologies.

In the year 2006, the Post graduate Diploma Course in Health Education, (DHE) has been updated and *renamed* as ***Post Graduate Diploma Course in Health Education & Promotion (DHEP)*** in accordance with the recommendations of the National Workshop to Review and Update the DHE course held at IIPA, New Delhi from 7th to 9th December, 2005 in collaboration with WHO (India).

2. Aim and Objectives of DHEP Course

Developing health education & promotion specialists in the country, equipped with competencies /skills to :

1. assess the health education and promotion needs of the community in different settings.
2. carry out advocacy at different levels to create political will and conducive environment for social and health behavioural change.
3. plan and manage effective health education & promotion programmes through designing, implementing and evaluating behavioural and social change interventions.
4. design and develop appropriate health education and promotional aids in traditional and modern media for facilitating interpersonal and mass communication for effecting health behavioural change.
5. mobilize resources and elicit community participation and inter - sectoral coordination for effective health educational and promotional programmes.
6. plan, conduct and evaluate training programmes for building capacities of human resources at different levels in health and related sectors.
7. plan and conduct need based, action oriented social and behavioural research studies on health education and promotion, health behavioural related problems; health educational technologies, aids & approach.

3. Eligibility for Admission to the Course

- Recognized Bachelor's Degree in Medicine and Surgery, in the field of Allopathy/ Ayurveda/ Unani / Siddha/ Homeopathy and Dental surgery.

or

- Recognized Bachelor's degree in the field of Nursing/ Pharmacy/Physiotherapy/ Hearing and Speech Therapy/ Rehabilitation /other Public Health allied subjects with at least one year working experience in respective fields.

or

- Recognized Master's Degree in. Psychology / Sociology / Anthropology / Economics / Social Work / Political Science /Education/ Population Sciences/Life Sciences/Disaster Management /Environmental Science/ Mass Communication/ Bio-Statistics with at least one year working experience in medical and health fields.
- Preference will be given to those candidates who are in service in government/ registered non-governmental sectors.

4. Course Details

1. The Post Graduate Diploma Course In Health Education & Promotion (DHEP) is a full time regular course of 2 years duration (2400 hours – **Theory** : 960 hours **Practical** : 1440 hours).
2. The DHEP course comprises following four theory papers:
 - (I) Public Health Administration and National Health programmes.
 - (II) Basic Sciences in relation to Health Education and Promotion.
 - (III) Social, Behavioural Sciences and Research foundations for Health Education & Promotion.
 - (IV) Communication for Health Education & Promotion.
3. The practical training component of DHEP course comprises the following :
 - (i) Supervisory Field Training (S.F.T.)
 - (ii) Concurrent Field Training (C.F.T.) which includes project work and Report writing

5. Instructional Methodology

Lecture, Discussion, Assignments, presentations, Institutional visits, Demonstration, Epidemiological exercises, industrial tours, community diagnosis, Project work, field work, Report writing etc.

6. Evaluation

- (i) The performance of students shall be evaluated in the following manner for award of post-graduate diploma in Health Education and Promotion (DHEP):

Internal assessment = 50 Marks

Final University examination = 550 marks

600 marks

- (ii) Internal assessment shall be done on the basis of routine weekly/ monthly assignment, presentations etc.
- (iii) The final university examination consists of 600 marks. The break up of the marks is as follows:

1	Theory Papers	Total marks	Minimum Qualifying marks	Remarks
2	Paper I	100	40	Aggregate 50% in 4 theory papers i.e. 200 marks.
	Paper II	100	40	
	Paper III	100	40	
	Paper IV	100	40	
2	Project Work & Internal Assessment	50	25	—
		50	25	
3	Practical & Viva Voce	100	50	—
	Total	600	300	—

Paper – I: PUBLIC HEALTH ADMINISTRATION AND NATIONAL HEALTH PROGRAMMES

**Total Marks: 100
Total Hours: 240**

1. Public Health Administration – 120 Hours

S.NO.	Learning Units of Public Health Administration	Hours Allotted
1.1	Community Medicine, Health Care Delivery System.	20 Hours.
1.2	Health Planning in India	20 Hours
1.3	Health Services Organization	20 Hours
1.4	Management for Health Education Programmes	20 Hours
1.5	Health Legislation	20 Hours.
1.6	International Health	20 Hours

2. National Health Programmes – 120 Hours

S.NO.	Learning Units of National Health Programme	Hours Allotted
2.1	National Health Programmes	33 Hours
2.2	Maternal and Child Health (MCH)	20 Hours
2.3	Family Planning/Welfare	20 Hours.
2.4	Schools, Adolescent Health and Population Education	40 Hours
2.5	Oral health	3 Hours
2.6	Geriatric Health	4 Hours

- 1.1.5 Comprehensive Health Care.
- 1.1.6 Health Insurance, ESIC, CGHS.
- 1.1.7 Dispensaries and Hospitals, Primary Health Care, Sub-Center.
- 1.1.8 Rehabilitation Services
- 1.1.9 Health Financing

Learning Unit 1.2 : Health Planning in India **20 Hours**

Learning Objective: The student will be able to describe the recent trends in the provision of health care services.

Contents:

- 1.2.1 History of Health Planning in India.
- 1.2.2 Health survey and development (Bhore) committee report.
- 1.2.3 Health Survey and planning (Mudaliar) committee report.
- 1.2.4 National Plans, Planning Commission and Five Year Plans: Social service Component and health, achievement, shortcomings and reasons thereof. Chadha Committee and Mukherjee Committee reports. Kartar Singh Committee Report on multipurpose workers scheme,
- 1.2.5 National Health Policy, 1983, 2001,
- 1.2.6 Recent developments in health planning in India.

Learning Unit 1.3 : Health Services Organization **20 Hours**

Learning Objective: The student will be able to:

1. describe the organizational set up and functions of the health services at various levels.
2. identify the roles and functions of health personnel at various levels; including their role and function in health education and promotion.
3. identify the contribution that a professional Health Education specialist/ health educator can make in bringing about a coordinated action between health and other agencies.

Contents:

- 1.3.1 Constitution of India; rights and privileges regarding Health; Union, Concurrent and States lists.
- 1.3.2 National set up, functions of Central Council of Health and Family welfare
- 1.3.3 Union Ministry of Health and Family Welfare; Directorate General of Health Services, Central Health Education Bureau.
- 1.3.4 State level set up, Health Department; Directorate of Health Services: State Health Education Bureau.
- 1.3.5 Intermediate (including regional and sub-district) level set up; administration and co-ordination.
- 1.3.6 Local levels; urban roles and functions of different types of Health Organizations.
- 1.3.7 Rural, democratic decentralization (Block, Panchayat Raj), Primary Health Center set-up.
- 1.3.8 Functions and roles of personnel at different levels.
- 1.3.9 Role of professional Health Education Specialist/Health Educator.
- 1.3.10 Mobilization of community resources.
- 1.3.11 Role of Professional bodies e.g., MCI, IMA, DCI, NCI, and IPHA etc.
- 1.3.12 Role of Profit & non profit agencies.

Learning Unit 1.4 : Management for Health Education Programmes

20 Hours

Learning Objective: The student will be able to :

1. define his own role and state the roles of the other members of the health team;
2. describe and apply the management techniques relevant to health sector.
3. demonstrate skills pertaining to the supervision of health personnel.
4. realize the importance of motivation and coordination in personnel management;
5. identify the need for staff development of those whom he supervises;
6. demonstrate skills to maintain harmonious relationship with the community for eliciting community participation.

Contents:

- 1.4.1 Principles of organization; Behavioural approach, human factors; authority, power and influence. General Managerial aspects applicable to Health Administration, e.g. men, money, resources. .
- 1.4.2 Delegation of duty and authority; obligating as a part of delegation; obstacles in delegating and in accepting.
- 1.4.3 Staff functions, Line Functions.
- 1.4.4 Communication principles applicable to management: techniques of communications; orders, manuals and guides:
- 1.4.5 Control, process and requirement; Management information system
- 1.4.6 Supervision-goals and functions; leadership and supervision.
- 1.4.7 Human Resource Management, Finances, Budgeting.
- 1.4.8 Material management.
- 1.4.9 Public relations and reporting.
- 1.4.10 Alternative Health Financing Mechanisms – NGOs & other such agencies, both profit, non-profit

Learning Unit 1.5 : Health Legislation

20 Hours

Learning Objective: The student will be able to :

1. explain the public health laws in the country.
2. state the difficulties (Challenges) encountered in the enforcement of these laws.
3. describe the importance of (Opportunities) community participation for the enforcement of these Laws.

Contents:

- 1.5.1 Public health laws need and scope, Historical development
- 1.5.2 Municipal acts,
- 1.5.3 Birth and Death Registration Act
- 1.5.4 Prevention of Food Adulteration Act
- 1.5.5 Indian Drugs and Cosmetics Act
- 1.5.6 The role of community participation in effective enforcement of these laws
- 1.5.7 Consumer Protection Act with latest amendments in relation to public health
- 1.5.8 MTP, PNDD, age at marriage.

Learning Unit 1.6 : International Health

20 Hours

Learning Objective: The student will be able to-

1. explain the International health regulations relating to the control of Diseases.
2. describe the objectives and *modus operandi* of different International agencies in providing assistance with regard to health programmes.
3. co-ordinate with and plan out workshops & plan projects in collaboration with International Agencies i.e. GOI- International Agencies Collaborative Project Plans.

Contents:

- 1.6.1. Interdependence in health, International health regulations-scope, objectives and functioning.
- 1.6.2. WHO constitution, objectives, plans of operation, assistance.
- 1.6.3. UNICEF, constitution, objectives, functions, roles, various programmes.
- 1.6.4. Other agencies like USAID, Colombo Plan, Common Wealth, FAO, ILO, Spanish and Russian aid in various health programmes in country.
- 1.6.5. Multilateral, bilateral and other agencies e.g., Rockefeller Foundation, Ford Foundation, Population Council other foundations and Professional Organizations like DFID, EU etc.
- 1.6.6. Global initiatives for primary Health Care-Health Promotion & Education Alma atta, Ottawa, Bangkok Charter on primary health care etc.

Subject 2 : Public Health Programmes **120 Hours**

Learning Unit 2.1 National Health Programmes **28 Hours**

Aim : Equipping the students with knowledge on various National Health Programmes in order to enable them to organize various health education and promotion programmes.

Learning Objective: The student will be able to :

1. state the various components of National Health Programmes; and
2. identify the nature and magnitude of problems for implementation of health education and promotion programmes in the community.
3. explain about Organization structure, operational strategy with special emphasis on IEC.
4. describe the crucial role of health education in implementation of National Health Programmes.

Contents

- 2.1.1 Reproductive & Child Health Programme.(RCH)
- 2.1 .2 National Vector Borne Diseases Control Programme (NVBDCP).
- 2.1.3 Revised National TB Control Programme (RNTCP).
- 2.1.4 National Leprosy Eradication Programme (NLEP).
- 2.1.5 National Aids Control Programme (NACP)
- 2.1.6 National STD Control Programme.
- 2.1.7 National Yaws Eradication Programme.

NON COMMUNICABLE DISEASES (NCB)

- 2.1.8 National Rural Health Mission
- 2.1.9 Integrated Disease Surveillance Programme
- 2.1.10 National Iodine Deficiency Disorders Control Programme (NIDDCP).
- 2.1.11 National Cancer Control Programme.
- 2.1.12 National Mental Health Programme.
- 2.1.13 National Diabetes Control Activities
- 2.1.14 Tobacco Control Activities
- 2.1.15 Drug – De-addiction Programme
- 2.1.16 National Blindness Control Programme
- 2.1.17 Cardio-vascular & Cerebro – vascular Diseases Control Activities
- 2.1.18 Lung diseases Control Activities
- 2.1.19 Trauma and Injuries Prevention and Management Activities
- 2.1.20 Deafness Control Programme
- 2.1.21 Health Care of Elderly

Learning Unit 2. 2 Maternal & Child Health / Family Welfare

20 Hours

Learning Objectives: The student will be able to:

1. describe the organization of Maternal and Child Health Services at various Levels;
2. identify the factors responsible for the under-utilization/ utilization of these services;
3. identify the opportunities and organize programmes for health education in Maternal and Child Health Services.
4. state the causative factors of maternal & infant morbidity & mortality.
5. describe the latest strategies and approaches being followed in Maternal and Child Health Services in the country

Contents:

- 2.2.1 Organizational set up of Maternal and Child Health Services, Historical Development of MCH Services, Organizational set up at centre, state, district and block levels. Comparison of set up of MCH services in various states.
- 2.2.2 Maternal Care:- Components of maternal care, Antenatal care, Natal care, Post-natal care, Immunization in maternal care, Nutrition in maternal care. Maternal morbidity and mortality, Causes, Preventive measures.
- 2.2.3 Infant & Child care:- care of newborn, care of infant, Components of child care, care of child from 1 to 5 years, Immunization in child care, Nutrition in child care, care of handicapped children and rehabilitation; services available for child care at various levels. Childhood morbidity and mortality Causes; Preventive measures.
- 2.2.4 Problems in utilization of Maternal and Child Health Services and corrective measures required
- 2.2.5 Health education for promotion of Maternal & Child Health Services Identification of educational opportunities in various settings; assisting other health personnel in education for Maternal and Child Health.
- 2.2.6 New initiatives in the field of Maternal and Child Health.

Learning Unit 2.3 : Family Planning / Family Welfare 20 Hours

Learning Objective: The student will be able to:

1. explain the evolution of family planning / family welfare programme in India.
2. describe the goals of the family planning / family welfare programme and the services provided under this programme.
3. describe the family planning / family welfare organizational set-up and the functions of the personnel at different levels.
4. enumerate the various methods of contraception and sterilization and explain advantages and limitations of each method.
5. explain implications of the Medical Termination of Pregnancy Act (MTP) and the problems in the implementation of this act.
6. describe the causes of infertility and the need for investigation and redressal of related issues.
7. explain in simple language about the need for family planning and the various methods of contraception and sterilization;
8. identify the educational opportunities in the family planning / family welfare programme;
9. plan, conduct and evaluate educational programmes for the family planning / family welfare.

Contents:

2.3.1. Family planning programme in India.

History and Development; Family Planning Programme in the post independence period; Family Planning programme in the Five Year Plans.

2.3.2. Concept of family planning.

Integrated approach to family planning and Maternal and Child Health, need for small family size-economic, health, socio-psychological, ecological and eugenic.

- 2.3.3 **Organizational set-up of family planning programme**
Central, State, District, Block and Peripheral levels, urban set up; role of personnel at different levels under the multipurpose workers scheme; operation of post-partum hospital programme.
- 2.3.4 **Conventional methods of contraception**
Classification of methods; mechanical devices, chemical contraceptives and natural methods, advantages and limitations of each method; services available.
- 2.3.5 **Intrauterine Devices**
Various types of I.U.Ds, motivation for I.U.D. acceptance.
- 2.3.6 **Oral contraceptive methods:** Various types of oral contraceptive. Motivation for acceptance of contraceptive methods.
- 2.3.7 **Sterilization:** Permanent methods of sterilization and motivation for acceptance of sterilization.
- 2.3.8 **Medical Termination of Pregnancy**
Medical termination of pregnancy Act; problems in implementation of MTP Act; services available and role of health educator / health education specialist in counselling
- 2.3.9 **Infertility**
Causes of infertility in the male and female; need for investigation of both partners, services available.
- 2.3.10. Health Educational and promotional programmes for family planning / family welfare identification of educational opportunities for family planning / family welfare barriers in education for family planning / family welfare and problem solving.
- 2.3.11 **Educational programmes for family planning**
Role of health education specialist in planning, conducting and evaluating health educational programmes viz special campaigns, intensive drives, exhibitions, leaders orientation camps etc.

Learning Unit 2.4 : School, Adolescent Health and Population Education **35 Hours**

Learning Objective: The student will be able to:

1. describe the concept and purpose of school health and population education.
2. explain the principles of curriculum development in relation to school health and population education for different age groups.
3. identify the role and responsibilities of health personnel, teachers and parents in school health and population education programmes.
4. identify the opportunities for health and population education through schools & Colleges.
5. prepare teachers for their role in the health and population education programme in schools.
6. assess the needs for a programme for adolescent health and population education in school and colleges.
7. impart health Education in relation to life skill education /Sex Education, psychological stress education

Contents:

- 2.4.1. **Introduction to school health and population education,** component of school and population education, development of school health education and service & population education programmes in India.
- 2.4.2. **Health appraisal:** Nature of health appraisal; cumulative health record of school children, role of health personnel, teachers and parents; educational opportunities in the process.
- 2.4.3. **Healthful school living:** School sanitation including hostel sanitation-building, ventilation, lighting, protected water supply, sanitary facilities, promoting interpersonal relationship between teacher and pupil and among pupils; games and recreation facilities, child guidance; health counseling.

2.4.4. Nutrition in school health programme:

Nutrition education, feeding programmes including mid-day meals, food sanitation.

2.4.5. Preventive and curative services in schools:

School health clinic, role of medical officer in school health education, immunization, accidents and emergency services, health of school personnel, health education opportunities in the process.

2.4.6. Curriculum planning for health and population education:

(a) Need for the preparation of health and population education curriculum for different age groups, integration of health and population education in existing curriculum.

(b) **Laboratory session:** (i) The students will prepare and present curricula on health and population education for different age group. (ii) The students will prepares teaching units in health and population education for selected age groups in schools.

2.4.7. Teacher preparation for health and population Education.

(a) Teacher's roles and responsibilities in health appraisal, health instruction and health and nutrition services, curriculum analysis with special reference to health and population education.

(b) **Laboratory sessions:** The students will prepare an in-service training programme in health and populations education for teachers.

2.4.8. Adolescent Health : Healthy Life Style, Sex Education, AIDs Awareness, Mental health, Skill building

Learning Unit 2.5 : Oral Health

3 Hours

Learning Objective: The student will be able to:

1. describe different oral health problems, their epidemiology and different control measures.
2. devise programmes for community education and other social security measures

Contents:

- 2.5.1 Oral Health Problems,
- 2.5.2 Epidemiology and control measures,
- 2.5.3 Community Education for oral health promotion.

Learning Unit 2.6 Geriatric Health

6 Hours

Learning Objective : The student will be able to:

1. describe different geriatric health problems, their epidemiology and different control measures with geriatric health problems.
2. devise suitable programmes for community education and other social security measures.

Contents:

- 2.6.1 Geriatric health problems,
- 2.6.2 Epidemiology and control measures,
- 2.6.3 Disabilities of elderly and their rehabilitation,
- 2.6.4 Community Education and Social Security Measures

Paper-II

BASIC SCIENCES IN RELATION TO HEALTH EDUCATION & PROMOTION

Total Hours – 240

Total Marks – 100

S. No.	Learning Units	Hours Allotted
1.	Holistic approach to Health	5 Hours
2.	Systems of Medicine in India	5 Hours
3.	Anatomy and physiology	15 Hours
4.	Microbiology, Helminthology and Medical entomology	30 Hours
5.	Basic Epidemiological, Control of Communicable and Non-Communicable diseases	45 Hours
6.	Environmental Health	25 Hours
7.	Occupational Health	10 Hours
8.	Nutrition & Dietetics	35 Hours
9.	Concepts and Skills of Emergency Preparedness including Basic Life Support	20 Hours
10.	Health Statistics and Demography	50 Hours

Aim: Enabling students to integrate the knowledge and skills pertaining to basic sciences in health education & promotion activities.

Learning Unit 1: Holistic Approach to Health 5 Hours

Learning Objective: The students will be able to explain the holistic concept of health.

Contents:

- 1.1. Concepts of Health and disease, evolution of concept of modern medicine.
- 1.2. Definition, scope of community medicine.
- 1.3. Natural history of disease, levels of prevention.

Learning Unit 2: Systems of Medicine in India 5 Hours

Learning objectives: The student will be able to describe different systems of medicines.

Contents:

- 2.1. Definitions of various systems of medicine.
- 2.2. Approaches of these systems to health and sickness.

Learning Unit 3: Anatomy and Physiology 15 Hours

Learning Objectives: The student will be able to

1. describe the common terminology used in describing the different parts of the body.
2. state the structure and functions of the various systems of human body and their inter-relationships.
3. describe the normal structure and functioning of the reproductive system as a basis for understanding the mechanism of action of contraception and sterilization.
4. explain to the community in simple language the structure and functions of the various parts of the body in relation to the causation and prevention of diseases, and promotional health programmes.
5. demonstrate skills pertaining to anatomy and physiology for training and guiding other health personnel in their health education programmes.

- 4.2. Characteristics, growth, multiplication of different types of microbes -Bacteria, virus, fungi, rickettsiae, Mycoses, Parasites, Protozoa, Helminths, Zoonoses and their common infections
- 4.3. Animals, arthropods as sources of human disease- vector control measures
- 4.4. Diseases caused by different microbes –Bacteria, virus, fungal etc.
- 4.5. Immunity- types—natural and acquired herd immunity.- Active and passive immunization; toxoids, vaccines, antisera, *gamma* globulins.
- 4.6. Sterilization and disinfection - definition of terms; methods of sterilization and disinfection.
- 4.7. Microbiology of specific diseases i.e. SARS; Diphtheria; Pertussis; Measles; Mumps; Tuberculosis; Leprosy; Cholera; Typhoid; Bacillary dysentery; Poliomyelitis; Viral hepatitis; Malaria; Filariasis; Plague; Yaws; Bird flu and Emerging and re-emerging infectious diseases.

Learning Unit 5: Basic Epidemiology, Control of Communicable and Non-Communicable diseases 45 Hours

Learning Objectives: The students will be able to :

1. describe the concept and scope of epidemiology as an understanding of the disease process.
2. explain the role of agent, host and environment and their interaction in the disease causation.
3. apply the basic epidemiological procedures for the identification and investigations of health problems and their solution.
4. explain the methods of significance of health surveys.
5. describe the concept of health and disease and the factors involved in the spread of communicable diseases.
6. explain the occurrence, mode of spread, and manifestations of certain important communicable diseases;

7. describe the levels of prevention and the importance of specific measures applicable at each level in the prevention and control of certain important communicable diseases;
8. describe the types of immunity and the role of immunization in disease control;
9. plan & conduct a health survey during concurrent fieldwork.
10. explain in simple language the causation and mode of spread of communicable diseases and their prevention and control;
11. recognize early manifestations of some common diseases.

Contents:

- 5.1 Concept of epidemiology- Definition, concept, uses in public health. Interaction between agents, host environment; definition of terms—sporadic, endemic, epidemic, pandemic, levels of preventions.
- 5.2. Communicable diseases-Definition of communicable disease, reservoir and source of infection, mode of exit and entry of organism, channel of transmission, susceptible host, definition of terms i.e. case, carrier, reservoir, contact, fomite, vector, vehicle etc.
- 5.3. Different Basic Epidemiological Studies as tools for determination of association of various factors in diseases causation and the strength of such associations- Retrospective, prospective and experimental studies.
- 5.4. Health Surveys- Principles, uses and methods of health surveys, special surveys for screening for disease and ill health.
- 5.5. Immunity definition- concept and types of Immunities; Herd immunity and its importance in public health.
- 5.6. Immunization methods, schedule, storage of vaccines- cold chain, maintenance, side effects of immunization.
- 5.7. Classification of communicable diseases- Communicable diseases caused by inhalation, ingestion, direct contact and inoculation; Principles in control of those diseases and health education components.

- 5.8. Specific communicable disease occurrence, mode of spread, manifestations, prevention and controls of the following diseases i.e. Chicken-pox; Measles; Tuberculosis; Diphtheria; Whooping Cough; Tetanus; Cholera; Typhoid and Paratyphoid; Diarrhea; Dysentery and food poisoning; Poliomyelitis; Viral hepatitis; Helminthic diseases i.e., Hookworm, Round worm, Tapeworm and Thread-worm; Malaria, Filaria ; Leprosy, STD, AIDS/HIV, Common skin infection like, Scabies; Rabies; Trachoma and Conjunctivitis, SARS, Dengue fever Emerging and re-emerging diseases.
- 5.9 Epidemiology of non-communicable diseases their etiology, prevention, control management of following diseases : (i) Cancer (ii) Cardio vascular (iii) Blindness (iv) Renal disease (v) Neurological disorders (vi) Mental / Psychiatric disorders (vii) Muscular-skeletal disorders such as arthritis and allied disease (viii) Chronic Respiratory disease (e.g. Chronic Bronchitis, Asthma, Emphysema) Accident and Trauma (x) Dementia (xi) Diabetes (xii) Obesity and various metabolic and degenerative diseases (xiii) Disabilities resulting from communicable diseases (xiv) Oro-dental diseases (xv) Disorders of unknown cause (xvi) Substance abuse etc.

Learning Unit 6 : Environmental Health

25 Hours

Learning Objective: The student will be able to:

1. describe the environment and its relationship to health and disease;
2. describe the methods of improving the environment to promote community health and prevent disease;
3. identify the environmental factors causing health problems in the community;
4. identify the opportunities for health education in environmental health.

Contents:

- 6.1. **Introduction to the Environmental Health and its concepts-** physical, biological and social.
- 6.2. **Environmental health problem in India.-** Problems in relation to drinking water, Sanitation, refuse, fresh air, food, housing, public places and public gathering.
- 6.3. **Diseases relating to water,** Sanitation, and environmental degradation.
- 6.4. **Water and disease -** Importance of water for good health; Potable and polluted water; sources of water; Diseases transmitted through water - pollution and protection of water supply. Sources of pollution Methods of protection of water supply at source; in-storage and in distribution; Prevention of pollution in wells, hand pumps, springs, surface and rain water sanitary well, tank and pond. Purification of water for domestic and community supply. Slow and rapid filtration; Purification of water for domestic use; Chlorination of wells and hand pumps.
- 6.5. **Disposal of waste water:** waste water on a small scale and in individual house, such as soak pits and kitchen gardens. Health hazards of dampness and water stagnation; Methods of disposal of waste water on large scale- Drainage System.
- 6.6. **Environmental sanitation-**urban, rural- National schemes for the improvement of environments; Environmental sanitation in the community.
- 6.7. **Diseases transmitted through excreta.** Excreta as a source of infection, Channels of transmission and the disease transmitted. Sanitary latrine as sanitation barrier. A sanitary latrine service, trench pattern, bore-hole hand flushed, water seal latrines. Its construction, advantages and limitation Septic- tank, its function, construction and maintenance; Water carrying system for collection and disposal of human excreta treatments and disposal of sewage.
- 6.8. **Collection and disposal of refuse,** Health hazard of refuse; Diseases connected with improper collection and disposal of refuse; Various methods of refuse disposal and drawbacks therein,

damping, incineration, composing with human or animal excreta, disposal in sea and sorting.

6.9. **Urban Solid Waste Management.**

6.10. **Rural Sanitation-** Total Sanitation Campaign.

6.11. **Food hygiene and sanitation:** Food sanitation. Public Health importance of food and milk sanitation; sources of contamination; sanitation measures for food, milk and drinks; Milk pasteurization; sanitation of slaughter house and markets.

6.12. **Sanitation of food establishments** Sanitation of premises, preparation, storage and serving of food; Food handlers, washing of utensils, sources of contamination; Role of Health Educator in context of sanitation of food establishment.

6.13. **Housing and Health.** Principles of healthful housing and ventilation. Sanitation of camps, theatres and cinema halls. Sanitation measures in camps; Sanitation of theatres and cinema halls. Sanitation of swimming pools. Diseases likely to be transmitted through swimming pools and preventive measures.

6.14. **Control of insects, rodents and stray dogs.** Diseases transmitted by insects and rodents, Control of fleas, mosquitoes, and rodents; Rat-proofing, destruction of stray dogs, role of Health educator.

6.15. Community sanitary survey.

6.16. Personal hygiene and environmental health.

6.17. Healthy settings.

Learning Unit 7: Occupational Health

10 Hours

Learning Objectives: The student will be able to:

- (1) list out the hazards arising out of physical, chemical, mechanical and biological conditions in various occupations:
- (2) prepare educational programmes for workers for safety measures.

- (3) plan and implement health Education programme for different occupational group in relation to prevention & detection of occupational hazard.

Contents:

- 7.1. **Introduction:** Basic concepts of occupation Health and its components.
- 7.2. **Environment at work:** Physical environment, Socio-physiological environment protection against accidents.
- 7.3. **Occupation diseases/hazards** Classification and prevention of occupational diseases/hazard and their prevention.
- 7.4. **Factories Act;** Industrial Health Services
- 7.5. Health hazards in agriculture.
- 7.6. Computer Vision Syndrome.
- 7.7. White Collar Syndrome.
- 7.8. Role of health Education in Occupational Health.

Learning Unit 8: Nutrition & Dietetics

35 Hours

Learning Objectives: The student will be able to:

1. identify food habits with the health status of the individual and the community.
2. describe the role of essential nutrients in health and disease; and basic elements of foods.
3. plan a balanced diet according to the needs of the individual and the Community.
4. identify cases of common nutritional deficiency disease and role of nutrition in Life style /disease in the community and to associate nutrition with infection and list food borne diseases and understand the importance of food hygiene.
5. assess the nutritional status of the individual and the community through surveys.
6. identify the role of health education in order to organize nutrition intervention programme/nutrition education programmes.

Contents:

- 8.1. Concept, scope and importance of nutrition in promotion of health.
- 8.2. Classification of foods
- 8.3. Food habits, cultures and practices,
- 8.4. Nutrient loss in processing, storage and cooking,
- 8.5. Adulteration, fortification, enrichment of food,
- 8.6. Assessment of nutrition and diet survey in individual, family and community level,
- 8.7. Dietary prescription: Planning of balanced diet for vulnerable groups, in health,
- 8.8. National nutrition programmes,
- 8.9. Growth monitoring, nutrition supplementation and nutrition education,
- 8.10. Spectrum of malnutrition,
- 8.11. Micronutrient malnutrition,
- 8.12. Prevention and control of malnutrition,
- 8.13. IEC on food & nutrition at different levels.
- 8.14. Importance of investment in nutrition

**Learning Unit 9 : Disaster Preparedness
(Including Basic Life support) 20 Hours**

Learning Objectives: The student will be able to:

1. describe the various types of disaster and emergency measures required to be taken in by the community.
2. demonstrate skills pertaining to disaster management.

Contents:

- 9.1. Disasters: concept, types, natural and manmade disaster.
- 9.2. Epidemiology and health impact of calamities.
- 9.3. Disaster preparedness and response: concept, principle and application,

- 9.4. Management of disasters like flood, cyclone, earthquake, fire, famine, industrial accident.
- 9.5. Multi-sectoral approach in disaster management.
- 9.6. Organization of health sector for disaster management
- 9.7. Environmental health in disaster situation.
- 9.8. Monitoring and management of nutrition of disaster victims.
- 9.9. Community emergency preparedness.
- 9.10. Content of community education for different types of disaster
- 9.11. Basic life support.
- 9.12. Advanced life support.
- 9.13. Cardio –pulmonary resuscitation.

Learning Unit 10 : Health Statistics and Demography (50 Hours)

Learning Objectives: The student will be able to:

1. apply statistical methods in identifying health related problems;
2. develop skills in calculating various rates of fertility, mortality and morbidity;
3. apply statistical methods in simple surveys and designing studies related to health.
4. state the importance of recording system and its utilization for planning and assessment.
5. identify factors associated with population change and prepare report.

Contents:

10.1 Health Statistics:

- 10.1.1. Introduction to theoretical and applied statistics with special reference to Health Statistics; Specification, estimation, testing of hypotheses and inference; Sources and uses of Health Statistics.
- 10.1.2. Measures of morbidity-incidence rate, prevalence rate, inception rate, case fatality rate.
- 10.1.3. Measures of mortality; Crude death rate, age-sex ratio, specific death rate, infant mortality rate, proportional mortality rate, neo-natal mortality rate, post-neo-natal mortality rate peri-natal mortality rate, and concept of standardized death rate.

- 10.1.4. Presentation of health data: Classification and tabulation of data, graphic presentation of data, linear graph, bar chart, pie-diagram, histogram, frequency polygon, age-pyramid.
- 10.1.5. Measures of central tendency/location: mean, media and mode.
- 10.1.6. Measures of dispersion/ variation range, standard deviation, variance and coefficient of variation.
- 10.1.7. Basic concepts of correlation and association. Basic concepts of probability.
- 10.1.8. Concept of test of significance- the chi-square test Measures of health, direct and indirect indicators of health.

10.2 Demography:

- 10.2.1. Introduction to demography: concepts, definition, purpose and uses. Sources of demographic data-census, vital registration, sample registration, National Sample Surveys. Errors in vital registration system in India and suggestions for improvement
- 10.2.2. Population trends in the world and in India; Population theories- Malthusian, Marxian and Demographic transition theories, their consequences-economic, social and health; and remedies-the role of agricultural production, industrialization, migration and family planning.
- 10.2.3. Factors affecting fertility; Biological factors-menarche and menopause, lactation and post-partum amenorrhea; Demographic factors-age, age at marriage, infant and childhood mortality, socio-economic factors-income, women's employment, education, type of family.
- 10.2.4. Measures of fertility; Crude birth rate, general fertility rate, age-specific fertility rate, general marital fertility age-specific marital fertility rate, total marital fertility rate, gross reproduction rate and net reproduction rate.
- 10.2.5. Concept of life tables and its uses.
- 10.2.6. Population projection and estimation of population.

PAPER III

BEHAVIOURAL SCIENCES AND RESEARCH FOUNDATIONS FOR HEALTH EDUCATION & PROMOTION

Total hours: 240

Total marks: 100

Aim : Developing capabilities among students to bring desirable changes in the health behaviour of a community by applying knowledge of behavioural sciences and research methods.

S.No.	Learning Units	Hours Allotted
1.	Introduction to Social and Behavioural Sciences as basis for Health Education & Promotion in India.	5 Hours
2.	Basis of Human Behaviour	25 Hours
3.	Group Dynamics	20 Hours
4.	Human Behaviour Theories/Models relevant to Health Promotion & Education	10 Hours
5.	Cultural Basis of Health Behaviour	15 Hours
6.	Social Basis of Health Behaviour	20 Hours
7.	The Dynamics of Behaviour Change	15 Hours
8.	Mental Health	10 Hours
9.	Community organization	20 Hours
10.	Community Development	15 Hours
11.	Social Research Process	10 Hours

12.	Sampling Procedure	10 Hours
13.	Data Collection-techniques and procedures for conducting social research study	25 Hours
14.	Data tabulation and Analysis	20 Hours
15.	Reporting Research Findings	5 Hours
16.	Evaluating Health Programmes / Health Education & Promotion Programmes.	5 Hours
17.	Pre-testing Health Education Materials	10 Hours

Learning Unit 1: Introduction to behavioural sciences as basis for Health Education & Promotion practices in India. (5 Hours)

Learning Objectives: The student will be able to describe the meaning and scope of the behavioural sciences.

Contents :

- 1.1 Definition, Nature, Scope, Contributions, Limitations of behavioural sciences.
- 1.2 Sociology, Social Psychology, Socio-cultural Anthropology and their relevance to health behaviour.
- 1.3. Social sciences like, Economics, History and Political Science in relation to Public Health.

Learning Unit 2 : Basis of Human Behaviour (25 Hours)

Learning Objectives: The student will be able to describe the human behaviour with special reference to health education & promotion.

Contents:

- 2.1 Perception Process

- 2.2 Beliefs, Values & attitude formation
- 2.3 Personality: Concepts & Types
- 2.4 Defence mechanism
- 2.5 Motivation: motivation process, theories of motivation, designing motivational strategies for health education & promotion.
- 2.6. Learning: Concept, principles, process, theories & their relation to behaviour change.

Learning Unit 3 : Group Dynamics (20 Hours)

Learning Objectives: The student will be able to identify the group forces and apply these principles in generating group support for promoting and sustaining healthy practices.

Contents :

- 3.1 Introduction to Groups: Types, functions, roles.
- 3.2 Understanding Group Process.
- 3.3 Influence of groups on the formation of norms and attitudes.
- 3.4 Leadership and group performance.
- 3.5 Group pressures and structure and properties of groups.
- 3.6 Group Cohesiveness.
- 3.7 Communication pattern in task oriented groups.
- 3.8 Diagnosing group needs.
- 3.9 Decision making in groups.
- 3.10. Building Teams.

Learning Unit 4 : Human Behaviour Theories/ Models relevant to Health Promotion & Education (10 Hours)

Learning Objectives: The student will be able to describe various models pertaining to health behaviour.

Contents :

- 4.1 Trans Theoretical Model
- 4.2 Health Belief Model
- 4.3 Relapse Prevention Model

Learning Unit 5 : Cultural basis of Health Behaviour (15 Hours)

Learning Objectives : The student will be able to identify the cultural basis of health behaviour.

Contents :

- 5.1 Culture- definitions and explanations of terms such as knowledge, beliefs, norms, values, taboos, habits, traditions, superstitions, and magic in relation to human behaviour and health.
- 5.2 Culture-types components and propositions in relation to cultural change.
- 5.3 Cultural factors influencing health.
- 5.4 Influence of culture on perception of health and disease.
- 5.5 Influence of culture on formation of social attitudes.

Learning Unit 6 : Social basis of Health Behaviour (20 Hours)

Learning Objectives: The student will be able to identify the social factors that promote or impede changes in health behaviour.

Contents :

- 6.1 Society, community, social/community structure.
- 6.2 Rural & Urban Community Leadership.
- 6.3 Family Types, kinship status, roles, values & norms.
- 6.4 Social stratification, social deviance, social influence, social problems.
- 6.5 Process of socialization and Bio-social factors influencing individuals.

- 6.6 Patterns of rural-urban living in relation to public health practices.
- 6.7 Crowd / Mob behaviour, public opinion and social perception.

Learning Unit 7 : The Dynamics of Behaviour Change (15 Hours)

Learning Objectives: The student will be able to identify the factors influencing health behaviour and the change process as a basis for use in planning programme for change.

Contents :

- 7.1 Introduction to change process, Dynamics of planned behavioural change.
- 7.2 Factors influencing health behavior changes.
- 7.3 Strategies to overcome barriers in change process.
- 7.4 Adoption and Diffusion process.

Learning Unit 8 : Mental Health (10 Hours)

Learning Objective: The student will be able to:

1. define the concept and principles of mental health;
2. describe the various patterns of mental illness;
3. explain the promotive, preventive, curative and rehabilitative measures for mental health;
4. identify the role of the professional health educator in promoting community mental health.

Contents :

- 8.1 Concepts of mental health and relation between mind and body.
- 8.2 Criteria of healthy and unhealthy mind.
- 8.3 Mechanism of adjustment, physical, social and psychological needs. Some specific areas of mental health like ageing,

delinquency and criminality, sub-normality, suicide, neurosis, psychosomatic illness etc.

- 8.4 Causes of mental/behavioural disorders, Heredity Vs. Environment.
- 8.5 Prevention of mental disorders and rehabilitation of the mentally ill.
- 8.6 Community mental health.
- 8.7 Role of health educator in the field of mental health.

Learning Unit 9: Community Organization (20 Hours)

Learning Objective: The student will be able to:

- 1. describe the meaning of community organization.
- 2. state the major principles & process of community organization, and
- 3. demonstrate various skills involved in the process of community organization.

Contents :

- 9.1 Community Organization; Nature, Concepts of community work, meaning of community organization, basic assumptions of community organization.
- 9.2 Community organization – Principles and process.
- 9.3 Importance of community organization in health education programme.
- 9.4 Importance of community organization in health education application in rural and urban communities.
- 9.5 The role of health education specialist as a change agent in community organization.
- 9.6 Role of other agencies (voluntary and government) in the process of community organization.
- 9.7 Mobilizing the community for action; formation of groups/committee, including nature and function & principle to be used for effective community work.

- 9.8 Power & Authority and its relevance to health Education & promotion.

Learning Unit 10 : Community Development (15 Hours)

Learning Objective: The student will be able to:

1. explain the philosophy and principles of the community development programme in India; and
2. describe the historical development, organizational set up and functions of the community development programme in India.

Contents:

- 10.1 Introduction to community development, definition, philosophy and principles of community development, community development as a process, as a programme as a method and a movement, need for community development in India.
- 10.2 History of community development programme in India.
- 10.3 Progress of Community development in India including tribal blocks
- 10.4 Organizational set and functions of community development at the Central, State, District and Block levels.
- 10.5 Panchayati Raj- Integration of Panchayati Raj with Community programme.
- 10.6 Role of Health Education in community development programme.
- 10.7 Critical Review of community development programme in India.

Learning Unit 11 : Social Research Process (10 Hours)

Learning Objective: At the end of this Unit, the student will be able to:

1. explain the concepts, process and steps involved in conducting social research related to health education in a community.
2. demonstrate skills by preparing a simple research proposal on a selected health problem.

3. describe different types of social research studies as applicable to health behaviour.
4. demonstrate skills by selecting a suitable type of social research in the light of existing/ prevailing situation in the community.
5. list out the different sources containing social research articles/findings pertaining to health promotion & education.

Contents :

- 11.1 **An Introduction to Social Research:** Definition of Scientific Method and Social Research, Scope of Social Research in Health Promotion & Education.
- 11.2 **An Overview of Scientific Method of Social Research**
 - 11.2.1 Problem identification & justifications
 - 11.2.2 Formulation of objectives and hypotheses.
 - 11.2.3 Concept & relationship among Variables: Independent, dependent & intervening variables.
 - 11.2.4 Classification of research studies: Exploratory, descriptive, diagnostic, experimental, ex-post facto, case study, survey research & operational research.
 - 11.2.5 Description, similarities and differences among survey, longitudinal, cross- sectional studies.
 - 11.2.6 Research Documents dealing with Health Education & allied fields- Report Series, Journals & Research Papers etc.

Learning Unit 12 : Sampling Procedure (10 Hours)

Learning Objective: At the end of this Unit, the student will be able to:

1. explain the various concepts related to sampling procedure
2. describe the concepts and procedures of various sampling technique.
3. demonstrate skill by selecting a sample from a given universe/ population.

Contents:

- 12.1 Concept & importance of sampling in research
- 12.2 Concepts of Probability and Non-Probability
- 12.3 Types of sampling
 - Random
 - Systematic
 - Stratified
 - Cluster
 - Quota
 - Accidental
 - Purposive
- 12.4 Determining size of a sample
- 12.5 Sampling Errors.

Learning Unit 13: Data Collection-Techniques & Procedures for Conducting Social Research Study (25 Hours)

Learning Objective: The student will be able to:

1. distinguish differences between primary and secondary data sources as well as quantitative data and qualitative data.
2. demonstrate skills by selecting and developing suitable data collection methods for a research study in Health Promotion & Education.

Contents:

- 13.1. Concept & Types of Data: Primary & secondary data, quantitative & qualitative data, nominal, ordinal data.
- 13.2. Instruments of data collection:
 - i) Structured & Unstructured Interviews
 - ii) Questionnaires
 - iii) Observation
 - iv) Socio-metric Technique.
 - v) PRA Technique.

- vi) Case study
 - vii) Projective Technique;
 - viii) Attitude Scales
 - ix) Focus Groups Discussion
 - x) Content Analysis
 - xi) Review of Secondary data sources.
- 13.3. Development of Research tools: Process & procedures.
- 13.4 Concepts of reliability & validity

Learning Unit 14: Data Tabulation & Analysis (20 Hours)

Learning objectives: The student will be able to:

- 1 demonstrate skills pertaining to data tabulation and analysis.
- 2 interpret data and make inferences for strengthening health education in the community.

Contents:

- 14.1 Preparing Tabulation
 - Coding Process
 - Editing
- 14.2 Plan for Data Analysis
 - Central Tendency
 - Variance
 - Test of Significance
 - Measure of strength of Associations
 - Concept of univariate, bivariate & multivariate analysis
- 14.3 Dummy tables preparation / Frequency distribution
- 14.4 Visual Presentation of data
- 14.5 Use of computer in data analysis including relevant software packages.

Learning Unit 15: Reporting Research Findings (5 Hours)

Learning objectives: The student will be able to:

1. explain the salient features of an effective, well written report.
2. demonstrate skills in respect of report writing and presentation of reports.

Contents:

- 15.1 Features & purpose of a good report
- 15.2 Interim Report and Final Report.
- 15.3 Structure of a good report: Problem, methodology, results, interpretation and conclusions.

Learning Unit 16: Evaluating Health Programmes or Health Education/ Promotion programmes (5 Hours)

Learning objectives: The student will be able to:

1. explain the concept & importance of evaluation in health / health education.
2. apply the principles and procedures of evaluation in health/ health education programmes, campaigns etc.

Contents:

- 16.1 Concept & process of evaluation.
- 16.2 Types and importance of evaluation in public health.
- 16.3 Technique & tools, design & procedures.
- 16.4 Indices of measurement and selection of criteria of effectiveness in context of over all objectives of evaluation.

Learning Unit 17: Pre-testing of Health Promotion & Education Materials (10 Hours)

Learning objectives: The student will be able to:

1. explain why pre-testing is important for developing more effective communication material.

2. list out and describe the basic steps for developing and pre-testing health education & promotion material.
3. explain the advantages of pre-testing in a variety of places & settings.
4. demonstrate skills relating to pre-testing by getting health education & promotion material pre-tested developed by them during the training course.

Contents:

- 17.1 Pre-testing: Concept, importance & process.
- 17.2 Basic Principles of pre-testing.
- 17.3 Methods & Techniques for pre-testing.
- 17.4 Constraints, problem & limitations.
- 17.5 Reporting the findings.

Paper – IV

Communication for Health Education & Promotion

Total Hours: 240

Total Marks: 100

Aim: Developing capabilities of students to carry out/ conceptualize Health Education and Health Promotion programmes/ campaigns independently for bringing about desirable changes in health behaviour of the people.

S.No.	Learning Units	Hours Allotted
1.	Health Education and Health Promotion	40 Hours
2.	Health Communication/ Communication for Health	60 Hours
3.	Communication Channels for Interpersonal Communication, Group Communication & Mass Communication 3.1. Printed Material. 3.2. Projected Aids. 3.3. Non-Projected Aids. 3.4. Exhibition.	75 Hours
4.	Use of ICT and other latest/Modern Technologies in Health Education.	10 Hours
5.	Training And Capacity Building	25 Hours
6.	Programme Planning For Health Education & Health Promotion	30 Hours

Learning Unit I: Health Education and Health Promotion

40 Hours

Learning Objectives: The student will be able to:

1. Explain the definition, objectives, philosophy and basic assumptions underlying the principles of Health Education & health promotion;
2. Describe the modern trends in the field of Health Education Promotion.
3. Identify the roles and responsibilities of the Health Education specialist;

Contents:

- 1.1. Introduction to Health Education; Definition, objectives, concepts, philosophy, importance and need of health education.
- 1.2. Historical developments – milestones of Health Education and Health Promotion (Alma-Ata conference Ottawa Charter, Bangkok Charter etc.).
- 1.3. Principles of Health Education.
- 1.4. Roles and attributes of the Health Education specialist and health professionals in bringing about health behavioral change.
- 1.5. Approaches & processes used in Health Education programme for Health Education & Promotion.
- 1.6. Objectives of Health Education and Health Promotion.
- 1.7. Competencies, professional ethics & standards for Health Education & Promotion specialist.
- 1.8. Issues related to Health Promotion with respect to individual (settings)

Learning Unit - 2: Health Communication / Communication for Health

60 Hours

Learning Objectives: The student will be able to:

1. Describe the principles and process of communication applicable in organizing Health Education programmes.
2. Select appropriate methods and media for mass, group and individual communication in Health Education programmes.
3. Plan, organize and evaluate an exhibition as a medium of communication in Health Education programmes.
4. Plan, prepare and use different media in Health Education programmes.
5. Prepare, present and produce printed materials for Health Education programmes and evaluate their effectiveness.
6. Select, prepare, present, use and evaluate projected and non-projected aids suitable for a specific Health Education programme.

Contents:

- 2.1 Communication, Definition, process and its application in Health Education.
- 2.2 Models of communication & basic elements of communication (some message channels destination & effects).
- 2.3 Encoding and decoding processes.
- 2.4 Theories & models of communication.
- 2.5 Principles of communication for social change (IEC & behavioural change communication -BCC).
- 2.6 The message, structure & treatment of message.
- 2.7 Channels of communication-meaning and definition, reaching out to target group
- 2.8 Problems in communication with respect to dimensions of group goals & socio cultural system.
- 2.9 Factors (positive and negative) influencing communication & Conditions necessary for effective communication.
- 2.10 Communication breakdowns & barriers to communication.
- 2.11 Traditional and modern channels of communication.
- 2.12 Methods used for Health communication

Learning Unit : 3.1 - Print Material

Learning Objectives:

1. Prepare, pretest and produce printed materials for Health Education & promotion programmes.
2. Prepare scripts for press release, and handbills, folders and pamphlets on specific subjects.
3. Prepare printed materials for the observance of special days and campaigns.
4. Understand the procedures and steps involved in getting materials printed.
5. Prepare layouts and press copy for the handbill, folders and pamphlets.
6. Use various printed materials and their evaluation.
7. Understand the procedures for maintenance and distributions of printed materials.
8. Collaborate with other agencies in the procurement and production of printed material.

Contents:

- 3.1.1. Preparation, presenting and production of printed materials for Health Education programme; Steps involved (Handbills, folders and pamphlets).
- 3.1.2. Preparation of scripts for press release, Steps involved.
- 3.1.3. Preparation of printed material for special campaigns – Steps, Advantages and Disadvantages.
- 3.1.4. Writing text for speeches.
- 3.1.5. Art of Public speaking.
- 3.1.6. Production process selection of photographs, printing process, calling quotations, preparation of layout, press copy, checking proofs and giving print order.
- 3.1.7. Maintenance and distribution of printed materials, various procedures in maintaining the printed material, procedure for distribution.

- 3.1.8. Collaboration with other agencies, procurement of the printed material and coordination for production of printed material.

Learning Unit : 3. 2. Projected Aids

Learning Objective: The student will be able to:

1. Provide technical guidance in the preparation and pretesting of filmstrips and slides for Health Education & Promotion programmes.
2. Organize the production of cinema slides and audio-visual spots for Health Education and Promotion campaigns.
3. Describe the design and performance of audio-visual equipment and ensure effective supervision and guidance in its maintenance and operation.
4. Preview and select appropriate film, film-strips and slides for specific Health Education programmes.
5. Organize the exhibition of films, filmstrips, slides and audio-visual spots on Health Education and Promotion activities and evaluate their impact on the community.

Contents:

- 3.2.1. Projected aids-definition.
- 3.2.2. Role of projected aids in Health Education.
- 3.2.3. Pattern of development of projected materials.
- 3.2.4. Media production-concept and philosophy.
- 3.2.5. Projected materials- types and their characteristics.
- 3.2.6. Production of filmstrips and slides by photographic methods.
- 3.2.7. Production of filmstrips and slides by non-photographic methods.
- 3.2.8. Pretesting of filmstrips and slides.
- 3.2.9. Production of cinema slides and audio-visual spots- planning and organization.

3.2.10. Audio-visual programme in action-preview and selection of materials, organizing, implementing and evaluating the programme.

3.2.11. Use and maintenance of equipment and materials.

3.2.12. Lab. Sessions-5 Session of 2 hours each (10 hours.)

Learning Unit : 3.3 Non Projected Aids

Learning Objectives: The student will be able to:

1. Select, prepare and use simple visual aids for effective communication for groups and individuals.
2. Describe criteria of an effective visual aids and apply this criteria for pretesting and evaluating.
3. Use visual aids effectively for Education, Teaching and Training purpose.

Contents:

- 3.3.1. Non-projected aids-definition; Use of non-projected aids in Health Education (what, why and how of these materials).
- 3.3.2. Process of planning for production; Preparation of inexpensive materials such as flash-cards set, flip chart, flannel graph, poster, charts and diagrams and puppets, etc.
- 3.3.3. Criteria for displays and bulletin boards.
- 3.3.4. Arrangement of displays and bulletin boards.
- 3.3.5. Preparation of simple mass media such as banners, hoardings, placards and their use in various situations.
- 3.3.6. Preparation of layout and dummy for leaflets, folders and displays.
- 3.3.7. Preparation and use of simple Tran–slides, overhead transparencies through projection for demonstration and teaching purposes.
- 3.3.8. Costing and budgeting the production of simple inexpensive aids, including the approximate prevailing rates of raw materials.

Learning Unit: 3.4. - Exhibition

Learning Objectives: The student will be able to:

1. Describe the importance of exhibition as a medium of communication;
2. Enumerate the principles of planning an exhibition.
3. Visualize the related theme and prepare a script.
4. Identify the resources needed, keeping in view the available resources and prepare estimates for the exhibition.
5. Listing out the steps in setting up a exhibition.
6. Design the layouts, and plan the production of exhibits and evaluate an exhibition.

Contents:

- 3.4.1. Concept, meaning, importance and role of exhibitions as mass media of communication; types of exhibitions, their purposes and application in the education and promotion programme.
- 3.4.2. Principles of planning an exhibition, techniques of developing exhibition scripts.
- 3.4.3. Identification of resources needed, tapping the local resources and working out estimates under different heads for a given type of exhibition.
- 3.4.4. Setting up and organizing an exhibition, giving publicity to the exhibitions.
- 3.4.5. Visualization, designing and selection of visuals and their production.
- 3.4.6. Techniques of evaluation of exhibition.

Learning Unit 4: Use of ICT and other latest Modern Technologies in Health Education and Promotion. 10 Hours

Learning Objective: The student should be able to use computers and other latest technologies for Health Education & Promotion.

Contents:

- 4.1. Use of Information Technology and latest technology in Health Education
- 4.2. Use of Internet as a source of Health Information

Learning Unit 5: Training And Capacity Building 25 Hours

Learning Objectives: The student will be able to:

1. Identify the training needs in Health Education and Promotion for health and allied personnel and community leaders;
2. Develop curricula for different categories of personnel;
3. Select and use the appropriate teaching and learning methods and media;
4. Conduct training programmes; and
5. Evaluate and report on training programmes.

Contents:

- 5.1. **Training** : Definition and concepts of training, difference between education and training, administrative considerations in training.
- 5.2. **Training process:** some conceptual models, functions of training, training strategy, establishing and defining training goals, principles and steps in curriculum development.
- 5.3. **Introduction to teaching learning methods** :Advantages and limitation. of various teaching & learning methods; principles to be followed in selecting and using different methods for e.g. lecturing, group discussion, Buzz-group, problem solving, brain storming, demonstration, symposium, panel, case study,

role play, programmed instruction, colloquy, dialogue, workshop, seminar etc.

- 5.4. Evaluation of teaching-learning methods
- 5.5. **Lesson Plan** : Components, principles and steps in preparation of lesson plan.
- 5.6. **Field Practice and Demonstration Area** : Need and importance of FP & DA. Methodology of developing and utilizing FP & DA for training and programme development.
- 5.7. **Training Evaluation** : Need and importance of evaluation in training principles and procedures in evaluating training courses and various aspects of training.

Learning Unit 6: Programme Planning for Health Education & Health Promotion. 30 Hours

Learning Objectives: The student will be able to:

1. Describe the need, importance and steps of programme planning for Health education.
2. Explain the basic concepts, characteristics and underlying assumptions in programme planning.
3. Frame measurable educational objectives indicating the required change in health behavior.
4. Identify the type of data to be collected for community & educational diagnosis and develop skills in selection and preparation of tools for data collection;
5. Demonstrate skills in data processing interpretation of data and their use for programme planning;
6. Demonstrate skills in preparing a plan of operation relevant to the available resources and time; and
7. Demonstrate skills in implementing and evaluating the plan of action.

Contents :

- 6.1 Concepts, principles and process of Programme Planning as an administrative tool and an educational process.

- 6.2 Steps of programme planning.
- 6.3 Community diagnosis, needs assessment; facilitators and barriers for action programme.
- 6.4 Planning for data collection and preparation of tools.
- 6.5 Resource mapping (apparent and potential).
- 6.6 Analysis and Interpretation of Data, Drawing inference for planning community Health Promotion programme (during concurrent field work).
- 6.7 Framing objectives; short and long term objectives, indicating change in behavior to be achieved.
- 6.8 Preparation of plan of operation phase wise (Concurrent field work) Report writing- Preparation and presentation (concurrent field work) .
- 6.9 Implementation and Evaluation of the Planned Programme (concurrent field work)
- 6.10 Supervision
- 6.11 Report writing – preparation and presentation (concurrent field work).
- 6.12 Proposal writing & budgeting for communication programme of Health Promotion.

Distribution of Hours for Practical Training

I. Intra mural (In –House)

480 Hours

S.No	Skills based Activities	Hours allotted
1.	Assignments	70
2.	Seminars, Panel discussion etc.	70
3.	Presentations skills	80
4.	Demonstration	60
5.	Script writing	60
6.	Exposure to Modern Information, Communication Technology	80
7.	Other Skill Orientation (Traditional & Folk Media)	60

II. Extra mural Supervisory Field Training (S.F.T.)

240 Hours

S.No	Activities	Hours allotted
1.	Visit to Water Treatment Plant	6
2.	Visit to Sewage disposal plant	6
3.	Visit to SOS Village/ NGOs	18
4.	Visit to National Health Programmes	120
5.	Visit to NICD/NVBDGP	12
6.	Visit to International agencies	24
7.	Industrial visit	12
8.	RHC Najafgarh/ PHC	12
9.	Visit to sister institutions	30

III. Extra mural- Concurrent Field Training (Project work) * 720 Hours

S.No	Activities	Hours allotted
1.	Preparatory hours	30
2.	Community Diagnosis	90
3.	Educational Diagnosis	90
4.	Planning Health Education Programme	120
5.	Implementation of Health Education & Promotion Programmes.	180
6.	Evaluation of Educational Impact & follow up	90
7.	Report Writing	120

* Hours distribution may vary depending on the emerging needs.

RECOMMENDED BOOKS AND JOURNALS

TEXT BOOKS:

1. Park K: Textbook of Preventive and Social Medicine; M/S Banarasidas Bhanot Publishers, Jabalpur.
2. Mahajan B K & Gupta M C: Textbook of Preventive & Social Medicine; Jaypee Bros. Medical Publishers (P) Ltd., New Delhi.
3. Sathe P V & Sathe A P: Epidemiology and Management of Health care for all; Popular Prakashan, Mumbai.
4. Lilienfeld A M: Foundation of Epidemiology; Oxford University Press, Oxford UK.
5. Gordis Leon: Epidemiology; WB Saunders Company.
6. Maxcy-Rosenau: Public Health and Preventive Medicine; Apleton-Century-Crofts, New York.
7. Hollard W W, Detels R, Knox G: Oxford textbook of Public Health; Oxford University Press UK.
8. Hanlon J J, Picket G E,: Public Health Administration and Practice; St. Louis
9. Guilbert J J: Educational handbook for health personnel; WHO offset publication No 35 (Revised edition) 1998.
10. Barker D J P: Practical epidemiology; Churchill Livingstone.
11. Pocock S J: Clinical trials – A practical approach; John Wiley & Sons, New York.
12. Fletcher R H, Fletcher S W: Clinical epidemiology – The essentials; M/S Williams and Wilkins.
13. Hill A B: A short textbook of Medical statistics; Hodder and Stoughton, London.
14. Mahajan B K: Methods in Biostatistics; M/S Jaypee Bros., New Delhi.
15. Das & Das: Statistics in Biology and Psychology; M/S Academic Publishers, Kolkata.
16. Dawn C S: Textbook of Obstetrics; Dawn Books, Kolkata.
17. Ghai O P: Essential pediatrics; Interprint, New Delhi.

18. Sachdev H P S & Chowdhury P: Nutrition in Children in Developing country concerns; Department of Pediatrics, MAMC, New Delhi.
19. Swaminathan M: Essentials of Food and Nutrition; Bangalore Printing and Publishing Company Limited, Bangalore.
20. Gopalan C & Kaul S: Women and Nutrition in India; NIN, India.
21. ICMR: Nutritive value of Indian foods; NIN, India.
22. Kavonew M & Mikheer M I (WHO): Epidemiology of Occupational health.
23. Jeyartram J: Occupational health in Developing Countries; Oxford University Press, UK.
24. Ananthanarayanan L & Paniker C K J: Textbook of Microbiology; Oriental Longman, Chennai.
25. Dr. Dharama Lingam : Health Education

JOURNALS, PERIODICALS AND REPORTS

1. The Journal of Family Welfare; FPAI, Mumbai
2. Journal of School Health; American School of Associations, Kent USA.
3. Indian Journal of Community Medicine; IAPSM, Rohtak.
4. Indian Journal of Public Health; IPHA, Kolkata.
5. Indian Pediatrics; IAP, New Delhi.
6. Indian Journal of Pediatrics; Deptt. of Pediatrics, AIIMS, New Delhi.
7. Indian Journal of Medical Research; ICMR, New Delhi.
8. Journal of Indian Medical Association; IMA, Kolkata.
9. Journal of Communicable Diseases; NICD, New Delhi.
10. ICMR Bulletin; ICMR, New Delhi.
11. Indian Journal of Communicable and Environmental Medicine; Indian Association of Occupational health, Mumbai.
12. The Health Educational Journal; Health Education Council, New Delhi.
13. The Indian Journal of Nutrition and Dietetics; Avinashilingam Institute for Home science and higher education for Women, Women University, Coimbatore.
14. Indian Journal of Tuberculosis; TB Association of India, New Delhi.
15. Leprosy Review; British Leprosy Relief Association, Colchester, UK.
16. Indian Journal of Malariology; ICMR, New Delhi.
17. National Family Health Survey (NFHS II) 1998-99; IIPS, Mumbai.
18. Maternal Nutrition, Lactation and Infant Growth in Urban Slums; Scientific Report No. 9 of NIN, 1988.
19. Profile of Undernutrition and Underdevelopment; Scientific Report no. 8, NIN, 1988.

20. Reports on various National Health Programmes by Department of Health & Family Welfare, Govt of India.
21. Indian Journal of Leprosy; Indian Leprosy Association, New Delhi.
22. W.H.O: Technical Report Series.
23. W.H.O: Public Health Papers.
24. W.H.O: World Health Bulletin.
25. W.H.O: World health report (annual).
26. W.H.O: Weekly Epidemiological Record.
27. Govt. of India; Health Information in India.
