

**VALUE ADDED ADD-ON COURSE ON
HEALTHCARE GOVERNANCE IN INDIA**

Department of Political Science, Dibrugarh University, Dibrugarh

Course Title	: Healthcare Governance in India
Course Code	:
Nature of Course	: Value Added Add-On Course
Total Credits	: 2 (Two)
Distribution of Marks	: 35(End -Sem) +15 (In-Sem) 50 (Total)

This Value-added Add-on Course “**Healthcare Governance in India**” is a teacher-assisted learning Course open to all students of the University. Classes for this Course will be conducted during the reserved time slot in a week or beyond the regular class hours. Since this is a learner-centric course, classes may be conducted during weekends also (if necessary). A student is allowed to register in only one Add-on Course in a semester. This course shall be offered in *phygital* (physical plus digital) or blended mode. The grades obtained after successful completion of the Add-on Course will be reflected in the grade-sheets of the students. However, the credits will not be included for calculating the CGPA as per the rules of the University.

COURSE OBJECTIVES:

- To acquaint the learners with the processes and issues concerning health and healthcare governance in India.
- To enable the learners to understand the Constitutional values and Legal Framework of health and healthcare governance in India
- To familiarize the learners with key issues on Health and Healthcare Governance in India
- To help the students gain better employability in sectors related to healthcare governance and research, both in government and non-government sectors.

Unit	Contents	L	T	Total Hours
I (20 Marks)	Understanding Health and Healthcare in India: Traditional and cultural contexts Colonialism and healthcare Constitutional perspectives and values	6	3	9

II (20 marks)	Constitutional and Legal Framework: Fundamental Rights and Directive Principles of State Policy Health Legislations in India Trends in policy making	5	2	7
III (20 marks)	Issues on Health and Healthcare Governance in India -I Access to healthcare: rural-urban divide, income inequality, education, class-caste-gender. Consent and Choice: power dynamics of healthcare	5	2	7
IV (20 marks)	Issues on Health and Healthcare Governance in India -II Health Technology Governance in India Privatization of healthcare in India: PPP Models Licensing in healthcare Bio-ethics Health Insurance: different dimensions	5	2	7

Modes of In-Semester Assessment : 15 Marks

1. One Unit Test : 8 Marks
2. Marks in any one of the activities listed below : 7 Marks
 - a. Group Discussion/Seminar
 - b. Assignment
 - c. Fieldwork/Project
 - d. Viva-Voce

Programme Outcome:

On completion of this course, learners will be able to:

- understand the processes and issues concerning health and healthcare governance in India.
- engage with the Constitutional values and Legal Framework of health and healthcare governance in India
- identify with key issues on Health and Healthcare Governance in India
- gain better employability in sectors related to healthcare governance and research, both in government and non-government sectors.

Suggested Readings

Abenna Brewster, "A Student's View of a Medical Teaching Exercise" (pp. 128-130);Atul

Gawande, “Whose Body Is It Anyway?”

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Ethan Watters, chapter on PTSD from *Crazy Like Us: The Globalization of the American Psyche* (pp. 65-124)

Fidler, D. P. (2010). *The Challenges of Global Health Governance*. Council on Foreign Relations. <http://www.jstor.org/stable/resrep24171>

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HUNT, P. (2016). Interpreting the International Right to Health in a Human Rights-Based Approach to Health. *Health and Human Rights*, 18(2), 109–130. <http://www.jstor.org/stable/healhumarigh.18.2.109>

- Ilyas, H. (2015), Right to Health from Constitutional Perspective Available at SSRN: <https://ssrn.com/abstract=2675009> or <http://dx.doi.org/10.2139/ssrn.2675009>
- Kollannur, A., & Kollannur, A. (2013). Will India deliver on universal health coverage? The only serious barrier is a lack of political will. *BMJ: British Medical Journal*, 347(7928), 10–10. <http://www.jstor.org/stable/43512511>.
- Krennerich, M. (2017). The Human Right to Health.: Fundamentals of a Complex Right. In S. Klotz, H. Bielefeldt, M. Schmidhuber, & A. Frewer (Eds.), *Healthcare as a Human Rights Issue: Normative Profile, Conflicts and Implementation* (pp. 23–54). Transcript Verlag. <http://www.jstor.org/stable/j.ctv1fx7w.4>
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- Ronald Schleifer; Jerry Vannatta; Sheila Crow, “The Chief Concern of Medicine”, University

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Sood, N., Bendavid, E., Mukherji, A., Wagner, Z., Nagpal, S., & Mullen, P. (2014). Government health insurance for people below poverty line in India: quasi-experimental evaluation of insurance and health outcomes. *BMJ: British Medical Journal*, 349. <https://www.jstor.org/stable/26517235>

Thomas R. Cole; Nathan S. Carlin; Ronald A. Carson, “Medical Humanities: An Introduction”, Cambridge University Press (2014)

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